



December 4, 2020

Minneapolis City Council Members
350 South 5th Street, Room 307
Minneapolis, Minnesota 55415

RE: "Safety for All" Budget Recommendations Joint Statement

Dear City Council Members:

We strongly believe that there is a need for a mental health response to mental health crisis calls. It is critical that the city council take steps to implement an effective response.

After reading the Safety for All Budget Plan we have **serious concerns with the inclusion of EMS personnel on the response teams**. EMTs and paramedics do not have extensive training on mental health issues and thus shifting funds will dilute the ability of the teams to meet the needs of people experiencing mental health crises. As you know there have been problems with the use of ketamine which have created issues of mistrust. It's important to note that under MN Stat. 256B.0624, subd. 5, EMTs and paramedics do not meet the requirements for mobile mental health crisis responders.

The language in the Safety for All plan indicates that the teams will only respond to "nonthreatening" calls, a vague term. In addition, the OPI pilot states that the teams will respond to calls that "don't involve a weapon and don't pose an immediate risk to self or others." Both sets of language imply that **the teams will not respond to suicide calls when those are the exact calls that need a mental health crisis team response, not a police response**. Even in those situations in which a person has threatened others or has a weapon, co-response should be utilized. This would place a mental health professional on the scene and available to take over the call once the scene is safe.

We are in agreement with the proposed expenditures for training 911 call center staff and embedding a mental health professional in the 911 call center to ensure that staff gain proficiency in recognizing these calls and handing them off to the mobile mental

health crisis response unit. We also appreciate that the Safety for All plan calls for extended hours rather than the shorter hours of 10 am to 6 pm in the OPI proposal.

As the city considers implementation options, there should be strong consideration of contracting with the Hennepin County Mobile Crisis Team (COPE) to quickly ramp up the ability to respond to mental health crises within the city. Time and funds to develop infrastructure would not be needed if there is a contract with Hennepin County. COPE uses the Epic medical records system, which is interoperable with hospital medical records systems.

Our organizations stand ready to assist in the implementation of a city-wide dedicated mental health crisis response service that will unburden the Minneapolis Police Department from a significant number of calls while ensuring that people experiencing mental health crises get the quality of response they need.

Sincerely,

/s/ Sue Abderholden

Sue Abderholden
Executive Director
NAMI Minnesota

/s/ Michelle Gross

Michelle Gross
President
Communities United Against Police Brutality