

OPENING STATEMENT

Good Morning Mr. Chairman and Members of the Committee. My name is Ric Bradshaw, I am the Sheriff of Palm Beach County Florida, and have been for 15 years. Prior to that I was the Police Chief in West Palm Beach, Florida for thirty three (33) years. I appreciate the opportunity to be here this morning to speak with you about what I believe is one of the most important issues that face law enforcement today, and that is the high level of violence that exists in this Country resulting in loss of human lives. This violence maybe Domestic Violence, Street Violence, or Active Shooters/Mass Casualty incidents most of which involve firearms, having said that it is not my intention to debate gun control. Recent studies indicate Domestic Violence and Street Violence incidents are more often the result of an impulsive or reactive situation. The active shooter/mass casualty incidents appear to be predatory and planned, where the violence is premeditated and serves some purpose for those who plan and conduct the attacks. Another aspect that was identified is that the perpetrator at some point displayed pre attack behaviors or shared information that gave clues to others of about impending violence. It is incumbent upon Law Enforcement to continue to connect with the community and provide avenues for them to communicate information and concerns to their respective Agency so then that information will be acted upon. Finally there is a relationship between mental illness and targeted violence, it is complex and by no means absolute. To be clear All Mentally Ill people are not violent and do not commit violent acts. Research has shown that those involved in these acts do have and have demonstrated mental illness issues. Behaviors can be clues to a person's intentions and are the foundation of any mental health diagnosis. Law Enforcement must carefully consider each case individually assessing the impact that mental illness may have on the person involved and taking the appropriate action. Law Enforcement must educate and train its personnel in mental health issues, and employ mental health professionals to be part of Risk Assessment Teams. Once a person or persons have been identified as a potential risk and may be involved in a violent act, in possession of firearms or likely to purchase one then the use of the Risk Protection Order appears to be a valuable tool. My testimony here today I will be discussing how the Palm Beach County Sheriff's Office has developed a strategy and a Special Unit called the Behavioral Services Unit to address these issues. I think that the most important thing is to realize we cannot arrest our way out of this situation. Prevention and intervention are the key factors to resolving this issue. Having a unit such as the Behavioral Services Unit with the capabilities of using Risk Protection Orders and Mental Health Professionals will reach those goals. Thank you and I look forward to our discussion and your questions.

PROPOSED TESTIMONY:

Behavioral Services Risk and Threat Assessment Division

History of Behavioral Services Risk and Threat Assessment Division

The senseless violence of mass shootings and gun violence against innocent victims has evoked a public outcry and a call for meaningful action from policymakers, law enforcement and community stakeholders for comprehensive measures to prevent these tragedies from occurring in our communities. Most law enforcement agencies are inadequately prepared and trained to assess threats of violence and to make risk assessments beyond a criminal investigation or an involuntary mental health commitment. Historically, mass shooters have experienced unresolved mental health issues, multiple contacts with law enforcement and have expressed potential threats and harm to others. Often this information is relayed to law enforcement by family members, friends, and co-workers. Without a crime being committed, law enforcement is unable to intervene. Additionally, law enforcement lacks the skills and expertise in mental health, risk assessment and the ability for coordination of services via mental health providers, the judiciary and others. Law enforcement can do more, but it calls for a change in strategy.

In 2012, the development of the BSD came during a time when law enforcement was experiencing an increase in officer involved shootings of the mentally ill. I developed the BSD program, because I knew that law enforcement was well-trained for an active shooter, but inadequately trained in the area of prevention and mental health. It was time for law enforcement to become involved with crisis intervention and partner with the mental health community. I developed a program to identify individuals who are likely threats or are “at risk” mentally and pose a threat to the public. The idea was “prevention through intervention” via a law enforcement and mental health program called Behavioral Services. The Palm Beach Sheriff’s Office created the Behavioral Services Risk and Threat Assessment Division (BSD). The program is designed to use specially trained law enforcement investigators and specially trained licensed mental health therapists, working together to assess situations and individuals for risk, and to provide resources to reduce the threat of violence.

The BSD Team

In 2012, the Palm Beach Sheriff’s Office was able to immediately start the program through the reallocation of personnel who currently held qualifications unique for this position. The agency already employed several law enforcement supervisors, who in addition to their traditional law enforcement duties are licensed mental health professionals. Additionally, the agency employed several civilians who are licensed mental health professionals.

As of today, the BSD employs 18 full-time and two part-time employees:

- 5- Full-time law enforcement investigators (2 are Ph.D. licensed therapists)
- 9- Civilian Licensed therapists (1 is a Ph.D., eight are licensed as Social Workers or Mental Health Professionals)
- 2- Case Managers
- 1- Substance Abuse Professional

- 1- Chaplain
- 2- Part-time law enforcement investigators (1 is a Ph.D. licensed therapist)

The cost to operate BSD is over 3 million dollars.

Description of Services

A 24/7 response team is available to immediately address calls from the public as well as from other law enforcement agencies. Utilizing a multidisciplinary team of law enforcement investigators, licensed mental health professionals, and case manager specialists, BSD can immediately assess the risk of the potentially violent individual and can take immediate action to reduce the threat risk. BSD utilizes the most current and up to date strategies and research for identifying risk and threat.

The Therapist

The mental health therapist will respond immediately and assess the crisis state of the individual using specialized professional judgment and risk/threat assessment instruments in the field. The collaborative mental health history from family members, friends, co-workers, and mental health organizations are reviewed. The therapist develops a relationship with the individual, provides crisis intervention services and offers services to the individual. The goal is to reduce the crisis level and to link the individual to appropriate services in the community via established partnerships. The therapists will monitor the individual for a period of time, based upon the risk and success from outside psychological interventions.

The Investigator

The investigator conducts a criminal investigation and will collaborate with the therapist. If a crime was committed, the investigator may make an arrest and may refer the case to the appropriate court such as mental health or Veterans court. The investigator will prepare Risk Protection Orders (RPO) and will seize firearms by court order. Intelligence information is shared with the Fusion Center and other law enforcement counterparts.

Note: PBSO does not believe in criminalizing mental illness. Sometimes an arrest must be made, but great discretion is observed.

Case Management

Each case is monitored for risk and threat potential. Frequent visits, collaborating with service providers, the courts and law enforcement is necessary. Since its inception, BSD has handled over 700 cases and investigations. BSD also monitors an additional 100 cases, after care is essential.

Substance Abuse Professional

Many situations involve alcohol and drugs. The substance abuse professional works directly with the collaborative team and the individual, linking resources and treatment options to reduce future risk.

The Mental Health Community

The BSD established a strong relationship with mental health service providers such as the National Alliance for the Mentally Ill (NAMI), The public and private mental health receiving

facilities, the Veterans Administration, Public and private schools and the State of Florida Mental Health Managing Entity.

Partnerships

The Palm Beach County School Board and the School Board Police, local and tri-county law enforcement, federal partners such as the FBI and the Secret Service, The Criminal Justice Commission and others.

Success Stories

Example 1: A high school student posed on social media holding a shotgun and a book about killing. A direct threat was not made. BSD was notified via a mobile app about the posting. BSD and school board police (SBPD) immediately responded to the school and spoke with the principal. BSD and SBPD interview the student. The student has signs of mental illness (depression, anxiety and is self-harming). The student was placed under the mental health act for protection. The student had explicit, detailed drawings of killing, a comprehensive list of previous mass murders by name, date, kill ratio and weapons used. Family interviews see the student as very dark, suicidal and reclusive. The firearm belonged to her father but was turned over to PBSO. BSD developed a relationship with the child and the family. The child was referred to mental health services. BSD consults with the child's mental health providers and BSD monitors the risk level.

Example 2: An individual with a violent criminal record was living with his elderly parents and exploiting them financially. A PBSO deputy called BSD because he was concerned about the suspect's odd behavior and neighbor complaints of peeping in windows. BSD interviewed the suspect and identified sociopathic behaviors, a hatred of homosexuals and a belief that he must punish homosexuals. He described how he surveils homosexuals and will beat them up. His violent past and his current fixation were of concern. He was arrested for exploitation of the elderly and was placed under a mental health act. The mental health court declared him mentally unfit and sent him to South Florida State Hospital indefinitely.

Example 3: A business called PBSO to report an employee who verbally threatened to kill a co-worker. After the verbal threat, he followed the employee to the parking lot and placed two fingers in the co-workers back simulating a gun. An interview with the management identified "strange" behavior during the recent past. A search of the employee's computer revealed research on firearms. An interview with the employee identified suicidal and homicidal thoughts due to many recent life-stressors. He was placed under the Baker Act. BSD is collaborating with mental health service providers and is monitoring his risk and threat level. Additionally, safety plans are in place with the employer and employee. Criminal charges are pending and may be handled in a mental health court.

Additional Information

Assist other law enforcement activities such as barricaded subjects, consult with patrol and other specialized units about behaviors and outcome.

1. Patrol has received training from the BSD program and to contact BSD about individuals who are of concern by threat or risk. This, in turn, has reduced the number of repeated calls for service and has minimized police contact over time.
2. The decrease of arrests of mentally ill via early interventions. BSD has been able to assist patrol with nuisance calls involving persons who have a mental illness. Many times, BSD can address a crisis and link the individual with services. This has reduced the number of police service calls and complaints.

Increased collaboration and communication sharing between the schools, the public, and mental health service providers. BSD serves as a link between law enforcement and the mental health community. In the past, law enforcement and mental health service providers rarely communicated or shared information. Today, BSD and the mental health service providers work together.

Since July 2018, PBSO requested 16 Risk Protection Orders for dangerous individuals who have threatened to commit mass shootings or who have demonstrated risk-type behaviors combined with an apparent mental illness and access or desire for firearms.

Much funding is allocated for active shooting response, but the need is identification, intervention, and prevention). The cost of one mass shooting far exceeds the cost for prevention and intervention.

Another example of the type of services provided includes the "Internet threat" by a person who will "kill everybody at work" or "is going to shoot someone at school." We receive this information from the public via our hotline, Crime Stoppers, the PBSO Connect Protect App or the Student Protect App., these apps are provided to the public at no cost. The BSD would immediately attempt to identify the individual, respond and meet with the individual, assess the threat potential, access to firearms, plans for harm, past history and need for an arrest. Additionally, BSD would provide appropriate resources based upon the individual's needs. If the individual suffers from a mental health disorder, proper referrals and case management will be provided.

Each case is different; therefore, it is impossible to identify the specific courses of action. Some actions may result in a Baker Act, incarceration, referral to outside resources, identifying access to dangerous weapons such as firearms, education, advocacy, and follow-up.

PBSO intent is not to criminalize mental illness, or to create a mental health law enforcement database, overburdened the mental health system by mandated evaluations or stigmatized persons who are having difficulties in life. The intent is to reduce the potential for violence through intervention, referral, education, and advocacy.

Final Thoughts

In 2018, just after the Marjorie Stoneman Douglas High School shooting, I invited the Police Executive Research Foundation (PERF) to examine PBSO practices and procedures for handling like-type events. PERF identified the BSD as "a model for other agencies."

In 2016, BSD presented the program at the Bureau of Justice Assistance (BJA) conference in Washington, DC. The program was well received by the Justice Department.

2012 Mental Health Funding per capita for Florida \$37.28.
Maine is \$338 per capita, and California is \$169.65 per capita

Florida is still in the bottom 10% for funding for mental health resources.

BJA Grant: (2014): Provided funding for a therapist and case manager and collaborative services with Southeast Florida Behavioral Health Network in the amount of 1.2 million dollars.

BJA Grant (2019): Same as above. Amount is 1.5 million dollars. For therapist, investigators and outside resources. Program is being monitored by FAU who will study the overall effectiveness of the interventions and program.

Expansion of the program to 22 teams is planned and is being presented to the Florida Legislature during the current session.

Sample Costs:

1. Four (4) Licensed Clinical Psychotherapists (includes salary & benefits and equipment costs): \$483,400.00
2. Four (4) Law Enforcement Investigators (includes salary & benefits and equipment costs): \$683,248.00