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Sheriff
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Chairman Charles E. Grassley
United States Senate
Committee on the Judiciary
224 Dirksen Senate Office Building
Washington, D.C. 20510

Dear Chairman Grassley

Thank you for the opportunity to respond to your question of how best to address national concerns with incidences of mass violence and recommend solutions which provide for public safety and support for persons with mental illness. As you mentioned, the horrific images of tragedy suffered by far too many have garnered detailed media coverage and have left the impression that persons with mental illness are for the most part responsible for these acts of violence.

Research consistently shows that persons with mental illness are responsible for only one to four percent of all violent acts, yet persons with mental illness are more likely to be victims of violence themselves (E. Fuller Torrey, et al). The perceived correlation between violence and mentally ill persons is so common that it strongly continues to stigmatize all persons with mental illness. It is imperative that we provide information to everyone in an equally pervasive format, as is used by social media, television and the print media.

Still, even with the low incidence of violent acts by persons with mental illness, it is important to address this concern in such a way that any acts of violence are eliminated and that a system of support and mental health treatment can be provided such that even persons in crisis can be treated before crisis levels exceed safe limits.

Our success in Bexar County has been based on a collaborative and team approach to finding solutions. The following recommendations were developed with the assistance of Mr. Leon Evans – CEO, Center for Health Care Services and Mr. Gilbert Gonzales – Bexar County Director of Mental Health Services. Following are three approaches which are directed at preventing harm and providing for public safety; and are covered in more detail in the attachment to this letter:

- Expand public knowledge
- Strengthen law enforcement's ability to respond
- Establish expanded treatment options and provide accountable continuity of care

These issues related to incidents of violence and persons with mental illness are complex and far-reaching. Although these recommendations provide some solutions, we are sure there are other approaches which need to be studied. It is my hope that these brief points have addressed your questions and provide a way ahead to tackle this critical issue.

Sincerely,


SUSAN PAMERLEAU
Sheriff
Bexar County, Texas

1 Attachment

- Approaches to Enhance Public Safety and Address Mental Illness

APPROACHES to ENHANCE PUBLIC SAFETY and ADDRESS MENTAL ILLNESS

Expanding public knowledge

- A strong media campaign geared to informing the public about mental illness, about the low rates of violence among persons with mental illness and about the nature of the mental illness would go a long way in addressing this first recommendation. The possibilities for first alerts or calls for help go unmade because of lack of knowledge. Throughout the nation, families, neighbors and friends often know something is wrong with a loved one, but don't know what to do or where to go for help.
- One approach to this could be the expansion of "apps" commonly used in social media. In San Antonio, the local mental health authority, the Center for Health Care Services has developed an app titled "Mental Health and You" (MHU). This app is readily available to the general public in both Apple and Android formats. The app provides brief tutorials, signs and symptoms and a wealth of information including what to do in a suspected or actual mental health crisis. Basic mental health first aid courses (mental health 101) are available and can be readily provided in schools, churches and town halls.

Strengthen law enforcement's ability to respond

- Law enforcement officers are first responders. Strengthening their training through the implementation of the well-established "Crisis Intervention Team" (CIT) training can continue significant progress made by progressively innovative law enforcement agencies which have incorporated CIT training. CIT classes are typically 40 hours of training which improve the officer's skill set and knowledge of community resources. In Bexar County, CIT training includes dispatchers, 911 operators, school based resource officers, school administrators, detention officers, EMS and Fire.
- CIT trained officers then have the option to divert nonviolent offenders for assessment and treatment.
- Another area of improvement would be to provide background information to law enforcement officers at point of arrest, so a determination can be made if an individual has ever received any type of mental health treatment. In Bexar County, work is currently in progress towards developing a "law enforcement mental health navigator." This Navigator, through a community partnership and information exchange, would provide law enforcement officers the ability to receive real time information about previous mental health treatment from community providers, mental health hospitalizations from emergency rooms and/or mental health treatment failures from public and private providers in order to determine where best to transport the person in custody.

Establish expanded treatment options and provide for accountable continuity of care

- A key factor to consider in providing for treatment and support of persons with mental illness is to take into account the chronicity of mental health disorders. The nature of the illness(s) is that treatment and support may be necessary for long periods of time or in some instances, treatment and support is needed for a lifetime. Mental illness can be cyclic going from crisis episodes to an improved state but where treatment must be accessible. A third cycle can consist of a stable and productive period. Treatment must be available in all phases. A final note about the nature of mental illness is that a person may not be aware that he or she is sick. Ultimately, all these factors combine to make the current mental health system ineffective.
- Good and or even great crisis systems will not make much of a difference if treatment options are unavailable. A key question is "divert to what?" It is critical that treatment options be established and/or expanded. Treatment options such as accessible medication management, ongoing assessments which include criminogenic evaluations, peer support, transportation, residential step down and strong coordinated case management are a few of the most important elements necessary to reduce crisis incidents and provide the greatest hope for public safety and productive stable lives.