



MASSACHUSETTS PEACE OFFICER STANDARDS & TRAINING COMMISSION

April 8, 2024

CHAIR

Margaret R. Hinkle

COMMISSIONERS

Lester Baker

Hanya H. Bluestone

Lawrence Calderone

Larry E. Ellison

Deborah Hall

Marsha V. Kazarosian

Charlene D. Luma

Rev. Clyde D. Talley

EXECUTIVE DIRECTOR

Enrique A. Zuniga

In accordance with [Sections 18-25 of Chapter 30A of the Massachusetts General Laws](#), and [Chapter 20 of the Acts of 2021](#), as amended by [Chapter 22 of the Acts of 2022](#), by [Chapter 107 of the Acts of 2022](#), and by [Chapter 2 of the Acts of 2023](#), notice is hereby given of a meeting of the Peace Officer Standards and Training Commission. The meeting will take place as noted below.

**NOTICE OF CERTIFICATION SUBCOMMITTEE
MEETING AND AGENDA
Public Meeting #3
April 11, 2024
10:00 a.m.**

**Remote Participation via [Zoom](#)
Meeting ID: 9297 126 9559**

1. Call to Order
2. Approval of minutes
 - a. February 27, 2024
3. Draft Plan for Recertification
 - a. Proposal to Recertify Academy Graduates
 - b. Criteria for Recertification – General Counsel Ravitz
4. Public comment
5. Matters not anticipated by the Chair at the time of posting
6. Adjourn

2a.

MASSACHUSETTS PEACE OFFICER STANDARDS AND TRAINING COMMISSION
Certification Policy Subcommittee Meeting Minutes
February 27, 2024
10:00 a.m.

By Zoom and in-person at 84 State Street, Suite 200, Boston, MA 02109

Documents Distributed in Advance of Meeting

- Minutes from 2-1-24 Subcommittee Meeting

In Attendance

- Commissioner Lawrence Calderone, Subcommittee Chair (In person)
- Commissioner Hanya H. Bluestone (Virtual at the beginning/In person thereafter)
- Commissioner Marsha V. Kazarosian (Virtual)
- Executive Director Enrique A. Zuniga (In person)
- General Counsel Randall E. Ravitz (In person)
- Director of Certification Steven R. Smith (In person)
- Outside Counsel Lon F. Povich (Virtual)

1. Call to Order

- At 10:01 a.m., Chair Calderone welcomed the public to the Commission's second Subcommittee meeting and called the meeting to order.
- Chair Calderone introduced the members of the Subcommittee: Commissioners Bluestone and Kazarosian, and himself.
- Executive Director Zuniga noted this was the Commission's first virtual and in-person meeting.

2. Approval of February 1, 2024 Minutes

- Chair Calderone asked for a motion to approve the minutes.
- Commissioner Kazarosian moved to approve the minutes.
- Commissioner Bluestone seconded the motion.
- The Commissioners voted as follows:
 - Commissioner Calderone – Yes
 - Commissioner Bluestone – Yes
 - Commissioner Calderone – Yes

3. Presentation from the Municipal Police Training Committee (MPTC)

- Natick Police Chief James Hicks provided remarks on behalf of MPTC, stating that they are happy to be involved with the Subcommittee going forward, working in partnership with POST regarding the certification timeline.

4. Stakeholder Comments

- Executive Director Zuniga stated that the Subcommittee members decided at the 2/1 Subcommittee meeting to include stakeholder/public comments regarding the second-round certification process.
- **Tom Greenhalgh, Executive Director of National Public Safety Solutions** provided

in-person verbal and written testimony.

- He provided an overview of the Mass. State Care Support Network, established in 1999, which has provided free services on a volunteer basis to any uniformed personnel in the state for 25 years.
- Executive Director Zuniga asked if this resource provides referrals and whether peer support takes place after the referral is complete.
- Director Greenhalgh explained that the support is ongoing, and every law enforcement officer has access to the service.
- Executive Director Zuniga asked how the program received funding.
- Director Greenhalgh answered that much of the funding is secured by grants.
- Executive Director Zuniga asked how many police agencies are utilizing the services.
- Director Greenhalgh stated there are currently 10 agencies.
- **Christopher Delmonte, Bridgewater Police Chief and Vice President of the Massachusetts Police Association** provided in-person verbal testimony.
 - Chief Delmonte provided comments regarding the psychological and physical evaluation for veteran officers for recertification and recommended the consideration of an incentive-based approach by encouraging better health initiatives to departments.
 - Commissioner Bluestone stated she is in favor of an incentive-based approach and asked the Chief what the process is if it is determined that an officer is not considered physically fit.
 - Chief Delmonte stated that an officer can be sent to a fit-for-duty examination with the criteria having been articulated carefully, as one cannot judge by an officer's appearance whether the officer is physically unfit.
- **David Clark, Reading Police Chief,** provided in-person verbal testimony highlighting the department's officer wellness programs.
 - Chief Clark stated that the department has a dedicated mental health clinician. If an officer sees the clinician four times, they will receive 2 administrative (mental health) days off. This service is open to civilian dispatchers as well.
 - On the physical-fitness side, Chief Clark stated that they have a gym located within the station that the officers can use when their shifts overlap. The equipment was donated by a non-profit group in the town.
 - Chair Calderone asked who pays for the clinician.
 - Chief Clark answered that it is a town-funded position that falls within the police department.
 - Executive Director Zuniga asked the Chief if he had heard of any other agencies who have similar incentives and a dedicated budget.
 - Chief Clark estimates that there might be around 10-12 agencies.

5. Public comment

- **John Nelson, Vice President, Massachusetts Coalition of Police, and Tim King, in-house counsel for the Coalition,** provided virtual verbal testimony and written

testimony.

- Tim King read testimony summarizing the Coalition’s view on why the recertification process should not include physical fitness standards, psychological evaluations, and oral interviews, for cost and process reasons. They believe that any type of evaluation should be done at a local level as opposed to a POST standardized approach.
 - Chair Calderone asked for clarification on whether the Coalition is in support of peer support.
 - Counsel King answered that they are in support of peer-support efforts, but not the psychological testing, due to cost and management reasons.
 - Commissioner Kazarosian asked whether they would support ongoing physical fitness and psychological testing if money were not an object.
 - Counsel King answered that the testing should be done on a local level, as opposed to on a standardized basis.
 - Commissioner Bluestone asked the Coalition’s view on a wellness initiative being a part of the recertification process, not in terms of an evaluation component, but in terms of a participation-based expectation.
 - Counsel King said the Coalition feels strongly about officers’ wellness and, if it is not a standardized process, they would be open to those ideas.
 - Commissioner Bluestone clarified that she does not see the Commission going in the direction of standardized testing since results would vary in evaluating a new officer vs. a veteran officer, but there remains a question of whether there should be an evaluative or participation-based component.
- Chair Calderone acknowledged the POST Staff who were in attendance, made a motion to adjourn the meeting, and took a roll call vote on the motion. The Subcommittee voted as follows.
 - Commissioner Bluestone – Yes
 - Commissioner Kazarosian – Yes
 - Commissioner Calderone – Yes
 - The motion was unanimously carried, and the meeting was adjourned.

3a.



Massachusetts POST Commission

84 State Street, Suite 200 Boston, MA 02114

To: Certification Subcommittee
From: Division of Certification
Date: April 11, 2024
Subject: Proposals for Recertification of Certain Officers First Certified by POST

SUMMARY

For the reasons stated in the discussion section below, the staff recommends that the Subcommittee on Certification Policy adopt the following approach regarding upcoming expiration of certification for certain officers who were initially certified by POST.

For officers who graduated from an academy between July 1, 2021, and June 30, 2022, continue their recertification using the same recertification process for the veteran officers currently in place. This process started on June 30, 2022 (for officers with last names A-H), continued on June 30, 2023 (for officers I-P) and is scheduled to continue for the group of officers with last names Q-Z by June 30, 2024.

For officers who have been previously recertified by POST for a three-year term, have the subsequent period of certification be extended to three years *plus* their birth date. This mechanism will begin to align officers' certification expiration to their birth month, which will be a more efficient process to manage subsequent recertifications.

DISCUSSION

After July 1, 2024, all law enforcement officers in the Commonwealth will have gone through the certification process with POST at least once. To effectuate the renewal of certifications (recertifications) after this initial three-year period, the Division of Certification is making the following recommendations:

- 1.) Officers who graduated from an academy between July 1, 2021, and June 30, 2022 (the first calendar year of new officer certifications) will be certified in the same manner as the veteran I-P officers in 2023 and Q-Z in 2024.
- 2.) Officers who graduated from an academy after June 30, 2022, and the veteran officers who were grandfathered in as of July 1, 2021, will have their second certification (first renewal) expiration date extended to the month of their birth at least three but no more than four years from the date of issue.
- 3.) Annual in-service training requirements will be evaluated on an annual basis, separate from the three-year certification.

New officers between July 1, 2021, and June 30, 2022. The Certification Subcommittee is currently considering several topics that may ultimately appear on a certification renewal application. This includes whether the oral interview, physical and psychological fitness/wellbeing, and the moral character attestation should be required only at the time of initial certification, or whether these (or a version of them) should be required every three years. The subcommittee will consider potential modifications to this process and the Division of Certification would need time to implement any modifications and communicate it to agencies.

While the Subcommittee is making these determinations, the first wave of officers initially certified by POST will be required to be recertified (certifications renewed) beginning July 1, 2024.

We propose implementation of any new renewal procedures to begin no earlier than July 1, 2025. This would allow sufficient time for the Subcommittee to consider the public comment received to date, discuss potential changes and enhancements and draft or revise regulations as necessary. This date would also allow the Division of Certification to prepare new forms, fine tune processes and communicate and deploy those changes.

For those officers whose certification expires between July 1, 2024 and June 30, 2025, the Division of Certification would use the existing platform (portal) with the questionnaire and in the exact manner that was completed by agencies for the I-P and Q-Z recertifications. This questionnaire would include some information that was already provided by agencies at the time of initial certification (i.e., whether the officer has graduated from high school and completed a police academy, etc.).

Recertifications (renewals) that begin on July 1, 2025. Once the Subcommittee has finalized the renewal process over the next year and a revised questionnaire has been implemented (if so determined), the Division proposes to adjust the timing of certification expirations to the date of birth of the individual officer . Currently, most officers' certifications expire on July 1 (according to their last name). However, the certification of officers who are graduating from an academy expires three years after such graduation. This creates both a mismatch of expiration times and significant workload for both the POST Commission and agencies. The Division of Certification is therefore suggesting that, after the initial three-year certification, an officer's certification expiration should be correlated with the month of their birthday.

For all officers, including future academy graduates after July 1, 2025, the initial certification period would remain at three years. The first renewal/second certificate would be extended over three years (but not more than four years) to expire on the officer's birthday. The process would extend to the birth month, rather than the birthday, to ease tracking requirements in the department. For instance, all officers born in February could have an expiration date of February 1, regardless of the actual date of their birth. The Division of Certification could implement procedures to notify departments monthly of their officers whose certification is expiring within 60 days – whether the expiration is on the 1st or on the actual date of birth – and allow departments to complete the renewal form during that time leading up to the expiration.

As a result of this, an officer whose certification expires July 1, 2025 who has an October birthday would be issued a renewal certification expiring October 2028. An officer whose certification expires July 1, 2025 who has a February birthday would be issued a renewal certificate expiring February 2029, so that no officer is granted a certification of less than three years. All subsequent renewals would be for the standard three years.

Over time, as new graduates are certified at the time of their academy graduation and the July 1, 2021 and veteran officers age out, the certification expiration dates would gradually level out to be distributed throughout the year. Correlating the expiration date with date of birth rather than date of graduation would expedite this change and would be an easier date for agencies, officers and POST to track.

3.) Reviewing in-service compliance separate from certification. The training year for annual in-service training runs from July 1 to June 30. Records of this training are then due to the MPTC no later than September 30. With the veteran recertification cohorts, the Division of Certification has attempted to confirm whether training from the prior training year was completed; however, the September 30 reporting deadline, and the time it takes for the MPTC to implement these updates, resulted in POST issuing certificates that were due on July 1, as late as October. Given these delays and the proposal to distribute expirations more evenly throughout the year, the Division proposes un-coupling annual in-service verification of that year from the three-year certification.

The Division would still look at training compliance for the recent *completed* training years when issuing certifications. By way of example, for an officer with a certification expiring March 2025, the Division would verify compliance with in-service training requirements for TY24 (ending June 30,

2024). An officer who was repeatedly delinquent over the last three years may have conditions attached to their certification or be denied certification, consistent with 555 CMR 9.08(2) and MGL 6E § 3(a)(4). Conversely, the same officer with the certification expiring in March 2025 still has three months to satisfy TY25 requirements; therefore, TY25 would not be a factor in issuing a recertification.

The Division of Certification will instead review the training records for all officers on an annual basis, regardless of an expiration month or year. Every fall, once the MPTC's records are updated, the Division would identify the officers who are not in compliance and reach out to those officers and their departments. At that time, we would issue Administrative Suspensions, Conditional Certifications, or "Not Certified-On Leave" certificates as appropriate, depending on the circumstances.

3b.

Commonwealth of Massachusetts
Peace Officer Standards and Training Commission

MEMORANDUM

TO: Certification Subcommittee Members
FROM: Elizabeth B. Smith, Paralegal
DATE: April 11, 2024
RE: Summary of Jurisdictional Research Regarding Officer Mental and Physical Wellness Standards

I. Executive Summary

Pursuant to M.G.L. c. 6E, §§ 3(a)(28), 4(f)(1)(iv), as adopted through 2020 Mass. Acts Chapter 253, § 30, and 555 CMR 7.06(4), the Massachusetts Peace Officer Standards and Training Commission (“Commission”) shall establish minimum standards for evaluating officer psychological and physical fitness. These standards will ensure officers of the Commonwealth are healthy and able to perform all job duties and will apply to all law enforcement officers as defined in M.G.L. c. 6E, § 1. This memorandum outlines how the Commission can collaborate with agencies and other stakeholders to institute a realistic, fair, and sustainable plan to improve officer wellness. Included in this report are relevant statutory and regulatory provisions, a list of some existing officer wellness resources in Massachusetts, jurisdictional research, a summary of previous subcommittee meetings, recommendations, challenges, and next steps.

II. Purpose/Mission Statement

Research shows a strong correlation between officer wellness and job performance. Throughout their careers, law enforcement officers are potentially exposed to danger and traumatic events. Repeated exposure can negatively impact their mental and physical health. One study of a random sample of officers revealed that although they reported physical health outcomes at rates similar to the general population, they screened positive for elevated rates of posttraumatic stress disorder, common mental disorders, and alcohol misuse.¹ Coupled with the barriers to treatment, officers may not be taking care of their mental and physical health as much as they should. The purpose of creating these standards is not to punish officers, but to support their overall well-being.

Initial research on wellness standards from other jurisdictions was presented to the Commission at the November 16, 2023, meeting. As part of the new cycle of officer recertification, a subcommittee was formed to evaluate the Commission’s current certification policies. The topic of officer psychological and physical wellness has been at the forefront of the subcommittee discussions. Various stakeholders and law enforcement groups have testified before the subcommittee and provided input on the recertification standard requiring the successful

¹ Mumford, Elizabeth A., Taylor, Bruce G., et al., "Law Enforcement Officer Safety and Wellness," Police Quarterly Volume 18, Issue 2 (2014).

completion of a physical and psychological fitness evaluation. The testimonies revealed concern over the confidentiality of psychological examinations and the possibility of punishment or repercussions from seeking mental health treatment. The Commission should consider these concerns as it drafts its new recertification policy.

III. Relevant Statutory and Regulatory Provisions

2020 Mass. Acts Chapter 253, § 108

...

(c) [A special legislative] commission shall evaluate the establishment of a statewide law enforcement officer cadet program in the commonwealth through which all law enforcement agencies, as defined in [M.G.L. c. 6E § 1], may hire law enforcement officers and shall make recommendations to the legislature. The commission shall study the feasibility and benefits of establishing said cadet program, including, but not limited to:

(iv) proposed standards for admission to the statewide cadet program, including, but not limited to, age, education and physical, psychological and mental health....

....

2020 Mass. Acts Chapter 253, § 118

Notwithstanding any general or special law to the contrary, the [Municipal Police Training Committee (“MPTC”)], in consultation with the executive office of public safety and security, shall promulgate regulations requiring law enforcement agencies to participate in critical incident stress management and peer support programs to address police officer mental wellness and suicide prevention as well as critical incident stress and the effect on public safety. The programs shall be created internally within an agency or agencies may collaborate within a regional system. The programs shall include, but shall not be limited to, mental wellness and stress management pre-incident and post-incident education, peer support, availability and referral to professional resources and assistance. The [MPTC] shall ensure that each officer is notified of the program during each 3-year certification cycle under this act.

M.G.L. c. 31, § 61A

The [the personnel administrator of the human resources division within the executive office for administration and finance], with the secretary of public safety and the commissioner of public health shall establish initial health and physical fitness standards which shall be applicable to all police officers and firefighters when they are appointed to permanent, temporary, intermittent, or reserve positions in cities and towns or other governmental units. Such standards shall be established by regulations promulgated by the administrator after consultation with representatives of police and firefighter unions, and the Massachusetts Municipal Association.

M.G.L. c. 31, § 61B

Any city, town, district or other governmental unit which accepts the provisions of this section shall establish a wellness program for police officers and firefighters, if any, employed in such city, town, district, or other governmental unit....

M.G.L. c. 6 § 116

...

The [MPTC] and the division of police certification established in [M.G.L. c. 6E, § 4] shall jointly establish minimum certification standards for all officers, pursuant to [M.G.L. c. 6E, § 4].

...

M.G.L. c. 6E, § 3

(a) The commission shall have all powers necessary or convenient to carry out and effectuate its purposes, including, but not limited to, the power to:

...

(2) establish, jointly with the [MPTC] established in [M.G.L. c. 6, § 116], minimum officer certification standards pursuant to [M.G.L. c. 6E, § 4];

...

(6) establish, in consultation with the [MPTC] established in [M.G.L. c. 6, § 116], minimum agency certification standards pursuant to [M.G.L. c. 6E, § 5];

...

(28) adopt, amend or repeal regulations in accordance with [M.G.L. c. 30A] for the implementation, administration and enforcement of [M.G.L. c 6E], including, but not limited to, regulations:

...

(ii) determining whether an applicant has met the standards for certification; [and]

...

(iv) establishing a physical and psychological fitness evaluation pursuant to [M.G.L. c. 6E, § 4] that measures said fitness to ensure officers are able to perform essential job duties

....

M.G.L. c. 6E, § 4

(a)(1) There shall be within the commission a division of police certification. The purpose of the division of police certification shall be to establish uniform policies and standards for the certification of all law enforcement officers, subject to the approval of the commission. The head of the division shall be the certification director, who shall be appointed by the commission.

...

(f)(1) The division of police certification and the [MPTC] established in [M.G.L. c. 6, § 116] shall jointly establish minimum certification standards for all officers that shall include, but not be limited to:

...

(iv) successful completion of a physical and psychological fitness evaluation approved by the commission

...

[(f)](2) The commission shall not issue a certificate to an applicant who: (i) does not meet the minimum standards enumerated in [M.G.L. c. 6E, § 4(f)(1)] or the regulations of the commission;

(i) Each certified law enforcement officer shall apply for renewal of certification prior to its date of expiration as prescribed by the commission. The commission shall not recertify any person as a law enforcement officer unless the commission certifies that the applicant for recertification continues to satisfy the requirements of subsection (f).

....

555 CMR 7.06(4)

(4) Successful Completion of a Physical and Psychological Fitness Evaluation. This standard shall be deemed satisfied if the officer successfully completed a physical and psychological fitness evaluation that was required for graduation from an academy or training program certified by the MPTC or the training programs prescribed by M.G.L. c. 22C prior to the reference date for the officer. The commission will implement a policy concerning officers who were certified pursuant to St. 2020, c. 253, § 102 but did not successfully complete a physical and psychological fitness evaluation that was required for graduation from an academy or training program certified by the MPTC or the training programs prescribed by M.G.L. c. 22C prior to the applicable reference date.

....

IV. Examples from Other Jurisdictions

Most of the jurisdictional research was completed by the Summer 2023 legal interns Ben Alpert, Jason Lee, and Nick Santiago. They researched the psychological and physical fitness requirements and/or standards of the other forty-nine states. Below is a chart summarizing the interns' findings.

State	Physical Testing	Psych Testing
Alabama	<p>The physical agility component of the test simulates certain specific activities routinely expected of a law enforcement officer or correctional officer, and consists of five events designed to measure minimum levels of endurance, strength, agility, and coordination. This test simulates any number of job-related activities such as the removal of a stalled vehicle, jumping down from porches, climbing stairs, walking along walls, rafters, pipes, or beams while in foot pursuit or while checking buildings for suspects. A period of running is incorporated into each of the events to simulate the apprehension and control of a fleeing suspect.</p>	<p>Each applicant shall submit to a comprehensive psychological evaluation by a Licensed Behavioral Health Professional with experience in conducting Psychological Testing and Evaluations. The Behavioral Health Professional shall have experience working with the law enforcement community. The report of the examining professional shall state whether the applicant is recommended or not recommended for employment/appointment as a law enforcement officer. The examining professional shall complete and submit to the Commission APOST Form Number 3B.</p> <p>An applicant who fails to receive a positive assessment of his or her psychological evaluation is not eligible for employment/appointment for a period of one (1) year- <u>and must first be cleared by the Committee on Character and Psychological Evaluation Review prior to any future appointment as a law enforcement officer.</u> The applicant is not exempt from Rule 650-X-2-.01.</p> <p>Committee on Character and psychological Evaluation Review: any applicant receiving recommendation other than “recommended for employment” shall be reviewed by the Committee. Employing agency must provide documented, supplemental info to Commission to support and validate fitness of applicant. Committee will evaluate the reports and other documents to determine the acceptability of the applicant. If applicant is rejected by the Committee, the Executive Secretary will notify the employing agency that the applicant is ineligible for appointment and the applicant’s provisional appointment as a law enforcement officer is deemed terminated.</p>
Alaska	<p>Initial physical fitness test and later test during final testing phase Public comment: health/fitness/nutrition training for officers</p>	<p>Written psychological test</p> <p>Interview by licensed psychologist Testing completed remotely by computer and interview conducted by secure internet video.</p> <p>There is no definitive pass/fail in psychological exam. Psychologist report states the results of testing and interview with levels of concern, but it is up to the department to weight that against all the other information obtained from polygraph, backgrounds, interviews, etc. The psychologist does not determine pass/fail of an applicant.</p>

<p>Arizona</p>	<p>Medical examination from board-trained physician</p> <p>Comprehensive medical evaluation conducted by physician trained on how to complete AZ POST medical evaluation</p> <p>Physical aptitude test required when applying or basic peace officer course</p> <p>Physical fitness test for those preparing to attend Arizona law enforcement academy</p>	<p>Seems to be folded into medical report</p> <p>Departments must receive documentation of psychological fitness assessment before admitting applicant to academy</p> <p>Results of psychological fitness assessment approved by Director and conducted by a psychologist or psychiatrist designated by Department</p>
<p>Arkansas</p>	<p>Standardized physical training for academy</p>	<p>Psychological examination part of hiring process; does not go into detail on exact process</p>
<p>California</p>	<p>Must be free from any physical condition which might adversely affect the exercise of peace officer powers</p> <p>Physical evaluation must be conducted by a licensed physician and surgeon</p>	<p>Psychological screening requirements est. in Government Code 1031</p> <p>Exams must be completed by psychologist licensed by CA board of psychology who has at least the equivalent of 5 full-time years of experience in diagnosis and treatment of emotional and mental disorders, including the equivalent of three full-time years accrued post doctorate</p> <p>Psychological screening manual provided by POST Commission</p>
<p>Colorado</p>	<p>Vary between departments</p> <p>Physical exams must be completed prior to appointment</p>	<p>Psychological exams must be done prior to date of appointment</p>
<p>Connecticut</p>	<p>Physical fitness assessment for new recruits. After initial assessment, recruits expected to improve fitness level in progressive manner through participation in recruit physical fitness wellness program (additional 3 physical assessments throughout training)</p> <p>Retesting not permitted</p>	<p>Mental wellness checks every 5 years</p> <p>Chief executive officer or chief of police ensure sworn officers participate in mental health check (recommended 20% of personnel each year)</p>
<p>Delaware</p>	<p>Licensed physician shall examine applicant at expense of employing agency Each department may establish higher standards based on the physical demands placed on officers within their respective jurisdiction.</p> <p>Academy recruits must meet minimum physical ability standards.</p>	<p>Complete psychiatric/psychological test to show competency to perform law enforcement duties Applicant required to be examined in person and receive endorsement by licensed psychologist/psychiatrist to determine that mental and emotional stability is suitable to perform law enforcement duties</p>

Florida	Physical examination by licensed physician, physician assistant or certified APRN	None
Georgia	<p>Examination by licensed physician or surgeon</p> <p>Physical agility test required for all academy candidates prior to admission</p> <p>Unless your peace officer certification is suspended or revoked by Council, your certification is valid indefinitely</p> <p>Previous requirements to be re-certified every 4 years ended January 1, 2022, by GA POST Council Vote</p>	<p>Ga. Comp. R. & Regs. R. 464-3-.14</p> <p>When initially accepted for employment or appointment as LEO, any candidate seeking certification shall:</p> <ol style="list-style-type: none"> (1) be found, after examination by a licensed psychiatrist, or psychologist to be free from any emotional, or mental conditions which might adversely affect his/her exercising powers or duties of a peace officer (2) each agency must submit an affidavit acknowledging that a psychological evaluation to determine suitability as a LEO was conducted on each application for certification, on forms approved by Council; or (3) Each academy director must submit an affidavit acknowledging that a psychological evaluation to determine suitability as a law enforcement officer was conducted on each pre-service applicant for certification, on forms approved by Council. <p>Stone, McElroy & Associates (SMA): Private psychological risk management firm in GA providing psychological services to police and public safety agencies throughout the U.S. SMA brings broad and in-depth experience within field of public safety psychological evaluations...</p>
Hawaii	Physical agility test to academy	None
Idaho	Physical Readiness Test required by some academies	<p>Mental readiness assessment – seems to be as needed</p> <p>“where there is a question as to whether the applicant may be subject to a mental or emotional disorder that calls his suitability for the law enforcement profession into question, the employing agency shall have a psychiatrist or clinical psychologist conduct thorough evaluation</p>
Illinois	<p>New physical fitness standards for 2023</p> <p>Have advisory special advisory group exploring issues related to physical fitness</p>	Public Act 101-652 requires Board to establish statewide standards for minimum standards re: mental health screening for probationary and permanent police officers, ensuring that

	(POWER) test. Group expected to conduct research, consult with experts, gather stakeholder input, and prepare recommendations for changes.	<p>counseling sessions and screenings remain confidential</p> <p>Focus on resiliency of officers</p> <p>Begin screening process with recruits and monitor as go through training Screen officers at least once annually</p> <p>Critical incident stress management counselors or counseling options should be made available to officers</p> <p>Agencies should consider partnering with a third-party to conduct screenings; Agencies should consider partnering with third-party vendor to provide follow-up on trends</p>
Indiana	Law enforcement academy entrance and exit standards	Requirements seem to vary by department
Iowa	Iowa Law Enforcement Academy Council established physical test as pre-employment standard	<p>Iowa Law Enforcement Academy conducts POST cognitive testing and MMPI testing and evaluations for sworn peace officers, civilian jailers, communication specialists, and reserve police officers.</p> <p>Testing can be conducted at ILEA or local agency (when requested)</p> <p>ILEA can make referrals and provide list of mental health professionals who are experienced in working with law enforcement officers in handling problems both on and off-duty. Clinicians can perform fitness for duty assessments and critical incident stress debriefing.</p>
Kentucky	<p>KRS 15.382 (legislation enacted by 1998 Kentucky General Assembly) – Kentucky Law Enforcement Council and Kentucky Department of Criminal Justice Training, established physical training standards for pre-selection screening of peace officer applicants</p> <p>Two doctors completed study in 2009 for current physical agility test. New approach employs an “overall” scoring</p>	In Medical Exam Form, question for examiner: “are there any conditions, physical, emotional or mental which, in your opinion, suggest further examination prior to employment?”

	scheme which allows a lower score on one test item to be compensated by a higher score on another test item.	
Louisiana	None	None
Maine	Physical fitness test for basic law enforcement training program	Applicants responsible for any fees incurred Psych evaluation conducted by licensed psychologist or licensed psychological examiner
Maryland	Effective July 2022 all certified police officers in Maryland must submit to physical agility assessment determined by POST. Physical agility assessment required for initial certification. Officer required to submit to annual physical agility assessment to establish continuing physical fitness.	Psychological eval by mental health professional Lists mental health requirements: Director Kelly Brauning noted that Maryland has recently passed laws in this area but has not yet put in place actual regulations. Before an applicant may be selected for a position as a police officer, a mental health professional shall conduct a psychological evaluation of the applicant and offer a positive recommendation indicating that the applicant is: (a) Emotionally and mentally fit; and (b) Able to perform the duties of a police officer as these duties are determined by the law enforcement agency
Michigan	Physical fitness test Cost no more than \$55 Results reported as P/F Requirements established according to age and gender	Doesn't seem compulsory
Minnesota	Medical screening and physical fitness test Physical fitness test required for entrance into training academy	Pre-employment psych exam to determine candidate is not danger to self or others
Mississippi	None	None
Missouri	None	SB 551 passed 3/30/21 Act establishes "critical incident stress management program." Provide services to officers to assist in coping with stress and potential psychological trauma. All officers shall meet with program service provider once every 3-5 years Public safety fund with state treasury to provide services to officers for coping with stress and psychological trauma
Montana	Physical abilities test	"job suitability testing" complete two personality profiles related to general cognitive abilities and job suitability

Nebraska	Exam paid for by Nebraska State Patrol	Psychological post conditional offer evaluation Written psychological examinations and psychological interview at NSP headquarters
Nevada	A participant who fails a single event, fails the PPFT in its entirety and must retest on all events. “POST Readiness Standards” ensure State of Nevada provides for development and maintenance of a fit and capable work force. State physical fitness examination for different categories of peace officers. Categories vary based on duties (like criminal investigations, enforcement of traffic laws, or other specialized areas of law enforcement).	NV AB 336 Adopt regulations establishing standards for an annual behavioral wellness visit for peace officers
New Hampshire	Physical fitness test based on Cooper Aerobics Institute Must pass medical and physical fitness test every year throughout career to maintain certification	Hiring authority may assess a testing fee to cover all or part of the cost of any medical or psychological examination in cases where the person has been given a conditional offer of employment. A hiring authority may also make repayment of a testing fee part of any training or hiring contract that establishes a minimum term of employment for such an officer Police psychological stability screening fund: reimbursing costs related to psychological stability screening for candidates for certification as law enforcement officers
New Jersey	Physical ability test not required for license renewal	Departments required to psychologically test candidates after initial academy training and every 5 years after
New Mexico	Medical examination Physical fitness verification (entrance and exit standards)	Mental examination certification Applicant prepare and submit form prescribed by director entitled “psychological statement of applicant” Oral interview and at least one professionally recognized clinical test developed by psychiatrist or licensed psychologist
New York	Medical exam by licensed physician	Psychological tests and individual face to face interview Interview may be conducted virtually over secure HIPAA-compliant platform set forth by state licensing entities

North Carolina	Initial certification requirement: Screened by licensed physician or surgeon to meet physical requirement	Initial certification requirement: Have been administered a psychological screening examination by a clinical psychologist or psychiatrist licensed to practice in North Carolina or by a clinical psychologist or psychiatrist authorized to practice in accordance with the rules and regulations of the United States Armed Forces within one year prior to employment by the employing agency to determine the officer's mental and emotional suitability to properly fulfill the responsibilities of the position.
North Dakota	Physical fitness test in academy	Psychological evaluation approved by Board required to obtain POST license List of POST approved psychological providers on website
Ohio	Education of officers and executive-level staff on issues of physical health, including importance of nutrition	Establish agency wellness standard Access to mental and physical support to officers and families: <ul style="list-style-type: none"> • Employee Assistance Program (EAP) • External clinicians and wellness staff • Peer support teams • Awareness of organization factors that can impact officer's mental and physical health
Oklahoma	Physical fitness test prior to admission to basic law enforcement academy Participants allowed 4 opportunities to pass test	Application to basic academy: Psychological Testing Affidavit. Original must be submitted. Psychological examination and evaluation must have been performed within the last year.
Oregon	Physical fitness test	ORS 181A.485: agency may not employ a person as a law enforcement officer unless person has completed a psychological screening to determine fitness to serve as a law enforcement officer. Board shall establish: <ol style="list-style-type: none"> (1) Qualifications and training necessary for a licensed mental health professional to conduct a psychological screening under this section (2) Standards and procedures for conducting a psychological screening
Pennsylvania	Physical fitness test for entrance into academy	Psychological examination for applicants to training academy Psych testing is only required where an officer requests an evaluation, where a Chief of Police

		refers an officer, or when an officer uses lethal force Post-traumatic stress evaluation form
Rhode Island	Police training academy physical fitness assessment	State police: written psychological examination and follow-up interview by licensed psychologist. Requirements seem to vary by department
South Carolina	Physical ability test Must wait 30 calendar days to retake physical test	Psychological evaluations and screenings for basic law enforcement class 1 candidates Hiring agency sponsoring candidate responsible for having evaluation administered during pre-employment phase of hiring process
South Dakota	Varies by department Administrative Rule 55:10:04 Law enforcement appointing authority may establish additional requirements for all persons seeking appointment. The appointing authority may specify standards for the following: Weight or body composition Flexibility Physical fitness Fitness requirements to get into academy. Pre and post physical fitness test	Administrative Rule 55:10:04 A law enforcement appointing authority may establish standards for appointment relating to... psychological testing. The applicant shall pay for any examination required to determine if the applicant meets any such standards.
Tennessee	Physical exam by licensed physician Officer certification expires after separation of full-time employment from a new enforcement agency. A new application for certification is required for each new employment as a law enforcement officer.	Required for new applicants, after 6 month break in full-time law enforcement service, or upon request of agency for good cause. Tennessee Code Annotated, Section 38-8-106 and/or Section 8-8-102 , applicants for police certification must have been certified by a Tennessee licensed health care provider qualified in the psychiatric or psychological field as being free from any impairment, as set form in the current edition of the DSM V.
Texas	Physical ability tests vary by department, but seem required; Physical fitness test for new academy recruits There does not seem to be expiry date for licensure.	Psychological examination selected by appointing agency/academy. Examiner must be licensed by Texas State Board of Examiners of Psychologists or Texas Medical Board. Examiner must be familiar with duties appropriate to type of license sought.

	Fitness and wellness menu on DPS site with workouts, nutrition information, and wellness tips	Exam must be conducted pursuant to professionally recognized standards and methods.
Utah	Exit physical fitness requirements	Seems to vary by department Required by Salt Lake City PD SLCPD has note that says psych exam not designated to measure mental health
Virginia	Entry level physical exam requirements Medical examination by medical personnel submitted prior to training at criminal justice academy	None
Vermont	Performed by licensed physician or P.A. Meet physical training requirements to gain entrance into academy Link to Texas DPS website for fitness calculator and workout videos	Each candidate's prospective department must have submitted to Council documentation that candidate has been psychologically evaluated through use of reliable and valid assessment procedure and written certification MMPI (psychological inventory)
Washington	Physical ability test required in academy	Psychological examination administered by psychiatrist licensed in state of Washington Examiner trained and experienced in psychological testing, test interpretation, psychological examination techniques, administration of psychological exams specific to law enforcement or corrections agencies Examiner shall be trained and knowledgeable in issues of PTSD, discrimination, implicit bias, police-community relations Employing agency may require that each person who is required to take psychological examination and a polygraph or similar test pay a portion of the testing fee based on the actual cost of the test or \$400, whichever is less Resources on website for House Bill 2926 to expand critical incident stress management (CISM) program and resource access
West Virginia	Pre-employment agility screening (pass/fail) screening into basic entry level training program Medical examination by licensed physician or licensed medical	WV Code § 30-29-14. Minimum standards for hiring of pre-certified law-enforcement officers Submitted to psychological assessment and recommended for hire as result

	<p>employment testing company chosen by and at expense of employing agency</p> <p>Medical examination shall consist of criteria aimed at identifying conditions that may potentially exclude an applicant from entry into a basic entry-level training program</p> <p>Physical ability (pass/fail) screening for admissions into entry-level training program</p>	
Wisconsin	Handbook on website to provide physical testing standards for entry into academy	None
Wyoming	<p>Physical fitness entrance exam</p> <p>Entrance exam is \$35.00 cash only</p> <p>Students must pass assessment into basic training</p>	<p>Psychological evaluation required for admittance to pre-service academy</p> <p>First responder mental health resources on website</p> <p>\$400 app fee, \$4,600 basic peace officer training course</p>

Table 1
State Mandates for Psychological Screening of Police Candidates
(N = 50)

Status	States
Required (n = 33)	AR, AZ, CA, CO, CT, DE, GA, IA, KS, KY, MA, MD, ME, MI, MN, MS, MT, NC, ND, NH, NM, NV, NY, OK, OR, PA, RI, SC, TN, TX, UT, WA, WY
Conditionally required (n = 4)	AK, AL, ID, NE
Not required (n = 13)	FL, HI, IL, IN, LA, MO, NJ, OH, SD, UT, VA, WV, WI ²

<https://doi.org/10.1037/pro0000487>

Of the 50 U.S. states, 37 mandate psychological evaluations of prospective police officers. Of these 37 states, 33 require evaluations of all candidates as a condition of certification or entry to a state-certified police academy. Another four states require the evaluation conditionally, specifically: (a) when a candidate has been convicted of a misdemeanor involving force, violence, moral turpitude, perjury, or false statements, in which case results of psychological testing shall also be considered as a factor in determining the candidate’s suitability (Alabama);

² Corey, et al., *Statewide Psychological Screening Mandates for Police Candidates in the United States: A review and Comparison to the Standard of Practice*, 160 Table 1 (2023).

(b) when a previous psychiatric or psychological examination has indicated a past or present personality defect or mental problem (Alaska); (c) when a question of emotional stability or disorder is indicated by a physician or the background investigation (Idaho); and (d) when the candidate has not previously worked as a law enforcement officer in the state (Nebraska).

State	Periodic Recertification	Requires Periodic Psych Evaluation	Requires Periodic Physical Fitness Evaluation
Alabama	No	No	No
Alaska	No	No	No
Arizona	No	No	No
Arkansas	No	No	No
California	No	No	No
Colorado	No	No	No
Connecticut	Every 3 years	Yes	No
Delaware	No	No	No
Florida	No	No	No
Georgia	No	No	No
Hawaii	No	No	No
Idaho	No	No	No
Illinois	No	Yes	No
Indiana	No	No	No
Iowa	No	No	No
Kansas	No	No	No
Kentucky	No	No	No
Louisiana	No	No	No
Maine	No	No	No
Maryland	No	Yes	Yes
Michigan	No	No	No
Minnesota	Every 3 years	No	No
Mississippi	No	No	No
Missouri	No	Yes	No
Montana	No	No	No
Nebraska	No	No	No
Nevada	No	Yes	No
New Hampshire	No	No	Yes

	Every 3 years	Legislation introduced	
New Jersey			No
New Mexico	No	No	No
New York	No	No	No
North Carolina	No	No	No
North Dakota	No	No	No
Ohio	No	No	No
Oklahoma	No	No	No
Oregon	No	No	No
Pennsylvania	No	No	No
Rhode Island	No	No	No
South Carolina	No	No	No
South Dakota	No	No	No
Tennessee	No	No	No
Texas	No	No	Yes
Utah	No	No	No
Vermont	No	No	No
Virginia	No	No	No
Washington	No	No	No
West Virginia	No	No	No
Wisconsin	No	No	No
Wyoming	No	No	No

Few states currently require periodic psychological testing. Under Conn. PA 22-114, each police officer “shall submit to a periodic behavioral health assessment not less than once every five years.”³ The legislation directs the Connecticut Peace Officer Standards and Training Council to “develop and implement written policies ... concerning the requirements that all police officers undergo periodic behavioral health assessments as set forth in section 7-291e.” The written policies must address the confidentiality of such assessments including compliance with all provisions of the Health Insurance Portability and Accountability Act of 1996 (HIPAA), P.L. 104-191. The legislation also gives officers the ability to review and contest the results of any behavioral health assessment and provides employment protection of police officers who seek or receive mental health care services.⁴ It expressly prohibits penalizing officers solely because they sought mental health care services.

In 2021, Illinois passed Public Act 101-0652 giving the Illinois Criminal Justice Information Authority the responsibility of establishing statewide minimum standards regarding regular mental health screenings for probationary and permanent police officers. Illinois HB4480 was

³ 2022 Conn. Pub. Acts 2.

⁴ Conn. Gen. Stat. § 7-291d (2022).

filed in 2022 to amend the Illinois Police Training Act by establishing minimum standards regarding mandatory annual mental health wellness checks rather than regular mental health screenings. It also requires the regular mandatory annual mental health wellness checks be provided through the law enforcement agency's health insurance at no cost to the law enforcement agency.

Missouri also passed legislation in 2021, SB 551, creating the "Critical Incident Stress Management Program" within the Department of Public Safety. The act requires officers to meet with a program service provider once every three to five years for a mental health check-in. The program service provider is then required to notify the officer's agency that the officer completed the check-in. The act provides that any information disclosed by an officer is privileged and shall not be used as evidence in criminal, administrative, or civil proceedings against the officer. There are exceptions to the privilege that apply if the program representative reasonably believes the disclosure is necessary to prevent harm to the officer or another person, the officer provides written consent to the disclosure, the program representative is a witness or party to a critical incident that prompted the officer to receive critical stress services, or the officer receiving services discloses information that is required to be reported under mandatory reporting laws.⁵ SB 551 does not define or elaborate on the meaning of a "third party service provider."

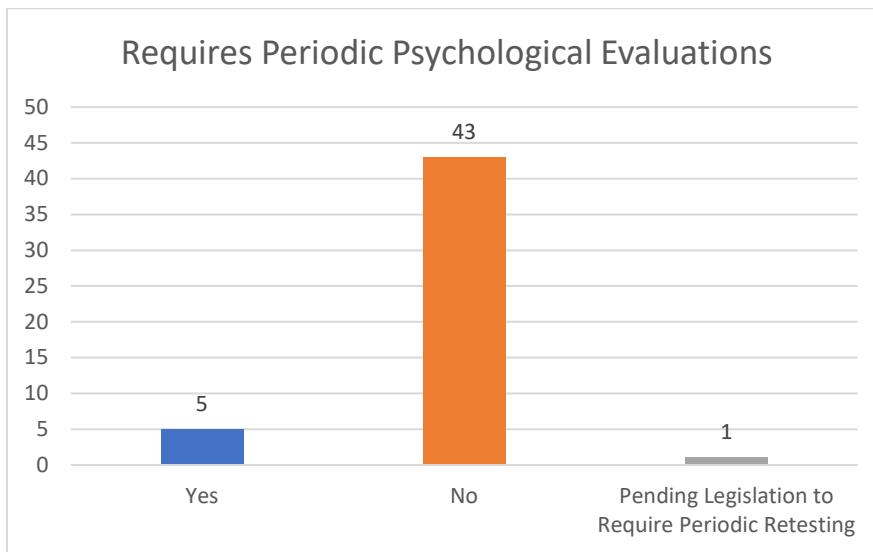
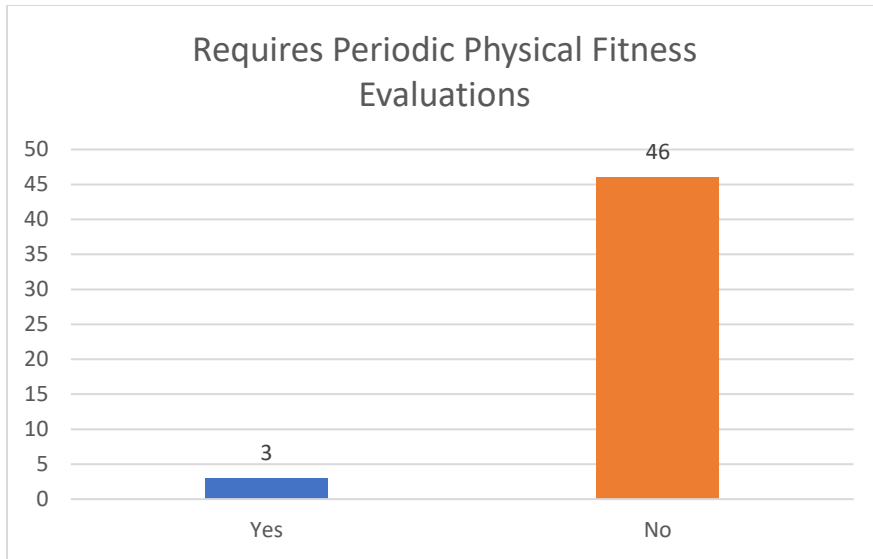
Effective January 1, 2023, Nev. Rev. Stat. § 289.510 charges the Nevada Peace Officers' Standards and Training Commission with adopting regulations that establish "standards for an annual behavioral wellness visit for peace officers to aid in preserving the emotional and mental health of the peace officer and assessing conditions that may affect the performance of duties by the peace officer."

New Jersey introduced a bill for the 2024-2025 session concerning psychological testing of police officers. Should it be enacted by the Senate and General Assembly of New Jersey, it will require each member of a police department submit to a psychological evaluation every five years.⁶ The bill entitles officers the right to review the results of a psychological or fitness-for-duty evaluation.

Please note that all the jurisdictional research is subject to change. Most of the legislation on psychological and physical wellness has been introduced within the last five years. Other jurisdictions may follow the trend and consider establishing officer mental and physical wellness standards in their regulations.

⁵ SB 551.

⁶ S. 2136 (2024).



V. Subcommittee Meetings

The subcommittee held two public meetings, on February 1, 2024, and February 27, 2024. The members of the subcommittee are Commissioner Bluestone, Commissioner Calderone, Commissioner Kazarosian. All recommendations of the subcommittee will be shared with the full Commission for consideration.

The February 27th meeting allowed for public comment and the submission of written testimony. The area of law enforcement psychological and physical wellness was the main topic of discussion at that meeting. Over seven groups and individuals sent written testimony to the subcommittee. They cited concerns about funding, confidentiality, and labor relations. There was strong sentiment against compulsory examinations, as commenters believed they would perpetuate the stigma against mental health treatment in the law enforcement community.

Some recommendations for addressing officer psychological wellness included programming like peer support networks, Critical Incident Stress Management (CISM) teams, and access to mental health services without prejudice, bias, or stigma. There is a consensus that officer wellness should be a priority. Some takeaways from the testimonies were that officer wellness should not be punitive. One member of the public recommended the subcommittee consider incentivizing mental and physical wellness. Some departments offer “mental health time” for officers to attend a wellness program or speak with a clinician. Certain agencies give officers time during their shift to work out and use fitness facilities. Another recommendation was to leave officer wellness to the agencies. However, other groups mentioned concerns over putting the onus of addressing officer wellness on agencies. Agencies vary in size and resources, which make it difficult for smaller agencies to offer the same services as larger departments. Funding was a common concern mentioned by multiple groups. Not all agencies have the resources available to allocate to mental and physical wellness.

VI. Recommendations

Pursuant to the statute and regulations, the Commission and the MPTC should work together to institute measures incrementally. Some recommendations that incorporate ideas from the subcommittee meetings are as follows:

- The subcommittee should consider how to fairly implement standards on all agencies.
- The subcommittee should consider creative and sustainable ways to fund psychological and physical wellness initiatives.
- Officers’ physical and psychological fitness could be re-evaluated in each recertification cycle, but in a way that is flexible and workable.
- One approach would be to reach agreement with the MPTC that officers can satisfy a certain portion of their required in-service training hours through something related to fitness, wellness, or counseling. That approach should help address the unfunded-mandate arguments from law enforcement, because it should not require any extra expenditures of time (and it might not require any extra resources).
- The psychological evaluation component could dovetail with online wellness training.
- The statutory language “successful completion of a physical and psychological fitness evaluation approved by the commission” could possibly be interpreted to mean that one must be evaluated, and not that the evaluation needs to yield any particular result.
- Any approach could be structured in such a way that is not punitive and does not simply lead to the result that an officer fails and cannot be recertified. Instead, it would put officers on a path to getting to where they need to be.
- There should also be measures in place for officers to retake evaluations and work their way up to achieving certain standards. One approach would be to develop a long-term plan, where the standards and requirements are not too demanding at the outset but are then increased over time. A benefit to such an approach is that it would accommodate officers who are suddenly faced with new fitness requirements and would not have sufficient time to get to where they need to be.
- The Commission should be able to implement something in the way of an evaluation, even if it is something basic, such as getting confirmation that the officer had a physical with a doctor. A physical evaluation with a licensed health professional could be

required as part of the recertification process. Officers can submit proof of a physical in their application for recertification.

- To incentivize officers to get annual physicals, departments can consider “health” days that allow officers to get a paid day off if they provide proof of a physical exam. This is similar to the Reading Police Department’s “administrative day” given to officers that meet with the staff clinician. The goal is to encourage officers to seek treatment, not to force them to do so.
- One set of comments submitted to the Commission said a fair evaluation would consider all aspects of an officer’s background, including age, veteran status, and years in the field. Any evaluation the Commission adopts could be tailored to an officer’s age, years of service, or specific duties.

VII. Challenges

Some concerns that were mentioned during the subcommittee meetings were confidentiality of treatment, sustainability of funding, overcoming the stigma surrounding mental health treatment, and ensuring officers do not face negative consequences for seeking treatment. It is important they work with mental health professionals that are familiar with the demands of a law enforcement officer. All these concerns are valid, and the Commission should find a way to ensure any policy it adopts addresses them.

VIII. Next Steps

I have been working on a proposal to establish a POST commission network with the other New England states. I believe the subcommittee and Commission as a whole can benefit from seeing how similar states approach recertification and officer wellness.

The Commission could collect information from law enforcement agencies on their existing mental and physical health policies. This will provide some baseline data on officer fitness and may reveal areas for improvement.

Commissioner Bluestone expressed an interest in conducting training for Commissioners on officer wellness issues. This could be open to Commissioners and POST staff.

The purpose of developing these standards is not to punish officers. The Commission recognizes the mental and physical stress officers endure on the job. Establishing these standards will benefit officers by ensuring they maintain their physical and mental wellness.

4.



Proposed suggestions for MA POST Officer Recertification Requirements: Psychological and Emotional Wellness

Prepared for the POST Commission Meeting on February 27, 2024

"Certain workforce strategies and practices can reduce the risk and impact of psychological harm, strengthen the health of the workforce, and contribute to improved decision-making abilities, which affect the delivery of public safety services to our nation's people"

(DOJ Report on Best Practices to Address Law Enforcement Wellness, May 2023, pg. 7)

Annual Officer Wellness Visits

Program Need

Officer wellness has taken a priority position within many law enforcement agencies. A comprehensive plan to address the "whole" officer is now recognized as a best practice. In light of the challenges that today's officers are facing, and to meet the requirements being set forth by the MA POST Commission, the need to support officers has become increasingly important. Identifying and dealing with the personal and professional challenges that may be faced by today's officer will help an officer deal with issues that may undermine their effectiveness with public interactions and personal wellbeing. This program focuses on the mental and emotional components of wellness. With recent research showing the emotional and psychological component in many illnesses, this program may ultimately have a positive influence on the officer's physical wellbeing as well.

Proposed Program Description

The proposed program is based upon a model put in place in 2019 with various law enforcement agencies in MA. A clinical team comprised of both a trained Law Enforcement Peer Support Officer and a Clinician would meet with the Police Officer for one (1) hour on an annual basis. This meeting will be held at a site within the City/Town, other than the Police Station, secured by department and agreed upon by the clinical team providing the direct services.

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The meeting would be structured such that the individual officer would be asked about any involvement in professional or personal critical incidents that may impact their personal well-being or work performance. Cumulative stress issues will be explored as well.

Education would be provided about what these critical incidents may possibly be. Coping mechanisms of how to deal with stressors and available resources would be provided. Referral options would also be provided to the officer for any issues discussed.

Subsequent annual sessions will build upon the checks completed in previous years and not simply be a repeat session.

It needs to be clearly understood that these visits will not be deemed or used to determine Fitness for Duty

Confidentiality

It is understood that the officers attending these sessions are compensated by the department for their attendance. Due to this, the clinical team will notify the Department liaison of who attended and who did not show up from the list of scheduled personnel.

To be successful both the department and their officers identify and agree that confidentiality is of the utmost importance. To ensure the highest level of confidentiality the following safeguards are to be utilized:

All clinical providers utilized, in accordance with their core training, are instructed that all conversations held are to remain confidential. Clinical providers may share the content of the conversation with their oversight Clinical Director for the purposes of consultation and quality assurance.

Exemptions to confidentiality legally and are acknowledged in this document as:

- Intended harm to others (Tarasoff Decision)
- Intended harm to self (Suicidality)
- Mandated Reporter obligations
- Commission of crimes

These exceptions are in alignment with the Peer Support Confidentiality Law, M.G.L. Ch 233, Sec 200, "*Crisis intervention services for emergency service provider: confidentiality of information*"

Officers at the wellness visits will be explicitly advised of this standard of confidentiality and the limits of it.

When the need arises for confidentiality to be breached for the above stated reasons, the Department's Peer Support liaison will be notified in addition to the team's Clinical Director. An appropriate response will be developed and taken for the situation that caused the breach.

Clinical Team Requirements

The need for cultural competence for the clinical team is of the utmost importance. To ensure a consistent minimum baseline for teams, the Police Peer and Clinician used for these meetings will follow the training and membership guidelines set forth for Peer Support as promulgated by the MA State Peer Support Network. In place since 2000, this statewide, state-sponsored volunteer group (comprised of trained Peers, Clinicians, and Chaplains) has been providing confidential peer support to any requesting law enforcement agency in the Commonwealth since the group's inception.

Any clinical team member will show proof of providing clinical and/or peer support to the law enforcement community for a minimum of three years before engaging in providing wellness visits.

Wellness Visit Frequency

The proposed Wellness Visit cycle would align with the 3-year recertification requirement put forth by the POST commission. Each year a Wellness Visit with the team would be offered. One year would be a mandatory scheduling and the other two years it would be electively provided to officers, paid for by the department. This model would allow an officer to access annual wellbeing support paid for by the department. It would also give the department the ability to say that they have offered paid clinical support annually should an employee issue arise.

This rotating model would allow the department to schedule these sessions in such a way as to not be an overburden in either scheduling or finances.

In Summary

In conclusion, this model has been field tested for the last five (5) years with various law enforcement agencies in the Commonwealth. Preliminary indications show it to be accepted by both officers and administrations, with many officers reporting that they look forward to their visit and some wishing it could be done more frequently than just annually. Combined with the work of supporting Law Enforcement through the MA State Peer Support Network, these Wellness Visits offer our law enforcement personnel the tools to support their psychological and emotional needs and to help maintain their professionalism with the public whom they serve.

Respectfully submitted

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A Descriptive Study of Police Officer Access to Mental Health Services

Kathleen E. Padilla¹

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Abstract

The culture of policing is thought to emphasize maladaptive methods of coping with stress, such as the use of alcohol, rather than seeking out mental health services. The current paper seeks to better understand police officers' knowledge about mental health services offered by their department and their willingness to engage in and utilize such services. Pen and paper surveys were administered at daily briefings with 134 members of a Southwestern police department. This descriptive study indicates that while only 34% of officers were explicitly aware that their department provided services to alleviate stress or mental health issues, and 38% of officers were unsure of exactly what those services were, over 60% of officers were willing to participate in an annual mental health checkup or mental health class. Ultimately, officers may now be more willing to participate in and take advantage of mental health and wellness opportunities, but the knowledge of what those services are often acts as one barrier, among others, to accessing those services. Knowledge dissemination of mental health and wellness opportunities represents one way to engage more officers in preventative health options.

Keywords Police officer · Mental health · Stress · Mental health services

Since 2020, COVID-19 has stunned the world, hitting those who work as frontline employees particularly hard. Indeed, of the 1335 total officer deaths from 2020 to 2022, COVID-19 was responsible for 829 of those, with gunfire (intentional and inadvertent) accounting for the next highest portion of officer deaths, at 179 (ODMP 2020, 2021, 2022). In addition to those deaths, termed “Line of Duty Deaths” (ODMP 2020, 2021, 2022), an additional 504 officers died by suicide (Blue H.E.L.P. 2020, 2021, 2022). Unfortunately, these years were not anomalies; rather, the fact that more officers died by suicide than as a result of homicides or accidents reflects a trend that has been occurring since officer suicides began being officially recorded in 2016 (LEOKA 2016–2019; Blue HELP 2020). Furthermore, as the climate surrounding law enforcement has grown more contentious amid a surge in protests in urban environments, the Black Lives Matter movement, and numerous U.S. Department of Justice investigations (Day 2015; USDOJ Civil Rights Division 2015), police are working in an environment that is perceived to be ripe with public apathy (Marier and

Moule 2019) and the stress and risks associated with being a member of this occupation have arguably increased (i.e., the 2016 shooting of five Dallas police officers; Fernandez et al. 2016).

In 2015, President Obama convened a task force that was charged with developing proposals to strengthen community policing and improve overall levels of trust between the police and the communities they served. Of the six pillars they proposed, one explicitly called for police departments to improve police officer wellness and safety. Since the disbursement of the final report, research has continued to examine aspects of policing such as community policing (Leroux and McShane 2017; Peyton and Sierra-Arévalo 2019), officer use of force (Ariel et al. 2015; Terrill and Paoline 2013), and the use of technology (Ready and Young 2015; White et al. 2017). Furthermore, scholars have focused substantial attention on police officers' *perceptions* of some of these concepts (e.g., Gaub et al. 2016; Padilla et al. 2022; Wolfe and Nix 2016). However, given the current contentious climate of law enforcement—what some have termed a “legitimacy crisis” (Gest 2016; Todak 2017)—examining police officers' overall health and wellness, and what officers perceive their departments are doing to help them, is critical, as police officers themselves should be included in the police reform process.

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Stress in Policing

Phrases such as “stress” and “stress management” have become buzzwords in policing—akin to “community policing” or even “de-escalation.” The impact and importance of stress and stress management are understood, yet there is a lack of consensus on what exactly stress is, how it should be measured, and how it is best addressed. Research demonstrates that a police officer’s level of stress is likely to be affected by the characteristics of the individual officer (Padilla 2020; Zhao et al. 1999), as well as their working group and their department (Maguire et al. 2020; Peterson and Uhnou 2012). What is more, police officer stress typically stems from one of two sources: organizational and occupational (sometimes discussed as operational or environmental; McCraty et al. 1999). Organizational sources of stress are those that are found across many types of occupations and can include having to deal with excessive paperwork or unsupportive supervisors (Purba and Demou 2019; Violanti et al. 2019). These stressors are often deemed more problematic in the lives of police officers as compared to occupational sources of stress, due to their repeated exposure to these situations (Joseph and Nagarajamurthy 2014; Shane 2010). Occupational sources of stress, on the other hand, are those that are unique to a particular occupation—in this case, policing. Occupational stress in policing is generated by having to write traffic tickets, deliver death notifications, or being exposed to potentially dangerous or life-threatening incidents (Lieberman et al. 2002; Violanti and Aron 1993).

The consequences of stress can manifest in a variety of dimensions of a police officer’s life. Physiologically, police officers have high rates of cardiovascular disease and high blood pressure (Wirth et al. 2017), as well as exacerbated spinal issues (Maguire et al. 2020). Psychologically, officers have relatively high rates of depression and suicidal ideation, as well as high rates of suicide itself (Milner et al. 2013; Violanti et al. 2016). Behaviorally, there are often high alcohol-use rates (Chopko et al. 2013), as well as marital issues, such as high rates of divorce and domestic violence (Blumenstein et al. 2012; Burke 2019). Additionally, the failure to cope appropriately can result in a higher rate of use of force in interactions between officers and citizens (McCarty et al. 1999), resulting in an increase in lawsuits that will have to be managed by the department and their legal team (Schwartz 2011, 2016). These consequences can be further felt and seen by the organization itself. Officers who are under immense stress without the proper channels or ability to cope with that stress may experience decreased job satisfaction (Maurya and Agarwal 2015), higher turnover rates (Yun et al. 2015), or increased use of sick days (Devonish et al. 2012), resulting in lost productivity (Fox

et al. 2012). It then behooves police department administrators to be able to identify stress in the workplace, implement programs or services designed to ameliorate such stress, and encourage their officers to engage in those services.

Services and Barriers to Accessing Services

The first experience an individual will have with psychological services in law enforcement comes with their pre-employment psychological screening, which is designed to identify and select candidates who are well-adjusted and possess coping skills that will help them navigate the stress associated with the job (Dantzker 2011). After the pre-employment screening, departments generally offer in-house training or seminars, though often not mandatory to attend, as well as a staff psychologist. Indeed, Employee Assistance Programs (EAPs) allow officers and their families to access mental health care without out-of-pocket costs (Burke 2019; Donnelly et al. 2015). Nevertheless, officers report that they are reluctant to utilize EAPs due to the perception that EAPs are intrinsically “linked” to the department (Burke 2019; Fox et al. 2012).

Resiliency training, or training to improve “the ability to withstand, recover, and grow in the face of stressors and changing demands” (Deuster and Silverman 2013, p. 24), and peer support groups designed to combat the stigma associated with seeking help for mental health issues (Creamer et al. 2012) have grown more common in police departments. After exposure to potentially life-threatening or traumatic incidents, peer support groups have proven beneficial in alleviating poor mental health issues such as anxiety or depression (Evans et al. 2013; Waters and Ussery 2006). Other resources that departments have provided for officers include fitness programs (National Law Enforcement Memorial Fund 2020), staff psychologists (Brewster et al. 2016), critical incident stress debriefings (Burke 2019; Pasciak and Kelley 2013), in-house chaplains (Padilla 2016), and trauma risk management (TRiM; Watson and Andrews 2018).

One of the most prominent and, perhaps, daunting encounters between law enforcement officers and psychiatrists and psychologists is the fitness for duty evaluation (FFDE; Mayer and Corey 2017). Typically performed after exposure to a critical incident, an FFDE is designed to ensure that an officer is capable of safely and effectively performing their job functions (Mayer and Corey 2017; IACP 2013). The stigma of the potential for termination of employment that is associated with FFDEs often acts as a barrier for officers to seek out mental health care support more generally (Fox et al. 2012; Padilla 2016).

There are a number of additional barriers to seeking out mental health care services in policing (Burke 2019; Fox

et al. 2012; Price 2017; Haugen et al. 2017), including the fear of employment termination (as discussed above), fear of judgment from peers/supervisors, as well as a self-imposed stigma that admitting to needing help is a sign of weakness (Haugen et al. 2017; Karaffa and Tochov 2013), and feeling ostracized (Stuart 2017). Additionally, there often are inadequate resources provided by departments (Karaffa and Koch 2016), insufficient knowledge of services, ease of access issues (Burke 2019; Donnelley et al. 2015; Haugen et al. 2017; Padilla 2020), a perceived lack of support (Webster 2013), and general negative perceptions about mental health services from the department (Terpsura and Schaap 2013; Cordner 2017; Blumenstein et al. 2012).

Current Study

Given the increasingly contentious environments in which police officers work, it becomes imperative to better ascertain the types of services that departments offer and understand why officers may or may not be willing to access mental healthcare services. As such, the current study seeks to address three research questions: (1) How knowledgeable are police officers of departmentally provided mental healthcare services? (2) How likely are officers to participate in any type of mental healthcare services? (3) What are some of the barriers officers may identify regarding participation in mental healthcare services? As this study is descriptive and exploratory in nature, no a priori hypotheses are included, and all statistics presented are descriptive.

Methods

Procedure and Design

In June 2019, day (6:00 am), swing (3:00 pm), and graveyard (9:00 pm) shift patrol briefings were attended each day for 7 days. Separate briefings were held for school resource officers (SROs), officers assigned to criminal investigations (CIS), and individuals instructing at the academy. Prior to the administration of the surveys, respondents were read a university IRB-approved informed consent. Survey administration took between 12 and 30 min, averaging approximately 15 min to complete. While the department employed approximately 190 sworn officers at the time of the study, due to officers being on leave, conducting business off premises, or otherwise unavailable, 145 officers were asked to take the survey, and 134 agreed, resulting in a 93% response rate.

While the survey administered included a modified version of Spielberger et al. (1981) Police Stress Survey, Cohen et al.'s (1983) Perceived Stress Scale, and Reisig and Mesko's (2009) procedural justice scale, of interest in the

current study is respondents' knowledge of, willingness to participate in, and barriers to accessing mental healthcare services in their department. The full survey is available upon request. Pen and paper surveys were entered verbatim into Qualtrics and all data were analyzed using Stata 15. As this study was exploratory in nature, all results provided are descriptive.

Sample

The current study is part of a larger series of projects with the sample department, which was selected due to the author's proximity to the organization. Importantly, this department falls below the national average in terms of female representation, so meaningful comparisons between male and female officers could not be ascertained and results presented are reflective of the entire department.

The modal respondent in the current study was a White Hispanic/Latinx male patrol officer with approximately 1 decade of law enforcement experience. Males accounted for 89% of the sample. Approximately 89% of the sample indicated they were White, 2% indicated they were Black/African American, less than 1% indicated they were Native Hawaiian/Other Pacific Islander, and 6% identified as a member of another racial/ethnic group. Approximately 63% reported their ethnicity as Hispanic/Latinx. Tenure or years an individual had served in law enforcement (to include other policing agencies) ranged from less than 12 to 358 months, with an average of 126 months, or approximately 10.5 years ($SD = 82.04$ months or 6.8 years) in law enforcement. Fifty-six percent of the sample worked in a patrol role. Thirty-five percent of the sample had "some college" experience, but with no degree, and 36% of the sample had at least a bachelor's degree.

Measures

Two questions were asked regarding *knowledge of services*: (1) "Please rate your level of agreement to the following statement: Your agency provides services that help manage stress or mental health" (with responses ranging from "strongly agree" to "strongly disagree") and (2) "If you know your agency provides services to manage stress or mental health, who performs these functions (select all that apply)" (options including a private provider, contract provider, department provider, city provider, EAP, or unsure). Three questions were asked related to *willingness to access services*: (1) "How likely are you to participate in any type of services to manage your stress or mental health?" (with responses ranging from "not likely at all" to "very likely"); (2) "Would you consider taking part in a voluntary annual mental health checkup, similar to an annual physical checkup?" (Yes/No); and (3) "Would you consider taking

part in an annual or bi-annual class on the importance of good mental and emotional health?" (Yes/No).

Finally, one question was asked regarding *barriers to accessing services*: "What are some reasons you might choose to not participate in any type of mental health services (select all that apply)?" Responses to this question were divided into "resource-based" and "fear-based" categories. Resource-based barriers included "didn't have time/the process is too cumbersome," "don't know the process to activate services," and "don't believe in these types of services." Fear-based barriers included "fear of peers finding out," "fear of supervisor(s) finding out," "fear of subordinate(s) finding out," "fear of retaliation," and "macho subculture—don't want to appear weak." This question was analyzed for frequency of response and resource-based and fear-based barriers were compared against each other.

Results

Knowledge and Types of Services

Table 1 provides the results for the first research question, which focuses on officers' knowledge of departmentally offered services, as well as provides context on the types of services officers perceive their department offered. Thirty-four percent of police officers in this department ($n = 46$) either agreed or strongly agreed to the statement "Your agency provides services that help manage stress or mental health." Furthermore, when asked about potential services offered by the department, 38% ($n = 51$) responded that they were unsure. One respondent wrote in, "I HAVE NO CLUE WHAT'S PROVIDED" (all caps included in initial response), although it is important to note that the police department provides an EAP and departmental psychologist.

Table 1 Knowledge of services and types of services offered

	N	%
Department offers mental health services		
<i>Strongly disagree</i>	19	14%
<i>Disagree</i>	21	16%
<i>Neither agree nor disagree</i>	48	36%
<i>Agree</i>	42	31%
<i>Strongly agree</i>	4	3%
Type of departmentally provided mental health services (select all that apply)		
<i>Private provider</i>	6	4%
<i>Contract provider</i>	7	5%
<i>Department provider</i>	38	28%
<i>City provider</i>	45	33%
<i>Employee assistance program</i>	46	34%
<i>Unsure</i>	51	38%

Table 2 Willingness to access services

	N	%
Likelihood of participation in any mental health services		
<i>Not likely at all</i>	35	26%
<i>Somewhat unlikely</i>	38	29%
<i>Somewhat likely</i>	50	38%
<i>Very likely</i>	10	7%
Willingness to participate in...		
<i>Annual/bi-annual mental health class</i>		
<i>Yes</i>	87	65%
<i>No</i>	47	35%
<i>Annual mental health checkup</i>		
<i>Yes</i>	82	61%
<i>No</i>	52	39%

This provides crucial evidence that officers are not aware of what is being provided under their own roof, and if they are unaware of services offered, they cannot take advantage of those services.

Willingness to Access Services

Table 2 provides the results for the second research question, regarding the likelihood of accessing mental healthcare services. Respondents were asked about general mental health services, with no clearly articulated type of services, as well as about two specific types of mental healthcare services, including an annual/bi-annual class on the importance of good mental health, and/or an annual mental health checkup, similar to a physical checkup.

Forty-five percent ($n = 60$) of respondents indicated they were "somewhat likely" or "very likely" to participate in general mental healthcare services. However, when asked about specific types of mental healthcare services, such as a class or checkup, those who were willing to participate jumped to 65% ($n = 85$) and 61% ($n = 80$), respectively. This may be indicative of the stigma surrounding the term "mental healthcare services." Conversely, discussing the specifics of the intervention (e.g., a class or checkup) may lead officers to feel more comfortable, indicating a willingness to participate. This is examined further in the "Discussion" section.

Barriers to Accessing Services

Table 3 provides the results for the final research question, related to barriers to accessing mental healthcare services. Generally, these results could be separated into one of two groups: resource-based barriers or fear-based barriers. Responses related to resource-based barriers included: "didn't have time/the process is too cumbersome," "don't know the process to activate services," or "don't believe in these types of services."

Table 3 Barriers to accessing mental healthcare services (select all that apply)

	<i>N</i>	%
Resource-based	83	43%
<i>Don't have time/the process is too cumbersome</i>	50	60%
<i>Don't know the process to activate services</i>	17	21%
<i>Don't believe in these types of services</i>	16	19%
Fear-based	111	57%
<i>Fear of peers finding out</i>	31	28%
<i>Fear of supervisor(s) finding out</i>	30	27%
<i>Macho subculture—Don't want to appear weak</i>	20	18%
<i>Fear of retaliation</i>	16	14%
<i>Fear of subordinate(s) finding out</i>	14	13%

Responses related to fear-based barriers included: “fear of peers finding out,” “fear of supervisor(s) finding out,” “fear of subordinate(s) finding out,” “fear of retaliation,” or “macho subculture—don’t want to appear weak.” Barriers related to fear accounted for 57% of the responses, while barriers related to resources accounted for 43%. The most commonly reported barriers to accessing mental healthcare services included not having time ($n=50$), fear of peers finding out ($n=31$), and fear of supervisor(s) finding out ($n=30$).

Discussion

Scholars have increasingly focused their attention on police officer health and wellness, and with good reason. As President Obama’s Task Force on Twenty-First Century Policing (2015) indicated, improving the ways in which police officers manage their mental health is one of a myriad of ways that policing can be improved. This study provided evidence that largely the cultural mindset and stigma of seeking out mental health assistance in policing may be starting to shift. Though these data were collected in 2019, approximately 1 year prior to the death of George Floyd and the resulting demands for change and accountability in policing, they still are indicative of the current climate surrounding law enforcement. This is evidenced by the finding that barriers to accessing mental healthcare services reportedly stemmed largely from resources and knowledge of accessing resources, rather than solely from a fear of how others may perceive the choice to participate in mental healthcare services.

What is more, police officers are expressing a willingness to participate in departmentally provided services—with a catch. The wording of these services appears to play a particular role in their decision to participate. That is, while less than half of all respondents indicated they would participate in “any” type of mental healthcare services, those numbers jumped to approximately two-thirds indicating they *would* take part in annual/bi-annual classes/

checkups on the importance of maintaining good mental health. This could be related to a perceived reactive, punitive connotation that may be attached to the phrase “mental health services,” rather than a proactive, educational connotation that may be attached to “classes/checkups.” It is important that future research further parses out not just *what* services are offered, but *how* they are advertised and phrased to those they aim to impact.

While these findings shed additional light on mental healthcare services and barriers to accessing those services, it is important to be cognizant of limitations in the study. First, these data were collected in one, cross-sectional survey administration. Current efforts are being made to examine these topics more longitudinally to better understand the causality and how socio-political contexts may impact perceptions of mental healthcare services. Second, the sole department engaging in research is a majority-minority department, in a majority-minority city. That is, both the department and the city in which it resides are predominately Hispanic/Latinx, so the results may not be generalizable to other departments with differing demographic make-ups. Relatedly, the present study is subject to the potential limitations associated with case studies more broadly (Yin 2009). That is, it was intended to more thoroughly understand knowledge of and willingness to access mental healthcare services in a single department. However, these findings can provide added clarity about these issues in other departments. Finally, this study was exploratory and descriptive in nature, and, as such, did not set out to understand predictors of participation in mental healthcare services. Rather, the goal was simply to examine frequencies of knowledge of services, participation in services, and barriers to participation in services. Future work will undoubtedly utilize more rigorous analytical techniques to examine this aspect.

Limitations aside, this study provides evidence that officers may be more willing to take part in mental healthcare services. This is crucial for departments and administrators to take notice of as now may be the time to be implementing mental health programs and services that will improve not just the individual officer, but the organization as a whole, in turn improving the relationships they have with the communities they are charged with serving.

Declarations

Ethical Approval All procedures performed in studies involving human participants were in accordance with the ethical standards of the Arizona State University Institutional Review Board (IRB: STUDY00010063).

Informed Consent Informed consent was obtained from all individual participants included in the study.

Conflict of Interest The author declares no competing interests.

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"The Only Union for Police Officers and 911 Dispatchers"

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February 27, 2024

Massachusetts Peace Officer Standards and Training Commission
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RE: Written Testimony for Certification Subcommittee Hearing 2/27/24

Dear Chairperson Calderone and Members of the Certification Subcommittee,

The Massachusetts Coalition of Police and our nearly six-thousand members from across the Commonwealth would like to thank you for accepting input into your efforts of studying, considering, and deliberating ideas regarding the re-certification process. We appreciate the inclusion into a process that requires serious thought and examination before any revisions are made to the recertification of law enforcement officers in Massachusetts. We have all learned that the arbitrary timelines applied by the enabling statute to the original recertification procedure created significant difficulties for the Commission, hindered your ability to properly vet the process, and resulted in litigation and other challenges. The Massachusetts Coalition of Police is committed to working with this Subcommittee and commission to assist in any way we can to create a workable and practical recertification process.

The Commission members and staff in previous meetings discussed the interpretation of statutory language such as the phrase "successfully completed" and the like, and how those phrases relate to which aspects should or must be included in the recertification process. We hold the position that physical fitness standards, psychological testing, and oral interviews were all successfully completed at the initial hiring stage. The only determinations that should be used for recertification are whether the law enforcement officer has remained in good standing since the last recertification and whether the applicant was subject to a statutorily disqualifying event, such as being convicted of a felony, being decertified by POST, being decertified while working as a police officer elsewhere, or appearing in the National Decertification Database.

There are many reasons why the recertification process should not include physical fitness standards, psychological evaluations, and oral interviews. The first and most important reason is simply cost of an unfunded mandate in forcing the development and support of any standards. A statute enacted in 1996 required physical fitness standards for any newly hired officer. That statute was never funded and/or implemented because the cost and logistics to conduct a physical fitness evaluation of twenty-thousand Massachusetts police officers is overburdensome. If you then add psychological evaluations of those same officers, you have doubled the burden. It would be extremely difficult to devise a psychological testing process

that could fairly and effectively evaluate a veteran officer's psychological condition in the limited time setting that would be available for these tests.

The costs of implementing mandatory physical and psychological testing for all officers would be extraordinary. The costs not only will arise from the testing of all officers, but the costs to pay for officers to submit to such testing and/or to pay for overtime to substitute for officers being tested. It seems unlikely that the State will pay for the costs associated. And police departments that already are strapped for resources should not be expected to handle this unfunded mandate. Many departments find it extremely difficult to have officers attend in-service never mind increasing their time away from shifts due to increased testing.

Speaking of which, even if adequate resources were available, the costs would outweigh the benefits. We should be spending public safety dollars to recruit, retain, educate, and train officers, not to force officers to submit to unnecessary physical and psychological examinations. There has not been any widespread concern about physical and mental fitness of Massachusetts officers. These issues are best monitored and addressed at the local level, with agencies working in collaboration with their collective bargaining partners.

The requirement for completion of in-service as a requirement for recertification is troublesome as well. We agree and support continued enhanced training of Massachusetts police officers. We even support mandatory training. However, as we explained to Governor Baker when the POST commission was created, it should be the *Department's* responsibility to ensure officers are provided the opportunity for in-service and actually attend. In many understaffed departments, it can be difficult for the employer to cover the shifts of people who are attending in-service. There are departments that make it very difficult for their officers to attend. The departments should continue to shoulder this responsibility as they always have and to suffer consequences if their officers do not. Officers should not suffer loss of certification because of *their employer's failure* to enable them to attend. This obligation should not be placed solely or squarely on these officer's backs. A failure to do so should hinder the certification of the agency or Chief, not the individual officers.

There has been some discussion about POST managing some sort of performance evaluation process for officers. It is well established law that performance evaluations are a mandatory subject of bargaining and many, if not all, departments have some sort of formal, or informal, procedure for evaluating their officers that was properly negotiated with their bargaining units. We are opposed to any reduction in collective bargaining rights that govern how our members are evaluated. The POST could encourage or mandate evaluations, but it should not dictate the method, criteria or implementation of them.


Lastly, we are aware that the subcommittee and ultimately the commission are considering questions to be included in either a new questionnaire or to be asked during some sort of oral

interview. As stated prior, we believe the oral interview phase was completed at initial hiring. In the first round of recertifications, there was an oral interview requirement that most departments did not complete. Reasons included that it is too burdensome on already cash-strapped and understaffed departments to dedicate personnel to complete these unnecessary tasks. The questions considered so far in the process seem to be a combination of unnecessary, unrelated to recertification, and overreaching. Most importantly, the questions serve no legitimate purpose because they are not asked or received by the Commission. For better or worse, the POST has delegated the questioning to local agencies and those answers remain within the department's exclusive possession, unless the POST requests them. It is doubtful that any agency needs to ask or receive answers to these questions in order to decide whether an officer should be recommended for recertification. There is no evidence that the questions provided any useful guidance to recommendations by agencies for officers to be recertified or of POST to make recertification decisions.


Moreover, the substance of the questions pertain to fitness and conduct issues that are best addressed locally through disciplinary process or evaluations. Personal interactions with the criminal justice system and domestic violence, neglect, or physical altercations will all be routed out in the disciplinary process of POST, as all of them are subject to a mandate of reporting within two days of complaint. Bankruptcy is in no way related to the ability to be an effective police officer. While some have indicated financial strain leads to an increase in corruption, we are unaware of widespread bankruptcy or corruption in policing. When it comes to social media use, if there is a complaint, it should be dealt with accordingly. Questions that just inquire into an officer's social media habits are overreaching and too broad. And like the previous question, if there is an issue relating to an officer's use of alcohol and/or cannabis, then it should be dealt with on an individual basis with the goal being employee assistance and recovery, not decertification. In any of these situations, if there is an issue it should be dealt with at the local level.

The Massachusetts Coalition of Police would again like to take the opportunity to thank the subcommittee and the commission for this opportunity to present our concerns. We also want to reiterate that we present these concerns in the hope that this subcommittee and the commission will take the time to explore these issues completely. Unfortunately, as in the first round of recertifications, you are up against a timeline for the next round. We hope that timeline does not hinder your ability to conduct the proper exploration into these matters and produce a process that is fair, equitable, and practical. We are always available for further discussion on these important matters.


Sincerely,



Scott A. Hovsepian
President



John E. Nelson
Vice President



Timothy King, Esq.
In-House Counsel



February 26, 2024

Via Email

Enrique Zuniga, Executive Director
Lawrence Calderone, Chair, Certification Subcommittee
Peace Officer Standards and Training (POST) Commission
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Re: Comment on Regulations on and Proposed Plan for Recertification, 555 CMR 7.00

Dear Commissioners:

The American Civil Liberties Union of Massachusetts, Inc. (ACLUM) submits this comment on the “Recertification” regulations, 555 CMR 7.00, *et seq.*, and the POST Commission’s proposed revisions to the same as discussed during the February 2nd Certification Subcommittee meeting. ACLUM thanks the Commission for inviting public comment and for its serious consideration of the same when promulgating regulations and policies in the past. ACLUM previously submitted comments on the then-proposed regulations on “Procedural Rules” at 555 CMR 1.00 and on “Databases and Disseminations of Information” at 555 CMR 8.00. We, like the Commission, are committed to promoting unbiased and ethical policing within the Commonwealth.

The regulations being considered concern a centerpiece of the 2020 police reform law and the core duties of the Commission to certify officers for duty in consideration of the totality of the officer’s career and conduct. In submitting this comment, we have the benefit of having seen how the recertification process has worked in practice and acknowledge that we all stand in a different position than we did four years ago. Thus, while we understand that the recertification regulations represent the Commission’s best effort to fulfill the goals of the 2020 law based on the information it had at that time, ACLUM writes to now suggest changes to the regulations that may better meet the goals of the certification process and the reform law. Specifically, ACLUM writes to express two primary concerns with the current regulations and recertification process.

First, in 555 CMR 7.01, 7.05, and in the “Requirements and Plan for Recertification of Certain Law Enforcement Officers” adopted by the Commission in 2022 [hereafter the “2022 Recertification Plan”], the Commission delegated its statutory obligation to determine if an officer possesses good moral character to the individual law enforcement agencies, *i.e.*, the officer’s

employing agency. But it did so without clearly defining “good moral character” beyond mere reference to the POST statute and without establishing mandatory criteria which agencies were required to use in assessing an officer’s character. Under this system, several officers with recent criminal convictions for, and findings of, egregious misconduct have been certified without conditions.

Second, the Commission delegated to the agencies the task of conducting oral interviews as required by statute, *see* 555 CMR 7.06, and of ensuring that officers met certain statutorily required minimum certification standards, such as passage of a qualifying exam and background check. This authority was delegated without any requirements that the agencies submit proof of the same to the Commission, *e.g.*, a recording of the oral interviews or proof of the qualifying exam score.

Without safeguards, police departments are still policing themselves with little to no oversight, which was the exact problem the Commission was established to address. If the Commission is going to delegate its duties to the agencies, it should provide clearer guidance and criteria as to the meaning of good character and require agencies to provide documentation that certification standards have been met. Thus, to ensure all officers within the Commonwealth operate under a certification process that seriously takes into account an officer’s character and which leaves POST as the arbiter of whether certification standards have been met, ACLUM urges the Certification Subcommittee to recommend revisions to the recertification regulations (consistent with the below) so as to remove any grant of unfettered discretion to agencies.

- I. **The Subcommittee should recommend a clear definition of “good character” be added to the regulations along with nondiscretionary criteria an agency must use in assessing the same, and the Subcommittee should recommend the regulations require agencies to explain their assessment in certain circumstances.**

To be certified, an officer must “be[] of good moral character and fit for employment in law enforcement, *as determined by the commission.*” G.L. c. 6E, § 4(f)(1)(ix) (emphasis added). Under the regulations, the Commission delegated the authority to determine if an officer meets the character standard to the employing law enforcement agencies, *see* 555 CMR 7.05, and it did so without first establishing any mandatory criteria or a clear definition for what it means for an officer to possess the requisite character. Thus, under the current process, the agencies’ unguided judgment stands in the place of the Commission’s in certain key regards and in disregard of the statutory requirement that POST be the entity to make the character judgment.

To cure this issue, ACLUM urges the Subcommittee to recommend a clearer definition of “good moral character and fitness for employment” to be added to 555 CMR 7.01 and the addition of mandatory criteria agencies must use when making character assessments under 555 CMR 7.05. In addition, ACLUM suggests that 555 CMR 7.05(2)(b) be revised so as to require agencies to submit a written report explaining why they believe an officer possesses good moral character where

that officer has been found to have engaged in misconduct or has a pattern of complaints (regardless if sustained) alleging the same or similar misconduct.

- a. ***The regulations fail to define or establish mandatory criteria for the good moral character standard, and they do not require the Commission to oversee the application of the standard.***

Under the regulations, “[e]ach officer’s employing agency shall provide a submission to the commission concerning whether an officer possesses good character and fitness for employment, in accordance with commission policy.” *Id.* The regulations define “good character and fitness for employment” as “[g]ood moral character and fitness for employment in law enforcement,” M.G.L. c. 6E, § 4(f)(1)(ix).” *Id.* at 7.01. It lays out some discretionary factors that an agency “may take into account” or “may rely on” to make this character assessment, but it provides no mandatory criteria. 555 CMR 7.05(2)(a). Notably, the regulations do not require that agencies consider “any guidance or forms approved by the Commission,” though it is suggested that they do. *Id.*

Further, unlike the requirements that agencies explain any determination that an officer does not meet the character standard, agencies have no affirmative obligation under the regulations to explain any determination that an officer does possess good character, even if an officer is known to have engaged in misconduct or has been repeatedly alleged to have engaged in a pattern of the same or similar misconduct. Under the regulations, “[i]f an employing agency determines that an officer possesses good character and fitness for employment, the agency shall provide, *upon request by the commission*, documentation supporting such a determination.” 555 CMR 7.05(2)(b) (emphasis added). This process stands in contrast to the requirement that “the employing agency *shall* make a written report to the commission” with certain delineated findings if it “determines that it *cannot* find that an officer possesses good character and fitness.” 555 CMR 7.05(2)(c) (emphasis added). This imbalance was exacerbated in the 2022 Recertification Plan. Under the plan, “[w]here . . . the employing agency attests that the officer currently possesses good moral character and fitness . . . , this standard will be deemed satisfied.” The plan makes no mention of the ability of the Commission under the regulations to request written documentation justifying this character assessment.

- b. ***In the absence of clear guidance from POST, in practice several agencies applied a toothless “good moral character” standard that led to the recertification of several officers with numerous incidents of egregious misconduct and criminal convictions.***

The regulatory grant of unfettered discretion to agencies to determine whether an officer meets the good moral character standard may be the cause for the certification of officers who have engaged in recent, egregious misconduct. The Commission’s “officer disciplinary records database” lists at least 15 certified officers with sustained findings of criminal conduct since 2010 that range from destruction of public property out of state to assault and battery on a family or household member. In addition to these instances, several certified officers have civil findings of liability for civil rights violations, adverse judicial findings, including that the officer lied on the stand, and have

admitted to misconduct before grand juries; these findings are not listed in the database. It is unclear what weight, if any, the respective agencies gave these sustained findings of criminality and other misconduct when assessing an officer's character. Indeed, they may not have been considered at all, given that the regulations did not require the agencies to consider the findings or any other particular information about an officer's history.

Perhaps no Massachusetts law enforcement agency is more emblematic of the problem inherent in the Commission's decision to allow agencies unguided discretion than the Springfield Police Department (SPD). *See generally Graham v. District Attorney for Hampden District*, 493 Mass. 348 (2024). In July 2020, the U.S. Department of Justice (DOJ) issued a report in which it stated its findings of "systemic deficiencies in policies, accountability systems, and training" within the SPD.¹ Although the SPD entered into a consent decree with the DOJ in April 2022, efforts to enact promised reforms within the department remain ongoing. Nevertheless, the current recertification system gave the SPD unguided discretion to determine whether its officers possess good moral character.

For example, Springfield reportedly recommended Officers Christian Cicero and Daniel Billingsley for recertification immediately after they were convicted of the off-duty assault and battery of three Black men outside a bar in Springfield. Juries ultimately found Billingsley and Cicero guilty in March 2022 of three counts of misdemeanor assault and battery. The officers received a suspended two-year sentence to the house of correction pending probation, were ordered to stay 100 yards away from the bar, and were ordered to have no direct or indirect contact with the three victims, among other obligations. Prior to their convictions, both officers had years of complaints filed against them alleging excessive force, notably including allegations that they kicked or punched multiple individuals in the head or face. Allegations against Billingsley include that he participated in punching and/or kicking multiple complainants. For Cicero, in 2015 alone, at least four complaints were filed against him alleging that he was among officers that punched and/or kicked multiple complainants.

That both officers were certified by the Commission without condition is not an isolated incident. A special master found that SPD Deputy Chief Steven Kent testified before a grand jury in 2018 that he had given false information to SPD investigators and false testimony to grand jurors.² This admission is consistent with a statement by a U.S. Magistrate Judge in 2017 that it could be inferred from evidence that Kent and 2 other SPD officers "were prepared to be untruthful when it suited their purposes."³ In addition, Kent has been the subject of several civil lawsuits, including one

¹ "Investigation of the Springfield, Massachusetts Police Department's Narcotics Bureau," U.S. Department of Justice (July 8, 2020) ("DOJ Report"), <https://www.justice.gov/opa/pr/justice-department-announces-findings-investigation-narcotics-bureau-springfield>.

² Report of Special Master in *Graham*, 493 Mass. 348.

³ *Douglas v. City of Springfield*, 2017 WL 123422, at *10 (D. Mass. 2017) (adopting report and recommendation).

which the City settled for reportedly \$175,000⁴ that alleged that Kent filed a false report against an individual justifying charges for which that individual was eventually acquitted after video evidence surfaced showing that it was the officers who used excessive force against him. This claim backed by video evidence is consistent with the DOJ's finding that SPD Narcotics Bureau officers, of which Kent was a part, routinely falsified reports to conceal unlawful uses of force,⁵ and the Hampden District Attorney's Office's identification of Kent as one of the officers implicated in the misconduct identified by the DOJ, *Graham*, 493 Mass. at 357. Notably, the Supreme Judicial Court has stated unequivocally that “[c]oncealing police brutality against an arrestee, whether by the officer or a fellow officer, or making false statements that might lead to an unjust conviction are for law enforcement officers the equivalent of high crimes and misdemeanors.” *Matter of a Grand Jury Investigation*, 485 Mass. 641, 652 (2020).

None of the above information about Deputy Chief Kent is reported in the Commission's database, and it is unclear if SPD leadership factored this history into the assessment of Kent's good moral character. Certainly, the regulations provided no mandate that the agency was required to consider it. And the questionnaire used by the Commission would not have required Kent, Cicero, or Billingsley to report on any of this past behavior or these allegations. While we use the SPD as an example of the inherent problem, it should be obvious that it is the current regulatory framework and not any specific police department that has created the issue.

c. The regulations must define “good moral character” and outline the specific criteria that the agencies must evaluate in making this character assessment.

ACLUM urges the Certification Subcommittee to recommend a clear definition of “good moral character” for addition to 555 CMR 7.01 and to recommend mandatory criteria that agencies must use in assessing the same under 555 CMR 7.05. For example, the term “good moral character” is defined for admission as an attorney to the Massachusetts state bar as “embody[ing] that degree of honesty, integrity and discretion that the public and members of the bench and the bar have the right to demand of a lawyer.” Mass. Board of Bar Examiners Rules, Rule V.⁶ The Rule specifies that the Board of Bar Examiners “takes into consideration all available pertinent information as to past conduct of the candidate,” and that “[a] record manifesting a significant deficiency in the honesty, trustworthiness, diligence or reliability of a candidate may constitute a basis for denial of a recommendation for admission.” *Id.* It lays out specific criteria that applicants must meet to be deemed of good moral character. *Id.* Indeed, the term “good moral character” is defined in various rules governing an individual's ability to practice various professions. ACLUM would be happy to

⁴ Dugan Arnett, ‘One of the worst police departments in the country’: Reign of brutality brings a reckoning in Springfield, *The Boston Globe* (July 25, 2020), <https://www.bostonglobe.com/2020/07/25/metro/one-worst-police-departments-country/>.

⁵ DOJ Report at 2.

⁶ <https://www.mass.gov/professional-conduct-rules/board-of-bar-examiners-rule-v-character-and-fitness-standards-for-admission>

provide input as the Commission decides how to define the term for the purposes of certification of a law enforcement officer.

In addition, ACLUM urges a revision of 555 CMR 7.05(2)(b) that would require police departments to explain their determinations that an officer meets the character and fitness standard where an officer has a known history of misconduct or pattern of similar allegations of misconduct. To ensure that all certified officers meet this new standard, any recertification plan should require that agencies provide a report as to the character of any officers with a finding of misconduct since 2015 or with a pattern of complaints alleging the same or similar misconduct; any new recertification plan should not simply ask whether there have been any changes since the last certification. Alternatively, if the agencies are unable to meet these new requirements, the Commission should reclaim for itself the role as arbiter of character as was designated under the POST statute, and it should determine whether officers who have engaged in misconduct meet the character standard for certification.

II. The Subcommittee should require that agencies provide actual documentation that the relevant criteria have been satisfied rather than accept mere attestations.

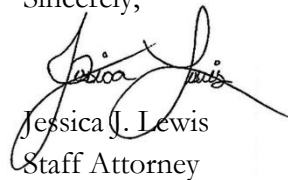
In other regards as well, the regulations delegated unchecked authority to agencies to attest that an officer met certain standards without requiring that they provide any proof of the same to the Commission. Most notably, this occurs in the requirement that the officers “complet[e] an oral interview administered by the commission.” G.L. c. 6E, § 4(f)(1)(viii), but it also occurs everywhere that the regulations and recertification plan allow agencies to attest without proof that an officer has met a standard, such as the successful completion of a background check or exam. To remove undue reliance on an agency’s assertions that a standard has been met and ensure that the Commission retains authority over the recertification process, all oral interviews intended to meet the certification standard should be recorded and a copy of the same should be provided to the Commission. Further, where an agency attests that a standard is met, appropriate documentation should be provided for verification by the Commission.

In order to leave no room for doubt that all standards have been met by each certified officer, the Commission should not adopt any recertification plan that allows standards to be met only once. The Subcommittee is currently considering whether to require that certain certification standards be met once, such as the oral interview and physical and psychological fitness exams, or to require that standards be met every certification round. ACLUM urges the Commission to require that officers continuously meet all certification standards, particularly in light of the above stated concerns.

For the reasons stated above, ACLUM asks that the Certification Subcommittee recommend the following to the Commission:

- (1) a clear definition of “good character and fitness” to be added to 555 CMR 7.01;
- (2) nondiscretionary criteria that an agency must consider when assessing character to be added to 555 CMR 7.05(2)(a);
- (3) a requirement under 555 CMR 7.05(2)(b) that agencies provide a written explanation for a determination that an officer possesses good character where that officer engaged in recent misconduct or has a pattern of complaints alleging the same or similar misconduct;
- (4) an adoption of a new recertification plan that enacts the above requirement retroactively such that an agency must explain their determination that an officer that has engaged in misconduct since 2015 meets the character standard;
- (5) the addition of questions to the questionnaire to capture all aspects of an officer’s history, including any adverse judicial credibility determinations consistent with *Graham*, 493 Mass. 383, civil findings of liability for civil rights violations, and other admissions of misconduct;
- (6) a requirement under 555 CMR 7.06(8) that all oral interviews be recorded and a copy of the recording be provided to the Commission;
- (7) no longer allowing agencies to attest without providing proof that a qualification standard has been met; and
- (8) an adoption of a recertification plan that ensures that officers are continuing to meet all minimum requirements for recertification, including physical and psychological fitness and the passages of examinations based on current training standard.

Sincerely,



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Date: 2-27-24
To: Post Commission Certification Subcommittee
Subject: Position on Recertification Standards

First, on behalf of the Fraternal Order of Police and police officer in general, we appreciate the diligence that the POSTC and its subcommittees are doing to employ the laws and requirements required by police reform legislation of 2020. It has been a grind but eventually it will be smooth.

Secondly, forgive me for starting with an introduction. I am a retired 43-year veteran of a Massachusetts police department. My last 12 years were as a Chief of Police. I was POST certified when I retired in 2022. I was heavily involved in the Legislative Police reform discussions with the Mass Chiefs of Police and many legislators. I was also a Governors appointment to the Municipal Police Training committee that was charged with implementing many training issues because of the passage of Police Reform law and POSTC compliance. I am currently the Director of Governmental Affairs for the Massachusetts Fraternal Order of Police.

I listened to the February 1st POST Commission Certification Subcommittee meeting. Below are my opinions on re-certification per 6E - 4F

- (i) attaining the age of 21; **Determined once.**
- (ii) successful completion of a high school education or equivalent, as determined by the commission; **Determined once**
- (iii) successful completion of the basic training program approved by the municipal police training committee; **Determined once**
- (iv) successful completion of a physical and psychological fitness evaluation approved by the commission; **Determined once – During the Police Reform legislative process, and annual evaluation for both was never implied. The discussion was for the same entry level standard across the board. We all agree that the wellness of our officers is paramount for many reasons. However, to make this part of the recertification requirements would be a logistical improbability that would require setting new standard measures, labor relation issues, unpredictable and endless funding. Rather than require this, I would be great if POSTC could support legislation for proactive measures and funding for officer wellness.**
- (v) successful completion of a state and national background check, including, but not limited to, fingerprinting and a full employment history; provided, that if the applicant has been previously employed in law enforcement in any state or United States territory or by the federal government, the applicant's full employment record, including complaints and discipline, shall be evaluated in the background check; **Determined once**

- (vi) passage of an examination approved by the commission; **Determined once**
- (vii) possession of current first aid and cardiopulmonary resuscitation certificates or equivalent, as determined by the commission; Annual **Certification Required**
- (viii) successful completion of an oral interview administered by the commission; and (ix) being of good moral character and fit for employment in law enforcement, as determined by the commission. **Determined once - It would be a reasonable conclusion that after the initial certification, POSTC would be aware of any new issues that would rise to the level of possible de-certification. Therefore, the POSTC would not have the ability to de-certify on any other issues if none were reported to them.**

I can certainly expect that the Chief or other Department Head would have to submit a verification that the Officer is has successfully met all standards and training to be re-certified.

During the last subcommittee meeting, there was a mention of doing an evaluation for certification. Please do not venture into that. The ability to implement a standard evaluation and the time to do that would not accomplish anything and would be another layer of unpopular oversight that will do nothing to improve police performance.

As the POST Commission continues to complete its mission, please know that it is appreciated that you are reaching out for input on these critical matters. You really need a ground level view to make a good decision on implementing POST standards. By working together, I am confident that we will improve the quality of police officers in Massachusetts which are already among the best in the country.

Please do not hesitate to contact me if I can help in any way.

Respectfully,

Frank G. Frederickson
Director of Governmental Affairs
Fraternal Order of Police Massachusetts

Dear Director Zuniga and Committee Chairman Calderone,,

My name is Jennifer Waldron, and I have been asked to share my perspective on mandated psychological testing on veteran police officers. I am a licensed mental health clinician in the state of Massachusetts, I have been certified as a first responder clinician, and currently I am in private practice working exclusively with first responders and law enforcement personnel. My career started as an individual studying criminal justice, graduating from the basic reserve police academy, with a police internship with Greenfield Police Department, and working as a correction officer at the Franklin County Sheriff's Office. I became interested in the mental health of first responders and police officers, and accepted a position at the Brattleboro Retreats Uniform Services program, after earning my graduate degree, I began supervising the program. While doing this work, I recognized a need that was not being fulfilled with trained clinicians, and decided to open my private practice focusing solely on first responders and law enforcement officers.

The mental health and well-being of police officers is my number one priority professionally. Additionally, it is equally as important to me personally, as my husband, my son, and my brother are all in law enforcement in the state of Massachusetts.

I would like to thank you and commend you for recognizing and prioritizing the mental health of the men and women in law-enforcement in Massachusetts. You have an incredible opportunity to do some groundbreaking work in this crucial area.

When I started my career as a clinician, I was met with much resistance and an incredible stigma around mental health, therapy and other mental health supports by law enforcement officers. I have heard the phrase "voluntold" many times when individuals answer the question why they've decided to start therapy. It was very difficult to see individuals so adverse to the support I knew would benefit them and that they would ultimately be thankful for. Now, 15 years later, the climate is changing, and individuals are willing and more open to therapy, mental health trainings and support. They are able and excited to share their experiences with fellow officers. There is a developing acceptance of mental health as part of having a long and successful career in law-enforcement and that mental health is vital to being a productive, well balanced and thriving police officer.. We know that individuals who are aware of and have access to mental health services and seek said services out on their own, are more successful than individuals who are mandated or told to attend.

Mandating psychological examinations prophylactically, without cause, would undermine so much of the work that I, fellow clinician, and police departments have accomplished and continue to work toward throughout our state. Our goal is to break down barriers, stigmas and prejudices, through positive experiences with mental health services and trainings.

This proposed testing is a snapshot in time that has the high potential to result in false, biased and inaccurate test results. It has the real potential to continue the fear and negative view of mental health services and could lead to losing really good officers who could benefit and thrive with programming like peer support, CISM teams and access to mental health services without prejudice, bias or stigma.

When informed of the discussion to implement this testing, my thought was "to what end?", if the purpose is to have a solid mentally healthy police workforce, the way to accomplish that is not through testing, but through the implementation of the supports that we know work such as: peer support programs, critical incident stress management teams, trained clinicians specializing in the area of first responders and law enforcement, and programming and directives that highlight and prioritize mental health education and the access to mental health services.

I am currently working with multiple agencies throughout the state of Massachusetts to support and enhance EAP program, peer support programming and working to ensure individuals have access to trained and well qualified clinicians. These are the programs that work, adding in-person inservice trainings that are interactive and educational are not only vital to officers mental health, they build bridges between providers and department and their officers throughout the state. Moving away from instilling fear and shame, and working to lift the stigma of mental health has been shown most effective when it comes from the top down in an inclusive and supportive environment.

As someone who lives in Gill, a very small rural town in Western mass, I am also concerned with how departments in my area and small towns throughout the state, will be able to bear the responsibility and burden of not only the initial psychological evaluations, but the potential fallout if an individual is in need of services, support and potential disability leave and or retirement, with already taxed departments with staffing shortages. Even more concerning is the ability to access equal resources, including access to resources after an evaluation has determined that someone is in need of mental health supports. Mental health services are currently in crisis in Massachusetts and the country, and adding unnecessary mandated ongoing psychological evaluations would add to that burden. The ability to conduct and regulate fair and equal testing across the state would be difficult if not impossible.

Please reconsider your current proposed approach to the mental health of Massachusetts law enforcement officers. The potential to do something groundbreaking and the impact on the men and women who serve Massachusetts could be just the beginning.

Thank you for your time, if I can be of any further assistance, please feel free to contact me.

Respectfully,

Jennifer Waldron, LMHC

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Gill, Massachusetts

Dear Director Zuniga and Subcommittee Chairman Calderone,

Thank you for the opportunity to speak to you regarding officer health and wellness and mandatory psychological evaluations. My name is Thomas Famolare, I am a retired Boston Police Detective with over 27 years of service. One of my last assignments with the police department was the Peer Support Unit (PSU). While at the PSU, I coordinated the Critical Incident Stress Management Team's response to the Marathon Bombings. This response was the largest police CISM response since 9/11. As you may know, the Peer Support Unit was established in 1974 first as a place for officers to address issues they may have had with alcohol and then later as our knowledge of mental health changed, matters of critical incident stress among other stressors. One of my duties at the unit was representative to the Mass Peer Support Network, where I served on the steering committee and was later elected to the position of co-coordinator. I am certified by the American Academy of Experts in Traumatic Stress in Emergency Crisis Response. Since my retirement, I have been working as an outreach coordinator for the LEADER Program and McLean Hospital. The LEADER (Law Enforcement, Active Duty, Emergency Responder) program at McLean Hospital provides specialized mental health and addiction services, designed specifically for men and women in uniform and have been treating first responders for almost 10 years. In addition to working for McLean, I was a curriculum developer "Mental Wellness" for the MPTC. I also have been working with several police departments in the greater Boston area, with NEMLEC setting up critical incident teams and peer support units, and facilitating yearly trainings so that these teams are current and in compliance with MGL 233 sec 20O. I am the PEER Support provider for the Massachusetts Coalition of Police and monitor their first in the nation self-check quiz for police officers. Just briefly, the quiz was designed by the American Foundation for Suicide Prevention and is available to any police officer in Massachusetts. Since its inception in 2017, approximately 250 officers have taken the quiz, of those 150 either reached back out to peer support or sought a referral to a mental health clinician. Last year alone, 34 people took the quiz and 15 followed up. Some of these folks were in extreme crisis at the time they took the quiz. I do not have any letters after my name, but I feel confident I can give you an informed opinion of mental wellness and psychological evaluations for veteran officers.

There is no question that over a police officer's career, whether its 5-10-15 or 30 years, the trauma they are exposed to changes them emotionally and psychologically. I would be shocked if it didn't. In my training, I show a video

called “The Things We See”. The video is a montage of horrific events first responders are exposed to. It should be called The Things We Can’t Unsee. I tell my students you all have a video regardless of your time on the job and this video stays with you forever. What changes from officer to officer is how this video (their exposure to traumatic events) affects them. As a result, a standardized test could be flawed. For example, take a police officer who works 20 years in the city of Brockton, his or her exposures to critical incidents or horrific events could be different from an officer in Lee, Mass. Along with that, in order to have a fair process, each officer would have to be evaluated in regards to their age, time on the job, area worked, race, upbringing, religion, whether or not they are veterans, married, do they have children, the list that makes us all different goes on and on. This would be the only way to fairly evaluate a police officer. Bottom line, our world views change and as a result, our evaluations would be different. If you look at PTSD in the DSM 5, police work is mentioned as a contributor to PTSD. While some think your exposure to traumatic events makes you immune to PTSD, the truth is you become more susceptible. Another concern is the probability that an officer being evaluated could quite possibly take a test and answer questions with the thought in their mind “if I don’t do well this will hurt my career”. There are several good clinicians working with our officers. For years we have been telling officers there is no shame in seeking help. A standardized test will have officers believing they are on the express train to termination, placing yet another stressor on what is already a stressful occupation. Just like with suicide prevention, mental health has to be part of the culture, department wide, top to bottom. Chiefs must lead by example and there should be some assurances that if an officer seeks help it won’t have a detrimental effect on his/her career. Departments owe it to their officers and their families.

As far as who should be the lead going forward, I believe MGL, Ch 253 section 118 covers that:

*SECTION 118. “Notwithstanding any general or special law to the contrary, the committee on police training and certification, in consultation with the executive office of public safety and security, shall promulgate regulations requiring law enforcement **agencies** to participate in critical incident stress management and peer support programs to address police officer mental wellness and suicide prevention as well as critical incident stress and the effect on public safety. **The programs shall be created internally within an agency or agencies may collaborate within a regional system. The programs shall include, but shall not***

be limited to, mental wellness and stress management pre-incident and post-incident education, peer support, availability and referral to professional resources and assistance. The committee shall ensure that each officer is notified of the program during each 3-year certification cycle under this act.”

I believe if you keep mental wellness within the agency with input from the officers and unions, you will have buy-in from the officers. Some departments are already doing the work, some are giving mental health time (comp time) for their officers to seek a wellness program or clinician to discuss matters that are private to them. There have even been cases where officers have spoken to embedded clinicians resulting in them seeking counseling. Not every officer will seek these resources, but I can assure you that you will get a better response than if you make these evaluations mandatory.

It’s also important to discuss if mental health or wellness evaluations are put in place, what do you do with the results? For example, an officer is evaluated, and it is the opinion of the doctor or clinician that he or she is suffering from depression or has Post Traumatic Stress, what then? Are they relieved of duty, are they sent for fitness for duty evaluations, are they placed on an injured-on duty status? Will they be allowed to seek treatment and if so at who’s expense? Certainly, this burden should not fall to the officer. I would submit to you that educating officers about mental wellness will not only help them to see in themselves the need to seek service, but also in their peers. Several officers that have been at the LEADER program have stated the peer part of the program helped them to understand they were not alone.

A career in policing changes a person. I would submit to you that most veteran officers would not score the same in the MMPI as they did when they first came on the job, but does that mean they can’t do the job? The answer is no. Police Officers are a very resilient group, however they are human. They feel pain, they experience highs and lows. Education and resources are what will assist them in understanding how the job can affect them. As I stated earlier, a mandatory psychological evaluation at various points in their career will only contribute to the stress they are already experiencing. This is without even taking into consideration what happens to an officer who is required to be evaluated the day after seeing a fatal car accident or responding to a horrific event.

I have asked two trusted clinicians that I have worked with over the years to weigh in on this subject. With your permission, I will forward their emails.

There is a lot to be considered in this decision.

If I can be any further assistance to you or the commission, please feel free to contact me

Respectfully submitted.

A handwritten signature in black ink, appearing to read 'Thomas J. Famolare', written in a cursive style.

Thomas J. Famolare

MASSCOP Peer Support coordinator

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TOWN OF BRIDGEWATER

POLICE DEPARTMENT

March 15, 2024



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Chairman Lawrence Calderone
POST Commissioner Dr. Hanya H. Bluestone
POST Commissioner Atty. Marsha V. Kazarosian
Massachusetts Peace Officer Standards and Training Commission
Subcommittee on Certification Policy

Dear Commissioners,

I would like to thank you for the opportunity to come before you and offer testimony on February 27, 2024 as you consider the requirements for recertification of veteran officers. I also welcome the opportunity to provide some written comments here.

We believe the plain meaning found in the police reform statute, M.G.L. c.6E, s.4(f)(1), addresses the one-time successful completion of a psychological and physical fitness evaluation for certification of veteran officers, and not a recurring benchmark. However, in the alternative I would offer the following observations as well.

Much to our disappointment, entry level physical fitness standards have been lowered in recent years for new police officer candidates, yet our recruitment numbers remain very low. Our quality candidate pool also remains generally weak and we know there is no substitute for recruiting candidates of strong character and integrity. As police leaders, we want to encourage all our current and future personnel to be active contributors on the job and remain healthy for many years to come, but we are concerned random standards do not accomplish this goal. This presents a unique opportunity for POST to incentive rather than eliminate one of policing's most valuable resources: *experience*.

There are many considerations before establishing a recurring cycle of psychological and physical requirements for veteran officer recertification: Where is the funding coming from and sustain each year? (Est. \$1,200 to \$1,500 per officer for 8,700 (A-H) officers in 2025: Est. \$10 mil. to \$13 Mil.); Who monitors?; How will officers be measured and how are the results related to job effectiveness?; What is an officer's

departmental status if they do not meet certain criteria?; Are the requirements necessary to meet a clearly defined objective?

Locally, we emphasize the value of advanced education for all officers, but we don't believe a minimum degree qualifier for hiring will produce a more educated workforce. This type of bar may exclude potential candidates serving in the military or people with significant life-experience who entered the workforce to support their family. Instead, we have taken an incentive-based approach with increased pay for degrees, a financial benefits package for attending our local university, and additional consideration during promotional opportunities. This has proven most effective for developing well-rounded officers and operate as a modern police service for our community.

We recommend POST take a similar incentive-based approach by encouraging better health initiatives for departments and officers. As one example, every other recertification cycle, ask veteran officers to submit a primary care physicians' attestation to an officer's basic fitness for duty. Another possibility is to have a confidential psychological check-in every other recertification cycle as well. Staggering certification cycles will reduce significant costs and refining recertification objectives will maintain professional value.

The Chiefs of Police in Massachusetts and the many police officers wearing the badge today are aligned with the goal of improving our honorable and noble profession, but random bars to recertification for veteran officers may not be the most effective way to truly improve officer wellness, meeting the expectations of our communities, or reduce the many challenges we face in this profession today.

I hope the comments offered here are helpful to you. Thank you again for your time and consideration on these important matters.

Sincerely,



Christopher D. Delmonte
Chief of Police

CC: Mr. Enrique A. Zuniga, POST Executive Director