



Testimony of Service Employees International Union (SEIU), Local 668

Presented to the
House Veterans Affairs and Emergency Preparedness Committee, and
Human Services Committee
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Joint public hearing on Supporting the Next Generation of Emergency and Mental
Health Response.

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Thank you to the House Veterans Affairs and Emergency Preparedness and Human Services Committee members for the opportunity to testify at this joint hearing today on the issues our members at 911 call centers are facing. I am Steve Catanese, president of SEIU Local 668, and I am joined today by a fellow 668 union member, Michael Steinmiller, a 911 telecommunicator from Allegheny County. SEIU Local 668 represents more than 17,000 social service workers across Pennsylvania. We serve more than 350 members who work at ten public safety answering points, 911 call centers, across the state. These workers are the first call in a crisis.

911 telecommunicators are highly-trained professionals who ensure that on-scene responders have the most up-to-date and accurate information possible to protect the community and deliver life-saving care as quickly as possible. Their job is critical to saving lives and protecting public safety.

Today, our 911 shops are facing a staffing recruitment and retention crisis. According to the Pennsylvania Emergency Management Administration (PEMA)'s most recent Annual Report on the 911 program, there were 15.7 million calls to 911 in 2021, an increase of one million calls since 2020. As rates of violence and public safety threats rise in some communities, our 911 shops struggle to meet the demand. We must remember the real people who answer the calls for help and ensure our *first* first responders have access to all the resources needed to maintain their well-being and can build sustainable careers in public safety.

The State of the 911 Workforce

Like so many other agencies across the Commonwealth, we have a staffing crisis in our emergency communication infrastructure. Due to years of inadequate investment and a lack of comprehensive support services, 911 call centers struggle to attract and retain professionals to answer the worst calls from those in need.

What do you do in an emergency? Call 9-1-1. You make that call, and help is on the way, but in the meantime, the person on the other end of the line will stay with you. They will direct services from across the county to your location. They will guide you through emergency care until on-scene responders arrive. They orchestrate real-time, real-life crisis management and ensure that all the fast-moving parts and teams of support professionals are on track and equipped with the most accurate, up-to-date information. This is a challenging job and not one for the faint-hearted.

For years, it has been challenging for public safety answering points to meet the demand of 911 call volume. During the pandemic, PEMA reduced the minimum standards for 911 call answering and dispatching. To address staffing difficulties, the training and qualifications standards for

hiring were also reduced. Between 2018 and 2021, staffing has been ranked the ninth of nine priorities for PEMA.

The staffing shortage has led to an incredible burden on the remaining workers. These centers often struggle to maintain basic operations even while workers are subjected to excessive amounts of mandatory overtime. Workers are frequently required to sacrifice their personal time for mandatory overtime; this often means working a 16-hour shift. In Allegheny County, the average commute time for workers at the 911 call center is over an hour a day. That's 17 hours in a day with 7 hours left to sleep, eat, shower, and live your life before you have to be back at the office on the clock. Repeated over weeks and months, the ongoing stress and adrenaline of crisis response compound with the lack of recuperation and recovery time. It is not surprising that workers in emergency response occupations are at high risk for burnout and exhaustion and experience adjacent adverse mental and physical health implications. This is unsustainable for workers and call centers, creating a significant vulnerability in our underlying public safety infrastructure.

Working Conditions When Your Job is Crisis: Stress and Trauma on the Job

Trauma in the workplace can have a drastic effect on any individual's mental health. Without proper resources and the necessary support, these jobs take an incredible toll not just on your life on the job but the stress and trauma follow you home.

Workers who answer the phone at a 911 call center never know what they will get. Throughout their workday, they can instruct frantic parents on giving CPR to an infant, navigate Fire and EMS to a burning building, dispatch police to a shooting, and countless other scenarios that most of us would rather not think about in our daily lives.

For example, Allegheny County handled the second-highest 911 call volume in the state, with [more than 1.4 million calls in 2021](#) alone. There is little that can prepare a person to step into such an intense and high-stakes workplace. In Allegheny, 60% of 911 telecommunications workers have less than 3-years of experience. Many of them have never received any in-person training. It is common in Allegheny County for a worker to take 100 calls in an eight-hour shift.

Exacerbated by the staffing shortage, the stress and constant traumatization in the workplace can wreak havoc on the personal lives of these workers. The lack of sleep due to long hours from mandatory overtime can create and even worsen physical and mental health problems.

In 2012, a study by Northern Illinois University found 911 workers' "on-the-job, indirect exposure to trauma puts dispatchers at risk for developing symptoms of post-traumatic stress

disorder (PTSD).”¹ 911 telecommunicators experience intense emotional and psychological distress in the course of several calls throughout their shift. This peritraumatic distress increases the likelihood of post-traumatic stress disorder and other adverse mental health implications. While this study was conducted over a decade ago, it must be noted that there is very little research on the impact of trauma on 911 dispatchers as they are not considered “first responders.”

Similar research has been conducted on the trauma experienced by police officers, firefighters, and EMS medics. In 2018, the Substance Abuse and Mental Health Services Administration (SAMHSA)² estimated that 30% of first responders develop behavioral health conditions, including depression and post-traumatic stress disorder (PTSD), compared to 20% of the general population.

It’s easy to forget the person on the phone until you need them. Today, we would like members of the committee to hear from one of our members, Michael Steinmiller, who works at the Allegheny County 911 call center:

Usually, I’m the voice you hear on the phone or dispatch radio but seldom see. It is encouraging to be seen today and have the opportunity to tell you about my experience. Since 2011, I have been a telecommunicator employed at the Allegheny County 911 Center, and I dispatch for Pittsburgh police, fire, and medics. I am here today to tell you about the person who picks up the phone when you call for help and dispatches the emergency services you need.

Our job isn’t like any other job. It takes a special kind of personality to do this work and do it well, and I am incredibly proud of what my colleagues and I do. The schedule is grueling. I have an hour-long round-trip commute every day to the center, as do many of my co-workers. It’s not how you want to begin your day or end it after a 16-hour shift.

Every day on the job is different, and so is every call. You never know what you’re going to get. In my 12 years on the job, I have delivered five babies over the phone. But I can’t tell you the number of times I have had to instruct parents on how to perform CPR on their own children of all ages. Sometimes you pick up the phone, and it could be a house fire, a violent domestic, a medical emergency, a suicide, or a violent crime involving a weapon. Then you have days when a bridge collapses, and your break gets put off for a few hours.

¹ [NIU psychology study links 9-1-1 dispatchers with post-traumatic stress disorder symptoms](#), Northern Illinois University, March 29, 2012

² [SAMHSA Disaster Technical Assistance Center Supplemental Research Bulletin First Responders: Behavioral Health Concerns, Emergency Response, and Trauma](#), Substance Abuse and Mental Health Services Administration, May 2018

Consider this, when someone calls 911, have you ever wondered how help actually arrives? That's my job. But it's a lot harder to see the person who takes the call and orchestrates the delivery of those emergency services than the ones in front of you on the scene. We need the same kinds of support and resources our police, firefighters, and medics have to deal with their trauma from the scene.

In 2018, on a Saturday morning, at about 9:54 AM on a rainy October day, I got a gun call present to my screen. It was for the Tree of Life synagogue. I heard someone on the other side of the call center yell, "We have an active shooter." I started a few units on the way, and it just went downhill from there. It happens so quickly. You don't have time to think. Your training and instinct just kick in. And I will never forget that day.

Afterward, I stepped away for a few moments, but I was back on the radio 15 minutes later. There's no going home early or taking the next day off, even when you get the worst calls. There are many health implications from the stress of this job. We all cope the best we can and try to find ways to balance our lives. Many of my colleagues seek therapy or other support services and find it helpful. But oftentimes, the question of mental health is swept under the rug, and the resources available to our colleagues in police, fire, and EMS aren't guaranteed for 911 workers because we are not classified as first responders. It's my hope that we can change the culture of our 911 centers and improve working conditions for all my colleagues. Thank you for the opportunity to speak to you today.

Solutions to Support Telecommunicators

The Commonwealth of Pennsylvania can improve working conditions for 911 call center telecommunicators in several ways. First, the General Assembly can pass legislation that would accurately classify telecommunicators' critical role in emergency response. Secondly, the Commonwealth can ensure that the 911 program, a vital piece of public safety infrastructure, is fully funded and capable of attracting, training, and retaining skilled professionals to solve the staffing crisis.

While 911 call center workers are the first point of contact in a crisis, they are not classified as "first responders." Therefore, they are ineligible for additional resources and support available to their peers in police, fire, and EMS departments. Reclassifying 911 telecommunicators as first responders is a critical step toward getting these workers the support they deserve, as well as advocating for research, technology, funding, and policy that will benefit the field of emergency services. In 2022, seven states enacted legislation classifying emergency telecommunicators as first responders. It is time for Pennsylvania to define these essential workers as first responders because they have dedicated their careers to saving lives. House Bill 349, Defining Dispatchers as First Responders, has been introduced by Representative Dan Miller, and SEIU Local 668 strongly supports this legislation.

Governor Shapiro is taking a firm step towards addressing years of underinvestment in our 911 system. His budget proposal would begin to address some of the recruitment and retention issues that have plagued the Commonwealth's system for years. We're also aware that the County Commissioners Association of Pennsylvania's call for (CCAP)³ is calling for an increase to \$2.30 with a \$.15 increase until the next reauthorization. Given the challenges workers are facing and the resulting effect on public safety, we ask the General Assembly to support the highest surcharge possible in accordance with the Commonwealth's fiscal constraints.

Appendix: The 988 Suicide and Mental Health Crisis Hotline

The Suicide Prevention and Crisis Hotline, 988, became available nationwide to all cell phone and landline users [on July 16, 2022](#). A person experiencing a mental health emergency can [call the three-digit number](#) and connect with a local crisis counselor. The counselor provides the caller with counseling, resources, and referrals. If a local counselor is unavailable or the wait becomes too long, the caller is directed to a Lifeline overflow call center, often out of state. As of December 2022, [Pennsylvania has an 82%](#) answer rate.

While the federal government allocated funds to implement the 988 hotline, primary funding is the responsibility of the state and local governments. Five states [passed legislation regarding the allocation](#) of funds for the hotline.

SEIU Local 668 represents county caseworkers who work in crisis intervention and have first-hand experience with 988 referrals. Instead, the county contracts with a call center. Our members note that there is a significant need for additional mental health resources to meet community demand. However, the 988 program would benefit from specific improvements:

- **Increased location accuracy of the call.** Theoretically, the 988 callers connect with a crisis counselor in their area, but that is not always the case. For example, a member recently received a call from a 988 call center, but the call was not local. He took the information and found the appropriate county resource in the caller's location. In a mental health emergency, someone must quickly connect with the local resources that can provide the proper services. There are [only 13 crisis centers](#) throughout the state.
- **Improved integration with county resources.** For example, a person in crisis calls the 988 number and speaks with a crisis counselor at a call center; then, the call center counselor calls the county crisis unit directly and transfers the referral information. From there, a crisis unit counselor calls the original 988 caller and speaks to them about local resources. Having the call center counselor serve as a middle entity slows the process of triaging the call and getting the caller the needed help.

³ [911 Funding and Reauthorization The Time for Action is NOW](#), County Commissioners Association of Pennsylvania, 2023

- **Consistent, committed funding.** SEIU Local 668 supports Governor Shapiro's budget ask for additional funding for the 988 program. While the federal government did provide some initial funding for the program, counties must make up the shortfall which places an undue burden on local governments already struggling to fully fund existing social services.

While a crisis hotline is a good model and valuable resource, implementation can be improved for efficiency. Too often, counties contract with providers who pay low wages, are not unionized, and do not provide benefits which can lead to worker burnout and high turnover rates.