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

MAY 4, 2021

Mr. Pascrell (for himself, Mr. Bacon, Mrs. Demings, and Mr. Rutherford) 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-

tives of the United States of America in Congress assembled,

3 SECTION 1. SHORT TITLE.

This Act may be cited as the “Traumatic Brain In-
jury and Post-Traumatic Stress Disorder Law Enforce-
ment Training Act” or the “TBI and PTSD Law Enforce-
ment Training Act”.

SEC. 2. FINDINGS.

Congress finds the following:

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

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

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

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

(5) TBI and PTSD have been recognized as the
signature injuries of the Wars in Iraq and Afghani-
stan.
(6) According to the Department of Defense, 383,000 men and women deployed to Iraq and Afghanistan sustained a brain injury while in the line of duty between 2000 and 2018.

(7) Approximately 13.5 percent of Operations Iraqi Freedom and Enduring Freedom veterans screen positive for PTSD, according to the Department of Veteran Affairs.

(8) About 12 percent of Gulf War Veterans have PTSD in a given year while about 30 percent of Vietnam Veterans have had PTSD in their lifetime.

(9) Physical signs of TBI can include motor impairment, dizziness or poor balance, slurred speech, impaired depth perception, or impaired verbal memory, while physical signs of PTSD can include agitation, irritability, hostility, hypervigilance, self-destructive behavior, fear, severe anxiety, or mistrust.

(10) Physical signs of TBI and PTSD often overlap with physical signs of alcohol or drug impairment, which complicate a first responder’s ability to quickly and effectively identify an individual’s condition.
SEC. 3. CREATION OF A TBI AND PTSD TRAINING FOR FIRST RESPONDERS.


(1) in section 2991—

(A) in subsection (h)(1)(A), by inserting before the period at the end the following: “, including the training developed under section 2993”; and

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

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

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

“(a) IN GENERAL.—Not later than one year after the date of the enactment of this section, the Attorney General, acting through the Director of the Bureau of Justice Assistance, in consultation with the Director of the Centers for Disease Control and Prevention and the Assistant Secretary for Mental Health and Substance Use, shall solicit best practices regarding techniques to interact with persons who have traumatic brain injury, acquired brain injury, or post-traumatic stress disorder from first re-
sponder, brain injury, veteran, and mental health organizations, health care and mental health providers, hospital emergency departments, and other relevant stakeholders, and shall develop crisis intervention training tools for use by first responders (as such term is defined in section 3025) that provide—

“(1) information on the conditions and symptoms of traumatic brain injury, acquired brain injury, and post-traumatic stress disorder;

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

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

“(b) USE OF TRAINING TOOLS AT LAW ENFORCEMENT MENTAL HEALTH LEARNING SITES.—The Attorney General shall ensure that not less than one Law Enforcement Mental Health Learning Site designated by the Director of the Bureau of Justice Assistance, in consultation with the Council of State Governments Justice Center, utilizes the training tools developed under subsection (a).

“(c) POLICE MENTAL HEALTH COLLABORATION TOOLKIT.—The Attorney General shall make the training
tools developed under subsection (a) available as part of
the Police-Mental Health Collaboration Toolkit provided
by the Bureau of Justice Assistance.”.

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

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

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

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

“(2) REPORT.—Not later than 18 months after
the date of the enactment of this subsection, the
Secretary, acting through the Director of the Cen-
ters for Disease Control and Prevention and the Di-
rector of the National Institutes of Health and in
consultation with the Secretary of Defense and the
Secretary of Veterans Affairs, shall submit to the
relevant committees of Congress a report that con-
tains the findings of the surveillance conducted
under paragraph (1). The report shall include sur-
veillance data and recommendations for resources
for first responders who have experienced traumatic
brain injury.”.