

Law Enforcement–Mental Health Learning Sites

Jurisdictions across the country are exploring strategies to improve the outcomes of encounters between law enforcement and people with mental illnesses. As a growing number of communities develop or enhance their comprehensive police-mental health collaboration (PMHC), many agencies are struggling with the planning process and how to tailor successful implementation strategies from other jurisdictions to address their own distinct problems and circumstances.

In an effort to expand the knowledge base for law enforcement agencies interested in starting or enhancing a PMHC, the Council of State Governments (CSG) Justice Center, with assistance from a team of national experts and the U.S. Department of Justice’s Bureau of Justice Assistance (BJA), selected six police departments to serve as national law enforcement–mental health learning sites. These learning sites represent a diverse cross-section of perspectives and program examples and are dedicated to helping other jurisdictions improve their responses to people with mental illnesses. The original six learning sites, selected in 2010, are the Houston (TX) Police Department, the Los Angeles (CA) Police Department, the Madison (WI) Police Department, the Portland (ME) Police Department, the Salt Lake City (UT) Police Department, and the University of Florida Police Department. In 2017, due to the success of the program, four new sites were added, including the Arlington Police Department (MA), the Gallia, Jackson, Meigs Counties Sheriffs’ Offices (OH), the Madison County Sheriff’s Office (TN), and the Tucson Police Department (AZ).

Madison (WI) Police Department

Total number of agency personnel: 598

Sworn: 479 **Civilian:** 119

Total population served: 233,000 people

Jurisdiction and state: Madison, Wisconsin

Program Highlights

- Collects comprehensive data and shares non-protected information with line-level officers
- Provides training for all officers using “scenario-based” approaches
- Features a multi-layered approach with volunteer officers trained to be “mental health liaisons”
- Employs a full-time mental health team of sworn officers and in-house crisis workers
- Facilitates a Crisis Intervention Team (CIT) training program for outside agencies, that includes: pre-service academy CIT, in-service CIT updates, basic CIT training, and advanced CIT

Since the mid-1980s, the City of Madison Police Department (MPD) has been dedicated to establishing and cultivating a [comprehensive criminal justice-behavioral health partnership](#) with other law enforcement agencies, mental health care providers, advocates, and people with mental illnesses. MPD’s longstanding commitment to partnership began as a way to help improve services to individuals with mental health needs, and it continues to do so today.



Training

MPD trains every officer to respond appropriately to people who have mental illnesses or are in crisis, emphasizing the use of communication, de-escalation, and stabilization skills to work toward an effective resolution. MPD conducts this extensive training at its academy, where agency personnel can tailor training topics to the needs of the community, the department, and its officers. All officers receive approximately 100 hours of crisis management and mental health-related training during the pre-service

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academy, as well as ongoing in-service training. MPD also hosts Crisis Intervention Team (CIT) trainings twice a year at its facility. MPD's CIT Training Program focuses on four pillars: pre-service academy CIT, in-service CIT updates, basic CIT (nationally known 40-hour course), and advanced CIT. To ensure continuous improvement and community input for MPD training courses, a CIT Training Advisory Committee was formed that is coordinated through the Community Outreach section and has both internal and external participation (including MPD in-house certified CIT coordinators, representatives from MPD's Training Team and NAMI Dane County, and rotating participation from other mental health and community partners). The committee also solicits input from other stakeholders to meet quality and training objectives.

Mental Health Liaison Program

The department has also expanded its PMHC using a multifaceted approach that includes the Mental Health Liaison Program, which is coordinated by a Sergeant and overseen by a Captain of Community Outreach. The program coordinator and mental health liaison officers work with mental health providers, advocates, and people with mental illnesses to provide individualized responses and follow-up plans, to address system issues/concerns, to share information internally and externally as appropriate, and when possible, jointly respond to mental health calls for service. The program has well-trained patrol officers as first responders that are complemented by 37 sworn liaisons that provide specialized case management and coordination services in conjunction with behavioral health providers. Program staff also provide additional support to first-responding officers to de-escalate situations, guide responses, and follow up on both.

Mental health liaison officers—who volunteer to serve—respond to mental health crises when available. Their responsibilities include identifying ongoing concerns or barriers to improved responses and coordinating efforts with partner agencies; engaging residents who have mental illnesses in their districts with whom they have had contact; serving as a point of contact regarding mental health systems issues for the community; and conducting trainings, attending relevant community meetings, and sharing necessary information internally and externally when appropriate. Together with fellow patrol officers, the mental health liaison officers work within and across districts to provide a coordinated, consistent, and collaborative response to calls involving people who have mental health needs.

Mental Health Officers

In Feb. 2015, the MPD created six full-time mental health officer positions to more consistently and comprehensively address mental health issues and mitigate the increasing demands on patrol resources to respond to people with mental illnesses. While the positions function as a citywide team, each mental health officer has single-district responsibility and is tasked with taking a problem-oriented approach to addressing the underlying issues that generate calls for service. They also

- provide back-up to other mental health officers and help provide citywide coverage;
- review reports to identify individuals in need of outreach and to address district-level or citywide issues;
- coordinate follow up with district Mental Health Liaison Officers to help prevent crises;
- attend briefings to exchange information about people with specific mental health needs and inform district neighborhood officers as appropriate;
- coordinate home visits and partner efforts to connect individuals to resources and reduce repeat calls;
- are contacts for officers, people with mental illnesses and their family, treatment providers, and other community partners;
- help develop and implement training and educational initiatives;
- field emergency detention calls for service to the point of transport when possible; and
- work with the Property Unit to assess the return of weapons removed during mental health crises.

Additionally, starting in 2016, MPD has added two in-house crisis workers to the team. The crisis workers and full-time mental health officers coordinate follow up and outreach efforts. The crisis workers have direct access to both law enforcement and mental health-related information, allowing them to draw on information needed by both systems.

HIERARCHY OF MPD COORDINATION



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To learn more about the Law Enforcement-Mental Health Learning Sites, please visit <http://csgjusticecenter.org/law-enforcement/projects/mental-health-learning-sites/> or email the Law Enforcement Program team at le-mh-learning/sites@csgjusticecenter.org.