

# Judiciary Committee

## JOINT FAVORABLE REPORT

**Bill No.:** HB-5372

AN ACT PERMITTING CLINICAL SOCIAL WORKERS TO CONDUCT PERIODIC BEHAVIORAL HEALTH ASSESSMENTS OF POLICE OFFICERS AND PROMOTING THE INCREASED USE OF CLINICAL SOCIAL WORKERS BY LAW ENFORCEMENT UNITS WHEN ISSUING EMERGENCY

**Title:** CERTIFICATES.

**Vote Date:** 3/29/2022

**Vote Action:** Joint Favorable Substitute

**PH Date:** 3/9/2022

**File No.:** 493

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### SPONSORS OF BILL:

Judiciary Committee

Co-Sponsors of Bill:

Rep. Michael A. Winkler, 56<sup>th</sup> Dist.

Rep. Robin E. Comey, 102<sup>nd</sup> Dist.

Rep. John K. Hampton, 16<sup>th</sup> Dist.

Rep. Josh Elliott, 88<sup>th</sup> Dist.

Rep. David Michel, 146<sup>th</sup> Dist.

Rep. Christine Palm, 36<sup>th</sup> Dist.

Rep. Dorinda Borer, 115<sup>th</sup> Dist.

### REASONS FOR BILL:

This concept was brought to the attention of the Judiciary Committee from Deputy Chief John Alves of the Branford Police Department and the Police Transparency and Accountability Task Force. The bill allows police social workers the authority to issue an emergency certificate, authorizing an individual to be taken to the hospital for medical examination. Currently only those working under a program operated by or under contract with DHMAS can issue an emergency certificate. The change in statutory language put forth by this bill would allow additional professionals in the mental health field to make these assessments and remove some obligation from the police to do so.

### PROPOSED SUBSTITUTE LANGUAGE:

Section 2 was stricken from the bill due to concerns raised by several groups. Among those with concerns are DMHAS, ACLU-CT, Connecticut Legal Rights Project Inc., and National Association of Social Workers, Connecticut Chapter. Four provisions from the

recommendations of the police accountability task force were added. One provision includes reporting use of force incidents involving law enforcement. Another provision added the ability for accreditation of police departments to be done by the Connecticut Police Officer Standards and Training Council (POST) in addition to the Commission on Accreditation for Law Enforcement Agencies (CALEA). Also added to the bill was a set of minimum standards and practices for administering and managing law enforcement units. Lastly, provisions relating to expanding diversity guidelines were included in the substitute language.

#### **RESPONSE FROM ADMINISTRATION/AGENCY:**

##### **State of Connecticut, Department of Mental Health and Addiction Services, Commissioner, Nancy Navarretta**

Nancy Navarretta, the Commissioner of the Department of Mental Health and Addiction Services (DMHAS), provided testimony related to some concerns on the bill. Section 2 of the bill, which provides for the expansion of the ability to write emergency certificates to ensure the involuntary transportation of individuals who are experiencing emotional distress. Currently, the behavioral health system and law enforcement can cause the involuntary transportation of individuals in emotional distress, thus making section 2 of the bill unnecessary in the opinion of DMHAS. DMHAS has an eight-hour training, after which licensed clinical social workers and advanced practice registered nurses can write emergency certificates. Having worked with the recovery community for many years, DMHAS has learned that forcing individuals to be transported may adversely affect those with a history of trauma. It also may create an adversarial relationship between consumers of services and behavioral health professionals. Expanding the ability to write emergency certifications in turn expands the potential for harm. Due to these concerns, DMHAS encourages the committee to remove Section 2 from the bill. These concerns were addressed in the substitute language.

#### **NATURE AND SOURCES OF SUPPORT:**

##### **Branford Counseling & Community Services, Executive Director, Peter Cimino & Branford Resident, Police Social Worker, Danielle Suraci, LCSW**

Peter Cimino of Branford Counseling & Community Services, and Police Social Worker Danielle Suraci, support the bill. In August 2021, the Town of Branford Police Department (BPD) hired a LCSW as a social worker after the BPD conducted a study on the feasibility and potential impact of using social workers to respond to police calls for service for mental health, substance abuse, and social service needs. They concluded that the number of calls warranted the need for a social worker to assist their officers in addressing non-criminal behavioral health and social service needs. The Police Social Worker has assisted officers with death notifications, juvenile matters, domestic violence calls, and more. BPD has seen a decrease in the rate of involuntary hospitalizations they have made since the position was created. Police are not social workers, they have a job they were hired and trained to complete, which is to protect the public and prevent crime. Allowing trained social workers to deal with non-criminal behavior and social service calls will help all members of the community.

##### **Connecticut Legal Rights Project, Inc., Executive Director, Kathleen Flaherty, Esq.**

Kathy Flaherty, the Executive Director of Connecticut Legal Rights Project (CLRP), shares concerns regarding the bill. She does not have objections to the section of the bill which

seeks to add licensed clinical social workers which experience diagnosing and treating post-traumatic stress disorder to the psychiatrists and psychologists who are authorized to perform these assessments currently. She believes this represents a powerful demonstration of workforce issues in the behavioral health system. However, Ms. Flaherty believes the Committee should remove Section 2 from the bill before advancing it as police officers can already write emergency evaluation requests. Thus, she believes this section does not add anything meaningful and is not necessary. This concern was addressed by the substitute language.

**Council 4 AFSCME's Public Safety Chapter, Legislative Director, Brian Anderson**

Mr. Anderson, on behalf of Council 4 AFSCME's Public Safety Chapter, supports the bill. The union supports the bill as some of the most knowledgeable experts on treating police officers for trauma are social workers. With this being the case, it makes sense to have social workers, the best professionals in the field, be utilized to deal with police officer mental health assessments.

**Licensed Clinical Social Worker, Isabel Logan**

Isabel Logan, a LCSW with over 20 years of experience in criminal, juvenile justice, and law enforcement settings, supports the bill. Allowing clinical social workers to conduct periodic behavioral health assessments of police officers will provide more mental health resources to police officers. Behavioral health insurances already recognize licensed clinical social workers' clinical diagnosing skill set, making it a seamless progression of services.

**Maureen Lopes**

Ms. Lopes believes that LCSW's are well trained and should be permitted to be hired by police departments to conduct behavioral health assessments. She supports the bill.

**National Association of Social Workers, Connecticut Chapter, LMSW, Stephen Wanczyk-Karp**

Stephen Wanczyk-Karp, a Licensed Master Social Worker and member of the National Association of Social Workers Connecticut Chapter (NASW/CT), strongly supports the bill. Licensed Clinical Social Workers have notable clinical assessment skills, and the bill offers police departments a valuable option in selecting a clinician to provide the behavioral health assessment of police offers. Licensed Clinical Social Workers are trained in and licensed for diagnosis and treatment. NSAW/CT urges the committee to assist police departments in meeting Section 16 of the Police Accountability Act by voting yes on the bill.

**National Association of Social Workers, Connecticut Chapter, Education and Legislative Action Network, Chair, Kathleen Callahan**

Kathleen Callahan, the chair of the National Association of Social Workers Connecticut Chapter's Education and Legislative Action Network, supports the bill. This bill recognizes the clinical assessment skills of Licensed Clinical Social Workers and offers police departments the option of selecting a clinician to provide the behavioral health assessment of police officers. LCSW's are trained in and licensed for diagnosis and treatment, they are also recognized as behavioral health providers by all major private insurers. Ms. Callahan also supports the recommendation from the Department of Mental Health and Addiction Services to remove Section 2 from the bill, which was addressed in the substitute language.

**National Association of Social Workers, Connecticut Chapter, Intern, Breanna Formanski**

Brenna Formanski, an intern with the National Association of Social Workers, Connecticut Chapter (NASW/CT), supports the bill. The bill calls for a particular amount of training from the board-certified professionals that can complete these assessments. Those conducting training must have experience diagnosing and treating post-traumatic stress disorder (PTSD), thus they will be well versed in their approach. This ensures they are well equipped to train and educate fellow social workers. Allowing Licensed Clinical Social Workers to conduct behavioral health assessments would only further the connection and relationship between social workers and police departments. It would also be beneficial to every police department's budget due to the cost efficiency of hiring a social worker compared to a psychologist or psychiatrist.

**Town of Branford, Department of Police Services, Deputy Chief, John Alves**

John Alves, the Deputy Chief of Police in Branford, supports the bill. The minor statutory changes stemming from this bill will allow for the expanded ability of a clinical social worker to issue an emergency certificate when working in collaboration with or directly for a law enforcement unit. This change is narrow but has a positive impact in allowing police agencies to incorporate mental health professionals into their response.

**Connecticut Association for Marriage and Family Therapy, Chair, Licensed Marriage and Family Therapist, Rebecca Ruitto**

**Licensed Marriage and Family Therapist, Briana Hansen**

**Licensed Marriage and Family Therapist, Kristen Diekmann**

**Therapy for Diverse Families, Owner, Licensed Marriage and Family Therapist, Michele E. Nardella**

The Licensed Marriage and Family Therapists (MFTs) above submitted identical testimony in support of the bill with requested modification to include Marriage and Family Therapists. Many MFTs have extensive training and ability to diagnose and treat post-traumatic stress disorder. They also have experience in mobile crisis positions, working with first responders, and the judiciary system. First responders within the state are continuously exposed to stressors and trauma while in the field. Given the ability of MFTs to assess and treat trauma-related disorders, they request that MFTs be included in the professions listed as those qualified to complete the police officer behavioral health assessments. They would also like to see MFTs be included as providers issuing emergency certificates. When establishing additional resources and supports for first responders, they recommend the committee be inclusive of all mental health professionals that may be qualified to assess and support police officers.

**NATURE AND SOURCES OF OPPOSITION:**

**American Civil Liberties Union of Connecticut, Policy Counsel, Jess Zaccagnino**

Jess Zaccagnino, the policy counsel for the American Civil Liberties Union of Connecticut (ACLU-CT), opposes Section 2 of the bill. Contact between police and community members can have tragic consequences for people experiencing mental health crises. Rather than continuing to entrench the role of police in mental health, the ACLU-CT would like to see the Committee seek to divest police from this function entirely. They have significant concerns with the bill as it fails to reduce the role of policing within communities, specifically regarding some of Connecticut's most vulnerable residents when they need medical care for a mental

health crisis. Due to this, they encourage the Committee to re-evaluate its centering of police in mental health care entirely, instead shifting its focus to mental health professionals. Section 2 was stricken from the bill in substitute language, addressing the concerns presented by the ACLU.

**Behavioral Health Consultants, LLC, Managing Partner, Mark J. Kirschner, PhD, ABPP**

Mr. Kirschner, a clinical psychologist who is Board Certified in Police and Public Safety Psychology, opposes the bill. Having worked closely with the CT Police Chief's Association and the CT Police Officer Standards and Training Council in developing guidance and standards as to the conduct of behavioral health assessments of police officers, Mr. Kirschner is admittedly protective of the process which he thinks will be negatively impacted by the proposed change from this bill. His first concern has to do with the difference in training between psychologists and clinical social workers related to the diagnosis and assessment of mental disorders. Social workers have an MSA which takes 1-2 years of general post-graduate work and complete 3000 hours of post-master's work, only 100 of which need to be done under professional supervision. A psychologist takes 4-5 years of post-graduate work in the area of clinical psychology and is required to complete a 1-year supervised internship in order to obtain their doctorate followed by a year of supervised experience during which they receive at least 3 hours of direct supervision for every 40 hours worked. His second concern has to do with quality control and making sure that the behavioral health assessments are being conducted in a similar fashion regardless of the clinician providing them. This is obviously difficult to do, and the fear is that opening this up now to clinical social workers will create a mass number of people who will be interested in doing this work, and quality control will be non-existent. His third concern has to do with the cultural competence to perform these assessments. While there are clinical social workers who have adequate cultural competence and experience, the vast majority do not. Mr. Kirschner believes opening the floodgates of opportunity risks the integrity of the overall process. Lastly, in terms of the ability for clinical social workers to complete emergency committal forms, he has not completed any in 30 plus years of working as a clinical psychologist. Due to this, he believes that this provision is unnecessary.

**CT Resident, David Godbout**

Mr. Godbout opposed the bill, stating that the virtual committee process constitutes a violation of his Fourth Amendment rights. He also believes that 8 hours of schooling for on the job training is insufficient.

**Reported by: Luke Tressy**

**Date: 04/19/2022**