

**Department of Legislative Services**  
Maryland General Assembly  
2020 Session

**FISCAL AND POLICY NOTE**  
**First Reader**

Senate Bill 565

(Senator Washington, *et al.*)

Judicial Proceedings

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**Police Officers – Mental Health – Employee Assistance Programs**

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This bill requires each law enforcement agency to develop and implement an employee assistance program for all police officers that the law enforcement agency employs. The bill establishes requirements for the employee assistance program and for law enforcement agencies.

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**Fiscal Summary**

**State Effect:** Potential significant increase in State expenditures (multiple fund types) for some State law enforcement agencies to the extent that existing employee assistance programs must be modified to meet the bill's requirements. Revenues are not affected.

**Local Effect:** Potential significant increase in expenditures for some local governments to the extent that existing employee assistance programs must be modified to meet the bill's requirements. Local revenues are not affected. **The bill imposes a mandate on a unit of local government.**

**Small Business Effect:** Minimal.

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**Analysis**

**Bill Summary:** The employee assistance program must provide police officers access to confidential low- or no-cost mental health services, including counseling services, crisis counseling, stress management counseling, mental health evaluations, and peer support services for police officers. The employee assistance program also must include a component designed to protect the mental health of police officers during periods of public demonstrations and unrest.

Each law enforcement agency must:

- as part of the required employee assistance program, provide to all police officers the agency employs a voluntary mental health evaluation before the police officer returns to full duty following any incident involving (1) a serious injury to the police officer; (2) an officer-involved shooting; (3) an accident resulting in a fatality; or (4) any use of force resulting in a fatality or serious injury; and
- develop standards for annual assessments of the agency's employee assistance program to identify deficiencies and areas for improvement.

### **Current Law/Background:**

#### *Maryland Police Training and Standards Commission*

The Maryland Police Training and Standards Commission (MPTSC), an independent commission within the Department of Public Safety and Correctional Services, operates approved police training schools and prescribes standards for and certifies schools that offer police and security training. In consultation and cooperation with various entities, it also sets minimum qualifications for instructors and certifies qualified instructors for approved training schools.

In consultation with the Maryland Department of Health (MDH), MPTSC must establish a confidential hotline that is available for police officers and other law enforcement personnel to contact and speak with a trained peer law enforcement officer or a mental health professional who may provide initial counseling advice and confidential referral to appropriate services. In addition, MPTSC is required to develop standards for the mandatory psychological consultation with a law enforcement officer who was actively involved in an incident when another person was seriously injured or killed as a result of an accident or a shooting or has returned from combat deployment.

#### *Employee Assistance Program*

The Employee and Labor Relations Division within the Department of Budget and Management administers the Employee Assistance Program, which provides confidential and professional referral and assessment services to State employees experiencing personal difficulties that are affecting job performance.

#### *Maryland Behavioral Health Crisis Response System*

The Maryland Behavioral Health Crisis Response System (BHCRS) must (1) operate a statewide network utilizing existing resources and coordinating interjurisdictional services to develop efficient and effective crisis response systems to serve all individuals in the

State, 24 hours a day and 7 days a week; (2) provide skilled clinical intervention to help prevent suicides, homicides, unnecessary hospitalizations, and arrests or detention, and to reduce dangerous or threatening situations involving individuals in need of behavioral health services; and (3) respond quickly and effectively to community crisis situations.

In each jurisdiction, a crisis communication center provides a single point of entry to the system and coordination with the local core service agency (CSA) or local behavioral health authority, police, emergency medical service personnel, and behavioral health providers. Crisis communication centers *may* provide programs that include the following:

- a clinical crisis telephone line for suicide prevention and crisis intervention;
- a hotline for behavioral health information, referral, and assistance;
- clinical crisis walk-in services, including triage for initial assessment, crisis stabilization until additional services are available, linkage to treatment services and family and peer support groups, and linkage to other health and human services programs;
- critical incident stress management teams providing disaster behavioral health services, critical incident stress management, and an on-call system for these services;
- crisis residential beds to serve as an alternative to hospitalization;
- a community crisis bed and hospital bed registry, including a daily tally of empty beds;
- transportation coordination, ensuring transportation of patients to urgent appointments or to emergency psychiatric facilities;
- mobile crisis teams operating 24 hours a day and 7 days a week to (1) provide assessments, crisis intervention, stabilization, follow-up, and referral to urgent care and (2) arrange appointments for individuals to obtain behavioral health services;
- 23-hour holding beds;
- emergency psychiatric services;
- urgent care capacity;
- expanded capacity for assertive community treatment;
- crisis intervention teams with capacity to respond in each jurisdiction 24 hours a day and 7 days a week; and
- individualized family intervention teams.
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The Behavioral Health Administration within MDH determines the implementation of BHCRS in collaboration with the local CSA or local behavioral health authority serving each jurisdiction. Additionally, BHCRS must conduct an annual survey of consumers and family members who have received services from the system. Annual data collection is also required on the number of behavioral health calls received by police, attempted and

completed suicides, unnecessary hospitalizations, hospital diversions, arrests and detentions of individuals with behavioral health diagnoses, and diversion of arrests and detentions of individuals with behavioral health diagnoses.

Chapter 209 of 2018 established a Behavioral Health Crisis Response Grant Program in MDH to provide funds to local jurisdictions to establish and expand community behavioral health crisis response systems. The Governor must include the following appropriations in the State operating budget for the program: (1) \$3.0 million for fiscal 2020; (2) \$4.0 million for fiscal 2021; and (3) \$5.0 million for fiscal 2022.

**State Expenditures:** The State Employee Assistance Program provides confidential and professional referral and assessment services to State employees, including State law enforcement officers. Insurance plans offered to State employees also include some coverage for mental health services. In addition, some State agencies have established departmental employee assistance programs. However, it is unclear if the services currently offered meet the bill's requirements. To the extent that existing programs must be modified to meet the bill's requirements, State expenditures (multiple fund types) increase, perhaps significantly.

**Local Expenditures:** Similar to the State, several local jurisdictions provide employee assistance programs for local government employees, including law enforcement officers. Insurance plans offered to local government employees also include some coverage for mental health services. In addition, some local law enforcement agencies have established employee assistance programs internal to their agencies. However, to the extent that existing programs must be modified to meet the bill's requirements, local government expenditures increase, perhaps significantly.

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## Additional Information

**Prior Introductions:** None.

**Designated Cross File:** HB 736 (Delegate Brooks, *et al.*) - Judiciary.

**Information Source(s):** Anne Arundel, Charles, and Montgomery counties; Maryland Association of Counties; Washington Suburban Sanitary Commission; City of Havre de Grace; Maryland Municipal League; Comptroller's Office; Baltimore City Community College; Department of General Services; Department of Natural Resources; Department of Public Safety and Correctional Services; Department of State Police; Maryland Department of Transportation; Department of Legislative Services

**Fiscal Note History:** First Reader - February 19, 2020  
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