

ALASKA STATE LEGISLATURE
SENATE JUDICIARY STANDING COMMITTEE

April 29, 2024

1:30 p.m.

MEMBERS PRESENT

Senator Matt Claman, Chair
Senator Jesse Kiehl, Vice Chair
Senator James Kaufman
Senator Cathy Giessel
Senator Löki Tobin

MEMBERS ABSENT

All members present

COMMITTEE CALENDAR

COMMITTEE SUBSTITUTE FOR HOUSE BILL NO. 66(FIN) AM

"An Act relating to homicide resulting from conduct involving controlled substances; relating to misconduct involving a controlled substance; relating to sentencing; and providing for an effective date."

- HEARD & HELD

PRESENTATION(S): WELLNESS AND TRAINING PROGRAM BY THE DEPARTMENT OF PUBLIC SAFETY

- HEARD

PREVIOUS COMMITTEE ACTION

BILL: HB 66

SHORT TITLE: CONTROLLED SUB;HOMICIDE;CRIMES;SENTENCING

SPONSOR(S): RULES BY REQUEST OF THE GOVERNOR

02/08/23	(H)	READ THE FIRST TIME - REFERRALS
02/08/23	(H)	JUD, FIN
02/27/23	(H)	JUD AT 1:30 PM GRUENBERG 120
02/27/23	(H)	Heard & Held
02/27/23	(H)	MINUTE(JUD)
03/01/23	(H)	JUD AT 1:00 PM GRUENBERG 120
03/01/23	(H)	Heard & Held
03/01/23	(H)	MINUTE(JUD)

03/03/23 (H) JUD AT 1:00 PM GRUENBERG 120
 03/03/23 (H) Heard & Held
 03/03/23 (H) MINUTE(JUD)
 03/06/23 (H) JUD AT 1:30 PM GRUENBERG 120
 03/06/23 (H) Heard & Held
 03/06/23 (H) MINUTE(JUD)
 03/24/23 (H) JUD AT 1:00 PM GRUENBERG 120
 03/24/23 (H) Moved CSHB 66(JUD) Out of Committee
 03/24/23 (H) MINUTE(JUD)
 03/27/23 (H) JUD RPT CS(JUD) NEW TITLE 4DP 1DNP 1NR
 1AM
 03/27/23 (H) DP: C.JOHNSON, CARPENTER, ALLARD, VANCE
 03/27/23 (H) DNP: EASTMAN
 03/27/23 (H) NR: GROH
 03/27/23 (H) AM: GRAY
 04/13/23 (H) FIN AT 1:30 PM ADAMS 519
 04/13/23 (H) Heard & Held
 04/13/23 (H) MINUTE(FIN)
 05/01/23 (H) FIN AT 1:30 PM ADAMS 519
 05/01/23 (H) Heard & Held
 05/01/23 (H) MINUTE(FIN)
 05/05/23 (H) FIN AT 9:30 AM ADAMS 519
 05/05/23 (H) Moved CSHB 66(FIN) Out of Committee
 05/05/23 (H) MINUTE(FIN)
 05/08/23 (H) FIN RPT CS(FIN) NEW TITLE 2DP 5NR 2AM
 05/08/23 (H) DP: EDGMON, D.JOHNSON
 05/08/23 (H) NR: CRONK, HANNAN, STAPP, ORTIZ, FOSTER
 05/08/23 (H) AM: JOSEPHSON, GALVIN
 05/11/23 (H) TRANSMITTED TO (S)
 05/11/23 (H) VERSION: CSHB 66(FIN) AM
 05/12/23 (S) READ THE FIRST TIME - REFERRALS
 05/12/23 (S) JUD, FIN
 05/15/23 (S) JUD WAIVED PUBLIC HEARING NOTICE, RULE
 23
 05/16/23 (S) JUD AT 9:00 AM BUTROVICH 205
 05/16/23 (S) -- MEETING CANCELED --
 02/28/24 (S) JUD AT 1:30 PM BUTROVICH 205
 02/28/24 (S) Heard & Held
 02/28/24 (S) MINUTE(JUD)
 04/29/24 (S) JUD AT 1:30 PM BUTROVICH 205

WITNESS REGISTER

ANGIE KEMP, Director
 Criminal Division
 Department of Law
 Juneau, Alaska

POSITION STATEMENT: Answered questions on the provisions included in the proposed SCS for HB 66.

LIEUTENANT KID CHAN, Alaska Statewide Operations
Alaska State Troopers
Anchorage, Alaska

POSITION STATEMENT: Delivered a presentation on the department wellness and training program.

LIEUTENANT MICHAEL HENRY, Detachment E
Alaska State Troopers
Soldotna, Alaska

POSITION STATEMENT: Responded to questions pertaining to the mental health segment of the presentation.

ACTION NARRATIVE

[1:30:49 PM](#)

CHAIR MATT CLAMAN called the Senate Judiciary Standing Committee meeting to order at 1:30 p.m. Present at the call to order were Senators Kiehl, Tobin, and Chair Claman. Senators Kaufman and Giessel arrived thereafter.

HB 66-CONTROLLED SUB;HOMICIDE;CRIMES;SENTENCING

[1:31:21 PM](#)

CHAIR CLAMAN announced the consideration of CS FOR HOUSE BILL NO. 66(FIN) am "An Act relating to homicide resulting from conduct involving controlled substances; relating to misconduct involving a controlled substance; relating to sentencing; and providing for an effective date."

[1:31:51 PM](#)

SENATOR KAUFMAN joined the meeting.

[1:32:23 PM](#)

ANGIE KEMP, Director, Criminal Division, Department of Law, Juneau, Alaska, expressed appreciation for the framing of the Senate committee substitute (SCS) and said she was available to answer questions.

[1:32:59 PM](#)

CHAIR CLAMAN said that the SCS includes provisions from HB 66, HB 265, SB 53, and SB 65. He asked Ms. Kemp to speak to these, insofar as they are built into the CS.

[1:33:19 PM](#)

MS. KEMP replied that the SCS consolidates various provisions from the aforementioned pieces of legislation. First, the grand jury provision related to allowing summaries of witness statements to be presented. (This was initially part of HB 67.) She said this is to avoid retraumatizing the victims of crime. This is a priority for the Department of Law (DOL) and is important for victims' rights and the associated constitutional provisions protecting those rights. She explained that this provision allows victims to summarize admissible evidence. The SCS acknowledges that the rules of hearsay do not apply at grand jury proceedings and mirrors (in part) the federal government's rules of procedure. Alaska would remain an outlier due to this partial adoption of the federal rules of procedure. However, several other states have adopted similar rules of procedure (e.g. Alabama, Maine, Delaware, Kentucky, etc.).

[1:36:20 PM](#)

CHAIR CLAMAN requested comments about the provisions from HB 265.

[1:36:32 PM](#)

SENATOR GIESSEL joined the meeting.

MS. KEMP briefly discussed the "name change" provision (HB 265), which would change "child pornography" to "child sexual abuse material."

[1:37:47 PM](#)

CHAIR CLAMAN noted that the Senate recently passed legislation related to competency and involuntary civil commitments and surmised that committee members would therefore be familiar with the provisions associated with SB 53. He asked about HB 66.

[1:38:07 PM](#)

MS. KEMP said that HB 66 is designed to recognize a public health crisis related to fentanyl and methamphetamine. She directed attention to the Alaska Public Health Report which shows that from 2018-2022, there was a 150 percent increase in the number of overdose deaths involving fentanyl and methamphetamine. She pointed out that the availability of overdose kits has impacted this number, though it continues to increase. HB 66 is intended to deter offences involving these substances in an effort to mitigate the worsening public health crisis.

[1:39:42 PM](#)

SENATOR TOBIN referred to the Department of Corrections (DOC) zero fiscal note and said that recent data indicated a relationship between individuals exiting DOC and overdoses. She questioned whether treatment would be offered within DOC for those who would be incarcerated because of the change - and whether an increased number of incarcerated individuals is expected. She wondered why it is a zero fiscal note, given these concerns.

[1:40:37 PM](#)

MS. KEMP replied that she cannot speak to a DOC fiscal note. She directed attention to Department of Law's fiscal note and said that, while increased litigation is expected, the costs related to HB 66 can likely be absorbed without requiring additional positions.

[1:41:12 PM](#)

CHAIR CLAMAN commented that HB 66 would be held in committee; therefore, DOC could provide this information at the next hearing.

[1:41:24 PM](#)

SENATOR TOBIN commented that a 2021 meta-analysis of 116 studies on recidivism showed that instances of reincarceration do not deter crime. She wondered how HB 66 would stop this crisis, given that it is not supported by the data.

MS. KEMP indicated that she is not familiar with the meta-analysis but would like to review it. She opined that there is a great deal of complicated data available on this issue. She said that criminal law allows for inherent deterrents. The sentencing criteria that prosecutors look to includes both individual and community deterrents. This is particularly true for fentanyl cases. While incarceration alone is not the answer, it encourages rehabilitation. For example, the resolution of these cases involves seeking treatment in some capacity (or having it made available to them) in addition to incarceration. She said that there are many ways to resolve these cases in order to meet the goal of rehabilitation.

SENATOR TOBIN said that she would like to speak with DOC regarding the substance treatment being referenced, which is not included in the zero fiscal note. She emphasized that, if the goal is to rehabilitate these individuals, the state must provide the necessary services while they are incarcerated.

[1:44:10 PM](#)

SENATOR KIEHL pointed out that the residential substance abuse treatment program within DOC is available during the last 6 months of an inmate's sentence - regardless of sentence length. He opined that there is no material difference - with respect to sentencing - in the realistic likelihood of getting inmates off the drug(s), whether or not HB 66 is passed. He turned his attention to the language of the legislation and the challenge of differentiating drug dealers, importers, and producers from fellow users. He asked whether HB 66 addressed this legal drafting challenge.

MS. KEMP replied not to her recollection. She acknowledged the challenge of carving out these factual distinctions. She surmised that this would be taken into consideration when determining how a case is handled (i.e. within the broad discretion granted to prosecutors) - regardless of whether it is codified in statute.

[1:46:14 PM](#)

SENATOR GIESSEL commented that repeated incarceration can be considered steps to rehabilitation, as each incarceration puts the individual through withdrawal and treatment. She noted that buprenorphine is costly and must be continued post-release. She questioned whether Medicaid is covering the cost. She said that there are tools (such as this) that are effective, although it takes time. She expressed disagreement with the notion that repeated incarceration is unhelpful.

[1:47:37 PM](#)

CHAIR CLAMAN noted that there is a summary of changes available and solicited a motion.

[1:47:48 PM](#)

SENATOR KIEHL moved to adopt the Senate committee substitute (SCS) for CSHB 66, work order 33-GH1482\Y, as the working document.

[1:48:09 PM](#)

CHAIR CLAMAN found no objection and SCS CSHB 66 was adopted as the working document.

CHAIR CLAMAN held HB 66 in committee.

PRESENTATION(S) : WELLNESS AND TRAINING PROGRAM
BY THE
DEPARTMENT OF PUBLIC SAFETY

[1:49:03 PM](#)

CHAIR CLAMAN announced a presentation from the Department of Public Safety (DPS). He invited LIEUTENANT CHAN to put himself on the record and begin the presentation.

[1:49:33 PM](#)

At ease.

[1:51:29 PM](#)

CHAIR CLAMAN reconvened the meeting and invited Lieutenant Chan to begin his presentation.

[1:51:36 PM](#)

LIEUTENANT KID CHAN, Alaska Statewide Operations, Alaska State Troopers, Anchorage, Alaska, explained that the presentation would cover the wellness program as well as the training troopers receive to better respond to subjects experiencing mental health crises, including Alzheimer's and dementia. He moved to slide 2:

[Original punctuation provided.]

Wellness Program Background

- Created the peer support program for the wellness of our members and to help with retention
- Created under the authority of the Commissioner, the Critical Incident Response Team (CIRT) for peer-to-peer support has been in place since 2013
- Department of Public Safety (DPS) CIRT was modeled after the U.S. Marshals Services Peer Program
- Has improved and expanded significantly under Commissioner Cockrell as the program was restructured to increase utilization

[1:54:00 PM](#)

LIEUTENANT CHAN moved to slide 3, Wellness Program Components: CIRT

[Original punctuation provided.]

Wellness Program Components: CIRT

- Six Peer Support Teams comprised four teams of sworn department members, one of spouses and family members of active employees, and one of Chaplains; new members are brought onto the teams to prevent burnout
- In 2022, approximately 1,000 peer support contacts were made with little to no therapist engagement
- In 2023, increased peer support contacts to approximately 1,900 and over a dozen people reached out to therapists through the app
- Conducted approximately 18 critical incident stress debriefings, with over 100 people in attendance
- Embraced a "proactive" approach to wellness to help de-stigmatize seeking resources or assistance

[1:54:57 PM](#)

LIEUTENANT CHAN moved to slide 4, Peer Support Program Member Training

[Original punctuation provided.]

Peer Support Program Member Training

- All new peer members are required to attend a five-day training by the International Critical Incident Stress Foundation (ICISF) Response to Group and Individuals in Crisis certification course
- Upon successful completion of the certification course, new peer members are equipped with tools to help their peers
- Advanced ICISF course
- Attend new peers certification course-Powers in Peers

[1:56:36 PM](#)

LIEUTENANT CHAN moved to slide 5, Wellness Program Components: The App

[Original punctuation provided.]

Wellness Program Components: The App

- Funded by the Alaska Police Standards Council and Mental Health Trust Authority Authorized Receipts
- Confidential tool that hosts all its wellness resources in one location
- Primary means for employees to contact the Peer Support Team; second year in use and over 300 users to date
- 90 percent of officers say cultural stigma creates a barrier to getting help for emotional or behavioral issues. Left unaddressed, stress can lead to destructive behaviors and poor decision-making, including excessive use of force
- Resource for troopers, retired troopers, Village Public Safety Officers, local law enforcement agencies, other first responders, spouses, and civilian employees

LIEUTENANT CHAN noted that the only item tracked is the number of users signed on to the app. He briefly discussed the shift in culture that has allowed DPS officers to feel more comfortable addressing emotional and behavioral health concerns.

[1:59:01 PM](#)

LIEUTENANT CHAN moved to slide 6:

[Original punctuation provided.]

Wellness Program Components: Clinician

- Identifying and enhancing existing wellness resources
- Providing counseling services to department members free of charge
- Developing and providing wellness education
- Collaborating with academic institutions on innovative (law enforcement) studies

- Developing partnerships with health and wellness providers
- Staying abreast of wellness program best practices through research
- Serving as an advocate for employees enduring personal or professional difficulties

[2:01:04 PM](#)

LIEUTENANT CHAN moved to slide 7:

[Original punctuation provided.]

Crisis Intervention Team (CIT)

- The Department of Public Safety (DPS) supports the Mat-Su CIT Coalition and its certification application to CIT International; first involved in 2015
- The CIT Coalition was formed to develop first responder partnerships, provide training, and explore additional solutions for individuals in crisis with mental illness or addiction disorders beyond the criminal justice system
- DPS developed partnerships establishing crisis intervention programs and delivering Mental Health First Aid (MHFA) training and the CIT Academy; the first CIT training was held in the Mat-Su Valley in 2017
- DPS strives to train more Troopers in CIT to help with interactions with members of the community who are experiencing a mental health crisis.

[2:03:22 PM](#)

LIEUTENANT CHAN moved to slide 8:

[Original punctuation provided.]

Crisis Intervention Team (CIT)

- 40-hour training program for law enforcement officers that includes basic information about mental illness, local mental health systems, policies, interaction with consumers and family members to learn about their experiences, verbal de-escalation techniques and strategies, and role-playing
- Consumer and family involvement in steering and advisory committees and in coordinating training sessions
- A community collaboration between mental health providers, law enforcement officers, family, and consumer advocates
- Determines the best way to transfer people with mental illness from police custody to the community mental health systems and ensures adequate services for triage

[2:05:01 PM](#)

SENATOR GIESSEL asked if this program is similar to the Crisis Now program that many communities are using.

LIEUTENANT CHAN replied that other law enforcement agencies around the state use this program and are setting up (or have set up) Mobile Crisis Teams (MCT).

[2:06:00 PM](#)

SENATOR GIESSEL said that this seems duplicative of the programs that communities are using that involve clinician response to mental health crises.

[2:06:18 PM](#)

LIEUTENANT CHAN clarified that the Mobile Crisis Team (MCT) is a function of the Crisis Now program. The Crisis Now program is under the umbrella of Crisis Intervention Teams (CIT), which is a national initiative. He explained that both clinicians and fire and emergency medical services (EMS) are involved in MCT/Crisis Now. He emphasized that all personnel are trained in recognizing substance abuse and behavioral/mental health services.

[2:06:56 PM](#)

CHAIR CLAMAN commented that Anchorage has MCT with some members who are not law enforcement. He asked if this is in line with the national structure of CIT.

LIEUTENANT CHAN replied yes. He explained that every MCT has a clinician or a fire/EMS member - and these individuals are not law enforcement. These members also receive CIT training.

[2:07:43 PM](#)

LIEUTENANT CHAN moved to slide 9:

[Original punctuation provided.]

Mental Health Training Overview

- Recognizing symptoms and identifying strategies to respond to persons in crisis while obtaining voluntary cooperation and maintaining officer safety
- Ongoing goal to improve law enforcement response and service to persons in crisis
- Learning about available resources for persons in crisis
- Understanding the Americans with Disabilities Act, Title 47, and other legal requirements
- Different types of mental health conditions
- Other behavioral health concerns such as suicide

[2:09:32 PM](#)

LIEUTENANT MICHAEL HENRY, Detachment E, Alaska State Troopers, Soldotna, Alaska, explained that MCTs (located throughout the state) are multidisciplinary teams. Each team includes a mental health professional who is available to respond to a mental health crisis as it occurs. Law enforcement and EMS respond to crises in areas without local MCTs. In addition, some areas have mental health crisis stabilization centers. In locations where these centers are not available, individuals in crisis are taken to the local emergency room. Individuals who have committed criminal offences are incarcerated. He stated that the new training program attempts to bridge the gap with respect to how law enforcement is responding to these incidents when the resources available are limited.

[2:12:52 PM](#)

LIEUTENANT CHAN moved to slides 10 - 11:

[Original punctuation provided.]

Alzheimer's and Dementia Training

- Knowledge and understanding of Alzheimer's disease (AD) is the key to positive interactions and successful outcomes
- About 50 percent of dementia cases are Alzheimer's
- With over half of all dementia cases suffering from Alzheimer's, troopers need a strong base of awareness and understanding to effectively handle any situation involving a person with AD
- Familiarize with the unique aspects of AD and learn the best ways to recognize, communicate with, and respond to people with AD
- Proper training and knowledge will encourage successful interactions and outcomes

[2:13:47 PM](#)

CHAIR CLAMAN asked whether Alzheimer's training is now a part of Alaska State Trooper Academy training.

LIEUTENANT CHAN replied yes.

CHAIR CLAMAN asked when it was incorporated into the academy training.

LIEUTENANT CHAN offered his understanding that it has been a part of the academy training for at least five years. He said that the 12-hour course replaced an 8-hour mental health first aid course, which did not offer sufficient education on the challenges associated with these crises.

[2:14:41 PM](#)

SENATOR TOBIN directed attention to slide 10, which states that 50 percent of the mental health cases are related to dementia. She asked what percentage of all cases are related to dementia.

LIEUTENANT CHAN said that he does not have those statistics and would follow up with answer.

[2:15:14 PM](#)

LIEUTENANT CHAN moved to slide 11, Alzheimer's and Dementia Training continued:

[Original punctuation provided.]

Things we can do to assist:

- Communicate slower and ask simple questions
- Ask for specifics about where they live and with whom, where they're going, how they got where they are
- Ask who the president is
- Look for identification bracelets
- Be patient and understanding

Sundowning: When an individual becomes disoriented or confused in the evening after being coherent during the early part of the day

[2:16:58 PM](#)

LIEUTENANT CHAN moved to slides 12 - 13, Alzheimer's and Dementia Symptoms/Training:

[Original punctuation provided.]

- Sometimes steal items - may not want to treat as a criminal case; rather get them to help
- May make calls for assistance or become paranoid, believe items are missing
- Family may have moved some things for the person's own protection
 - Items that would be considered a routine activity, such as cooking, but are now unable to be done safely, so pots and pans are removed

LIEUTENANT CHAN stated that fire and EMS are on site during these calls.

[2:18:34 PM](#)

LIEUTENANT CHAN moved to slide 13, Alzheimer's and Dementia Symptoms/Training, continued:

[Original punctuation provided.]

Individuals with dementia may:

- Not know where they are
- Give vague answers to where they live, what they're doing
- Be dressed inappropriately or look disheveled
- Misplace things and lose the ability to retrace steps
- Have decreased or poor judgment

[2:19:14 PM](#)

LIEUTENANT CHAN moved to slides 14 - 15:

[Original punctuation provided.]

Responding to Alzheimer's and Dementia

- Don't challenge the person's reality
- Work with individuals through de-escalation
- People with Alzheimer's are often frail
- Instruct officers to slow down and help those who need it
- Talk to the individual as if a loved one

[2:20:25 PM](#)

LIEUTENANT CHAN moved to slide 15: Responding to Alzheimer's and Dementia, continued:

[Original punctuation provided.]

- They're usually scared due to their confusion
- Address their basic needs
- If you were out there, how would you want to be treated
- Don't be too abrupt; try to talk to them to make them more comfortable
- Taking them into custody is best accomplished verbally if at all possible

[2:21:58 PM](#)

SENATOR KAUFMAN asked if different forms of dementia receive a different response.

LIEUTENANT CHAN replied no. He explained that all forms of dementia share similar symptoms with respect to diminished capacity. He said that troopers always exercise due care when interacting with these individuals.

[2:22:41 PM](#)

CHAIR CLAMAN said that constituents have inquired about law enforcement's Alzheimer's and dementia training. He asked if the academy training program for these is permanently set or if it will continue to be developed and improved.

[2:22:57 PM](#)

LIEUTENANT CHAN replied that AST is always working to improve training. He said that training evolves over time, as more information becomes available. He emphasized that the goal is to ensure that the troopers receive training that reflects current and best practices.

[2:23:19 PM](#)

CHAIR CLAMAN expressed appreciation for the presentation.

[2:23:50 PM](#)

There being no further business to come before the committee, Chair Claman adjourned the Senate Judiciary Standing Committee meeting at 2:23 p.m.