

116TH CONGRESS
2D SESSION

H. R. 6008

To direct the Attorney General to develop crisis intervention training tools for use by first responders related to interacting with persons who have a traumatic brain injury, another form of acquired brain injury, or post-traumatic stress disorder, and for other purposes.

IN THE HOUSE OF REPRESENTATIVES

FEBRUARY 27, 2020

Mr. PASCRELL (for himself, Mr. BACON, Mrs. DEMINGS, Mr. RUTHERFORD, and Mr. COX of California) introduced the following bill; which was referred to the Committee on the Judiciary, and in addition to the Committee on Energy and Commerce, for a period to be subsequently determined by the Speaker, in each case for consideration of such provisions as fall within the jurisdiction of the committee concerned

A BILL

To direct the Attorney General to develop crisis intervention training tools for use by first responders related to interacting with persons who have a traumatic brain injury, another form of acquired brain injury, or post-traumatic stress disorder, and for other purposes.

1 *Be it enacted by the Senate and House of Representa-*
2 *tives of the United States of America in Congress assembled,*

3 **SECTION 1. SHORT TITLE.**

4 This Act may be cited as the “Traumatic Brain In-
5 jury and Post-Traumatic Stress Disorder Law Enforce-

1 ment Training Act” or the “TBI and PTSD Law Enforce-
2 ment Training Act”.

3 **SEC. 2. FINDINGS.**

4 Congress finds the following:

5 (1) According to the Centers for Disease Con-
6 trol and Prevention, there were approximately 2.9
7 million traumatic brain injury-related emergency de-
8 partment visits, hospitalizations, and deaths in the
9 United States in 2014.

10 (2) Effects of traumatic brain injury (TBI) can
11 be short-term or long-term, and include impaired
12 thinking or memory, movement, vision or hearing, or
13 emotional functioning, such as personality changes
14 or depression.

15 (3) Currently, between 3.2 million and 5.3 mil-
16 lion persons are living with a TBI-related disability
17 in the United States.

18 (4) About 7 or 8 percent of Americans will ex-
19 perience post-traumatic stress disorder (PTSD) at
20 some point in their lives, and about 8 million adults
21 have PTSD during the course of a given year.

22 (5) TBI and PTSD have been recognized as the
23 signature injuries of the Wars in Iraq and Afghani-
24 stan.

1 (6) According to the Department of Defense,
2 383,000 men and women deployed to Iraq and Af-
3 ghanistan sustained a brain injury while in the line
4 of duty between 2000 and 2018.

5 (7) Approximately 13.5 percent of Operations
6 Iraqi Freedom and Enduring Freedom veterans
7 screen positive for PTSD, according to the Depart-
8 ment of Veteran Affairs.

9 (8) About 12 percent of Gulf War Veterans
10 have PTSD in a given year while about 30 percent
11 of Vietnam Veterans have had PTSD in their life-
12 time.

13 (9) Physical signs of TBI can include motor im-
14 pairment, dizziness or poor balance, slurred speech,
15 impaired depth perception, or impaired verbal mem-
16 ory, while physical signs of PTSD can include agita-
17 tion, irritability, hostility, hypervigilance, self-de-
18 structive behavior, fear, severe anxiety, or mistrust.

19 (10) Physical signs of TBI and PTSD often
20 overlap with physical signs of alcohol or drug im-
21 pairment, which complicate a first responder's abil-
22 ity to quickly and effectively identify an individual's
23 condition.

1 **SEC. 3. CREATION OF A TBI AND PTSD TRAINING FOR**
 2 **FIRST RESPONDERS.**

3 Part HH of title I of the Omnibus Crime Control and
 4 Safe Streets Act of 1968 (34 U.S.C. 10651 et seq.) is
 5 amended—

6 (1) in section 2991—

7 (A) in subsection (h)(1)(A), by inserting
 8 before the period at the end the following: “, in-
 9 cluding the training developed under section
 10 2993”; and

11 (B) in subsection (o)(1)(C), by striking
 12 “\$50,000,000” and inserting “\$54,000,000”;
 13 and

14 (2) by inserting after section 2992 the following
 15 new section:

16 **“SEC. 2993. CREATION OF A TBI AND PTSD TRAINING FOR**
 17 **FIRST RESPONDERS.**

18 “(a) IN GENERAL.—Not later than one year after the
 19 date of the enactment of this section, the Attorney Gen-
 20 eral, acting through the Director of the Bureau of Justice
 21 Assistance, in consultation with the Director of the Cen-
 22 ters for Disease Control and Prevention and the Assistant
 23 Secretary for Mental Health and Substance Use, shall so-
 24 licit best practices regarding techniques to interact with
 25 persons who have traumatic brain injury, acquired brain
 26 injury, or post-traumatic stress disorder from first re-

1 sponder, brain injury, veteran, and mental health organi-
2 zations, health care and mental health providers, hospital
3 emergency departments, and other relevant stakeholders,
4 and shall develop crisis intervention training tools for use
5 by first responders (as such term is defined in section
6 3025) that provide—

7 “(1) information on the conditions and symp-
8 toms of traumatic brain injury, acquired brain in-
9 jury, and post-traumatic stress disorder;

10 “(2) techniques to interact with persons who
11 have a traumatic brain injury, an acquired brain in-
12 jury, or post-traumatic stress disorder; and

13 “(3) information on how to recognize persons
14 who have a traumatic brain injury, an acquired
15 brain injury, or post-traumatic stress disorder.

16 “(b) USE OF TRAINING TOOLS AT LAW ENFORCE-
17 MENT MENTAL HEALTH LEARNING SITES.—The Attor-
18 ney General shall ensure that not less than one Law En-
19 forcement Mental Health Learning Site designated by the
20 Director of the Bureau of Justice Assistance, in consulta-
21 tion with the Council of State Governments Justice Cen-
22 ter, utilizes the training tools developed under subsection
23 (a).

24 “(c) POLICE MENTAL HEALTH COLLABORATION
25 TOOLKIT.—The Attorney General shall make the training

1 tools developed under subsection (a) available as part of
2 the Police-Mental Health Collaboration Toolkit provided
3 by the Bureau of Justice Assistance.”.

4 **SEC. 4. SURVEILLANCE AND REPORTING FOR FIRST RE-**
5 **SPONDERS WITH TBI.**

6 Section 393C of the Public Health Service Act (42
7 U.S.C. 280b–1d) is amended by adding at the end the fol-
8 lowing:

9 “(d) LAW ENFORCEMENT AND FIRST RESPONDER
10 SURVEILLANCE.—

11 “(1) IN GENERAL.—The Secretary, acting
12 through the Director of the Centers for Disease
13 Control and Prevention, shall implement concussion
14 data collection and analysis to determine the preva-
15 lence and incidence of concussion among first re-
16 sponders (as such term is defined in section 3025 of
17 the Omnibus Crime Control and Safe Street Act of
18 1968 (34 U.S.C. 10705)).

19 “(2) REPORT.—Not later than 18 months after
20 the date of the enactment of this subsection, the
21 Secretary, acting through the Director of the Cen-
22 ters for Disease Control and Prevention and the Di-
23 rector of the National Institutes of Health and in
24 consultation with the Secretary of Defense and the
25 Secretary of Veterans Affairs, shall submit to the

1 relevant committees of Congress a report that con-
2 tains the findings of the surveillance conducted
3 under paragraph (1). The report shall include sur-
4 veillance data and recommendations for resources
5 for first responders who have experienced traumatic
6 brain injury.”.

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