



Specialized Policing Responses: Law Enforcement/Mental Health Learning Sites

Jurisdictions across the country are exploring strategies to improve the outcomes of encounters between law enforcement and people with mental disorders. These efforts took root in the late 1980s, with the emergence of crisis intervention teams and co-response models. As a growing number of communities engage in the development of specialized policing responses (SPR), many grapple with the program design process, and are unsure how to tailor models from other jurisdictions to best fit their distinct circumstances.

In an effort to expand the knowledge base for law enforcement agencies interested in starting or enhancing a SPR, with assistance from a team of national experts and the U.S. Justice Department's Bureau of Justice Assistance, the Council of State Governments (CSG) Justice Center selected six police departments from across the country to act as national law enforcement/mental health learning sites. These learning sites represent a diverse cross-section of perspectives and program examples, and are dedicated to helping other jurisdictions across the country improve their responses to people with mental illnesses.

Portland (ME) Police Department

Total number of agency personnel: 218

Sworn: 163 Civilian: 55

Total population served: 64,000 people

Jurisdiction and state: Portland, Maine

Program Highlights

- Mental health professionals embedded in the law enforcement agency
- Operates within small city, with nearby rural community
- Co-response model with community-based support network

The Portland Police Department (PPD) has developed innovative programs and collaborative partnerships to address increased calls for service involving individuals who have mental disorders. Starting with a mental health police liaison position in 1996, the department has since developed a Specialized Behavioral Health Response Program, with trained officers who are called upon to respond to often time-consuming, complex calls involving individuals with mental disorders.

The PPD has worked with the National Alliance on Mental Illness (NAMI) Maine since 2001 to provide its Crisis Intervention Team (CIT) training, the 40-hour comprehensive "Memphis Model" designed to train officers responding to those with mental health issues who are in crisis. Although initially a volunteer program, PPD now mandates that all officers complete the CIT training program.

The PPD currently has a full-time mental health coordinator who collaborates with system-wide mental health care providers to facilitate meeting the needs of people who have mental disorders, primarily by managing a robust co-responder program and facilitating crisis intervention training for officers. The department also works closely with Opportunity Alliance, the state’s designated crisis services provider for Cumberland County, which places two part-time professional mental health liaisons on-site in the department. The mental health liaisons respond to calls alongside officers, assisting those in crisis. The department also has an agreement with Sweetser, a comprehensive behavioral health care organization, which provides a police liaison to the PPD one day per week.

Along with the mental health coordinator and liaisons, PPD CIT officers have a network of contacts they can call upon to assist in certain situations. For example, CIT officers can call Cumberland County Crisis Response to provide a mobile crisis outreach team for people who are in crisis and in need of mental health services, advocacy, and/or support. Additionally, Sweetser and Opportunity Alliance can send a crisis response team clinician when a crisis call involves children, and the Homeless Outreach and Mobile Engagement (HOME) team, a local nonprofit, typically co-responds to incidents involving people experiencing homelessness. Family Crisis Services have advocates embedded at PPD who respond to incidents that involve domestic violence. The Community Counseling Center coordinates the Trauma Intervention Program, an often-used team that provides volunteers (within a 20-minute response time) to a scene to assist officers in the support of those who have witnessed trauma.

When there are numerous calls for service, the mental health liaison and coordinator, officers, and case workers will use a team approach to determine the needs and solutions for the most appropriate response for future calls with individuals. Often, PPD CIT officers will attend commitment hearings, treatment planning meetings, and discharge planning meetings to further the continuum of care.

To learn more about the PPD and its initiatives, please contact:	
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To learn more about the Law Enforcement/Mental Health Learning Sites, please visit csgjusticecenter.org/mental-health/learning-sites/ or contact Nicola Smith-Kea at nsmithkea@csg.org or (240) 915-9718.