

Testimony Re: House Bill 5527 - Acute Mental Health Mobile Response and Stabilization Services

House Finance Committee

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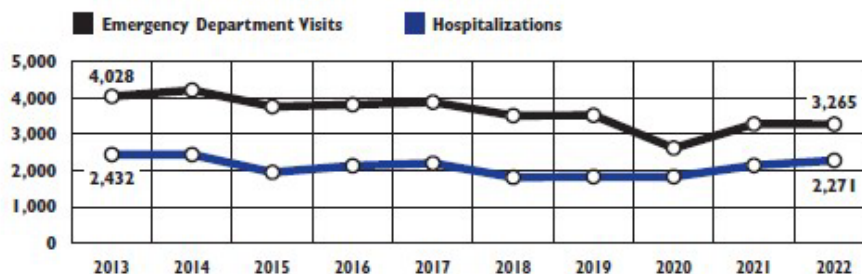
Mr. Chairman and members of the Committee, thank you for the opportunity to provide testimony today. Rhode Island KIDS COUNT would like to voice its support for House Bill 5527. This bill would establish a statewide standalone children's mobile response stabilization service to address the behavioral health needs of children and youth, overseen by DCYF.

Mobile Response and Stabilization Services (MRSS) provide mobile, on-site and rapid intervention for children and youth experiencing an acute behavioral health crisis. These services allow for immediate de-escalation in the least restrictive setting and allow for stabilization and intervention before urgent situations become costly and dangerous emergencies.

Mobile response and stabilization services are a lifeline for children and families experiencing acute mental health distress. They provide rapid response, urgent assessment, and early intervention for children and youth experiencing severe behavioral health challenges, such as aggression, self-injury, trauma, acute depression and anxiety, suicidal or homicidal thoughts, and extreme parent-child conflict. They can intervene in schools, homes, communities or emergency departments. **The MRSS workforce is specifically trained to respond to children, youth, and caregivers.** Services are available 24/7, 365 days per year, and respond within one hour. They provide face-to-face intervention, crisis de-escalation, needs assessment, and safety planning for families with children in crisis. Stabilization services and connections to additional resources and support are available for up to six to eight weeks following the intervention.

Mobile response and stabilization services work. Between November 2022 and February 2024, [92% of children referred to MRSS were deferred from emergency departments and stabilized.](#) An immediate risk assessment can divert children and youth from emergency departments and juvenile justice system involvement, preventing unnecessary and costly hospitalizations and out-of-home placements.

Emergency Care for Primary Diagnosis of Mental Disorder, Children Under Age 18, Rhode Island, 2013-2022*



Source: Rhode Island Department of Health, Hospital Discharge Database, 2013-2022. *Data are for emergency department visits and hospitalizations, not children. Children may visit the emergency department or be hospitalized more than once. Emergency department counts include all visits regardless of outcome and are not comparable to previous Factbooks. Note: Effective October 1, 2015, the International Classification of Disease (ICD) codes changed from the 9th classification to the 10th classification, which may impact comparability across the years.

In 2022, Rhode Island declared a [Child and Adolescent Mental Health State of Emergency](#). There were [over 3,000 emergency department visits and 2,271 hospitalizations in 2022](#) for Rhode Island children under age 18 with a primary diagnosis of a mental disorder. There were 2,448 emergency department visits and 1,349 hospitalizations of youth ages 13-19 due to suicide attempts or intentional self-harm between 2018 and 2022, [and 9% of Rhode Island high school students reported attempting suicide one or more times in the past year](#).

Children and youth need and deserve specialized, timely care for mental health crises that meet them where they are in their homes, schools, and communities and provide them with appropriate stabilization, support, and referrals to thrive.

We urge you to ensure that mobile response and stabilization services are available to support Rhode Island's children and youth and that these services are provided by and overseen by the organizations and agencies that are best equipped to meet the specific needs of children and youth. These services are vital in supporting the well-being and mental health of our children, promoting family stability, and reducing unnecessary health care costs by connecting children, youth, and families to the services and supports they need. Thank you for the opportunity to provide this testimony.