

**Title:** Partnership with Mental Health Providers and Law Enforcement

**Introduced by:** Kai Anderson, MD, for the Saginaw County Delegation

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**Referred To:** Reference Committee D

**House Action:** **APPROVED AS AMENDED**

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Whereas, law enforcement officers are becoming increasingly tasked with responding to calls outside of enforcing the law, including but not limited to de-escalating behavioral health crises and reversing overdoses, and

Whereas, at least 20 percent of calls received by 911 are related to mental health concerns, and

Whereas, 80 percent of Americans have never heard of the 988 Suicide and Crisis Lifeline, and

Whereas, although Michigan law enforcement officers are required to undergo training in de-escalation techniques, people with mental health issues continue to be arrested or harmed in situations where violence and force may not be warranted, and

Whereas, de-escalation training is not enough to prevent mental health crises from escalating as the presence of armed law enforcement officials can exacerbate feelings of distress, and behavioral or cognitive impairment increases the risk of escalation to using force, and

Whereas, studies have shown that four out of five Americans think mental health professionals should be the first responders when someone is having a mental health or suicide crisis, and

Whereas, a mental health provider accompanying law enforcement on calls responding to mental health crises may assist in de-escalating the situation and avoiding unnecessary violence or arrest; therefore be it

RESOLVED: That MSMS provide education to the public on the importance of mental health providers accompanying law enforcement officers on calls responding to mental health crises; and be it further

RESOLVED: That MSMS encourages law enforcement agencies in the state of Michigan to incorporate mental health providers on calls regarding mental health crises.

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WAYS AND MEANS COMMITTEE FISCAL NOTE: \$4,500-\$9,000

## **Relevant MSMS Policy**

### **Support for Mental Health Reform in Michigan**

MSMS supports efforts to improve mental health services in Michigan, including those that address mental health disparities, promote interdepartmental coordination and shared accountability, and provide greater access to timely outpatient treatment, crisis intervention, specialty behavioral health services, inpatient psychiatric hospitalizations and other medically necessary related therapies.

## **Relevant AMA Policy**

### **Mental Health Crisis Interventions H-345.972**

Our AMA: (1) continues to support jail diversion and community based treatment options for mental illness; (2) supports implementation of law enforcement-based crisis intervention training programs for assisting those individuals with a mental illness, such as the Crisis Intervention Team model programs; (3) supports federal funding to encourage increased community and law enforcement participation in crisis intervention training programs; (4) supports legislation and federal funding for evidence-based training programs by qualified mental health professionals aimed at educating corrections officers in effectively interacting with people with mental health and other behavioral issues in all detention and correction facilities; and (5) supports: (a) increased research on non-violent de-escalation tactics for law enforcement encounters with people who have mental illness and/or developmental disabilities; and (b) research of fatal encounters with law enforcement and the prevention thereof.

### **Mental Health Crisis D-345.972**

1. Our AMA will work expediently with all interested national medical organizations, national mental health organizations, and appropriate federal government entities to convene a federally-sponsored blue ribbon panel and develop a widely disseminated report on mental health treatment availability and suicide prevention in order to:
  - a) Improve suicide prevention efforts, through support, payment and insurance coverage for mental and behavioral health and suicide prevention services, including, but not limited to, the National Suicide Prevention Lifeline;
  - b) Increase access to affordable and effective mental health care through expanding and diversifying the mental and behavioral health workforce;
  - c) Expand research into the disparities in youth suicide prevention;
  - d) Address inequities in suicide risk and rate through education, policies and development of suicide prevention programs that are culturally and linguistically appropriate;
  - e) Develop and support resources and programs that foster and strengthen healthy mental health development; and
  - f) Develop best practices for minimizing emergency department delays in obtaining appropriate mental health care for patients who are in mental health crisis.
2. Our AMA supports physician acquisition of emergency mental health response skills by promoting education courses for physicians, fellows, residents, and medical students including, but not limited to, mental health first aid training.
3. Our AMA along with other interested parties will advocate that children's mental health and barriers to mental health care access for children represent a national emergency that requires urgent attention from all interested parties.

4. Our AMA will join with other interested parties to advocate for efforts to increase the mental health workforce to address the increasing shortfall in access to appropriate mental health care for children.

**Sources:**

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2. Irwin, A. (2023, July 28). The community responder model. Center for American Progress. <https://www.americanprogress.org/article/community-responder-model/>
3. Turner, N. (2022, April 6). We need to think beyond police in mental health crises. Vera Institute of Justice. <https://www.vera.org/news/we-need-to-think-beyond-police-in-mental-health-crises#:~:text=One recent analysis of eight,by people other than police>
4. DeGue, S., Fowler, K. A., & Calkins, C. (2016). Deaths due to use of lethal force by law enforcement. *American Journal of Preventive Medicine*, 51(5). <https://doi.org/10.1016/j.amepre.2016.08.027>
5. Mental Health in Michigan. (n.d.). <https://www.nami.org/NAMI/media/NAMI-Media/StateFactSheets/MichiganStateFactSheet.pdf>
6. (2020). bill. Retrieved from <https://www.legislature.mi.gov/documents/2019-2020/billanalysis/Senate/htm/2019-SFA-0945-C.htm#:~:text=-- Beginning January 1, 2022,justice training, and mental health .>
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