











Recognizing and fully funding Michigan's cutting-edge law enforcement and mental health partnerships

In the midst of a global pandemic, the related economic downturn, and a renewed focus on racial justice, mental health, and public safety, the intersection of law enforcement and mental health have come to the fore in public discussion and debate.

Our organizations, representing Michigan's law enforcement professionals, prosecuting attorneys, and community mental health (CMH) systems, want to underscore the ideas of continuously examining best practices, as well as taking the opportunity to enhance longstanding partnerships between law enforcement, mental health systems and communities throughout Michigan and to recommend strengthening those partnerships.

The mission of law enforcement officers is to preserve the peace, address criminal activity, and protect the constitutional rights of all citizens to ensure safe communities. However, all too often, law enforcement is called to respond to calls far from this central mission. These calls involve addressing the needs of the homeless, engaging and assessing persons with mental health challenges, resolving domestic disputes, and assisting persons with substance use disorders.

When placed on the shoulders of law enforcement, this list of community needs burdens them with an ever-growing list of expectations from the public – expectations beyond the core responsibilities and capacities of any law enforcement professional.

Rather than continuing to load this broad set of expectations on law enforcement professionals, many Michigan communities have developed innovative and effective partnerships between local law enforcement agencies and community mental health systems – the public mental health system designed to provide high quality, evidence-based and community-centered mental health services. These partnerships focus the appropriate resources and personnel on the issues at hand in any given crisis call - by applying law enforcement approaches when needed, mental health and human services approaches when needed, and partnering together as needed.

This team approach is shaped to meet the unique needs of individual communities and uses proven practices to meet the public safety, mental health, and human services needs of their communities.

Below are descriptions of some of the most common and proven examples of these partnerships. It should be noted, however, that due to limited and complex funding, these approaches provide only a glimpse of the comprehensive crisis response system that is being examined for all Michiganders across different funding streams.

Mental health training for law enforcement professionals: Training of law enforcement officers generally can help them be better prepared to recognize and appropriately interact with persons with mental illness who might be able to respond to verbal de-escalation. There are several examples of such training that have gained traction in Michigan. Mental Health First Aid (MHFA) is an international one-day training that serves as a way for all citizens to learn about mental health and mental health first aid basics.

Crisis Intervention Training (CIT) and CIT-Y for youth includes an internationally-recognized training especially geared for volunteer officers who will become part of a Crisis Intervention Team to respond to mental health crises and an additional training designed specifically to respond to youth. With its full 40-hour curriculum, this training is often considered the most enhanced training for law enforcement related to responding to mental health emergencies. The training is endorsed by the Michigan Mental Health Diversion Council.

The following two additional Michigan-based trainings have been endorsed by the Michigan Mental Health Diversion Council.

Managing Mental Health Crises (MMHC), a two-day training jointly taught by a mental health professional and a law enforcement officer through video and role play to help develop critical thinking and problem solving skills in addressing mental health crises in partnership with mental health community systems.

Michigan's Crisis Intervention System (MI-CIS), uses an online format for teaching general content followed by a one-day in person scenario training for active skill building with formatted scenes and skilled instruction, with learners targeted for law enforcement and emergency medical first responders..

Lessons Learned and the Value of Inter-Disciplinary Training and Approaches: Discussions are underway to advance the two Michigan-based trainings into a combined model that can build from the strengths of each model and enhance inter-disciplinary training platforms that will be appropriate for the growth of broad partnerships including law enforcement, community mental health and emergency medical personnel for enhanced coordination across crisis responses.

Mobile mental health crisis teams: Across Michigan, over 50 mobile mental health crisis teams have been established by Michigan's community mental health system. These teams, staffed by skilled clinicians and persons with lived experiences (person who have faced and recovered from mental health issues and/or substance use disorders), respond to crises where mental health or substance use disorder needs, the safety of the person with those needs or others, or homelessness are core issues. These teams, by coordinating with local law enforcement agencies, can tailor their response to the crisis at hand, either responding separately, or jointly with law enforcement. The Mental Health Diversion Council has also supported multiple counties to develop juvenile urgent response teams (JURTs), to specifically address the unique needs of youth for which traditional funding may not be available.

Co-Responder Police-Based Mental Health Supported Response initiatives: In several Michigan communities, skilled clinicians from the CMH system ride along with local road patrol

officers providing an immediate and multi-disciplinary team to respond to a wide range of community crises.

Mental Health and Substance Use Disorder Courts, pre/in/post incarceration linkage and treatment, and other jail and juvenile diversion efforts: In every community in Michigan, law enforcement, the judiciary, and mental health systems have applied a range of approaches to using mental health interventions to avoid arrest or incarceration. From Mental Health and Substance Use Courts (e.g., drug courts, sobriety courts) to in-jail mental health programs and reentry programs, these approaches complement the mental health training, mental health crisis teams, and ride-along efforts described above.

Strengthening these partnerships: While many approaches within these partnerships incorporate evidence-based practices, they all share the goal of building on longstanding community partnerships and have typically proven highly effective, they are not available in every community for a variety of reasons, which can include funding limitations in systems that have multiple competing priorities.

Now is the time to recognize the collegial relationships that Michigan's law enforcement and community mental health systems have developed across Michigan and the sound and proven approaches to meeting the public safety, mental health, and crisis needs in our communities.

This is also the time to provide these partnerships with the necessary tools and resourced needed to ensure that these approaches are fully developed, fully staffed, and available to all Michiganders. There are many exciting initiatives underway to build these strategies, and there is a need to further leverage additional opportunities to build upon their successes.

Co-authored by:

Matthew Saxton, Michigan Sheriffs Association Robert Stevenson, Michigan Association of Chiefs of Police Tim Bourgeois, Michigan Commission on Law Enforcement Standards Matt Wiese, Prosecuting Attorneys Association of Michigan Mike Sauger, Michigan State Lodge Fraternal Order of Police Robert Sheehan, Community Mental Health Association of Michigan