

I don't think the primary problem with the police violence is a mental health issue. We must focus on the combination of implicit and explicit bias, lack of adequate training, along with a permissive attitude of society and supervising agencies.

Good first step by NECOEM

This needs to be a permanent fixture of ACOEM/NECOEM as this problem will be with us for a long time.

While there may not be studies to show the benefits of periodic exams, given the job description/analysis of a police officer, I believe a periodic exam analogous to those recommended for fire fighters would be appropriate.

How do you envision the role of Occupational Med. providers changing if Police Departments move forward with significant force reduction, and shifting to community-led law enforcement?

What is the training or connection of police assessment to racism

Why are we so focused on fitness for duty? It is not the major cause!!

Hi Amir... We do annual psychologicals at the VA which in my experience are simply interviews and only go to testing if requested by the examiner due to an overt issue. With mental health issues- also from experience if an individual wants to tell the provider all is ok, without in-depth probing an issue may not be exposed. We had such a situation. So my comment is that it depends how a periodic psych eval is conducted to weed out a mental health issue. Kris Bulas MD.

ACOEM developed the LEO Guidance, which recommends post-offer psychological evaluation. It is not clear that this is being done routinely...is this something we can promote, i.e. post-offer psychological routinely. Some states are not routinely doing this.

I am an Air Force flight surgeon and see security forces personnel for their annual exams. As with all service members, we have an annual on-line medical and mental health questionnaire that they complete and I review prior to their exam. I feel this does help us identify some members with concerns for which we can intervene. Despite the lack of evidence, I feel that the annual visit is of value. Though, I cannot say that it can help me detect racial bias, only some medical or mental health concerns. I get a better sense of their biases when I visit their units and gain trust, which takes a while to do. My feeling is that annual exams and embedding medical or mental health personnel in security / police units might be the best I can do in my work. Certainly I can also try to serve as an example and work to open dialogue. I'm not sure that I have a good question or solution to the current crisis, but thought I'd share my experience.

Can we restrict discussion to OEM?

How can we as OEM physicians push for change in the initial training, FFD and ongoing evaluations of police officers? (I meant to pose this questions at the end of my comments earlier).

In trying to train on racism, in my experience, we have started by providing a safe environment to talk about, explore and share our implicit bias. Then it has helped, in my experience, to provide a supportive structure for discussing and working to deal with those biases. Admittedly, I've only done this in academic environments and am not sure how this works in a police unit. I feel that it would be harder for me to do this in that setting.

Disappointed that we did not adress racism more. Mental lhealth is not the major problem!!