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

1/25/22

The Honorable Delores G. Kelley Chairwoman, Senate Finance Committee 3 East Miller Senate Office Building 11 Bladen Street Annapolis, MD 21401

# $RE\colon$ SB12 - Behavioral Health Crisis Response Services and Public Safety Answering Points – Modifications

## Position: Favorable

Chair Kelley and Members of the Committee,

## The Problem:

- Without adequate behavioral health services, the responsibility of responding to individuals with mental illness or substance use disorder has largely fallen on law enforcement. 10-20% of police encounters involve someone showing signs of mental illness or a substance use disorder<sup>1</sup> and 1 in 4 individuals with a mental illness have been arrested at some point in their lives.<sup>2</sup>
- Those with untreated mental illness are **16x more likely to be killed during police contact** compared with the general population<sup>3</sup> and these outcomes are 40% more likely in small and mid-sized areas.<sup>4</sup> This reality can prevent those in crisis and their loved ones from seeking help altogether.
- A 2021 poll revealed that **nearly half of Americans would not feel safe calling 911** if they or a loved one was experiencing a behavioral health crisis **even despite favorable opinions of law enforcement in their own communities**.<sup>5</sup> Those with an existing mental health condition were most likely to report not feeling safe calling 911.
- **Response standards for handling crisis calls vary considerably** across Maryland's cities and counties, particularly surrounding which situations warrant the dispatch of law enforcement.



THE SENATE OF MARYLAND

ANNAPOLIS, MARYLAND 21401

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<sup>&</sup>lt;sup>1</sup> Watson AC, Morabito MS, Draine J, Ottati V. Improving police response to persons with mental illness: a multi-level conceptualization of CIT. *Int J Law Psychiatry*. 2008;31(4):359-368. doi:10.1016/j.ijlp.2008.06.004

<sup>&</sup>lt;sup>2</sup> Livingston J. Contact Between Police and People With Mental Disorders: A Review of Rates. Psychiatric Services. 15 Apr 2016. https://doi.org/10.1176/appi.ps.201500312

<sup>&</sup>lt;sup>3</sup> Treatment Advocacy Center. Overlooked in the Undercounted. Dec 2015. Retrieved from: https://www.treatmentadvocacycenter.org/storage/documents/overlooked-in-the-undercounted.pdf

<sup>&</sup>lt;sup>4</sup> Kindy K, Tate J, Jenkins J, Mellnik T. Fatal police shootings of mentally ill people are 39 percent more likely to take place in small and midsized areas. The Washington Post. 17 Oct 2020. https://www.washingtonpost.com/national/police-mentally-ill-deaths/2020/10/17/8dd5bcf6-0245-11eb-b7ed-141dd88560ea\_story.html

<sup>&</sup>lt;sup>5</sup> Ipsos. NAMI 988 crisis Response Research. Nov 2021. Retrieved from https://www.nami.org/NAMI/media/NAMI-Media/Public%20Policy/NAMI-988-Crisis-Response-Report-11-12-2021-For-Release.pdf

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• Despite containing a definition for "mobile crisis teams,"<sup>6</sup> Maryland Code does not reflect the language of best practices outlined by NAMI and SAMHSA, which is to divert those in crisis from unnecessary interaction with law enforcement.<sup>7,8</sup>

## What SB12 does:

- Requires proposals for behavioral health crisis funding to **include response standards that minimize law enforcement interaction**.
- Amends the definition of "mobile crisis teams" to reflect the ultimate goal of diversion.
- Requires all public safety answering points to **develop written policies for behavioral health crisis calls**, including how calls are triaged and how dispatch decisions are made.
- Requires these written policies be made available to the Maryland Department of Health and to the public.

## How SB12 helps:

- Provides transparency to neighboring jurisdictions to better coordinate crisis response.
- Provides transparency to the public regarding what may happen if 911 is called.
- Supports broader efforts to decriminalize and destigmatize mental illness.

Chair Kelley and members of the committee, I ask for your favorable report.

<sup>&</sup>lt;sup>6</sup> Md. Code Ann., Health – General § 7.5-208 and 10-1401(g). 2021.

<sup>&</sup>lt;sup>7</sup> National Alliance on mental Illness (NAMI). Divert to What? Community Services That Enhance Diversion. Retrieved from: https://www.nami.org/Support-Education/Publications-Reports/Public-Policy-Reports/Divert-to-What-Community-Services-that-Enhance-Diversion/DiverttoWhat.pdf

<sup>&</sup>lt;sup>8</sup> Substance Abuse and Mental Health Services Administration (SAMHSA). National Guidelines for Behavioral Health Crisis Care: Best Practice Toolkit. 2020. Retrieved from: https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-care-02242020.pdf