

# Public Health Committee JOINT FAVORABLE REPORT

**Bill No.:** SB-380

AN ACT CONCERNING MENTAL HEALTH CARE AND WELLNESS TRAINING

**Title:** AND SUICIDE PREVENTION FOR POLICE OFFICERS.

**Vote Date:** 3/1/2019

**Vote Action:** Vote to Draft

**PH Date:** 2/11/2019

**File No.:**

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## **SPONSORS OF BILL:**

Public Health Committee

## **REASONS FOR BILL:**

To prohibit law enforcement units from discriminating against police officers who seek mental health treatment. Currently, if a police officer is voluntarily admitted to a psychiatric hospital, they are not allowed to receive back their surrendered weapon for six months after being discharged. SB 380 would amend that language to allow an officer to receive their weapon upon discharge, provided they meet other criteria which include submitting to a mental health evaluation.

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

None provided.

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

### **Police Officers Association of Connecticut (POACT):**

POACT supports the bill. Current Connecticut laws place an officer's job in jeopardy when they admit they may need mental health services. As a result, many officers do not seek the help they need fearing they may lose their job. This fear of job loss often leads officers to seek treatment outside of the state or to commit suicide. A number of such tragic cases occurred in 2018.

A bill similar to SB 380 is currently before the Judiciary Committee (SB 824). This bill would prevent an officer from being charged with possession of an illegal firearm if the officer has been treated and his weapon returned, and the officer would not be penalized for seeking mental health treatment. POACT respectfully requests that similar language be included in SB 380. *Please see POACT testimony for specific language.*

**Louise Pyers, Executive Director, Connecticut Alliance to Benefit Law Enforcement (CABLE):**

Ms. Pyers and CABLE support the bill. Police officers, unlike any other segment of the population, face job loss if they admit to being suicidal and require inpatient hospital stays. In current statute, Connecticut does not allow officers to carry a gun for six months after being discharged if they have received such inpatient treatment. This came into effect after a 2013 statute change, prior to which officers were only required to pass a "Fitness for Duty" evaluation by a psychiatrist in order to receive their weapons back. This statute has caused police officers exposed to traumatic events not to seek needed mental health treatment. Lack of such treatment causes behavioral changes that may lead to addictions and suicide. CABLE hopes that police officers will be able to once again receive treatment without fear of reprimand.

**Caleb Lopez, Officer, South Windsor:**

Mr. Lopez supports the bill. After 16 years as a police officer, he has personally experienced mental health issues and has seen other officers suffer, most of whom were afraid to seek help. Today, seeking treatment is encouraged but obstacles still remain and the suicide rate is high. Police officers hold themselves to a higher standard of mental strength because they are afraid of judgment, although in private they are not immune to the traumas. Officers sign up to protect the people and possibly make the ultimate sacrifice, and they should not be penalized or face reprimand if they seek much needed help. Mr. Lopez received help and as a result it made him a better officer, better husband, father and person.

**Suzi Craig, Senior Director of Policy, Mental Health Connecticut (MHC):**

Ms. Craig and MHC support the bill and *recommend adding provisions that would require police departments to offer Mental Health First Aid*. Police officers are subject to daily traumatic situations yet are not unconditionally supported if they seek mental health services. Consequently, this results in suicides committed by officers to be triple that of officers dying in the line of duty. The conditional support of those seeking help include repercussions such as demotion or being passed over for a promotion. SB 380 would remove these barriers so that mental health conditions would share parity with physical conditions which may remove the stigma of officers seeking help.

**Additional sources of support include:**

Janine Sullivan-Wiley, Executive Director, Northwest Regional Mental Health Board  
Sgt. John Szewczyk, Union President, Hartford Police Union  
Kathy Flaherty, Executive Director, Connecticut Legal Rights Project

Richard Hart, Director, Legislative and Political Affairs, Uniformed Professional Firefighters of Connecticut  
Derek Puorro, Chairman, Public Safety Council, Council 4 AFSCME  
Trish Buchanan  
James Rascati, Director, Organizational Services, Behavioral Health Consultants

**NATURE AND SOURCES OF OPPOSITION:**

**Connecticut Conference of Municipalities (CCM):**

CCM urges the Public Health Committee not to take action on SB 380. CCM has convened a group comprised of municipal officials, police and fire employee groups, and an out of state consultant experienced in developing legislative language and first responder mental health issues. The group hopes to submit to the legislature a proposal for review concerning first responder mental health. CCM acknowledges that SB 380 has not been fully drafted and therefore remains ambiguous. They add that the Committee should wait for recommendations of the CCM working group before proceeding with this issue.

**Reported by: Valentina Mehmeti**

**Date: 3/22/19**