

HOUSE BILL 1280

J1, E4

11r2653
CF SB 857

By: **Delegate Pena–Melnyk**

Introduced and read first time: February 8, 2021

Assigned to: Health and Government Operations

Committee Report: Favorable with amendments

House action: Adopted

Read second time: March 8, 2021

CHAPTER _____

1 AN ACT concerning

2 **Health – Maryland ~~Community~~ Behavioral Health and Public Safety Center of**
3 **Excellence – Establishment**

4 FOR the purpose of establishing the Maryland ~~Community~~ Behavioral Health and Public
5 Safety Center of Excellence within the Governor’s Office of Crime Prevention, Youth,
6 and Victim Services; establishing the purposes of the Center; requiring the Center
7 to monitor and analyze its models, plans, policies, strategies, programs, technical
8 assistance, and training in a certain manner and for certain purposes; requiring the
9 Office to appoint certain individuals to jointly oversee the Center; providing that
10 certain individuals may be associated with a certain entity; authorizing the Center
11 to designate certain points of contact for a certain purpose; authorizing the Center
12 to coordinate with the Justice Reinvestment Oversight Board and other State
13 entities; authorizing the Center to enter into contracts with certain entities or
14 organizations for certain purposes; providing that the operation of the Center is
15 subject to the limitations of the State budget; requiring that the activities of the
16 Center include certain planning, assistance, ~~and~~ coordination, and facilitation;
17 requiring the Center to provide technical assistance to local governments for certain
18 purposes; requiring the Center to develop certain models, recommendations, and
19 procedures; requiring the Center to host a certain summit ~~at certain intervals~~ each
20 year for certain purposes; stating the intent of the General Assembly; requiring the
21 Center to support certain workshops and summarize certain rules in certain reports,
22 implement certain systems and policies, and produce and update a certain plan on
23 or before a certain date each year; establishing requirements for the plan; requiring
24 the Center to consider certain factors when developing the plan; requiring each local

EXPLANATION: CAPITALS INDICATE MATTER ADDED TO EXISTING LAW.

[Brackets] indicate matter deleted from existing law.

Underlining indicates amendments to bill.

~~Strike out~~ indicates matter stricken from the bill by amendment or deleted from the law by amendment.



1 jurisdiction to develop a certain plan in collaboration with certain persons; requiring
 2 the plan to include certain elements; ~~authorizing~~ encouraging a local jurisdiction to
 3 use an existing local planning and coordinating committee or local management
 4 board to satisfy certain requirements; ~~requiring the Center to prioritize the~~
 5 ~~disbursement of certain federal funds received by the Center for certain purposes;~~
 6 defining certain terms; and generally relating to health and safety in the State.

7 BY adding to

8 Article – Health – General

9 Section 13–4201 through 13–4206 to be under the new subtitle “Subtitle 42.

10 Maryland ~~Community~~ Behavioral Health and Public Safety Center of
 11 Excellence”

12 Annotated Code of Maryland

13 (2019 Replacement Volume and 2020 Supplement)

14 SECTION 1. BE IT ENACTED BY THE GENERAL ASSEMBLY OF MARYLAND,

15 That the Laws of Maryland read as follows:

16 **Article – Health – General**

17 **SUBTITLE 42. MARYLAND ~~COMMUNITY~~ BEHAVIORAL HEALTH AND PUBLIC**
 18 **SAFETY CENTER OF EXCELLENCE.**

19 **13–4201.**

20 (A) IN THIS SUBTITLE THE FOLLOWING WORDS HAVE THE MEANINGS
 21 INDICATED.

22 (B) “CENTER” MEANS THE MARYLAND ~~COMMUNITY~~ BEHAVIORAL HEALTH
 23 AND PUBLIC SAFETY CENTER OF EXCELLENCE ESTABLISHED UNDER § 13–4202 OF
 24 THIS SUBTITLE.

25 (C) “MARYLAND HBCU” MEANS THE FOLLOWING HISTORICALLY BLACK
 26 COLLEGES AND UNIVERSITIES:

27 (1) BOWIE STATE UNIVERSITY;

28 (2) COPPIN STATE UNIVERSITY;

29 (3) MORGAN STATE UNIVERSITY; AND

30 (4) UNIVERSITY OF MARYLAND EASTERN SHORE.

31 (D) “RACIAL IMPACT ANALYSIS” MEANS A SYSTEMATIC EXAMINATION OF
 32 HOW RACIAL MINORITIES ARE OR WILL BE IMPACTED BY EXISTING OR PROPOSED

1 MODELS, PLANS, POLICIES, STRATEGIES, PROGRAMS, PROCESSES, OR
 2 RECOMMENDATIONS.

3 (E) “RACIAL MINORITY” MEANS:

4 (1) BLACK OR AFRICAN AMERICAN;

5 (2) HISPANIC OR LATINO;

6 (3) INDIGENOUS, AMERICAN INDIAN, OR ALASKA NATIVE;

7 (4) ASIAN; OR

8 (5) NATIVE HAWAIIAN OR PACIFIC ISLANDER.

9 ~~(D)~~ (F) “SEQUENTIAL ~~INTERCEPT MODEL~~ INTERCEPT MODEL” MEANS A
 10 SYSTEMS-LEVEL FRAMEWORK FOR CRIMINAL JUSTICE, ~~MENTAL HEALTH, AND~~
 11 ~~ADDICTIONS STAKEHOLDERS TO DIVERT ADULTS WITH SERIOUS MENTAL ILLNESS~~
 12 ~~FROM THE CRIMINAL JUSTICE SYSTEM TO COMMUNITY MENTAL HEALTH AND~~
 13 ~~ADDICTIONS SERVICES AND BEHAVIORAL HEALTH STAKEHOLDERS TO PREVENT~~
 14 ENTRANCE INTO THE CRIMINAL JUSTICE SYSTEM, MINIMIZE PENETRATION INTO
 15 THE CRIMINAL JUSTICE SYSTEM, AND ENGAGE INDIVIDUALS WITH BEHAVIORAL
 16 HEALTH SERVICES AND RECOVERY SUPPORTS AS THEY TRANSITION INTO THE
 17 COMMUNITY FROM THE CRIMINAL JUSTICE SYSTEM.

18 13-4202.

19 (A) THERE IS A MARYLAND ~~COMMUNITY~~ BEHAVIORAL HEALTH AND
 20 PUBLIC SAFETY CENTER OF EXCELLENCE IN THE GOVERNOR’S OFFICE OF CRIME
 21 PREVENTION, YOUTH, AND VICTIM SERVICES.

22 (B) THE PURPOSES OF THE CENTER ARE TO:

23 (1) ACT AS THE STATEWIDE INFORMATION REPOSITORY FOR
 24 BEHAVIORAL HEALTH TREATMENT AND DIVERSION PROGRAMS RELATED TO THE
 25 CRIMINAL JUSTICE SYSTEM;

26 ~~(1)~~ (2) LEAD THE DEVELOPMENT OF A STRATEGIC PLAN TO
 27 ~~ENHANCE COMMUNITY HEALTH AND PUBLIC SAFETY~~ INCREASE TREATMENT AND
 28 REDUCE THE DETENTION OF INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS
 29 INVOLVED IN THE CRIMINAL JUSTICE SYSTEM;

30 ~~(2)~~ (3) PROVIDE TECHNICAL ASSISTANCE TO LOCAL
 31 GOVERNMENTS FOR DEVELOPING EFFECTIVE BEHAVIORAL HEALTH ~~AND~~

~~COMMUNITY HEALTH SYSTEMS OF CARE~~ SYSTEMS OF CARE THAT PREVENT AND MINIMIZE INVOLVEMENT WITH THE CRIMINAL JUSTICE SYSTEM FOR INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS;

~~(3) (4) FACILITATE THE DEVELOPMENT OF LOCAL AND REGIONAL SEQUENTIAL INTERCEPT MODELS~~ LOCAL OR REGIONAL PLANNING WORKSHOPS USING THE SEQUENTIAL INTERCEPT MODEL;

~~(4) (5) COORDINATE WITH THE DEPARTMENT AND THE BEHAVIORAL HEALTH ADMINISTRATION TO IMPLEMENT AND TRACK THE PROGRESS OF CREATING AN EFFECTIVE BEHAVIORAL HEALTH AND COMMUNITY HEALTH SYSTEM OF CARE IN THE STATE~~ RELATING TO INDIVIDUALS INVOLVED IN THE CRIMINAL JUSTICE SYSTEM; AND

~~(5) (6) SEEK AND DISBURSE~~ IDENTIFY AND INFORM ANY RELEVANT STAKEHOLDERS OF ANY FEDERAL FUNDING AVAILABLE TO THE CENTER TO CARRY OUT THE MISSION OF THE CENTER, INCLUDING THROUGH THE PROVISION OF GRANTS, SCHOLARSHIPS, AND OTHER FUNDING TO RECIPIENTS ENGAGED IN TRAINING, THE PROVISION OF SERVICES, OR THE STUDY OF MATTERS RELATING TO COMMUNITY HEALTH AND BEHAVIORAL HEALTH, PUBLIC SAFETY, AND CRIMINAL JUSTICE.

(C) IN CARRYING OUT ITS DUTIES, THE CENTER SHALL CONTINUOUSLY MONITOR AND ANALYZE ITS MODELS, PLANS, POLICIES, STRATEGIES, PROGRAMS, TECHNICAL ASSISTANCE, AND TRAINING FOR THEIR VALIDITY AND FOR OPPORTUNITIES TO REDUCE AND ELIMINATE DISPARITIES IN THE CRIMINALIZATION OF RACIAL MINORITIES WITH BEHAVIORAL HEALTH DISORDERS AND INCREASE ACCESS TO CULTURALLY COMPETENT CARE.

(D) (1) THE GOVERNOR'S OFFICE OF CRIME PREVENTION, YOUTH, AND VICTIM SERVICES SHALL APPOINT THE FOLLOWING INDIVIDUALS TO JOINTLY OVERSEE THE CENTER:

(I) A CRISIS INTERVENTION LAW ENFORCEMENT COORDINATOR;

(II) A MENTAL HEALTH COORDINATOR; AND

(III) ANY OTHER INDIVIDUALS DETERMINED NECESSARY BY THE OFFICE.

(2) THE INDIVIDUALS APPOINTED UNDER PARAGRAPH (1) OF THIS SUBSECTION MAY BE ASSOCIATED WITH THE CRISIS INTERVENTION TEAM CENTER

1 OF EXCELLENCE WITHIN THE GOVERNOR'S OFFICE OF CRIME PREVENTION,
2 YOUTH, AND VICTIM SERVICES.

3 (E) THE CENTER MAY DESIGNATE POINTS OF CONTACT THROUGHOUT THE
4 STATE WHO SPECIALIZE IN BEHAVIORAL HEALTH TREATMENT WITHIN THE
5 CRIMINAL JUSTICE SYSTEM TO BRIEF THE CENTER ON THE PROGRESS OF
6 STATEWIDE IMPLEMENTATION OF DIVERSION PROGRAMS.

7 (F) THE CENTER MAY COORDINATE WITH THE JUSTICE REINVESTMENT
8 OVERSIGHT BOARD AND OTHER STATE ENTITIES WORKING TO REDUCE STATE AND
9 LOCAL DETENTION FACILITY POPULATIONS AND RECIDIVISM.

10 ~~(E)~~ (G) THE CENTER MAY ENTER INTO CONTRACTS WITH THE
11 UNIVERSITY OF MARYLAND SYSTEM, MARYLAND HBCUS, OR OTHER ENTITIES OR
12 ORGANIZATIONS FOR THE PURPOSES OF CARRYING OUT ITS MISSION.

13 (H) THE OPERATION OF THE CENTER IS SUBJECT TO THE LIMITATIONS OF
14 THE STATE BUDGET.

15 13-4203.

16 (A) THE ACTIVITIES OF THE CENTER SHALL INCLUDE:

17 (1) STRATEGIC PLANNING;

18 (2) TECHNICAL ASSISTANCE; ~~AND~~

19 (3) STATE AND LOCAL GOVERNMENT COORDINATION; AND

20 (4) FACILITATING THE PROVISION OF TRAIN-THE-TRAINER
21 COURSES FOR THE SEQUENTIAL INTERCEPT MODEL FOR COMPLETION IN 2021 IN
22 PARTNERSHIP WITH THE FEDERAL SUBSTANCE ABUSE AND MENTAL HEALTH
23 SERVICES ADMINISTRATION, WITH THE GOAL OF TRAINING 50 INDIVIDUALS IN THE
24 STATE AS FACILITATORS.

25 (B) THE CENTER SHALL PROVIDE TECHNICAL ASSISTANCE TO LOCAL
26 GOVERNMENTS FOR THE PURPOSES OF:

27 (1) SHARING BEST PRACTICES ACROSS JURISDICTIONS;

28 (2) APPLYING FOR GRANTS TO SUPPORT WORK RELATED TO
29 BEHAVIORAL HEALTH, PUBLIC SAFETY, OR CRIMINAL ~~AND~~ JUSTICE;

1 (3) FACILITATING THE DISTRIBUTION OF RESOURCES, TECHNICAL
 2 ASSISTANCE, AND TRAINING IN BEST PRACTICES RELATED TO ~~PROGRAMS ALONG~~
 3 ~~ALL INTERCEPTS OF THE COMMUNITY HEALTH AND PUBLIC SAFETY SYSTEM;~~
 4 BEHAVIORAL HEALTH, PUBLIC SAFETY, OR CRIMINAL JUSTICE; AND

5 ~~(4) FACILITATING PROVISION OF TRAIN THE TRAINER COURSES~~
 6 ~~FOR THE SEQUENTIAL INTERCEPT MODEL FOR COMPLETION IN 2021 IN~~
 7 ~~PARTNERSHIP WITH THE FEDERAL SUBSTANCE ABUSE AND MENTAL HEALTH~~
 8 ~~SERVICES ADMINISTRATION, WITH THE GOAL OF TRAINING 50 INDIVIDUALS ACROSS~~
 9 ~~THE STATE AS FACILITATORS; AND~~

10 ~~(5) (4) FACILITATING SUBSEQUENT LOCAL AND REGIONAL~~
 11 ~~SEQUENTIAL INTERCEPT MODEL SUMMITS~~ SEQUENTIAL INTERCEPT MODEL
 12 SUMMITS.

13 (C) THE CENTER SHALL DEVELOP THE FOLLOWING:

14 (1) A STATEWIDE MODEL FOR LAW ENFORCEMENT-ASSISTED
 15 DIVERSION;

16 (2) RECOMMENDATIONS FOR PRETRIAL SERVICES;

17 (3) PROCEDURES FOR SHARING DEFLECTION AND DIVERSION
 18 STATISTICS BETWEEN RELEVANT STATE AGENCIES;

19 (4) RECOMMENDATIONS FOR STATEWIDE IMPLEMENTATION OF LAW
 20 ENFORCEMENT-ASSISTED DIVERSION PROGRAMS; AND

21 (5) A STATEWIDE MODEL FOR COMMUNITY CRISIS INTERVENTION
 22 SERVICES OTHER THAN LAW ENFORCEMENT.

23 ~~(C) (D)~~ (1) THE CENTER SHALL HOST ONE STATE ~~SEQUENTIAL~~
 24 ~~INTERCEPT MODEL SUMMIT EVERY 2 YEARS~~ SEQUENTIAL INTERCEPT MODEL
 25 SUMMIT EACH YEAR FOR THE PURPOSE OF SHARING BEST PRACTICES ACROSS
 26 JURISDICTIONS AND TRACKING THE PROGRESSION OF MARYLAND'S COMMUNITY
 27 HEALTH AND PUBLIC SAFETY SYSTEM.

28 (2) IT IS THE INTENT OF THE GENERAL ASSEMBLY THAT THE CENTER
 29 APPLY TO THE FEDERAL SUBSTANCE ABUSE AND MENTAL HEALTH SERVICES
 30 ADMINISTRATION FOR GRANT FUNDING TO HOLD SUBSEQUENT STATE SEQUENTIAL
 31 INTERCEPT MODEL SUMMITS ANNUALLY.

32 ~~(D) (E)~~ (E) THE CENTER SHALL SUPPORT COUNTY OR REGIONAL
 33 ~~SEQUENTIAL INTERCEPT MODEL~~ SEQUENTIAL INTERCEPT MODEL MAPPING

1 WORKSHOPS AND SUMMARIZE RESULTS IN REPORTS THAT INFORM CROSS-AGENCY
2 PLANNING AND PROGRAM DEVELOPMENT.

3 ~~(E)~~ (F) THE CENTER SHALL IMPLEMENT SYSTEMS AND POLICIES THAT
4 ESTABLISH A REGIONAL APPROACH TO COMMUNITY HEALTH AND PUBLIC SAFETY,
5 INCLUDING BY:

6 (1) FACILITATING MULTIJURISDICTIONAL APPLICATIONS FOR
7 FEDERAL BEHAVIORAL HEALTH AND CRIMINAL JUSTICE GRANTS;

8 (2) COORDINATING AND CONNECTING SIMILAR PROGRAMS ACROSS
9 MULTIPLE JURISDICTIONS; AND

10 (3) ASSISTING LOCALITIES IN BROADENING AND FORMALIZING
11 COUNTY-LEVEL COLLABORATION IN ~~COMMUNITY HEALTH AND PUBLIC SAFETY~~
12 BEHAVIORAL HEALTH, PUBLIC SAFETY, AND CRIMINAL JUSTICE.

13 13-4204.

14 (A) ON OR BEFORE DECEMBER 1 EACH YEAR, BEGINNING IN ~~2021~~ 2022, THE
15 CENTER SHALL PRODUCE AND UPDATE A MULTIYEAR STRATEGIC PLAN TO
16 IMPLEMENT THE RECOMMENDATIONS OF THE REPORT OF THE ~~NOVEMBER 2020~~
17 ~~STATE SUMMIT ON MENTAL HEALTH AND CRIMINAL JUSTICE~~ ANNUAL STATE
18 SEQUENTIAL INTERCEPT MODEL SUMMIT.

19 (B) THE STRATEGIC PLAN SHALL INCLUDE:

20 ~~(1) A STATEWIDE PRE-CRISIS TO RECOVERY SERVICE DELIVERY~~
21 ~~MODEL AND INFRASTRUCTURE;~~

22 ~~(2)~~ (1) A PLAN FOR FORMAL, CONSISTENT, APPROPRIATE, AND
23 COORDINATED BEHAVIORAL HEALTH SCREENING PROCESSES THAT ARE PROPERLY
24 APPLIED AT JAIL BOOKING, INCLUDING EXPANDED BEHAVIORAL HEALTH
25 SCREENING FOR VETERANS;

26 (2) RECOMMENDATIONS FOR THE COORDINATION OF BEHAVIORAL
27 HEALTH AND CRIMINAL JUSTICE INITIATIVES WITH RELATED STATE HEALTH
28 INITIATIVES;

29 (3) RECOMMENDATIONS FOR INVESTMENT IN PREVENTIVE SERVICES
30 SYSTEMS INCLUDING:

31 (i) ASSERTIVE COMMUNITY TREATMENT;

~~(H) EXPANDED HOUSING OPTIONS FOR JUSTICE INVOLVED PERSONS; AND~~

~~(HH) AN INCREASE IN ACCESS TO TRANSPORTATION; AND~~

(II) CRISIS RESPONSE SERVICES;

(III) HARM REDUCTION STRATEGIES; AND

(IV) OTHER PREVENTIVE SERVICES FOR INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS;

(4) AN EXPANSION OF THE USE OF TECHNOLOGY AND DATA ANALYSIS ACROSS ALL INTERCEPTS OF THE COMMUNITY HEALTH AND PUBLIC SAFETY SYSTEM. THE BEHAVIORAL HEALTH, PUBLIC SAFETY, AND CRIMINAL JUSTICE SYSTEMS IN ACCORDANCE WITH THE PURPOSES OF THE CENTER;

(5) A PLAN FOR EXPANDING THE USE OF PEER SUPPORT SERVICES ACROSS INTERCEPTS; AND

(6) A RACIAL IMPACT ANALYSIS.

(C) IN DEVELOPING THE STRATEGIC PLAN, THE CENTER SHALL CONSIDER:

(1) OPPORTUNITIES FOR THE PROVISION OF PRE-CRISIS-TO-RECOVERY SERVICES TO INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS WHO ARE INVOLVED IN THE CRIMINAL JUSTICE SYSTEM;

(2) THE AVAILABILITY OF HOUSING OPTIONS FOR INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS WHO ARE INVOLVED WITH THE CRIMINAL JUSTICE SYSTEM; AND

(3) THE AVAILABILITY OF TRANSPORTATION FOR INDIVIDUALS WITH BEHAVIORAL HEALTH DISORDERS WHO ARE INVOLVED WITH THE CRIMINAL JUSTICE SYSTEM.

13-4205.

(A) EACH LOCAL JURISDICTION IN THE STATE SHALL DEVELOP A 2-YEAR COMMUNITY HEALTH AND PUBLIC SAFETY PLAN IN COLLABORATION WITH:

(1) THE CENTER;

(2) THE LOCAL HEALTH DEPARTMENT;

1 (3) THE LOCAL DEPARTMENT OF HUMAN SERVICES;

2 (4) BEHAVIORAL HEALTH COORDINATORS FOR THE LOCAL SCHOOL
3 SYSTEM; ~~AND~~

4 (5) THE LOCAL HEALTH IMPROVEMENT COUNCIL;

5 (6) COMMUNITY-BASED BEHAVIORAL HEALTH PROVIDERS;

6 (7) A REPRESENTATIVE OF THE NAACP;

7 (8) A REPRESENTATIVE OF PUBLIC DEFENDERS; AND

8 ~~(5)~~ (9) OTHER KEY STAKEHOLDERS.

9 (B) THE PLAN SHALL INCLUDE:

10 ~~(1) A CRISIS RESPONSE SYSTEM;~~

11 ~~(2) A COMMUNITY HEALTH SYSTEM; AND~~

12 (1) AN ASSESSMENT OF THE CAPACITY OF THE LOCAL BEHAVIORAL
13 SYSTEM;

14 (2) RECOMMENDATIONS FOR THE ENHANCEMENT OF THE LOCAL
15 CRISIS RESPONSE SYSTEM;

16 (3) RECOMMENDATIONS FOR THE ENHANCEMENT OF THE LOCAL
17 BEHAVIORAL HEALTH CARE SYSTEM, INCLUDING CULTURALLY COMPETENT CARE;

18 ~~(3)~~ (4) AN ANALYSIS OF AVAILABLE FEDERAL GRANT FUNDS
19 AVAILABLE TO THE COUNTY OR JURISDICTION; AND

20 (5) A RACIAL IMPACT ANALYSIS.

21 (C) A LOCAL JURISDICTION ~~MAY~~ IS ENCOURAGED TO USE AN EXISTING
22 LOCAL PLANNING AND COORDINATING COMMITTEE OR LOCAL MANAGEMENT BOARD
23 TO SATISFY THE REQUIREMENTS OF THIS SECTION.

24 13-4206.

25 ~~TO THE EXTENT PRACTICABLE, THE CENTER SHALL PRIORITIZE THE~~
26 ~~DISBURSEMENT OF ANY FEDERAL FUNDS RECEIVED BY THE CENTER FOR;~~

1 IT IS THE INTENT OF THE GENERAL ASSEMBLY THAT THE CENTER, TO THE
 2 EXTENT PRACTICABLE, IDENTIFY OPPORTUNITIES TO FUND:

3 (1) BEHAVIORAL HEALTH CRISIS GRANTS;

4 (2) TRAINING FOR 9-1-1 OPERATORS;

5 (3) PEER SUPPORT SERVICES;

6 (4) BEHAVIORAL HEALTH SCREENINGS; ~~AND~~

7 (5) SCHOLARSHIPS FOR STUDENTS WHO ATTEND A MARYLAND
 8 HBCU TO STUDY BEHAVIORAL HEALTH-, PUBLIC SAFETY-, OR CRIMINAL
 9 JUSTICE-RELATED ISSUES; AND

10 (6) BEHAVIORAL HEALTH INITIATIVES IN RURAL COMMUNITIES.

11 SECTION 2. AND BE IT FURTHER ENACTED, That this Act shall take effect ~~June~~
 12 July 1, 2021.

Approved:

Governor.

Speaker of the House of Delegates.

President of the Senate.