

# OVERVIEW OF LAW ENFORCEMENT-MENTAL HEALTH RESOURCES

## Law Enforcement-Mental Health Learning Sites

In an effort to expand the knowledge base for law enforcement agencies interested in developing or enhancing a comprehensive police-mental health collaboration (PMHC), The Council of State Governments (CSG) Justice Center, with assistance from a team of national experts and the U.S. Justice Department's Bureau of Justice Assistance (BJA), selected 10 law enforcement agencies to serve as national Law Enforcement–Mental Health (LE-MH) Learning Sites.

Arlington (MA) Police Department  
Gallia, Jackson, Meigs Counties (OH) Sheriffs' Offices  
Houston (TX) Police Department  
Los Angeles (CA) Police Department  
Madison (WI) Police Department  
Madison County (TN) Sheriff's Office  
Portland (ME) Police Department  
Salt Lake City (UT) Police Department  
Tucson (AZ) Police Department  
University of Florida Police Department

**In FY2019, the LE-MH Learning Sites responded to 604 requests for information, conducted 37 presentations/trainings, and held 40 site visits for more than 1,600 people.**

Jurisdictions can engage, free of charge, with these Learning Sites to discuss strategies for improving the outcomes of encounters between law enforcement and people who have mental health needs. To assist you, they can provide various types of support on a range of topics, such as:

- **sharing** sample policies and procedures, training curricula, and data collection plans
- **discussing** strategic planning, collaboration, best practices, and lessons learned
- **recommending** additional policies, successful strategies, or program improvements
- **hosting** site visits for agencies to observe program operations first hand
- **visiting** requesting agencies to advise on program improvements
- **facilitating** mental health-related trainings and presentations

To access information regarding this free source, go to [csgjusticecenter.org/law-enforcement/projects/mental-health-learning-sites/](https://csgjusticecenter.org/law-enforcement/projects/mental-health-learning-sites/).

# LE-MH Learning Site Program Highlights

The table below provides program highlights for each of the 10 LE-MH learning sites.

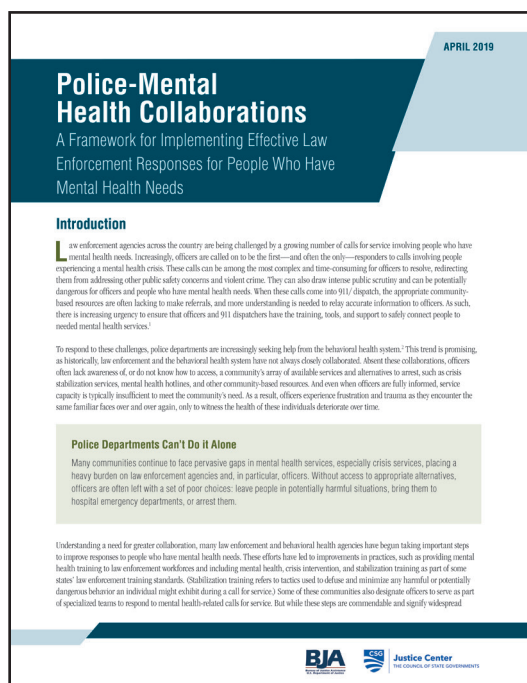
Learning Site	Program Highlights
Arlington (MA) PD	Consists of a co-response program and targeted initiatives, spearheaded by a mental health clinician embedded in the police department, which includes a jail diversion program, Hoarding Response Team, Elder Abuse Prevention Task Force, and Arlington Opiate Outreach Initiative.
Gallia, Jackson, Meigs Counties (OH) Sheriffs' Offices	Composed of three sheriffs' offices to provide a regional response in rural Appalachia, alongside a mental health provider. The collaborative offers pre-and post-release care to fill service gaps that exist in rural Appalachia; employs a mobile crisis team, telemedicine, and on-call support for crisis situations in five adult correctional facilities; and offers CIT training to all law enforcement personnel.
Houston (TX) PD	Includes a multi-faceted strategy staffed by various personnel including CIT-trained patrol officers, co-responder units, a homeless outreach team, a Boarding Homes Enforcement Detail, a Chronic Consumer Stabilization Initiative, trained dispatchers, and trained jailers.
Los Angeles (CA) PD	Uses a multi-layered approach that includes triage by trained dispatchers, co-response teams, follow-up case managers, and focused community engagement. Embeds mental health professionals in the law enforcement department, and incorporates comprehensive data collection and information-sharing procedures and a robust training strategy that includes 40-hour Mental Health Intervention Training.
Madison County (TN) Sheriff's Office	Operates an inter-agency collaborative, the Jackson-Madison County Law Enforcement-Mental Health Collaborative, which is essential to the planning, implementation, and provision of critical services for the community, including the development of a 24/7 crisis stabilization unit, a homeless unit, a training strategy that includes 40-hours of CIT, and mental health counselor positions embedded in the Madison County Jail.
Madison (WI) PD	Uses a multi-layered approach with officers trained to be "mental health liaisons" and a full-time mental health team (sworn officers and in-house crisis workers). Collects data and shares non-protected information with line-level officers, and provides training for all officers using scenario-based approaches.
Portland (ME) PD	Embeds mental health professionals in the law enforcement agency and uses a co-response model in partnership with a community-based support network. Provides CIT training for all officers.
Salt Lake City (UT) PD	Employs a complementary three-team approach: CIT, Homeless Outreach Service Team (HOST), and Community Connections Center Team. The CIT multi-county collaboration provides: 40-hour training for patrol and corrections-based academies and a detective in the CIT Investigative Unit that follows up on mental health calls for service.
Tucson (AZ) PD	Uses a multi-layered approach employing a co-responder program that pairs Mental Health Support Team (MHST) officers with mental health clinicians, crisis mobile teams that work in tandem with the crisis line, and a Crisis Response Center. Multi-tiered training is open to all levels of law enforcement, mental health workers, call takers and dispatchers, emergency medical technicians, paramedics, and firefighters.
University of Florida PD	Coordinates with many campus entities involved with student and faculty wellness to provide training for university officers, with on-site support during incidents, as well as crisis intervention consultants. UFPD is also positioned to respond to youth in crisis from K-12 through university-age students due to a K-12 Developmental Research School on campus.

## Available Funding

The [Justice and Mental Health Collaboration Program](#) (JMHC) promotes innovative cross-system collaboration and provides grants directly to states, local governments, and federally recognized Indian tribes. It is designed to improve responses to people with mental illnesses or co-occurring mental health and substance use disorders who are involved in the criminal justice system.

## Tools

In 2016, BJA launched the Police-Mental Health Collaboration toolkit, [an online resource](#) intended to provide support to law enforcement agencies around the country for planning and implementing programs which appropriately respond to calls for service involving people who have mental illnesses. The PMHC Toolkit was developed in partnership with the CSG Justice Center and BJA's subject experts to provide best practices and resources to help law enforcement agencies partner with behavioral health providers when responding to calls for service involving people who have mental health needs.



[\*Police-Mental Health Collaborations: A Framework for Implementing Effective Law Enforcement Responses for People Who Have Mental Health Needs\*](#) is intended to help law enforcement executives and their partners respond to the challenge of the growing number of calls for service involving people with mental health needs. The publication outlines how law enforcement and partners in the behavioral health system can create effective cross-system collaborations to connect people with needed services, reduce repeated law enforcement encounters, minimize arrests, and reduce use of force. The framework is organized around six main questions that law enforcement executives should consider to be successful in implementing or improving PMHCs in their jurisdiction.

[\*Sharing Behavioral Health Information within Police-Mental Health Collaborations\*](#) is a brief and complementary webpage that offers tips and strategies for facilitating information-sharing between law enforcement and behavioral health

agencies. The webpage includes operational examples from a diverse set of jurisdictions, developed with each community's unique needs and language in mind, which can be used as templates for other jurisdictions seeking to create their own strategies for sharing behavioral health information.

[\*Effective Community Responses to People in Mental Health Crises\*](#) is a national curriculum for law enforcement based on best practices from CIT programs nationwide. This course was developed to expand the reach of effective crisis intervention strategies to law enforcement agencies and to encourage the development of mental health community-law enforcement partnership teams throughout the United States. The curriculum contains 25 modules on various behavioral health and law enforcement topics with the flexibility to customize with special topics and local information. It includes an instructor guide, participant guide, slide deck, pre/post evaluation, certificate, and planning matrix. It is available at no cost to police agencies and mental health authorities.

[How to Reduce Repeat Encounters: A Brief for Law Enforcement Executives](#) is a 2-page brief that provides four practical steps law enforcement executives can take to address and improve outcomes for people who their officers frequently encounter. These individuals, often referred to as “high utilizers,” typically have serious mental illnesses, substance use disorders, and other significant health and social service needs. By following these steps, law enforcement agencies can more effectively respond to these needs, including building services in partnership with providers, and reduce their contact with the criminal justice system over time.

## Technical Assistance

**Free technical assistance** is available through the CSG Justice Center and the International Association of Chiefs of Police (IACP), with funding support from BJA. This national initiative offers guidance and resources to law enforcement, mental health agencies, and other partners interested in starting or enhancing their PMHC. To request technical assistance, visit [csjusticecenter.org/law-enforcement/contact](https://csjusticecenter.org/law-enforcement/contact).

**HOW TO REDUCE REPEAT ENCOUNTERS:**  
A Brief for Law Enforcement Executives

December 2019

A pressing challenge for law enforcement agencies is how to effectively respond to people they routinely encounter. Often known as “high utilizers,” these individuals come into frequent contact with law enforcement officers or other emergency services—usually for low-level, misdemeanor crimes or non-emergent concerns—and many have unmet behavioral health, housing, or other social services needs. For example, in Camden, New Jersey, 5 percent of adults accounted for 25 percent of all arrests over a 5-year period.<sup>1</sup> And in Wake County, North Carolina, of the 36,665 people who entered the jail over a period of 2 years, 5 percent (1,333 people) were jailed 4 or more times. Of those people, 807 had contact with not only the jail, but also homelessness and emergency medical services.<sup>2</sup> Encountering these same people again and again overburdens law enforcement agencies, strains limited resources, and can be frustrating and demoralizing for officers who are unable to help the individual.<sup>3</sup>

The four steps below provide a practical guide to addressing the needs of the people officers frequently encounter while reducing their contact with the criminal justice system over time.

“We want officers to have resources that they need to effectively respond to people in crisis, which is why our department has partnered with local homeless and health systems to build out community services, increasing the chances of success for the people we encounter most frequently and reducing the burden on our officers.”  
— Chief Gordon Ramsay, Wichita, KS, Police Department

**Who are the “high utilizers” in your community?**

While the definition of “high utilizer” may differ across systems, in the law enforcement context, the term typically refers to people who have frequent encounters (e.g., arrests, citations, 911 calls) with police, fire, and EMS. The level of law enforcement contact that categorizes a person as a “high utilizer” can vary by jurisdiction. Similarly, jurisdictions may use different terms for this population such as “frequent utilizers,” “familiar faces,” or “complex care clients.” In many instances, these people have serious mental illnesses, substance use disorders, or other significant health and social services needs,<sup>4</sup> which can leave them stuck in a revolving door between the criminal justice system and other systems like health and housing.

**What Can Law Enforcement Leaders Do?**

- STEP 1** Identify people in your community who are high utilizers
- STEP 2** Develop alternate response options
- STEP 3** Establish clear policies and procedures for encounters
- STEP 4** Review performance regularly

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## About BJA

BJA is a component of the Department of Justice’s Office of Justice Programs and helps to make American communities safer by strengthening the nation’s criminal justice system. It’s grants, training and technical assistance, and policy development services provide state, local, and tribal governments with the cutting-edge tools and best practices they need to reduce violent and drug-related crime, support law enforcement, and combat victimization. To learn more about BJA, visit [bja.gov](https://bja.gov).