

Allston_FAV_SB305

Uploaded by: Allston, Katie

Position: FAV

Dear Chairman Smith, Vice-Chair Waldstreicher, and members of the Senate Judicial Proceedings Committee,

Testimony bullet points

1. Summary of what psychosis is like for me
 - 1.1. Government agent interference
 - 1.2. Secret messages
2. The backdrop for interaction with the police officer
 - 2.1. Boyfriend calming me with a lunch date
 - 2.2. Messages show up and I flee the restaurant
 - 2.3. Call for police
3. Interaction with the police officer
 - 3.1. Officer arrives and splits my boyfriend and me up
 - 3.2. Attempt to punch the officer
4. Police officer's response and how it helped and affects me to this day
 - 4.1. Officer digs deeper and makes the decision to seek medical assistance - a clear result of mental health issue related de-escalation
 - 4.2. Received medical care
 - 4.3. In the current recovery, moving away from disability, volunteering and advocating for NAMI

Summary of what psychosis is like

My experience with mental illness is rooted in a nightmare... and I don't use that word lightly. If you can imagine living in a nightmare, that's what psychosis was like for me. I believed I had discovered I was part of a government secret agent program. I believed that I was being watched at all times. I also believed that I was delivered a constant stream of secret messages embedded in subtle conversations with strangers, the imagery on TV and print ads, and coded into the English language itself.

It was this experience with messages embedded into television images that propelled me into an inspiring and benevolent experience with an empathetic police officer.

The backdrop for interaction with the police officer

During an afternoon when I was particularly upset about my paranoid delusions, my boyfriend took me out for lunch. During this lunch, I began noticing messages delivered through the restaurant's television that was mounted above the bar.

Infuriated at the idea the government was interfering in my life, I lashed out at my boyfriend whom I believed to be a secret agent and launched a full margarita at him across the table. I jumped up from the table and ran through the restaurant out the back door.

Outside of the restaurant, I began screaming at people to call the police with my boyfriend trying to chase and calm me down.

Interaction with the police officer

Once the police officer arrived, he split my boyfriend and me up. My boyfriend took his time to explain my condition to him, that I was having a mental breakdown.

During my time with the officer, convinced he a secret agent, I wanted to be separated from my boyfriend and began asking, "what do I have to do to get arrested?" My boyfriend interjected saying, "don't tell her because she will do it."

After this exchange, my rage finally grew out of control with an attempt to punch the officer in the face. Thinking quickly and professionally, the officer maneuvered me into a confined hold on the back of the police car and quickly ushered me into the back once secured in handcuffs.

Police officer's response and how it helped and affects me to this day

Rather than immediately transporting me to the nearest jail, which he was surely within his rights and the law to do, he returned to my boyfriend to learn more about my condition. He decided to take me to the nearest hospital.

This police officer was truly a lifesaver. Conditions could have been made far worse for me at his discretion. Foregoing incarceration, devastating fines, felony charges, and restricting access to psychiatric counseling and medication, he opted not to take me to jail.

I am thankful for this police officer's patience and empathy. It is because of his kindness that I am able to stand and tell you this amazing story today and not sitting behind the bars with the other inmates for which you currently care.

Carroom_FAV_SB305

Uploaded by: Carroom, Phil

Position: FAV

Support SB 305 - Crisis Intervention center

MARYLAND ALLIANCE FOR JUSTICE REFORM

Working to end unnecessary incarceration and build strong, safe communities



TO: Chair Will Smith and Senate Judic.Proceedings Committee

FROM: Phil Caroom, MAJR Executive Committee

DATE: February 11, 2020

Md. Alliance for Justice Reform (MAJR-www.ma4jr.org) supports SB 305.

Studies of Maryland's pretrial system have estimated that at least 39% of local jail inmates suffer from mental health disorders (GOCCP 2016, p. 24 and p. 50; OPD 2017). Despite such a high incidence of mental illness, most Maryland law enforcement officers lack training in "crisis intervention" — that is, how to recognize, de-escalate and obtain appropriate mental health care for this large segment of their communities.

While the fiscal impact note for SB 305 may seem steep, the cost of not using best practices is steeper:

Maryland jail wardens and national studies agree that more mentally ill persons are in jails and prisons than hospitals (See, for example, TAC and NSA, 2010). But many Maryland wardens also complain of insufficient resources for both community-based, in-jail, and post-release treatment (GOCCP 2016, p. 9). This failure to provide treatment resources assures an even greater ongoing, long-term burden on Marylanders—in detention costs, law enforcement time, and public safety. The reason is clear:

More than 95% of county jail inmates will eventually return to the community and, if mental health and substance abuse issues remain untreated, they are very likely to cycle back into the system through the county jail, again and again (JRCC, pl.12). Indeed, the risk of reoffending is greater as studies suggest that incarceration increases the likelihood of new offenses.

For all these reasons, Md. Alliance for Justice Reform (MAJR) urges a favorable report on SB 305.

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PLEASE NOTE: Phil Caroom offers this testimony for Md. Alliance for Justice Reform and not for the Md. Judiciary.

NCADD_FAV_SB 305

Uploaded by: Ciekot, Ann

Position: FAV



**Senate Judicial Proceedings Committee
February 11, 2020**

**Senate Bill 305
Public Safety - Crisis Intervention Team Center of Excellence**

Support

NCADD-Maryland supports Senate Bill 305. Crisis Intervention Teams (CITs) are partnerships between law enforcement, mental health and addiction providers, and peers providing health interventions to address the needs of people in crisis situations in a way that is intended to prevent involvement in the criminal justice system.

SB 305 proposes the creation of a Crisis Intervention Team Center of Excellence within the Governor's Office of Crime Control and Prevention to provide technical support to local governments, law enforcement, behavioral health agencies, and crisis service providers and develop and implement a "crisis intervention model program." It is important to ensure best practices are developed and shared as these model programs are most effective with involvement of people with lived experience.

Maryland must prioritize the development of a statewide comprehensive crisis response system. We urge a favorable report on SB 305.

The Maryland Affiliate of the National Council on Alcoholism and Drug Dependence (NCADD-Maryland) is a statewide organization that works to influence public and private policies on addiction, treatment, and recovery, reduce the stigma associated with the disease, and improve the understanding of addictions and the recovery process. We advocate for and with individuals and families who are affected by alcoholism and drug addiction.

MML_FAV_SB 305

Uploaded by: Donoho, Candace

Position: FAV



Maryland Municipal League

The Association of Maryland's Cities and Towns

TESTIMONY

February 11, 2020

Committee: Senate Judicial Proceedings

Bill: SB 305 – Public Safety – Crisis Intervention Team Center of Excellence

Position: Support

Reason for Position:

The Maryland Municipal League supports SB 305. This bill establishes the Crisis Intervention Team Center of Excellence in the Governor's Office of Crime Control and Prevention to provide technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers and to develop and implement a crisis intervention model program.

Over ninety municipalities currently have law enforcement agencies, and our municipal officers appreciate any additional assistance and training they receive as they carry out their duties. Increasingly, our law enforcement officials are interacting with members of the public who suffer from a mental illness. The Center created by this legislation would serve to direct individuals away from the criminal justice system and provide access to alternative services at the point where an individual may have an encounter with local law enforcement.

For these reasons, the League supports SB 305 and respectfully requests that the committee report the bill favorably.

FOR MORE INFORMATION CONTACT:

Scott A. Hancock	Executive Director
Candace L. Donoho	Government Relations Specialist
Bill Jorch	Manager, Government Relations & Research
Justin Fiore	Manager, Government Relations

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MHA_FAV_SB305

Uploaded by: Dorrien, Erin

Position: FAV



Maryland
Hospital Association

February 11, 2020

To: The Honorable William C. Smith Jr., Chairman
Senate Judicial Proceedings Committee

From: Erin Dorrien, Director, Policy
Maryland Hospital Association

Re: Letter of Support- Senate Bill 305 - Public Safety- Crisis Intervention Team- Center of Excellence

Dear Chairman Smith:

On behalf of the Maryland Hospital Association's (MHA) 61 member hospitals and health systems, we appreciate the opportunity to comment on Senate Bill 305. Maryland's hospitals are focused on expanding access to behavioral health care to support the one in five Marylanders who suffer from a behavioral health condition. Unfortunately, too often law enforcement agencies are the first responders for those in a mental health crisis. For people with a mental health condition, entering the criminal justice system is often easier than accessing the mental health treatment system.

The Crisis Intervention Team (CIT) model of community policing is a nationally recognized model to improve interaction between law enforcement and individuals in mental health crisis. These programs train officers to identify people in need of mental health care and de-escalate situations. They also can include collaboration between local police departments and clinicians and link individuals to treatment rather than jail.

SB 305 establishes a Crisis Intervention Team Center of Excellence (CITCE) in the Governor's Office of Crime Control and Prevention (GOCCP). The CITCE would provide technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers and develop and implement a "crisis intervention model program." The bill also establishes a Collaborative Planning and Implementation Committee for the CITCE.

SB 305 builds on improvements already occurring locally and expands a working model to ensure Marylanders have access to the behavioral health care they need. For these reasons, we urge a *favorable* report on SB 305.

For more information, please contact:
Erin Dorrien
Edorrien@mhaonline.org

Farinholt_FAV_SB305

Uploaded by: Farinholt, Kate

Position: FAV

February 11, 2020

Senate Bill 305 - Public Safety - Crisis Intervention Team Center of Excellence - SUPPORT

Chairman Smith, Vice Chair Waldstreicher, and members of the Senate Judicial Proceedings Committee,

The National Alliance on Mental Illness, Maryland and our 11 local affiliates across the state represent a statewide network of more than 45,000 families, individuals, community-based organizations and service providers. NAMI Maryland is dedicated to providing education, support and advocacy for persons with mental illnesses, their families and the wider community.

NAMI Maryland strongly supports Senate Bill 305, legislation that would create a Crisis Intervention Team Center of Excellence to provide technical for local jurisdictions bring together law enforcement, behavioral health, and the resources necessary to help divert individuals with mental illness from the criminal justice system and into the treatment they need.

The value of crisis intervention teams is in making encounters between law enforcement and individuals with mental illnesses safer, more dignified and more informed. Research has shown that accomplishing this effectively involves many steps, the work of many people, and can take years.

Beginning with the creation of the Memphis Model of CIT in the mid-1980s, the National Alliance on Mental Illness has been central to the establishment of CIT programs nationwide – providing advocacy for people with mental illnesses and support to families. In addition to law enforcement, stakeholders include mental health services providers, hospitals, EMS and peers.

Law enforcement agencies, in partnership with stakeholders, must determine which program best suits their needs, and plan their responses and the needed training collaboratively. Collaboration among a diverse set of stakeholders is the first element and is pivotal to developing effective Crisis Intervention Team programs.

NAMI Maryland has been proud to partner with organizations like the Mental Health Association of Maryland, the Behavioral Health Administration, and others to grow CIT across the state. Over the years, we've made tremendous improvement, but we know there's more we can do. Creating a small, focused place within the state will help elevate our work beyond a piecemeal county-by-county strategy into a full-scale, statewide resource to serve our local communities.

For these reasons, NAMI Maryland asks for a favorable report on SB 305.

Kathryn S. Farinholt
Executive Director
National Alliance on Mental Illness, Maryland

Farinholt_FAV_SB305

Uploaded by: Farinholt, Kate

Position: FAV



TESTIMONY IN SUPPORT OF SB 305
Public Safety- Crisis Intervention Team Center of Excellence

TO: Chairman Clippinger and Members of the Judiciary Committee

FROM: Katie Allston, Executive Director of Marian House

DATE: February 11, 2020

Chair Sen. Smith, Vice Chair Sen. Waldstreicher, Members of the Judiciary Committee:

Marian House is a holistic, healing community for women and children in need of housing, employment and other support services. Marian House provides wraparound support to assist women exiting incarceration and other homeless women in need of our services. On behalf of Marian House and the women and families we serve, **I write to urge you to support SB 305.**

Marian House was founded as a joint project of the Sisters of Mercy and School Sisters of Notre Dame in response to the cyclical experiences of women exiting the Baltimore City Detention Center. The Sisters noticed that women were exiting jail with the same underlying problems that contributed to their incarceration in the first place, including substance use and mental health disorders among other challenges. Despite desires to change their circumstances, these women would return repetitively to the correctional system.

In 2019, we served 55 individuals with histories of incarceration in our transitional program. 93% of these women report also having a substance use disorder, and 80% have been diagnosed with a mental health disorder. In our 36 years of serving women across the state of Maryland, it is common for women to enter our program with one or more co-occurring diagnoses. Often, they have never received treatment or have received inadequate treatment while incarcerated. It is clear that there is a strong relationship between incarceration and behavioral health outcomes for the women we serve, and likely for those with similar experiences across the state.

Implementing a Center of Excellence to aid in the efforts of the Crisis Intervention Team is a necessary step to further divert individuals away from the criminal justice system, and toward much needed supportive services. Filling the void between mental health and substance use treatment, and reducing recidivism rates was the basis upon which Marian House was founded, and continues to be a vital part of our mission today.

A core element of The Crisis Intervention Team emphasizes the importance of partnerships between law enforcement, advocacy, and mental health organizations. Currently, Marian House is an active partner post-release, serving women leaving incarceration, however the Center of Excellence would allow for individuals to be connected to services like ours before they are



MARIAN HOUSE

Women Moving from Dependence to Independence

arrested, to ensure that they are referred to the best intervention. We would appreciate having the opportunity to serve women as an alternative to incarceration and hope this bill will support that goal. We strongly advocate for initiatives that improve the quality of life for those in our communities, and ask that you vote in favor of **SB 305**.

Sincerely,

A handwritten signature in black ink that reads "Katie Allston". The signature is fluid and cursive, with a long horizontal stroke at the end.

Katie Allston, LCSW-C
Executive Director

Farinholt_FAV_SB305

Uploaded by: Farinholt, Kate

Position: FAV



Maryland Chiefs of Police Association Maryland Sheriffs' Association



MEMORANDUM

TO: The Honorable William C. Smith, Jr. Chairman and
Members of the Judicial Proceedings Committee

FROM: Chief David Morris, Co-Chair, MCPA, Joint Legislative Committee
Sheriff Darren Popkin, Co-Chair, MSA, Joint Legislative Committee
Andrea Mansfield, Representative, MCPA-MSA Joint Legislative Committee

DATE: February 11, 2020

RE: **SB 305 – Public Safety – Crisis Intervention Team Center of Excellence**

POSITION: **SUPPORT**

The Maryland Chiefs of Police Association (MCPA) and the Maryland Sheriffs' Association (MSA) **SUPPORT** SB 305. This bill establishes a Crisis Intervention Team Center of Excellence (CITCE) in the Governor's Office of Crime Control and Prevention (GOCCP) to assist local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers with behavioral health crisis response.

As law enforcement increasingly engages individuals experiencing varying degrees of mental illness, these types of interactions have shown a true need for police and mental health service providers to partner together to better serve people experiencing mental health crises. The National Standard and Best Practice for Law Enforcement is the Crisis Intervention Team (CIT) Model. SB 305, Public Safety – Crisis Intervention Team Center of Excellence, addresses this as a "Best Practice" and collaborative approach by creating a CIT Technical Assistance Center and Committee, which will provide guidance and appropriate links to services, and possible diversion from the criminal justice system. As many law enforcement agencies in Maryland have adopted a Crisis Intervention Team or utilize modeling and procedures from CIT teams, the future collaboration from this Center of Excellence for all stakeholders, will continue to improve the interactions of Public Safety, with those experiencing mental health issues.

For these reasons, MCPA and MSA **SUPPORT** SB 305 and urge a **FAVORABLE** committee report.

Farinholt_FAV_SB305

Uploaded by: Farinholt, Kate

Position: FAV



February 11, 2020

Senate Judicial Proceedings Committee

TESTIMONY IN SUPPORT OF SB 305- Public Safety- Crisis Intervention Team Center of Excellence

Behavioral Health System Baltimore (BHSB) a nonprofit organization that serves as the local behavioral health authority (LBHA) for Baltimore City. BHSB works to increase access to a full range of quality behavioral health (mental health and substance use) services and advocates for innovative approaches to prevention, early intervention, treatment and recovery for individuals, families, and communities. **Baltimore City represents nearly 35 percent of the public behavioral health system in Maryland, serving nearly 75,000 people with mental illness and substance use disorders (collectively referred to as “behavioral health”) annually.**

Behavioral Health System Baltimore is in support of SB 305- Public Safety- Crisis Intervention Team Center of Excellence. This bill establishes a Crisis Intervention Team Center of Excellence (CITCE) in the Governor’s Office of Crime Control and Prevention (GOCCP). The CITCE will provide technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers and develop, and implement a “crisis intervention model program.” The bill also establishes a Collaborative Planning and Implementation Committee for the CITCE.

Too often law enforcement agencies are the first responders to people experiencing a mental health crisis. Each year, two million jail bookings involve a person with mental illness. Forty percent of individuals with a severe mental illness will have spent time in either jail, prison or community corrections¹

In order to improve law enforcements response to behavioral health crises Behavioral Health System Baltimore (BHSB) currently collaborates with the Baltimore Police Department (BPD) to utilize the Crisis Intervention Team (CIT), which is a nationally recognized model for community policing that has proven to keep those experiencing mental illness out of jails and improve public safety. BHSB and BPD provide new city officers with 40 hours of CIT training and are implementing ongoing refresher trainings for supervisors and seasoned patrol officers, and specific training for 911 and dispatch operators. In addition, in 2017 BHSB in collaboration with various stakeholders implemented a pilot program that pairs a CIT trained officer with a clinician in Baltimore City’s Central District.

CIT helps to improve officers’ ability to address mental health crises and ensure safety of officers, individuals in crisis, and bystanders. The collaboration between officers and behavioral health providers allows for the identification of resources, provides assistance to those experiencing the crisis and their families, and ensures officers get the training and support needed to respond.

Maryland must continue to prioritize implementation of CIT across the state to ensure persons with mental health disorders are not continuing to fill our jails and prisons. As such, **BHSB urges the Senate Judicial Proceedings Committee to support SB 305.**

¹ Subramanian R., Delaney R. Roberts S., Fishman N., McGarry P. (2015). “Incarceration’s Front Door: The Misuse of Jails in America” Vera Institute of Justice 4. Accessed April 9, 2015 at: <http://www.vera.org/sites/default/files/resources/downloads/incarcerations-front-door-report.pdf>

Farinholt_FAV_SB305

Uploaded by: Farinholt, Kate

Position: FAV



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Senate Bill 305 Public Safety – Crisis Intervention Team Center of Excellence

Judicial Proceedings Committee

February 11, 2020

Position: SUPPORT

The Mental Health Association of Maryland is a nonprofit education and advocacy organization that brings together consumers, families, clinicians, advocates and concerned citizens for unified action in all aspects of mental health, mental illness and substance use. We appreciate the opportunity to present this testimony in support of Senate Bill 305.

SB 305 establishes a Crisis Intervention Team (CIT) Center of Excellence to assist local jurisdictions in developing, evaluating and improving CIT programs across Maryland. CIT is a law enforcement-led, team-based intervention to divert individuals experiencing behavioral health crises away from the criminal justice system and into treatment. It results in less lethal interactions, better outcomes and increased safety for all involved.

CIT is not new to Maryland. Since 2013, a subcommittee of the Maryland Behavioral Health and Criminal Justice Partnership (BHCJP) has been working with the Behavioral Health Administration and a range of other stakeholders to standardize the model and expand it in jurisdictions across the state. The group has created a document outlining the core standards and elements that should be present in any effective and sustainable program; developed a roadmap of key implementation milestones to help local jurisdictions put the different pieces into place; worked to coordinate efforts among local partners; organized a series of regional relationship-building forums and statewide conferences for law enforcement and behavioral health professionals; surveyed all chiefs and sheriffs throughout the state on CIT awareness, interest and implementation barriers; and held a first-of-its-kind CIT train-the-trainer for a core group of local law enforcement and behavioral health partners, building an expertise and capacity that is allowing for more regional and local CIT training.

Tremendous progress has been made. While CIT coverage was sparse in 2013, there is now at least some CIT presence in most areas of the state. But the work is far from complete, and the Center of Excellence established under SB 305 would provide that extra level of support necessary to achieve the ultimate goal of around-the-clock CIT coverage in every law enforcement agency and jurisdiction throughout Maryland.

For this reason, MHAMD and the BHCJP CIT Subcommittee support SB 305 and urge a favorable report.

For more information, please contact Dan Martin at (410) 978-8865

MCF_Fav_SB 305

Uploaded by: Geddes, Ann

Position: FAV



SB 305 – Public Safety – Crisis Intervention Team Center of Excellence

Committee: Judicial Proceedings

Date: February 11, 2020

POSITION: Support

The Maryland Coalition of Families: Maryland Coalition of Families (MCF) helps families who care for someone with behavioral health needs. Using personal experience as parents, caregivers and other loved ones, our staff provide one-to-one peer support and navigation services to parents and caregivers of young people with mental health issues and to any loved one who cares for someone with a substance use or gambling issue.

MCF held focus groups with families who had accessed mental health crisis services for their child. In a crisis, families frequently call 911 and law enforcement responds.

In the focus groups, we heard of families having wonderful experiences with officers, who were well-trained to intervene in a crisis situation. They were successfully able to de-escalate the situation, and frequently their expertise resulted in the child not needing to go to the emergency department. We also heard stories of officers who were ill-equipped to address the mental health crisis. Sometimes they would arrest the child who was displaying out-of-control, aggressive behavior. One parent said “I called 911, so now we a parole officer.” Another parent reported that a police officer arrived and within ten seconds had tased her son.

We asked families: “Did you feel that the presence of the police was helpful to address the crisis?” Of the 28 families who reported having used the police, 16 families answered “yes,” and 12 families answered “no.” Participants came from across the state, and there were variable answers within jurisdictions.

SB 305 would support the development of more officers who are well-trained in mental health and substance use crisis intervention. It would result in greater consistency in training of officers across the state, with better outcomes for those experiencing a mental health or substance use crisis. In addition, it would improve the training of others who engage with individuals in a behavioral health crisis, or support those that do.

We urge a favorable report on SB 305.

Contact: Ann Geddes
Director of Public Policy
The Maryland Coalition of Families
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ageddes@mdcoalition.org

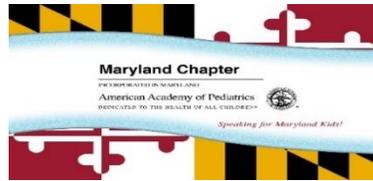
MedChi_MDAAP_MACHC_Pam Kasemeyer_FAV_SB0305

Uploaded by: Kasemeyer, Pam

Position: FAV



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MID-ATLANTIC ASSOCIATION OF
COMMUNITY HEALTH CENTERS
Serving Maryland and Delaware



TO: The Honorable William C. Smith, Jr., Chair
Members, Senate Judicial Proceedings Committee
The Honorable Malcolm Augustine

FROM: Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Richard A. Tabuteau

DATE: February 11, 2020

RE: **SUPPORT** – Senate Bill 305 – *Public Safety – Crisis Intervention Team Center of Excellence*

On behalf of the Maryland State Medical Society (MedChi), the Maryland Chapter of the American Academy of Pediatrics (MDAAP), and the Mid-Atlantic Association of Community Health Centers (MACHC), we submit this letter of **support** for Senate Bill 305.

Senate Bill 305 establishes a Crisis Intervention Team Center of Excellence in the Governor's Office of Crime Control and Prevention to provide technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers and to develop and implement a "crisis intervention model program." The bill also establishes a Collaborative Planning and Implementation Committee to guide the work of the Center of Excellence.

Given the current escalating incidences of mental health and substance abuse disorders and the corresponding need for crisis response services statewide, Senate Bill 305 provides a framework for creating a focused and organized approach to ensuring that local law enforcement, behavioral health agencies, and community-based support organizations and others invested in addressing this crisis have access to the best information and resource coordination available and that those resources are available statewide. A favorable report is requested.

For more information call:
Pamela Metz Kasemeyer
J. Steven Wise
Danna L. Kauffman
Richard A. Tabuteau
410-244-7000

MCPA-MSA_FAV_SB305

Uploaded by: Mansfield, Andrea

Position: FAV



Maryland Chiefs of Police Association

Maryland Sheriffs' Association



MEMORANDUM

TO: The Honorable William C. Smith, Jr. Chairman and
Members of the Judicial Proceedings Committee

FROM: Chief David Morris, Co-Chair, MCPA, Joint Legislative Committee
Sheriff Darren Popkin, Co-Chair, MSA, Joint Legislative Committee
Andrea Mansfield, Representative, MCPA-MSA Joint Legislative Committee

DATE: February 11, 2020

RE: **SB 305 – Public Safety – Crisis Intervention Team Center of Excellence**

POSITION: **SUPPORT**

The Maryland Chiefs of Police Association (MCPA) and the Maryland Sheriffs' Association (MSA) **SUPPORT** SB 305. This bill establishes a Crisis Intervention Team Center of Excellence (CITCE) in the Governor's Office of Crime Control and Prevention (GOCCP) to assist local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers with behavioral health crisis response.

As law enforcement increasingly engages individuals experiencing varying degrees of mental illness, these types of interactions have shown a true need for police and mental health service providers to partner together to better serve people experiencing mental health crises. The National Standard and Best Practice for Law Enforcement is the Crisis Intervention Team (CIT) Model. SB 305, Public Safety – Crisis Intervention Team Center of Excellence, addresses this as a "Best Practice" and collaborative approach by creating a CIT Technical Assistance Center and Committee, which will provide guidance and appropriate links to services, and possible diversion from the criminal justice system. As many law enforcement agencies in Maryland have adopted a Crisis Intervention Team or utilize modeling and procedures from CIT teams, the future collaboration from this Center of Excellence for all stakeholders, will continue to improve the interactions of Public Safety, with those experiencing mental health issues.

For these reasons, MCPA and MSA **SUPPORT** SB 305 and urge a **FAVORABLE** committee report.

Natasha Mehu_FAV_SB0305

Uploaded by: Mehu, Natasha

Position: FAV



Senate Bill 305

Public Safety – Crisis Intervention Team Center of Excellence

MACo Position: **SUPPORT**

To: Judicial Proceedings Committee

Date: February 11, 2020

From: Natasha Mehu

The Maryland Association of Counties (MACo) **SUPPORTS** SB 305 as it establishes a framework to help advance crisis intervention teams in Maryland.

SB 305 would establish a Crisis Intervention Team Center of Excellence (CITCE) in the Governor's Office of Crime Control and Prevention (GOCCP). The Center serves the dual purposes of providing technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers as well as developing and implementing model crisis intervention programs.

The bill also establishes a Collaborative Planning and Implementation Committee that is charged with reviewing and evaluating the services and training provided by the Center. The Committee includes a range of state and local stakeholders ensuring that unique viewpoints and expertise are employed in overseeing the Center.

Crisis intervention teams offer a community-based approach to improve the outcomes of interactions between first responders and those suffering from a behavioral health crisis. The Center and Committee establish a structure to help local governments and their agents establish effective, evidence-based crisis intervention programs. For these reasons MACo urges a **FAVORABLE** report on SB 305.

Augustine_FAV_SB305

Uploaded by: Senator Augustine, Senator Augustine

Position: FAV

MALCOLM AUGUSTINE
Legislative District 47
Prince George's County

Finance Committee
Energy and Public Utilities Subcommittee

Senate Chair, Joint Committee on the
Management of Public Funds



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THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

SENATE BILL 305 - PUBLIC SAFETY - CRISIS INTERVENTION TEAM CENTER OF EXCELLENCE

TESTIMONY OF SENATOR MALCOLM AUGUSTINE

Before Judicial Proceedings Committee
February 11, 2020

SB 305 will establish a Crisis Intervention Team Center of Excellence in the Governor's Office of Crime Control and Prevention. The goal of this legislation is to build upon and support the implementation of Crisis Intervention Team (CIT) best practices in law enforcement agencies across the state. The goal of a centralized Center of Excellence is to maximize resources and supports beyond traditional trainings for local law enforcement to improve their response to behavioral health crisis. New Jersey and Ohio have greatly increased the success of their local CIT programs by instituting similar state-wide coordination centers.

Nearly a quarter of police shootings and approximately 10% of police encounters involve residents experiencing a serious mental health crisis.¹ These contacts, more often than not, result in the arrest of the resident. This is evidenced by the fact that 56% of state prisoners struggle with serious mental illness.² Entry into the criminal justice system is likely to result in

¹ Ohio CIT Criminal Justice Coordinating Center of Excellence, *The Strategic Plan*.

² NAMI, *Department of Justice Study: Mental Illness of Prison Inmates Worse Than Past Estimates*, (Sept. 6, 2006) <https://www.nami.org/Press-Media/Press-Releases/2006/Department-of-Justice-Study-Mental-Illness-of-Pris>.

MALCOLM AUGUSTINE
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THE SENATE OF MARYLAND
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higher levels of recidivism.³ The aim of a CIT program is to partner law enforcement with mental health professionals and other advocates, in order that those who are experiencing a serious mental health crisis receive treatment rather than enter the criminal justice system. Research indicates that police who participate in a fully implemented CIT program (based on the best practices the Center will promote) will arrest fewer people.⁴

In order to reap the benefits of a fully functioning CIT program, it is essential to adopt nationally accepted *core elements*. The Center will encourage the incorporation of these elements. These elements, for example, include strong and continued partnerships between law enforcement, advocacy, and mental health professionals. Operational elements include facilitation between officers, dispatchers, and coordinators. Further implementation is encouraged through an up-to-date curriculum (training) and maintaining open communications with mental health receiving facilities. From a follow up perspective, the Center facilitates a continued and thorough review of statewide CIT policies and procedures, a formal evaluation

³ National Institute of Justice, Office of Justice Programs, *Recidivism*, <https://www.nij.gov/topics/corrections/recidivism/Pages/welcome.aspx>.

⁴ *Id.* at 394.

MALCOLM AUGUSTINE
Legislative District 47
Prince George's County

Finance Committee

Energy and Public Utilities Subcommittee

Senate Chair, Joint Committee on the
Management of Public Funds



THE SENATE OF MARYLAND
ANNAPOLIS, MARYLAND 21401

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process, and dissemination via in-service training based on the most successful of those policies and practices.

This bill will create the Maryland Crisis Intervention Team Center of Excellence to help local jurisdictions in creating, evaluating, and improving CIT's by facilitating collaboration between law enforcement, mental health professionals, and local governments. Besides helping fully implement the ideals of CIT programs, the Center will provide the valuable practical knowledge to sustain it. In the short term, it will better direct limited resources by ensuring police departments and mental health professionals properly respond to those in crisis. Over the long term, law enforcement will be freed up to address truly criminal matters while, at the same time, help those with mental health and substance abuse issues access life-improving treatment.

This legislation is a priority for the entire Behavioral Health Coalition. You have in your packets support from the Chiefs and Sheriffs Association – we are proud they support the creation of the Center and are willing to lead the charge on law enforcement support when it comes to diverting individuals with mental illness from the criminal justice system.

MPS_FAV_SB305

Uploaded by: Tompsett, Tommy

Position: FAV



February 11, 2020

The Honorable Senator William C. Smith, Jr
Senate Judicial Proceedings Committee
2 East Miller Senate Office Building
Annapolis, MD 21401

RE: Support– SB 305: Public Safety - Crisis Intervention Team Center of Excellence

Dear Chairman Smith and Honorable Members of the Committee:

The Maryland Psychiatric Society (MPS) is a state medical organization whose physician members specialize in the diagnosis, treatment, and prevention of mental illnesses including substance use disorders. Formed more than sixty years ago to support the needs of psychiatrists and their patients, MPS works to ensure available, accessible and comprehensive quality mental health resources for all Maryland citizens; and strives through public education to dispel the stigma and discrimination of those suffering from a mental illness. As the district branch of the American Psychiatric Association covering the state of Maryland excluding the D.C. suburbs, MPS represents over 700 psychiatrists as well as physicians currently in psychiatric training.

MPS supports Senate Bill 305: Public Safety - Crisis Intervention Team Center of Excellence (SB 305). Many consider crisis intervention services as a critical service in the provision of comprehensive mental health care. Such services not only provide an immediate need for crisis intervention, but they often help to prevent the use of higher levels of care such as inpatient hospitalization and emergency room visits. Collaboration between police and crisis mental health care providers is also a well-studied and effective collaboration.

SB 305 wisely promotes the education of police officers by mental health providers, which will ultimately result in more measured police interactions with citizens who are experiencing mental health care crises. In addition, coupling crisis providers with police who are responding to calls for mental health-related matters will result in better outcomes, including the use of less violent interventions by officers.

MPS asks the committee for a favorable report of SB 305. If you have any questions with regard to this testimony, please feel free to contact Thomas Tompsett Jr. at tommy.tompsett@mdlobbyist.com.

Respectfully submitted,
The Legislative Action Committee for the Maryland Psychiatric Society

BPD_SB305_FAV

Uploaded by: Wirzberger, michelle

Position: FAV



BALTIMORE POLICE DEPARTMENT



BERNARD C. "JACK" YOUNG
Mayor

MICHAEL S. HARRISON
Police Commissioner

TO: Members of the Senate Judicial Proceedings Committee

FROM: Michelle Wirzberger, Esq., Director of Government Affairs, Baltimore Police Dept.

RE: Senate Bill 305 – Public Safety – Crisis Intervention Team Center of Excellence

POSITION: SUPPORT

Chair Smith, Vice-Chair Waldstreicher, and members of the Committee, please be advised that the Baltimore Police Department **supports** Senate Bill 305.

Senate Bill 305 establishes the Crisis Intervention Team Center of Excellence within the Governor's Office of Crime Control and Prevention. The Center is to provide technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers. Senate Bill 305 also establishes the Collaborative Planning and Implementation Committee for the Center which would ultimately be responsible for developing recommendations for full implementation of the crisis implementation model program at the municipal, county and state level.

The Crisis Intervention model is an innovative partnership of law enforcement personnel, mental health and addiction professionals, individuals living with mental illness and/or addiction disorders and their families. The goal of these types of efforts is to destigmatize treatment while prioritizing the following:

- Strategies for de-escalating crises and connecting individuals to community resources that provide appropriate service;
- Appropriate use of hospital emergency services only after less restrictive alternatives have been considered;
- Opportunities for diversion from the criminal justice system; and
- Use of methods for addressing the long-term needs of individuals and families in order to provide for the least police-involved response.

The BPD supports the least police-involved response necessary for persons with Behavioral Health Disabilities or in Crisis consistent with community safety. As such, BPD has pledged to ensure that its members have the training and resources to appropriately respond to individuals with Behavioral Health Disabilities or those experiencing Crisis, including de-escalating and promoting peaceful resolutions to incidents, and diverting individuals to community resources that provide stabilizing service.

SB 350 will facilitate a state-wide discussion on how best to improve the criminal justice system's response to and treatment of individuals in the midst of a behavioral health crisis. This will lead to safer conditions for those experiencing a crisis, law enforcement officers and the public at large. Therefore, we respectfully request a **favorable** report on Senate Bill 305.

Baranauskas_INFO_SB3054

Uploaded by: baranauskas, andy

Position: INFO



GOVERNOR'S COORDINATING OFFICES

Community Initiatives · Service & Volunteerism · Performance Improvement
Crime Prevention, Youth, & Victim Services · Small, Minority, & Women Business Affairs
Banneker-Douglass Museum · Volunteer Maryland · Deaf & Hard of Hearing

FROM THE GOVERNOR'S OFFICE OF CRIME CONTROL AND PREVENTION

February 11, 2020

Chair William C. Smith, Jr., and Members of the Judicial Proceedings Committee
2 East, Miller Senate Office Building
Annapolis, MD 21401

Re: Senate Bill 305: Public Safety - Crisis Intervention Team Center of Excellence

POSITION: Letter of Information

Dear Chairman Smith and Members of the Judicial Proceedings Committee,

The Governor's Office of Crime Prevention, Youth, and Victim Services is providing this letter of information for Senate Bill 305: Public Safety - Crisis Intervention Team Center of Excellence.

Senate Bill 305 would establish a Crisis Intervention Team Center of Excellence ("CITCE") in the Governor's Office of Justice, Youth, and Victim Services ("The Office"). The CITCE would be responsible for (1) providing technical support to local governments, law enforcement, public safety agencies, behavioral health agencies, and crisis service providers, and (2) developing and implementing a "crisis intervention model program."

A crisis intervention model program is a nationally recognized program developed by the University of Memphis in Tennessee. This includes a police-based first responder program that provides for crisis intervention training for law enforcement when dealing with individuals who suffer with mental illness. The program would be based within the patrol division of local law enforcement teams, and would be voluntary.

While the operation of the CITCE would be housed within the Governor's Office of Justice, Youth, and Victim Services, the CITCE would be guided by a planning and implementation committee. The committee would be made up of members from the public safety, behavioral health, and crisis intervention fields. The Office would be responsible for appointing 8 members of the planning and implementation committee for the center.

The operation of the committee is subject to the limitations of the State budget. However, in order to implement the legislation as designed, the Governor's Office of Crime Prevention, Youth, and Victim Services would be required to hire three individuals. According to the bill, the CITCE shall appoint the following individuals to oversee the center: (1) a Crisis Intervention Coordinator, (2) a Mental Health Coordinator, and (3) An Advocacy Coordinator.

Thank you for your consideration of this matter.

Sincerely,

A handwritten signature in black ink, appearing to read "V. Glenn Fueston, Jr.", with a stylized flourish at the end.

V. Glenn Fueston, Jr.
Executive Director
Governor's Office of Crime Prevention, Youth, and Victim Services

For all inquiries, please contact
Andy Baranauskas, Legislative Affairs Manager
410-855-2538
Anthony.Baranauskas@maryland.gov