

27- cancelled

February 26, 2015

Joint Legislative Public Hearings

on the

2015-2016 Executive Budget Proposal

Public Protection

**National Alliance on Mental Illness of New York State
(NAMI-NYS)**

99 Pine Street, Suite 302
Albany, New York 12207
(518) 462-2000

Irene Turski, President

Wendy Burch, Executive Director

Testimony delivered by: Wendy Burch

Good afternoon. My name is Wendy Burcg. I am executive director for the National Alliance on Mental Illness of New York State (NAMI-NYS). Thank you for this opportunity to provide testimony on this issue of importance for all New Yorkers, especially for individuals and families affected by mental illness. Traditionally, NAMI-NYS has not contributed testimony on the budget in regards to public protection, however there are several public protection measures in the proposed Executive Budget, as well as elements absent from the Executive Budget which we felt we need to address as they can have a tremendous positive impact on how our state protects people living with psychiatric disorders.

The media often calls attention to the public protection tragedies that involve people with psychiatric diseases. Despite this sensational tabloid focus, the facts are that people who receive the proper services to progress their recovery are able to live productive lives, exercise good judgment, live freely and safely in the community and are much more likely to be the victim of a violent crime than a perpetrator.

However, the symptoms of psychiatric diseases are unpredictable and can cause hallucinations, delusions, serious mood deregulations and impaired decision making that can lead people who suffer from these effects to interact and enter the criminal justice system. We are here today to ensure that the measures and services are in place and properly funded to ensure the most positive results for people living with a mental illness who are introduced to the system. These investments would not only create a better protected society, but would proactively address measures that will save New York's taxpayers millions of dollars in the long run.

While the Executive Budget proposal contains several encouraging aspects, we want to begin with a glaring omission from the budget, the funding to sustain and expand Crisis Intervention Teams (CIT) in New York State. CIT is a proven effective program that has demonstrated the ability to reduce harm to both the dedicated law enforcement officers who respond to incidents involving people experiencing episodes of psychosis as well as those whose behavior and judgment is impaired by these disorders.

Police are often the first responders when a person is in psychiatric distress. Every community owes it to them to provide the knowledge and training to handle mental health crisis situations safely and compassionately."

Crisis Intervention Teams consist of law enforcement officers specially trained to deescalate situations and take appropriate action to assist an individual in the midst of a mental health crisis. Outcome research has shown CIT to be effective in developing positive perceptions and increased confidence among police officers; providing very efficient crisis response times; increasing jail diversion among those with mental illness; improving the likelihood of treatment continuity with community based providers; and impacting psychiatric symptomatology for those suffering from a serious mental illness as well as substance abuse disorders. Communities who have incorporated CIT initiatives have seen harm to their police force reduced by 80%ⁱ.

While CIT has proven to benefit both our law enforcement officers and people living with a mental illness, its incorporation can also lead to long-term savings generated by proactive measures that reduce emergency room visits and incarceration costs. A study published in the *Southern Medical Journal* examined the costs and savings associated with implementation of a police crisis intervention team. The costs and savings associated with the implementation of a CIT program were analyzed in a medium-sized city, Louisville, Kentucky, 9 years after the program's initiation. Costs associated with officer training, increased emergency psychiatry visits, and hospital admissions resulting from CIT activity were compared with the savings associated with diverted hospitalizations and reduced legal bookings.

The study found that based on an average of 2400 CIT calls annually, the overall costs associated with CIT per year were \$2,430,128 (\$146,079 for officer training, \$1,768,536 for hospitalizations of patients brought in by CIT officers, \$508,690 for emergency psychiatry evaluations, and \$6823 for arrests). The annual savings of the CIT were \$3,455,025 (\$1,148,400 in deferred hospitalizations, \$2,296,800 in reduced inpatient referrals from jail, and \$9825 in avoided bookings and jail time). The balance is \$1,024,897 in annual cost savingsⁱⁱ. While the study concluded that the net financial effect of a CIT program is of modest benefit, the effect the

program can have on the mental health and safety of police and our loved ones living with a mental illness are immeasurable.

NAMI-NYS urges the legislature to continue your leadership in calling for the expansion of CIT throughout New York State. We thank and applaud you for including a \$400,000 investment in the 2014-2015 budget to form the Institute for Police, Mental Health & Community Collaboration, to advance CIT initiatives. We are disappointed to see the Executive Budget did not include funding to continue this program. We once again turn to you to lead the way in fully protecting the public by expanding your commitment to this crucial life-saving issue by allocating funding to sustain the program as well as well as expanding the funding to ensure that the streets in communities throughout New York are patrolled by CIT trained police officers. Since many first episodes of psychosis occur during the ages of 18-25, we also want to see that security officers on all State University of New York (SUNY) campuses are provided with CIT training. We also believe that correction officers should receive CIT training.

We are grateful that Senator Robert Ortt, Chair of the Mental Health and Developmental Disabilities Committee is requesting \$450,000 to further fund the Institute for Police, Mental Health & Community Collaboration. We thank him for his leadership and urge you to follow his lead and call for the inclusion of this funding in the final budget.

While NAMI-NYS is disappointed that the Governor ignored CIT in his budget, we do strongly support two endeavors contained in the budget. We urge you to support the following initiatives:

1-\$22 million investment to expand services to individuals at risk of violence. We support this investment to provide enhanced services to at risk individuals with the goal of reducing recidivism and potential violence in the community. The New York State Office of Mental Health (OMH) will provide additional in-prison assessments and treatment for high risk inmates, maintain individuals in OMH facilities when appropriate, and provide more aggressive community services through the use of additional Assertive Community Treatment (ACT) teams and supported housing and related services.

While we believe this investment will certainly lead to positive outcomes, we do believe this initiative lacks one vital component. In order to properly integrate someone with mental health issues coming out of prison there must be a presumption that these people are Medicaid eligible. Presumptive Medicaid eligibility will ensure these people who are among the most vulnerable people living with a mental illness receive quicker

access to the services and medications which will advance their recovery and prevent their return to the criminal justice and reduce potential crisis episodes and emergency room visits.

2-Raising the age for criminal responsibility from 16 to 18. NAMI-NYS strongly supports this initiative as 70% of juvenile offenders have a mental health diagnosis. We urge the legislature to support this issue. We also applaud Assemblyman Daniel O'Donnell for introducing a bill which would raise the age to 21.

NAMI-NYS strongly believes that expanding CIT, investing to expand services to individuals at risk of violence, raising the age of criminal responsibility as well as the passage of bills introduced in the Assembly to reform the use of solitary confinement, will interject positive measures that will both maximize New York's mental health and ensure the public's protection. We appreciate your previous leadership on these issues and call for your continued support.

We thank you for your time today and listening to the pleas of NAMI-NYS and the families we represent.

ⁱ According to CIT International

ⁱⁱ Peggy L. El-Mallakh, PhD, Kranti Kiran, MD, Rif S. El-Mallakh, MD, Southern Medical Journal, VOLUME: 107 ISSUE: 6 JUNE, 2014