

Hello County Councilmembers. Thank you for the opportunity to speak with you regarding BILL 43-23, CRISIS INTERVENTION TEAM.

My name is Sharon Dietsche and I am a clinical social worker residing in Silver Spring in Montgomery County. I have over 30 years of experience in mental and behavioral health from around the country including crisis intervention. In December, I became the Executive Director of the National Alliance on Mental Illness of Montgomery County also known as NAMI MC.

NAMI MC is part of the National Alliance on Mental Illness, the nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness. We envision a future where all people affected by mental health conditions live healthy, fulfilling lives supported by a caring community. We envision a future in which mental health crises consistently receive supportive and adequate mental health responses.

NAMI MC respectfully opposes Bill 43-23 for the following five reasons:

1. If enacted, **Bill 43-23 would lock in a prescribed crisis response program and restrict the latitude of County agencies** to modify it. Now is not the time to codify crisis response in Montgomery County. Here and across the country, we're seeing an evolution in crisis response systems, spurred in part by the rollout of the 988 Crisis Lifeline and SAMHSA's [National Guidelines](#) for Behavioral Health Crisis Care. With our State and County systems in a period of transformation, enshrining a wholly new program into law does not make sense as research and best practices are developing.
2. The bill tethers law enforcement to mental health crisis response at a time when there is a known shortage of police officers in our county. Many times mental health crises do not require law enforcement intervention. This can allow law enforcement to focus on other safety measures.
3. The bill is out of step with the National Crisis Now model, to which the State and County have committed. As a result, this CIT co-responder model would be comparatively **more expensive** for the County because teams that include police officers would **potentially not** qualify for reimbursement of clinicians' services

under a new [Medicaid](#) plan being finalized by the Maryland Department of Health.

4. The proposed CIT model runs counter to advice in CIT International's [Best Practice Guide](#) that "Cautions About the Embedded Co-Response Approach to Mental Health Crises" for reasons including police presences could deter people from calling for help due to fear of arrest and create an opportunity for the person suffering a crisis to become further involved in the justice system.
  
5. In the Bill, the composition of the proposed advisory committee is overweighted with criminal justice professionals and does not provide enough weight for community members with lived experience. In addition, the committee, whose purpose pertains to the CIT program specifically, is given undue authority to advise the County Executive and Council more broadly on crisis intervention.

NAMI MC is in support of more Mobile Crisis Outreach Teams also known as MCOTs.

While the implementation of MCOTs in our county needs improvement, the model offers advantages over the bill's proposed CIT program.

Thank you again for your time and for the opportunity to provide testimony regarding this bill. Please know that NAMI MC is always available as a resource to the Council and the community when it comes to discussing mental health policies in Montgomery County.

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