

Judiciary Committee JOINT FAVORABLE REPORT

Bill No.: SB-445

AN ACT CONCERNING THE PROVISION OF EMERGENCY MEDICAL SERVICES TO AN INDIVIDUAL WHO IS IN THE CUSTODY OR CONTROL OF

Title: A PEACE OFFICER.

Vote Date: 3/31/2022

Vote Action: Joint Favorable Substitute

PH Date: 3/25/2022

File No.: 520

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SPONSORS OF BILL:

Judiciary Committee

Co-Sponsors of Bill:

Rep. Michael A. Winkler, 56th Dist.

Sen. Martin M. Looney, 11th Dist.

REASONS FOR BILL:

The bill seeks to address the statutory gap that leads to poor medical outcomes for persons who have pre-arrest encounters with law enforcement. The bill comes at the request of the Medical Civil Rights Initiative which was organized by a group of physicians at Massachusetts General Hospital and Brigham Women's Hospital who brought the issue to the attention of Senator Looney.

PROPOSED SUBSTITUTE LANGUAGE:

In line 3-4, "substance use disorder or mental" was changed to "substance use disorder or mental health disorder" for the purpose of consistency and clarity.

RESPONSE FROM ADMINISTRATION/AGENCY:

None Expressed.

NATURE AND SOURCES OF SUPPORT:

State of Connecticut Senate, President Pro Tempore, Senator Martin M. Looney

Senator Looney supports the bill, which surrounds issues brought to his attention by the Medical Civil Rights Initiative which was organized by a group of physicians at Massachusetts General Hospital and Brigham Women's Hospital. Police officers by necessity have frequent encounters with people who have emergent mental or physical health needs and the officers do not always have sufficient training for these encounters. The bill allows police officers to remain focused on public safety and allow emergent physical or mental health needs to be addressed by medical personnel.

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

Jess Zaccagnino, on behalf of the American Civil Liberties Union of Connecticut (ACLU-CT), supports the bill. The ACLU-CT strongly supports measures that ensure that police do not deprive a person of emergency medical services while that person is in police custody or control. Police brutality has been in the national spotlight as in 2020 alone police killed more than 1,100 people. Police brutality includes the failure of officials to provide medical treatment to people who are arrested, in jail, or in prison. The ACLU-CT supports the bill as a beginning step towards police accountability by prohibiting the police from depriving a person of emergency medical care while in their custody or control.

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

Kathy Flaherty, on behalf of the Connecticut Legal Rights Project (CLRP), supports the bill. This bill recognizes that law enforcement officials are often the first responders to people who are in medical distress or mental health crisis, states that the person shall have the right to be provided with emergency medical services and places the focus and priority on getting the person emergency medical assistance. CLRP believes that ideally law enforcement would not be the first responders to people in mental health crisis or other medical distress. However, in Connecticut calling 911 often results in law enforcement officers showing up first. With this being the case, CLRP supports the bill as it ensures that medical assistance is provided, nonetheless.

Connecticut State Medical Society

The Connecticut State Medical Society (CSMS) supports the bill. CSMS believes that health care is a right and supports policies that facilitate greater access to medical services for persons in any situation that presents barriers to accessing health care. CSMS believes that this legislation is important for the following reasons. First, while there are legal rights to basic healthcare for persons who are incarcerated, these constitutional protections have never been applied to situations prior to formal arrest when a person similarly does not feel that they can leave the situation. Second, even if there are internal police department policies or regulations promoting medical access, having an organized affirmative right could encourage persons experiencing or observing a medical emergency to request necessary help. Third, this legislation would ensure that medical assessment is prompt and is provided by a trained emergency medical professional. Fourth, codifying this best practice into law can help ensure consistency in application across all demographics. CSMS supports this legislation and is happy to further engage with the committee to discuss this and other matters related to emergency care and behavioral health and substance use response.

Medical Civil Rights Committee

The Medical Civil Rights Committee supports the bill. Currently, there is no legal right in any U.S. jurisdiction for a person to request and be provided emergency medical care during police encounters. Also, there are no laws establishing a right to emergency medical care

during an initial law enforcement encounter. The Medical Civil Rights Committee aided in the creation of this bill to help remedy the longstanding statutory gap and ensure better health outcomes for persons in medical crises during police contact. Peace officers in Connecticut competently and bravely handle medical emergency every day, however a clear statutory framework could help avoid misapprehension about the extent and urgency of a person's medical need during police contact. This bill did not arise to reform police conduct, rather to advance health equity as an act of hope and an anticipation of justice.

Medical Civil Rights Committee, Co-Leader, Leonore A. Dluhy

Leonore A. Dluhy, the co-chair of the Medical Civil Rights Committee, supports the bill. The bill was drafted to resolve the statutory gap that currently exists and to ensure crucial legal protections for those whose freedoms are limited and who are unable to seek medical care on their own accord. There are existing police policies related to the handling of medical emergencies, but it is the opinion of the Medical Civil Rights Committee that the policies are inconsistent and unenforceable. Based on this, it is crucial to codify a right to medical care and to support the uniform handling of medical emergencies during police contact. A legal right to care would clarify duties during such circumstances while also de-burdening police officers. Inspired by the Miranda advisement, which ensures the right to counsel during a custodial investigation, this bill would ensure the right to clinical care during police contact. The bill provides an important opportunity to advance justice, to create safer police-community interfaces, and to support better health outcomes. The Medical Civil Rights Committee hope that Connecticut will be the first state in the nation to pass this bill, the medical civil rights bill, into law.

Medical Civil Rights Committee, Member, Julie R. Ingelfinger, M.D.

Julie Ingelfinger, a member of the Medical Civil Rights Committee, supports the bill. As a citizen and physician who has seen more than one unfortunate outcome when a person in a law enforcement encounter has experienced a deterioration in a health condition, she feels that it is crucial that someone who experiences a medical emergency be afforded appropriate and immediate medical care. Persons in psychiatric emergencies do not always contact 911, there must be a legal right to immediate, objective emergency medical care for persons in a medical health crisis who are encountered or who are held in police custody. This bill is critical for equitable treatment and human rights of citizens across the state.

Jennifer Root Bannon

Jennifer Root Bannon supports the bill. She shared the story of her brother, Juston Root, who was 41 years old and suffered from schizoaffective disorder. When Mr. Root was off his medication, he would have delusions, paranoia, and mania. Following speaking with a hospital security officer, who noted that Juston was nonsensical, and something was seriously off, Mr. Root left Mass Mental Health Center in his car. His car crashed, leaving him seriously injured. He was able to make it to a mulch area where a former EMT ran from the parking lot and was at his side, she later said that police arrived with guns drawn running. Police proceeded to tell the women to leave, following which one officer kicked Mr. Root and then from 5-6 feet away officers shot 31 times while Mr. Root was unarmed, leading to his death. Had a bill such as this been in place, this situation could have been avoided as Juston was at a hospital and needed to be hospitalized. Had emergency medical services arrived first, the outcome would have been different. This bill is truly about the fundamental mental right that someone in a medical emergency deserves at the minimum, a medical response

and an EMT should be called first. In the hopes of preventing further tragedy, Jennifer Root Bannon supports the bill.

**National Alliance on Mental Illness Connecticut Chapter, Community and Affiliates
Relations Manager, Thomas Burr**

Mr. Burr, on behalf of the National Alliance on Mental Illness Connecticut Chapter (NAMI CT), supports the bill. Although in a perfect world anyone in distress with a mental health condition would initially be addressed by responders from Mobile Crisis, the reality is that sometimes police are called, or happen to show up first on the scene. Mandating emergency medical services be provided to those who need them should lead to better outcomes for first responders as well as for the persons needing assistance.

NATURE AND SOURCES OF OPPOSITION:

None Expressed.

OTHER:

CT Resident, David Godbout

Mr. Godbout opposes the bill, stating that the virtual committee process constitutes a violation of his Fourth Amendment right.

Reported by: Luke Tressy

Date: 04/19/2022