RESOLUTION

Subject: Mental Health Mobile Response Teams

Submitted by: Alex Thebert, MD - Resident and Fellows Section

Referred to: Reference Committee

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WHEREAS, according to the National Alliance on Mental Illness, a mental health crisis is an episode during which a "person's behavior puts themselves at risk of hurting themselves or others and/or prevents them from being able to care for themselves or function effectively in the community"[1]; and

WHEREAS, a mental health crisis often leads to law enforcement involvement as a first contact, 2 million people with mental illnesses get booked into jail yearly and serious mental illness is present in 15% of men and 30% of women in jail[1]; and

WHEREAS, law enforcement officers do not have the same mental health training as mental health professionals, yet spend 21% of their time and 10% of their budget responding to mental health crises and transporting persons to hospitals[2]; and

WHEREAS, lack of training means escalation of crises and potential police shooting during a crisis, a police shooting database reports that 22% of victims of fatal police shootings had mental illness[3]; and

WHEREAS, in a survey in which 72% of respondents had a favorable view of police in their community, 4 in 5 respondents believed that mental health professionals should be the first response for mental health crises[4]; and

WHEREAS, federal law has created a 988 calling code for the National Suicide Prevention Hotline and mental health crisis counselors[5]; and

WHEREAS, the US Substance Abuse and Mental Health Services Administration (SAMHSA) provides guidelines with best practices on response to mental health crises, featuring crisis call centers, crisis mobile team response, and crisis receiving and stabilization facilities[6]; and

WHEREAS, SAMHSA guidelines recommend using law enforcement only as backup in situations where significant danger present, and it is often not needed as the CAHOOTS program in Oregon demonstrated that only 311 of 24,000 calls required police backup[6,7]; and

WHEREAS, there is a wide variety of implementation of 988 hotline and mental health crises response among states with many states failing to meet SAMHSA best practice recommendations[7-11]; and

WHEREAS, Kentucky has no legislation on mental health crisis response teams but has recently provided $500,000 for promotion of the 988 Mental Health Hotline in rural communities[11]; now, therefore, be it

RESOLVED, that KMA support state implementation of regional crisis call centers, mobile crisis team services, and crisis receiving and stabilizing services which follow best practice guidelines; and be it further

RESOLVED, that KMA supports law enforcement accompanying mobile crisis teams only if there is a significant risk of danger during the call response.

References:

[1] Navigating a Mental Health Crisis | NAMI: National Alliance on Mental Illness. https://www.nami.org/Support-Education/Publications-Reports/Guides/Navigating-a-Mental-Health-Crisis

[2] Meier M. Road Runners. Treatment Advocacy Center. https://www.treatmentadvocacycenter.org/road-runners

[3] Fatal Force: Police shootings database. Washington Post. https://www.washingtonpost.com/graphics/investigations/police-shootings-database/

[4] As Launch of 988 Mental Health Crisis Number Looms, NAMI Poll Finds Broad Support for the System and | NAMI: National Alliance on Mental Illness. https://www.nami.org/Press-Media/Press-Releases/2021/As-Launch-of-988-Mental-Health-Crisis-Number-Looms-NAMI-Poll-Finds-Broad-Support-for-the-System-and

[5] Suicide Prevention Hotline. Federal Communications Commission. Published March 5, 2020. https://www.fcc.gov/suicide-prevention-hotline

[6] SAMHSA National Guidelines for Behavioral Health Crisis Care Best Practice Toolkit Executive Summary. https://www.samhsa.gov/sites/default/files/national-guidelines-for-behavioral-health-crisis-services-executive-summary-02242020.pdf

[7] CASE STUDY: CAHOOTS. Vera Institute of Justice. https://www.vera.org/behavioral-health-crisis-alternatives/cahoots

[8] State Legislation to Fund and Implement "988" for the National Suicide Prevention Lifeline. The National Academy for State Health Policy. Published January 18, 2022. https://www.nashp.org/state-legislation-to-fund-and-implement-988-for-the-national-suicide-prevention-lifeline/

[9] Statewide Model for Mental Health Emergency Co-Responder Program Passes Georgia House. Office of the Lieutenant Governor Geoff Duncan. https://ltgov.georgia.gov/press-releases/2022-03-30/statewide-model-mental-health-emergency-co-responder-program-passes

[10] Houghton K. In Mental Health Crises, a 911 Call Now Brings a Mixed Team of Helpers — And Maybe No Cops. Kaiser Health News. Published June 14, 2021. https://khn.org/news/article/in-mental-health-crises-a-911-call-now-brings-a-mixed-team-of-helpers-and-maybe-no-cops/

[11] *KY HB 192 Chapter 169*. https://apps.legislature.ky.gov/law/acts/21RS/documents/0169.pdf

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