WHEREAS, there is no current legal requirement in Vermont that ensures individuals have access to necessary healthcare during the first 72 hours of arrest and detainment and while being held in police custody; and

WHEREAS, Vermont’s current Use of Force policy does not create an affirmative duty for officers to ensure an individual’s access to care if an emergent health care situation arises, creating a legal gap in rights; and

WHEREAS, disputes over excessive use of force during police arrests have occurred in Vermont, most recently exemplified by the Chittenden County State Attorney’s request to charge a Shelburne police officer with simple assault;¹ and

WHEREAS, there is evidence nationwide that individuals of racial and ethnic minorities are stopped more by the police and experience higher rates of physical force from police² and are denied care while in police custody more often than white individuals; and

WHEREAS, there have been cases of police denying people in custody necessary medical care, disproportionately people of color, leading to serious clinical sequelae or their death – exemplified by the case of Freddie Gray in Baltimore in 2015,³ Andrew Kearse in Schenectady in 2017,⁴ Tori Carter in Detroit in 2005,⁵ and George Floyd in Minneapolis in 2020;⁶ and

WHEREAS, racial and ethnic minorities are provided lower quality healthcare when compared to white individuals, for example, black individuals are more likely to be discharged earlier from hospitals following medical treatment, are less likely to be offered newer treatment options,⁷ and are more likely to receive less desirable treatments,⁸ and

WHEREAS, the Vermont Statute for Supervision of Adult Inmates at the Correctional Facilities grants incarcerated individuals the right to continue their prescribed medication regimen, a screening for substance use disorder and ensures that the incarcerated individuals receive medically necessary treatment in order to prevent the onset and worsening of a health condition and achieve proper growth,⁹ but these rights are not currently extended to individuals in police custody; and

WHEREAS, codifying the right for individuals in custody to access necessary medicine to manage chronic conditions and/or to treat any injuries, medical episodes or mental health crises

⁵ https://caselaw.findlaw.com/us-6th-circuit/1143765.html
⁹ https://legislature.vermont.gov/statutes/section/28/011/00801
that may have occurred during arrest or while in custody would help establish equitable access
to care and protect the health and safety of all detainees; and,

WHEREAS, establishing standards of care during the first 72 hours of arrest for all detainees
that mandate officers to contact healthcare professionals in any instance of medical necessity
and create a clear set of instructions to follow when observing a medical emergency or mental
health crises could ensure the health, safety and well-being of all individuals being held in police
custody; and

WEREAS, while no other state currently has a legal right for a person in an encounter with
police to request and be provided immediate emergency medical care there are efforts underway
in Massachusetts and Connecticut to provide such a right, called “Medical Civil Rights”\(^\text{10}\)
therefore, be it:

RESOLVED, that the Vermont Medical Society commits to work with the Vermont
Legislature and partners such as the American Civil Liberties Union of Vermont,
Vermont Legal Aid, Disability Rights Vermont, the Vermont Human Rights
Commission and the Office of the Defender General to:

- bring awareness to the needs for consistent and necessary medical care for
  individuals held in police custody upon the first 72 hours after arrest; and,
- work to codify and put standards into place establishing the right to emergent
  medical care while in police custody; and,
- support the development of training for police officers to recognize emergent
  medical episodes and respond to requests for medical care from individuals in
  their custody.