



Community Policing and Behavioral Health Advisory Council

May 14, 2025



Agenda

- I. Co-Chairs Welcome
- II. Call to Order & Attendance
- III. Introductions
- IV. Oath of Office
- V. Open Meeting Law & Conflict of Interest Overview
- VI. Review & Discussion of Statutory Charges/Purpose of CPBHAC
- VII. Other
- VIII. Public Comment Invited
- IX. Adjournment



Oath of Office



Open Meeting Law & Conflict of Interest Overview

Open Meeting Law



Open Meeting Law

- The Council's meetings are subject to the [Massachusetts Open Meeting Law \(OML\)](#), which requires government meetings to be open to the public.
- We are currently operating under an [extension of the temporary provisions pertaining to OML adopted during the COVID State of Emergency](#). Subsequent extensions have suspended certain provisions of the OML, thereby permitting public bodies to conduct meetings remotely without a quorum (simple majority) of their members physically present at a meeting location. These provisions were extended by Governor Healey in March and are valid through 6/30/2027.
- A key provision of the OML that Council members should be aware of is the restriction on communicating with a quorum of your fellow members regarding topics before the Council outside of a public meeting, both in person and via email. Please note, the OML does not uniformly bar members from emailing each other, discussing topics related to the Council, etc.
- Additionally, meeting notices must be provided to the public at least 48 hours in advance, typically via the group's dedicated Mass.gov [webpage](#). These notices must include the meeting's agenda and information on how members of the public can listen to the meeting. Please note, the OML does not automatically grant members of the public the right to speak or participate in the meetings.
- Finally, for any virtual meetings, the OML requires that all votes must be taken by roll call.
- For any questions about the OML, feel free to reach out to Council staff or contact the Attorney General's Division of Open Government directly at (617) 963-2540 or openmeeting@mass.gov
- Additional information can be found at: www.mass.gov/the-open-meeting-law

Conflict of Interest



Conflict of Interest

- All Massachusetts state, county, and municipal public employees are subject to the Massachusetts Conflict of Interest Law. However, by the very nature of their service on state boards, commissions, and councils, members are also considered “special state employees” and are subject to this law.
- To ensure members have familiarized themselves with the details of the Conflict of Interest Law, each of you are required to undertake the state’s [online Conflict of Interest training](#) **within 30 days of their appointment** to the Council and **every other year** thereafter. After completing the training, certification forms should be sent directly to Council staff for their records.
- When in doubt, contact your appointing authority or the State Ethics Commission.
- Please note, Council members should view the State Ethics Commission as a resource and are encouraged to contact the State Ethics Commission with any questions or concerns related to potential conflicts of interest and any required disclosures.
- The State Ethics Commission can be contacted at (617) 371-9500
- Requests for advice can also be submitted through the State Ethics Commission’s website: www.mass.gov/orgs/state-ethics-commission
- Advice is confidential and cannot be provided for past conduct or for matters pertaining to a third party.



Statutory Charge & Purpose of the CPBHAC



Statutory Charge - Summary

The Community Policing and Behavioral Health Advisory Council (CPBHAC) was established in 2018 with the enactment of M.G.L. Chapter 19, Section 25(e) and further amended through Chapter 253, Section 117 of the Acts of 2020.

[M.G.L. Chapter 19, Section 25](#) directs the Department of Mental Health (DMH) to create the Center for Responsive Training in Crisis Intervention (“the Center”).

The CPBHAC was created to serve in an advisory role to the Center.

The statute was amended by [Chapter 253, Section 117 of the Acts of 2020](#) to require the CPBHAC to create two reports, both of which have been completed and submitted in June 2023.

- *Crisis Services in the Commonwealth*
- *Massachusetts 911 Call Study: Assessing the Potential to Divert Behavioral Health Calls to Alternative Responses*

Center for Responsive Training in Crisis Intervention



M.G.L. Chapter 19, Section 25(a):

The Center shall serve as a source for **cost-effective, evidence-based mental health and substance use crisis response training programs for municipal police and other public safety personnel** throughout the commonwealth.

The Center shall conduct activities as the advisory council, pursuant to subsection (e), directs, which shall include:

- (i) supporting the ***establishment and availability of community policing and behavioral health training curricula for law enforcement personnel***, particularly in interventions that provide alternatives to arrest and incarceration;
- (ii) serving as a ***clearinghouse for best practices in police interactions with individuals suffering from mental illness and substance use disorders***;
- (iii) ***developing and implementing crisis intervention training curricula*** for all veteran and new recruit officers;
- (iv) providing technical assistance to cities and towns by ***establishing collaborative partnerships between law enforcement and human services providers*** that maximize referrals to treatment services; and
- (v) establishing ***metrics for success and evaluation*** of outcomes of these programs.

Center for Responsive Training in Crisis Intervention



M.G.L. Chapter 19, Section 25(c):

The Center shall:

- (i) establish **regional training opportunities** for municipal police as needed throughout the commonwealth;
- (ii) **develop and maintain curricula** that is updated with the latest research on best practices in community policing and behavioral health;
- (iii) **recruit, reimburse and support trainers** with experience in community policing and behavioral health crisis intervention;
- (iv) ensure the **training is targeted to meet specific local needs of participating cities and towns** and the commonwealth;
- (v) support police departments in **implementing improved behavioral health responses through responsive policies and procedures and partnerships** with community behavioral health providers;
- (vi) **assist municipal police departments to cover backfill costs incurred in sending staff to training**; provided, however, that reimbursement shall not exceed the actual cost of the sending department's backfill;
- (vii) **promote the use and adequate resourcing of trained community-based crisis response resources** to assist residents when an exclusive police response is not best suited to address the concerns raised or is inappropriate or unnecessary; and
- (viii) stipulate that **each municipal police department** receiving reimbursement **provide information** necessary for the center to evaluate the goals described in paragraph (3), including the percentage of the municipality's police sergeants, lieutenants and other officers who directly oversee patrol officers who have **received the center's recommended training** and the percentage of the municipality's patrol officers who have received the center's recommended training.

Community Policing and Behavioral Health Advisory Council



M.G.L. Chapter 19, Section 25(e):

The Council shall advise the chairs in ***directing the activities of the center*** consistent with subsection (c), and shall receive ***ongoing reports*** from the center concerning its activities.

The council shall ***solicit public comment*** in the area of community policing and behavioral health, and in so doing may ***convene public hearings*** throughout the commonwealth.

The council shall hold ***not less than 2 meetings per year*** and may convene special meetings at the call of the chair or a majority of the council.



M.G.L. Chapter 19, Section 25(e):

The Council's membership shall consist of 11 members:

- Secretary of EOHHS or the secretary's designee, serving as Co-chair
- Secretary of EOPSS or the secretary's designee, serving as Co-chair
- Representatives of both DMH and DPH
- Executive Director of the municipal police training committee or the director's designee
- Representative of a mental health consumer advocacy group
- 2 community members who are consumers of behavioral health services
- 3 municipal police chiefs or commanding officers to be selected by the executive director of the Massachusetts Chiefs of Police Association, which shall include:
 - 1 police chief or commanding officer in a community with fewer than 10,000 residents
 - 1 police chief or commanding officer in a community with more than 10,000 and fewer than 60,000 residents;
 - 1 police chief or commanding officer in a community with 60,000 or more residents.

Members of the council shall be appointed for a ***term of 3 years***, and may be reappointed for consecutive 3-year terms. Each member shall be reimbursed by the commonwealth for all expenses incurred in the performance of their official duties.

Statutorily Required Reports



Chapter 253, Section 117 of the Acts of 2020

The Council shall “study and make recommendations for ***creating a crisis response and continuity of care system*** that delivers alternative emergency services and programs across the commonwealth that reflect specific regional, racial, ethnic and sexual orientation needs and differences in delivering such services.”

In June 2023, the CPBHAC submitted two reports that met this requirement.

- [*Crisis Services in the Commonwealth*](#)
- [*Massachusetts 911 Call Study: Assessing the Potential to Divert Behavioral Health Calls to Alternative Responses*](#)

From June 2023 to April 2024, the Council and its vendor, forHealth at UMass Chan Medical School, conducted public hearings to collect community input on the reports.

Proposed Next Steps



1. Report from the Center on the DMH jail/arrest diversion initiative
2. Presentation and discussion of recommendations from *Crisis Services* and *911 Call Study* Reports
3. Other items from Council members

DISCUSSION



Public Comment



Thank you!