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Members of the House Public Safety and Criminal Justice Reform Finance and Policy Committee:

On behalf of NAMI Minnesota, we are writing in support of HF 515 and would suggest the inclusion of the mental health community in the 911 telecommunicator working group. Calling 911 in an emergency is second nature in our society, and we know the extremely challenging and brave work that our first responders do every day to keep our communities safe and healthy. Yet, unlike every other type of emergency when a person in a mental health crisis calls 911, there is no clear expectation of what kind of response they will receive.

In recent years, many public safety and criminal justice professionals across Minnesota have worked hard to break down the silos that isolate mental health as a public health and public safety issue. We have been proud partners with law enforcement agencies, counties, and providers to cross departments and disciplines and begin to think creatively to serve people with mental illnesses and promote greater awareness.

While Minnesota's mental health system is still under construction, it is hard enough for public safety professionals to be aware of the mental health system, let alone a person or family member experiencing the symptoms of a mental illness for the first time. Every county in Minnesota is served by a mental health mobile crisis team of licensed professionals with extensive training to de-escalate and respond to people in crisis. However, there are 40 different numbers to contact a crisis team depending on where you live and, in an emergency, people will call 911. As we continue to promote collaborations and partnerships that allow law enforcement to work safely and appropriately with mental health professionals, it's important that we begin to change a culture of silos, and work to provide a consistent response to people in crisis statewide.

We are grateful that HF 515 is working to improve that consistent response to people in emergencies by establishing statewide standards and certification for 911 dispatchers and response systems. As the state does this important work, it is imperative that mental health crisis team providers be at the table to continue to strengthen and create new partnerships around mental health crisis response. It is important that the very *first* first responders receive minimum training around mental health and opportunities and resources in the community – both for the communities they serve and for the wellness of the responders themselves.

We would encourage the committee to consider an amendment to include a Mental Health Crisis team provider in the membership of the working group. Thank you for your time, we are happy to answer any questions or discuss this issue further.

Sincerely,

Sue Abderholden, MPH Executive Director Elliot Butay
Criminal Justice Coordinator