

SENATE RESOLUTION NO. 36

BY SENATOR JACKSON

A RESOLUTION

To create a task force to study the implementation of a partnership between law enforcement agencies and safety net hospitals to reduce or eliminate incidents of law enforcement officers going to nonviolent calls or behavioral or social crises in which no crime has taken place.

WHEREAS, today, law enforcement officers spend a considerable amount of their time responding to low-priority 911 calls related to quality-of-life issues or social service needs; and

WHEREAS, many of these calls for service could be safely resolved by trained civilians experienced in finding long-term solutions to the root causes of community concerns; and

WHEREAS, law enforcement officers who respond to mental health crises may not be trained to try and communicate with the person in crisis or nearby community and family members; and

WHEREAS, the Center for American Progress (CAP) and the Law Enforcement Action Partnership (LEAP) propose that cities establish a new branch of civilian first responders known as "community responders" who would be dispatched in response to calls for service that often do not need a police response; and

WHEREAS, dispatching civilians in lieu of law enforcement officers can reduce unnecessary police responses and help prevent unjust arrests and uses of force, which disproportionately affect people with behavioral health disorders and disabilities; and

WHEREAS, it would also free up law enforcement resources, allowing officers to spend more time on key tasks such as addressing serious crime and building proactive relationships with communities; and

WHEREAS, in an analysis of 911 data from five American cities, CAP and LEAP found that 23 percent to 45 percent of calls for service were for less urgent or noncriminal

issues such as noise complaints, disorderly conduct, wellness checks, or behavioral health concerns; and

WHEREAS, according to a recent CAP and LEAP report, across eight American cities, community responders could have responded to between 21 percent and 38 percent of 911 calls, and an additional 13 percent to 33 percent of calls could be resolved administratively without dispatching an officer; and

WHEREAS, a number of cities have already implemented civilian first response programs that incorporate elements of the community responder model; and

WHEREAS, community responders would be dispatched in response to two specific categories of calls:

(1) Behavioral health and social service calls. Community responders trained as paramedics, clinicians, or crisis intervention specialists could respond to lower-risk 911 calls related to mental health, addiction, and homelessness; and also include peer navigators whose personal experiences with behavioral health and social service needs can help build bridges with individuals involved in these 911 calls.

(2) Quality of life and conflict calls. Community responders could be dispatched to 911 calls for nuisance complaints and nonviolent conflicts, which may include reports of suspicious people, youth behavioral issues, trespassing, and even simple assaults that do not involve weapons. Community responders who respond to these calls should be professionals with deep connections to the community and extensive training in conflict mediation; and

WHEREAS, the purpose of this partnership is to reduce incidents of injuries related to mental health emergencies while reducing the incarceration of the mentally ill; and

WHEREAS, it is appropriate to study the feasibility and implementation of this partnership in Louisiana.

THEREFORE, BE IT RESOLVED that the Senate of the Legislature of Louisiana hereby creates a task force to study the implementation of a partnership between law enforcement agencies and safety net hospitals to reduce or eliminate incidents of law enforcement officers going to nonviolent calls or behavioral or social crises in which no crime is reported.

BE IT FURTHER RESOLVED that a task force shall be composed of the following

members:

(1) A representative of the Louisiana Department of Health, Office of Behavioral Health, designated by the secretary of the department.

(2) A representative of the Governor's Office of Disability Affairs, as designated by the governor.

(3) A representative of the National Alliance on Mental Illness (NAMI) - Louisiana Chapter and a patient advocate for mental health, designated by the president of the chapter.

(4) A representative of the Louisiana Psychological Association, as designated by the president of the association.

(5) A representative of the Capital Area Human Services and a patient advocate for mental health, designated by the chair of the board of directors.

(6) A representative of the Louisiana Chiefs of Police Association, designated by the president of the association.

(7) A representative of the Louisiana Sheriffs' Association, designated by the president of the association.

(8) A representative of Louisiana State University Shreveport, designated by the chancellor of the university.

(9) A representative of Ochsner LSU Health Shreveport - Monroe Medical Center, designated by the chief executive officer of the medical center.

(10) A representative of Ochsner Medical Center - New Orleans, designated by the chief executive officer of the medical center.

(11) A representative of Louisiana's Mental Health Advocacy Service and a patient advocate for mental health, designated by the chief of the board of trustees of the agency.

BE IT FURTHER RESOLVED that the task force shall submit a written report of findings and recommendations to the Senate no later than February 15, 2022.

BE IT FURTHER RESOLVED that a copy of this Resolution be transmitted to the secretary of the Louisiana Department of Health, the Governor's Office of Disability Affairs, the National Alliance on Mental Illness (NAMI) - Louisiana Chapter, Louisiana Psychological Association, the Capital Area Human Services District, the Louisiana Chiefs of Police Association, the Louisiana Sheriffs' Association, the chancellor of Louisiana State

SR NO. 36

ENROLLED

University Shreveport, the chief executive officer of Ochsner LSU Health Shreveport -
Monroe Medical Center, the chief executive officer of Ochsner Medical Center - New
Orleans, and chair of the board of trustees of Louisiana's Mental Health Advocacy Service.

PRESIDENT OF THE SENATE