



**35<sup>TH</sup> LEGISLATURE OF THE VIRGIN ISLANDS  
COMMITTEE ON RULES AND JUDICIARY**

The Honorable Senator Diane T. Capehart  
Chair of Committee

Testimony Presented By  
The Honorable Justa Encarnacion, RN, BSN, MBA/HCM  
Commissioner of Health

on

**Bill Number 35-0224:** An Act amending Title 19, part V, chapter 45, subchapter VI to increase access to behavioral health services, with a focus on a Psychiatric Emergency Response Team to provide mobile crisis intervention services, and the 9-8-8 telecommunication system.  
**Proposed by Senator Diane T. Capehart**

1 Good day, Honorable Senator Diane I. Capehart, Chairperson of the Committee on Rules and  
2 Judiciary, Honorable Senator Milton E. Potter, Vice Chair; Committee members, and all non-  
3 committee members, and the viewing and listening audience. I am Renan Steele, Deputy  
4 Commissioner of Public Health responsible for Behavioral Health and Substance Use Services.  
5 Here with me today is Gesil Ramos, Director of the Division of Behavioral Health and Substance  
6 Use. I am appearing on behalf of the Honorable Commissioner Justa “Tita” Encarnacion,  
7 Commissioner for the Virgin Islands Department of Health.

8 We are here today to testify on Bill No. Bill Number 35-0224: An Act amending Title 19, part V,  
9 chapter 45, subchapter VI to increase access to behavioral health services, with a focus on a  
10 Psychiatric Emergency Response Team (PERT) to provide mobile crisis intervention services, and  
11 the 9-8-8 telecommunication system.

12 We endorse the formalization of the National 9-8-8 Suicide and Crisis Lifeline in our Territory.  
13 The 988 Suicide & Crisis Lifeline provides free and confidential emotional support to people in  
14 suicidal crisis or emotional distress 24 hours a day, 7 days a week, across the United States and its  
15 territories. The 988 Lifeline is comprised of a national network of over 200 local crisis centers,  
16 combining local care and resources with national standards and best practices.

17 The Lifeline offers 24/7 call, text and chat access to trained crisis counselors who can help people  
18 experiencing suicidal, substance use, and/or mental health crises, or any other kind of emotional  
19 distress or if they are worried about a loved one who may need crisis support.

20 Presently, the VI Department of Health's Division of Behavioral Health, in collaboration with local  
21 agencies, has successfully activated the "9-8-8" line in the Territory. Still, Bill 35-0224 is crucial  
22 in ensuring that the crisis line is answered locally and in codifying the federal 9-8-8 mandate.

1 The significance of the 9-8-8 lifeline extends beyond being just a number; it emerges as a beacon  
2 of hope, offering a genuine opportunity for timely intervention that can profoundly alter the  
3 trajectory of someone's life. Communities across the nation that have embraced the 9-8-8 crisis  
4 lifeline have witnessed remarkable success stories, illustrating the positive impact of this service  
5 in saving lives and providing essential help.

6 The advantages of 9-8-8 are diverse. It acts as a conduit for timely intervention, significantly  
7 reducing response times during behavioral health crises, and ensuring assistance arrives precisely  
8 when it is most crucial. Moreover, 9-8-8 plays a pivotal role in dismantling the pervasive stigma  
9 surrounding behavioral health, fostering an environment where individuals feel empowered to seek  
10 the assistance they require.

11 Equally significant is 9-8-8's ability to facilitate more efficient resource allocation through a  
12 centralized and coordinated response. The Division of Behavioral Health has developed job  
13 descriptions supporting the measures in this Bill for the 9-8-8 services and crisis response teams.  
14 This enhances the effectiveness of our crisis response mechanisms and ensures judicious use of  
15 resources. By having the integration of 9-8-8 and clinical staff, it allows for immediate de-escalation  
16 and provides for access to early intervention. If a response is required or needed, it will also allow for  
17 increased efficiency response time to help that individual and family members in need.

18 While the Psychiatric Emergency Response Teams (PERT) model for crisis response has proven  
19 successful, Act 8688 section 1021 (a) and (b), which speaks to Crisis Intervention Teams (CIT), is  
20 already in our current law and is the nationally recognized approach by the Substance Abuse Mental  
21 Health Service Administration (SAMHSA). The PERT model has limitations, such as the  
22 requirement for peers on response teams. While the Division of Behavioral Health acknowledges the  
23 valuable contributions of peers, their availability and willingness to risk exposure to triggering

1 stimuli may vary based on their behavioral health stability and recovery phase. Thus, the  
2 recommendation is to maintain CIT as the established approach to crisis intervention.

3 Act 8688, section 1018, also provides the avenue for peers and consumer voice by participating in the  
4 Behavioral Health Council of the Virgin Islands. We are actively engaged with Technical Assistance  
5 (TA) through SAMHSA to assist in the development of the council. Once the TA begins individuals  
6 will be invited to take part on the council upon approval of the nominees sent to the Honorable  
7 Governor Albert Bryan Jr. for final approval.

8 Although the Division of Behavioral Health has only ten (10) clinic-based staff members managing a  
9 wide range of responsibilities — including staffing outpatient clinics, providing intensive case  
10 management, ensuring medication compliance, organizing and staffing outreach events, monitoring  
11 involuntary commitments, testifying on clients' care and treatment progress within the judicial system,  
12 responding to crisis calls, and upholding rigorous documentation and accreditation standards it has  
13 implemented the following elements in alignment with recommended SAMHSA guidelines:

14 Someone to talk to: If someone is needed to speak with an individual for any mental health reasons the  
15 division of Division of Behavioral Health has in place someone to talk to between the hours of 8am to  
16 5pm in all 3 districts (STX, STT/STJ). Individuals that are seeking any services can call (340)712-  
17 0096(STX) and (340)774-7700 (STT/STJ) and after 5pm they can call 911 for emergency until there  
18 is an established crisis intervention team.

19 Someone to Respond: The Virgin Islands Department of Health Division of Behavioral Health faces a  
20 shortage of outreach field personnel to address crisis responses. Currently, the territory has only one  
21 or two individuals available to respond to crisis situations between 8:00 AM and 5:00 PM on the islands  
22 of St. Croix (STX) and St. Thomas (STT).

1 Place to Go: The Division of Behavioral Health currently does not have its own crisis stabilization  
2 center. The state is in the early implementation stage of developing a local residential treatment facility  
3 that is conducive for such services. In the interim, the state utilizes the Juan F. Luis Hospital and the  
4 Roy Lester Schneider Regional Medical Center for stabilization, psychiatric care and up to 5 days of  
5 monitoring.

6 Aftercare Outpatient Services: Intake/Screening/Evaluation/Medication/ process will consist of the  
7 following: Psychosocial assessment - to evaluate individuals mental, physical, and emotional health.  
8 Psychiatric Evaluations (as needed) will be provided based on initial psychosocial assessment  
9 Medication Management - inclusive of psychotropic medications and medications assisted treatment  
10 (MAT) as needed. Supported by therapeutic services and case management if needed.

11 Additionally, we would like to recommend the funding in Title 33 VIC, subtitle 1, part I, chapter 3,  
12 section 58 subsection (f) be amended; to reconsider the funding allocation from 30% to 50% for the  
13 Department of Health as Behavioral Health will be required to hire staff for the 24/7 mobile crisis  
14 response teams in both districts and the staffing and implementation of the local 988 call center. Both  
15 operations will require 24/7 coverage to support the community.

16 The Department is committed to reducing health risks, increasing access to quality equitable  
17 healthcare, and enforcing health standards. Again, thank you for the opportunity to present at  
18 today's hearing. The Department continues collaborative efforts with the members of the 35th  
19 Legislature. We stand ready to respond to any questions you may have.