



SILVER SPRING JUSTICE COALITION TESTIMONY ON FY23 BUDGET

The Silver Spring Justice Coalition's position is that this is the time to build people up, not fund programs that expand the bureaucracy. The County should not presumptively rely on police to respond to a wide range of needs across the County – that is ineffective and inefficient, and has proven unnecessarily and too often fatal for young Black men and people having a behavioral health crisis.

We have 3 budget demands of the Council:

1. Reject the creation of another police bureaucracy, the **Community Resources Bureau**, that unnecessarily expands police presence in our communities and schools
2. Implement and expand mental health supports for our MCPS students
3. Support full coverage of mental health crisis outreach teams and related short-term stabilization facilities

SSJC GENERAL PRINCIPLES

As many of you have noted, budgets are moral documents: they show what our County is committed to supporting by providing citizen funding. The County has promised that instead of police showing up to every crisis scene, there will be a shift to police coming only when dispatch determines it is a dangerous situation, such as an imminent risk of gunfire. On a nationwide level, there will soon be a new 988 number to be used specifically for behavioral health crises. People should expect help from qualified providers with appropriate lived and professional experience. We believe Ryan LeRoux, Kevin Costlow, Robert White, and Finan Berhe would all still be alive and with us today if the County had a robust behavioral healthcare first response.

I. MONTGOMERY COUNTY POLICE DEPARTMENT BUDGET

- **We oppose the new MPCD Community Resources Bureau and its \$5.5m budget for 39 positions**

The new MCPD Community Resources Bureau will in effect be nothing more than a marketing team dedicated to improving the image of MCPD in the community.

Neither the Reimagining Public Safety Task Force nor the ELE4A Preliminary Audit recommended anything like the Community Resources Bureau, and MCPD has not documented what problems they are trying to solve and why this expenditure of more than \$5 million will solve those problems or improve public safety.

We also oppose use of taxpayer dollars for 1,300 community events. Activities envisioned by the Community Resource Bureau include summer camps, midnight basketball games, and chess-playing sessions, all worthy investments but better run by the Recreation Department. County departments with expertise in these service areas should be running these programs, and not diverting police efforts from solving serious crimes.

We also object to the budget items that perpetuate a militarized police culture, such as firing range upgrades, pepperball guns, and surveillance tools. Why don't we, instead, invest in live-action de-escalation simulation facilities?

- **We oppose funding for Community Engagement Officers (CEOs)**

Alongside student advocate groups such as Young People for Progress, Sunrise Silver Spring, and Racial Justice NOW!, we oppose the return of police to our schools via the funding of Community Engagement Officers as part of the Community Resources Bureau.

School Resource Officers (SROs) have a demonstrated history of racial discrimination and discrimination against students with special education needs. In 2018-2019, Black students made up 22% of the MCPS student population and represented 45% of the SRO arrests. Similarly, special education students made up 13% of the MCPS student population and 25% of the SRO arrests. The County's students are calling for more resources to deter and prevent violence, rather than feeding students into the school-to-prison pipeline.

The CEO arrangement has not appreciably improved matters. Between August and December of 2021 - when officers were not stationed in schools, but assigned as CEOs - police were still called to schools almost 1,700 times. Less than 1% – 11 incidents out of the nearly 1,700 times the police were called – involved immediate safety concerns. These situations could have been handled with a non-police response or with general dispatch calls rather than summoning a specifically assigned officer.

These numbers demonstrate that rather than relying on CEOs exclusively for serious dangers, school staff are excessively calling for officers with guns to threaten and intimidate students. The statistics show that SRO programs do nothing to prevent shootings or gun-related incidences,¹ and have many harmful effects on students with disabilities and students of color, and in particular Black boys. We need a different approach.

¹ <https://www.edworkingpapers.com/sites/default/files/ai21-476.pdf> (from recent Annenberg/Brown Univ working paper)

II. We support expansion of Wellness Centers to include Middle School MCPS Students at \$12 million

We recommend fully-staffed mental health supports for students in all 31 high schools and all 40 middle schools. The mental health-specific components of the Wellness Centers (a therapist, a case manager, and positive youth development services) cost approximately **\$600,000 at each high school**. We were pleased to see Councilmember Navarro's proposal to close the gap in mental health supports for the 19 high schools that lack a Wellness Center in the upcoming fiscal year.

These mental health supports should be extended to our County's 40 middle schools, at an estimated cost, based on the size of middle schools, of about **\$300,000 per middle school, for a total cost of about \$12 million**. This is not a large sum to meet the needs of our children, many of whom are suffering from the trauma caused by Covid-related issues, in addition to other mental health issues that affect so many young people.

III. We support expansion of the Mobile Crisis Outreach Teams to 13-14 teams at \$9.5 million

The County needs a more robust behavioral healthcare first response. The expanded use of Mobile Crisis Outreach Teams (MCOTs) will ensure better care for those experiencing a behavioral health crisis, improve response times, reduce the chances that the person will be killed or injured by the police, and free up police to solve real crimes rather than behavioral health crises, for which they are ill-equipped to provide care. Public safety is best served, and lives protected and respected, when mental health crisis team responses are maximized and police responses are limited to dangerous situations only.

The County's response to mental health crises has been poor. Between September 2017 and May 2020, Montgomery County police were joined by a mental health crisis team for just 7% of the mental-health dispatches.² Based on data from Maricopa County, Arizona, we estimate that a crisis team response, without the need for police, is appropriate for 92-97% of behavioral-health incidents.³

² Montgomery County Office of Legislative Oversight analysis (https://www.montgomerycountymd.gov/OLO/Resources/Files/2021_Reports/OLORReport2021-4.pdf) police recognized 19 incidents they responded to per day as mental health situations, whereas the mental health crisis team only responded to 40 incidents per month. All responses were co-responses.

³ Report prepared for Montgomery County by RI (https://drive.google.com/file/d/1lel_GQZMKGgkijyVNWSkSBpZHemiPC_X/view?usp=sharing). The CAHOOTS backup rate is 8%, due to their responding to a number of calls that are traditionally police-only: <https://www.eugene-or.gov/DocumentCenter/View/56717/CAHOOTS-Program-Analysis>

Using MCOTs as the primary responders in mental health crises will have a significantly beneficial impact on police resources. In Maricopa County, their shift to a Crisis Now response freed up 37 officers to focus on solving crime instead of responding to mental health calls.

Montgomery County data shows that using police to respond to behavioral-health crises is a terrible use of police resources. The County's emergency call center data shows that responding to mental health situations took 154 minutes of police time on average, twice as long as most 911 calls.⁴ It is statistics like these that justify MCPD Third District Commander McBain's call for relieving police of responsibilities for responding to mental health crises.⁵

Call center data also shows that of the more than 700 daily 911 calls, up to 17% - 123 calls per day - can be classified as behavioral health crises.⁶ To meet the level of need for this budget year, we need to provide 315.7 team hours per day, or an average of 13-14 teams per shift.⁷

This level of coverage calls for a total of 131.6 FTEs: 117.6 responders⁸, 7 program managers, and 7 coordinators.⁹ We estimate a budget of **\$9.5 million**¹⁰ for these personnel this year. (In future fiscal years we will need to scale up as demand for mental health teams increases).¹¹

When people need care beyond what the MCOTs can provide, they should have the option of voluntarily going to a facility that matches the immediate and specific short-term support they may need. Restoration Center recliners where people can stay for a 23-hour observation period and sub-acute beds where people can spend 2-3 days in a home-like setting give people a place to stabilize that is more appropriate than a psychiatric bed. More funding will be needed in

⁴ Per the same OLO analysis. This time is from dispatch to clearance.

⁵ Commander McBain speaking, on Mar. 28, 2022, to the Policing Advisory Commission.

⁶ Interestingly, this number is in line with the CAHOOTS dispatch rate of 17% (<https://www.eugene-or.gov/DocumentCenter/View/56717/CAHOOTS-Program-Analysis>).

⁷ Assuming a robust response: every day, we will need 154 minutes * 123 calls = 18,942 minutes or 315.7 team hours per day, which calls for an average of 13.1 teams per shift (315.7 / 24).

⁸ 315.7 team hours per day * 365 = 115,230.5 team hours per year. Excluding vacation and sick leave, full-time responders will work 1,960 hours annually. 115,230.5 team hours / 1,960 hrs = 58.8 teams. MCOTs operate in teams of 2; therefore 58.8 teams of two will require 117.6 responders.

⁹ Per RI's recommendation of one supervisor and one support services coordinator per 8.4 teams.

¹⁰ Scaled up from RI's budget of \$1.35 million in salaries and benefits for 8.4 teams. Without an exact figure for peer support personnel, it is hard to compare; however, we note that therapists receive \$110,000 in salaries and benefits, while the peer support personnel working alongside them may be making as little as minimum wage.

¹¹ Based on CAHOOTS per-capita calls of 39.1 daily calls per 100K residents, we estimate that current volume of 44,900 annual calls could triple to 151,200, depending on factors such as the new 9-8-8 number launching this summer, rising behavioral health support needs, and growing community confidence in MCOTs as safer alternatives to police.

the future for these facilities as MCOTs are providing better service and better alternatives to hospitals.

We thank you for your consideration, and look forward to discussing our recommendations with you.