

The Commonwealth of Massachusetts Executive Office of Health and Human Services One Ashburton Place, 11th Floor Boston, Massachusetts 02108

CHARLES D. BAKER Governor KARYN E. POLITO Lieutenant Governor

Tel: (617) 573-1600 Fax: (617) 573-1891 www.mass.gov/eohhs

MARYLOU SUDDERS Secretary

Notice of Open Meeting Community Policing and Behavioral Health Advisory Council (CPBHAC) Sixth Meeting: October 7, 2019 1:00pm-3:00pm

1 Ashburton Place, Boston, MA, Ashburton Café Conference Room Conference Call # 866-692-3580, participant code 642-233-141#

Agenda

- 1. Welcome
- 2. Introduction of Robert Ferullo, Acting Executive Director of the Municipal Police Training Committee
- 3. Introductions of CPBHAC Members
- 4. Review of Minutes of the June 24, 2019 Meeting
- 5. FY 2020 Budget for The Center for Police Training in Crisis Intervention (The Center) within Department of Mental Health: Matt Broderick
 - The FY2020 General Appropriation act includes \$500K in new funding
 - DMH plans to use these funds to create a central location for staff of The Center who will administer satellite training sites around the state
 - Proposed Staffing:
 - Director (proposed as DMH employee)
 - Grant/Fiscal Manager
 - Technical Support/Grantee Liaison
 - Data Analyst
 - Administrative Support
 - \circ $\,$ Major functions to be performed by staff of The Center:
 - Training development and growth in capacity statewide
 - Coordination/scheduling/enrollments,

- Curriculum management & quality control,
- Data collection & outcome measurement,
- Website development and management
- Clearing house for best practices and current research
- 6. Review of CPBHAC's authorizing statute/mandate (See Attachment 1)
- 7. Direction and goals for FY 2020 and beyond: council members
 - Establishing recommendations regarding behavioral health training goals for law
 - enforcement entities
 - Training models
 - Mental Health First Aid (MHFA)
 - Crisis Intervention (CIT)
 - Other
 - Personnel category/rank; % of personnel trained
 - Patrolmen
 - Supervisors
 - Superior Officers
 - Dispatch
 - Other
 - Timeframe by which training is accomplished
 - One Mind Pledge by Police Chiefs
 - Resources required to implement recommendations
 - FY 2020
 - FY 2021 and beyond
 - Reports from The Center
 - To the CPBHAC
 - Type
 - Frequency
 - Community behavioral health resources
 - EOHHS Ambulatory Behavioral Healthcare Initiative
 - Listening sessions
 - RFI
 - The Hub Model
 - Middlesex County Restoration Center initiative
- 8. <u>Scheduled</u> meetings

9.

0	Monday, October 21st	1 to 3
0	Monday, November 18 th	1 to 3
0	Monday, December 16th	1 to 3
Proposed meetings: first half of 2020		
0	Monday. January 27 th	1 to 3
0	Monday, February 24 th	1 to 3
0	Monday, March 23 rd	1 to 3
0	Monday, April 27 th	1 to 3
0	Monday, May 18 th	1 to 3

- Monday, June 22nd
 1 to 3
- 10. Other Business not anticipated by co-chairs

Attachment 1

Chapter 208 of the Acts of 2018

SECTION 20. Said chapter 19 is hereby further amended by adding the following section:-

Section 25. (a) Subject to appropriation, within the department of mental health, there shall be a center for police training in crisis intervention, in this section hereinafter referred to as the center. 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.

(b) The center shall be funded with revenue from appropriations or other money authorized by the general court and specifically credited to the center, and revenue from private sources including, but not limited to, grants, both state and federal, gifts and donations received by the commonwealth that are specifically credited to the center.

(c)(1) 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 that said reimbursement shall not exceed the actual cost of the sending department's backfill; and (vii) stipulate that each municipal police department receiving reimbursement provide information necessary for the center to evaluate the goals described in subsection (c)(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.

(2) Training shall include, but not be limited to, information on: (i) the signs and symptoms of mental illnesses and substance misuse; (ii) mental health treatment; (iii) co-occurring disorders; (iv) responding to a mental health or substance use crisis; (v) best practices and (vi) community policing principles.

(3) The center shall develop and ensure sufficient training resources and opportunities to enable each municipality in the commonwealth to obtain the center's recommended training for

not less than 25 per cent of their police sergeants, lieutenants and other officers who directly oversee patrol officers, and not less than 50 per cent of their patrol officers within a time determined by the community policing and behavioral health advisory council as described in subsection (e).

(d) The center shall publish an annual report including: (i) narrative and statistical information about training demand, delivery, cost and identified service gaps during the prior year; (ii) the effectiveness of the services delivered during the prior year; (iii) the communities that participated in the training; (iv) the number of officers, and their ranks, that participated in the training; (v) the progress each municipality has made in reaching the goals described in subsection (c)(3), including the percentage of each 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 each municipality's patrol officers who have received the center's recommended training; and (vi) a review of research analyzed or conducted during the prior year. The center shall submit the annual report not later than February 1 to the governor, the secretary of health and human services, the commissioner of mental health, the secretary of public safety and security, the clerks of the house of representatives and the senate, the joint committee on mental health, substance use and recovery, the joint committee on public safety and the house and senate committees on ways and means.

(e) There shall be a community policing and behavioral health advisory council, in this section called the council, consisting of 11 members: the secretary of health and human services or the secretary's designee, and the secretary of public safety and security or the secretary's designee who shall serve as co-chairs of the council; the commissioner of the department of mental health or the commissioner's designee; the commissioner of the department of public health or the commissioner's designee; the executive director of the municipal police training committee or the director's designee; a representative of a mental health consumer advocacy group, as appointed by the secretary of health and human services; 2 community members who are consumers of behavioral health services, appointed by the secretary of health and human services; and 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 employed by a community with fewer than 10,000 residents; 1 police chief or commanding officer employed by a community with 10,000 or more residents and fewer than 60,000 residents; and 1 police chief or commanding officer employed by 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.

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.