



Manchester Police Department Policy

Chapter 9 Disabled	Policing Protocol	Section 12	Mentally Ill or Gravely Individuals, Crisis Team (CIT), and REACT
Intervention Model			
Effective	December 18, 2013	Rescinds	April 8, 2011
Issuing Authority	Chief Marc Montminy	SOP:	9-12
CALEA Standard(s):	41.2.7a - e, 72.5.4, 72.6.1		
Risk:	High		

PURPOSE

To establish the policies and procedures which govern the handling of mentally ill or gravely disabled individuals by personnel of the Manchester Police Department.

To establish the policies and procedures under which the Crisis Intervention Team (CIT) may operate to ensure a coordinated response in providing services to individuals who are mentally ill or involved in a crisis.

To establish the policies and procedures under which personnel of the Manchester Police Department will implement the REACT model.

DEFINITIONS

- A. Crisis Incident: Any call in which an individual would benefit from the specialized training and knowledge of the CIT member. Crisis incidents include but are not limited to calls involving: persons known to have mental illness who are experiencing a crisis, persons displaying behavior indicative of mental illness, attempts or threatened suicides, calls involving gravely disabled individuals or calls in which individuals may be experiencing an emotional trauma.
- B. Mentally Ill: A person who has a mental or emotional condition, which has substantial adverse effects on their ability to function and who requires care and treatment. Persons who are alcohol and/or drug dependent are specifically excluded from this category.
- C. Gravely disabled: A condition in which a person, as a result of mental or physical impairment, is in danger of serious harm as a result of an inability or failure to provide their basic human needs (e.g. food, clothing, shelter) and as such the person is mentally incapacitated of determining whether or not to accept such treatment, including the ability to seek hospitalization or treatment, and/or purposely disregarding treatment through non-compliance and failure or refusal to take prescribed medications.



- D. Risk of serious physical harm: A risk that a reasonable person would have that harm could be inflicted upon another as evidenced by recent overt acts, behavior or threats.
- E. Incapacitated Person: A condition in which a person, as a result of alcohol and/or drug abuse, has their judgment impaired, so that they are incapable of realizing and making a rational decision regarding the need for medical treatment.
- F. CIT Officer: A police officer who has successfully completed required training in crisis intervention techniques and is certified in first response crisis intervention. The CIT officer often works in partnership with a CIT clinician to respond to incidents of persons in crisis.
- G. CIT Clinician: When available and called upon a mental health professional who is trained in mobile outreach crisis intervention works in partnership with the CIT officers to effectively respond to incidents of persons in crisis.
- H. Reasonable Cause: Facts that would lead a person of ordinary care and prudence to believe and conscientiously entertain an honest and strong suspicion that the person in question is suffering from a mental illness or disorder.
- I. REACT Model: Responding to Children of Arrested Caregivers Together (REACT) - designed to provide tools and resources to law enforcement when an arrestee cares for a minor and to provide support to children and remaining family members when a caregiver is arrested.

POLICY

- A. Personnel of the Manchester Police Department shall adhere to the policies set forth below and the procedures in SOP 9-12 when dealing with mentally ill or gravely disabled individuals, serving warrants issued by the Probate Court, or making a Police Emergency Examination Request (PEER).
- B. Reporting Procedures.
 - 1. Contacts with mentally ill or gravely disabled individuals resulting in their being taken into protective custody must be documented in an incident report.
 - 2. The incident report shall include, but not be limited to, method of contact, method of transportation and place where transported, if applicable.
 - 3. Copies of the probate court warrant or the Police Emergency Examination Request (PEER) shall be attached to the incident report.
- C. Training.
 - 1. It shall be the responsibility of the Training Unit to provide and document entry-level training on mental illness and persons suspected of suffering from mental illness to agency personnel who may have contact with the public.
 - 2. It shall be the responsibility of the Training Unit to provide and document refresher training on mental illness and persons suspected of suffering from mental illness at least once every three years to agency personnel who may have contact with the public. **TS Activity**.

D. CIT.
Policy 9-12
of 3

Page 2



1. It is the policy of the Manchester Police Department to respond to individuals with mental or behavioral health problems with professionalism, compassion and concern for the safety of all involved. During these incidents officers may use the Crisis Intervention Team (CIT) as a resource when available for identifying and providing services for the individuals in crisis.
 2. The Manchester Police Department has developed a proactive approach by using trained officers in the Field Services Division to respond to calls for service and initiate contact with citizens who are dealing with mental illness. By working actively with the mental health community, the program can promote favorable long-range alternatives when dealing with citizens who suffer from mental health problems. Citizens with on-going mental health problems can be identified and measures taken to reduce the frequency of police contacts.
- E. Seizure of Firearms of Person Posing Risk of Imminent Personal Injury to Self or Others. In the event that Manchester Police Department officers have probable cause to believe that a person who possesses a firearm or firearms poses a risk of imminent personal injury to self or others, those officers shall file a complaint and affidavit for a warrant to a judge of the Superior Court for seizure of such firearm or firearms.
- F. REACT (Responding to Children of Arrested Caregivers Together) Model. In the event that a full-custody arrest is made, a child is present at the time of the arrest, and the arrestee is the caregiver of said child, the arresting officer may determine that a referral to 211/EMPS is necessary. In the event an arrestee is taken into custody and it is determined that the arrestee care for a child or dependent who is NOT at the scene, the officer will ensure that the child or dependent is safe, utilizing all available resources which may include contacting the Department of Children and Families and/or other appropriate social service agencies.

Standard Operating Procedures

Chapter 9 Disabled Crisis Intervention	Policing Protocol	Section 12	Mentally Ill or Gravely Individuals, Team (CIT), and REACT Model
Effective	December 18, 2013	Rescinds	April 8, 2011
Issuing Authority	Chief Marc Montminy	Policy:	9-12
CALEA Standard(s):	41.2.7a - e, 72.5.4, 72.6.1		
Risk:	High		

PURPOSE

To establish the policies and procedures which govern the handling of mentally ill or gravely disabled individuals by personnel of the Manchester Police Department.

To establish the policies and procedures under which the Crisis Intervention Team (CIT) may operate to ensure a coordinated response in providing services to individuals who are mentally ill or involved in a crisis.

To establish the policies and procedures under which personnel of the Manchester Police Department will implement the REACT model.

PROCEDURES

A. Guidelines for Recognition of Persons Suffering From Mental Illness.

1. Others saying the person is not him/herself,
2. Persons exhibiting behavior that is dangerous to themselves or others,
3. Persons exhibiting withdrawn behavior, talking only to themselves,
4. Persons experiencing sensations not based on reality such as visions, odors, tastes, voices,
5. Persons with unrealistic ideas or grand thoughts,
6. Persons that believe they are worthless,
7. Persons exaggerating events, and/or
8. Persons experience loss of memory and/or time.

B. Accessing Available Community Mental Health Resources. Personnel shall be aware of available resources and shall refer to the Human Services Directory kept on the Shift Supervisor's desk. Additional resources include:

1. Community Child Guidance Clinic 860-643-2101

Manchester Police Department

Standard Operating Procedures

- | | |
|--|------------------------------|
| 2. Community Prevention & Addiction Services | 860-645-0487 |
| 3. CT Clearinghouse | 800-232-4424 or 860-793-9791 |
| 4. Genesis Center | 877-884-3571 |
| 5. Gero-Psychiatric PPH | 860-647-6828 |
| 6. Manchester Memorial Hospital | 860-646-1222 |
| 7. Senior Substance Abuse | 860-647-3096 |

C. Contact and Interviews and Interrogation. Personnel who interact with subjects who may be mentally ill should consider safety issues since a person with mental illness may react differently. This includes persons who are victims, witnesses and suspects.

1. Evaluate the situation,
2. Do not abuse or threaten the person,
3. Avoid unnecessary excitement, and
4. Sworn personnel who find it necessary to interview or interrogate a person with a mental illness shall follow all laws and procedures that would apply to any other interview or interrogation.

D. Police Emergency Examination Request.

1. Any officer who comes in contact with a person who he/she has reasonable cause to believe is mentally ill and dangerous to himself or others, or gravely disabled and in need of immediate care and treatment:
 - a. Shall take such person into custody and have the person taken to a hospital for an emergency examination.
 - i. The person may be restrained but only to the extent necessary to protect the person, officer and/or the public, using only that amount of force necessary to affect the restraint.
 - ii. The person shall normally be transported by ambulance but may be transported by the officer if circumstances warrant and with the shift supervisor's approval.
 - iii. Conduct a search of the individual and possessions for weapons and/or items that would constitute an obvious threat to the safety of the individual, the officer or the public.
 - b. Shall complete a written Police Emergency Examination Request (PEER) using the designated form, detailing the circumstances under which the person was taken into custody:
 - i. The request shall be left with the facility.

Manchester Police Department

Standard Operating Procedures

- ii. A copy of the request shall be attached to the incident report.
- c. Sworn personnel shall be required to stand by at the hospital with the person in distress until the officer:
 - i. Completes and provides the Police Emergency Examination Request (PEER) to Emergency Department (ED) staff,
 - ii. Provides the staff member with a basic overview of the person's behavior (e.g., any known hazards such as threats and/or violent behavior),
 - iii. Remains on site at the ED while the person is registered and changed over into hospital clothing. (It is this time period where the greatest risk of violent behavior is likely to occur), and
 - iv. Notifies the ED Primary Nurse (the patient's assigned nurse) or Charge Nurse (ED Supervisory Nurse overseeing the staff of ED nurses) when the officer(s) are clearing the ED.
- 2. Probate Court Warrants. Probate Court can issue warrants directing the police department named to apprehend the person (respondent) named and have that person taken to the hospital named for:
 - a. An examination by a psychiatrist and a physician, or
 - b. A hearing before the Judge of Probate.
 - c. The warrant shall remain active until the person (respondent) named is apprehended.
- E. Duties of the Officers Serving the Warrant.
 - 1. Ensure that the DOB of the person for whom the warrant is issued appears on the warrant,
 - 2. Apprehend the person,
 - 3. Advise the hospital named in the warrant that the person (respondent) shall be transported to their facility,
 - 4. If necessary to protect the person, the officer or the general public, the officer may restrain the person **using only that amount of force necessary to affect the restraint.**
 - 5. Determine the appropriate mode of transportation (ambulance or cruiser),
 - 6. Ensure the person is taken to the hospital named,
 - 7. Upon arrival at the hospital, turn the person over to the custody of a duly authorized representative of the hospital and have that representative sign the "received by" section at the bottom of the warrant form,

Manchester Police Department

Standard Operating Procedures

8. Sworn personnel shall not be required to standby at the hospital. The Emergency Department staff may request a standby based upon the person's behavior (e.g. violent tendencies),
9. Sign the "delivering officer" section, as well as complete the date, time, and delivering officer's department sections of the warrant,
10. Ensure that the signed original copy of the warrant is returned to the appropriate Probate Court, and
11. Attach a copy of the warrant to the incident report.

F. Crisis Intervention Team (CIT).

1. Identifying CIT Calls for Service.

- a. Communications/Dispatch is the primary source for identifying CIT calls; however, officers investigating an incident may classify it as a CIT situation.
- b. Types of calls that may require CIT officers include, but are not limited to:
 - i. Attempted Suicides
 - ii. Mental Health Disorders
 - iii. Medical assists
 - iv. Traumatic Incidents
 - v. Sudden Deaths

2. Communications Responsibilities.

- a. When a crisis incident as described above is reported to Dispatch, the dispatcher may include a CIT officer if available to the assignment.
- b. Communications shall attempt to compile the necessary information and record the information in the comments section of the CAD screen.
- c. Dispatch can flag in PRIORS the CIT calls for service location when deemed appropriate.

3. Police Officer Responsibilities.

- a. CIT Officers will ensure that Communications knows that they are a CIT Officer when going in service.
- b. Officers, upon arriving at the incident and identifying it as a CIT call, can request the assistance of a CIT Officer. Officers can also request to have Mobile Crisis Services respond to the scene, when available or they can utilize the Mobile Crisis Hotline for follow-up. The final decision as to the outcome or arrest of the subject is the responsibility of the primary officer, CIT Officer, or Supervisor on scene.
- c. Officers shall complete the incident report and necessary documentation using the PRIORS incident report writing system.

Manchester Police Department

Standard Operating Procedures

- d. In the event an emergency examination is deemed appropriate pursuant to CGS 17-183a an officer may elect to transport by police cruiser or ambulance.
- e. In any incident that a subject is injured or physically ill, a police vehicle cannot be used and an ambulance will be requested.
- f. After completion, a copy of all CIT reports and/or PEER forms shall be placed in the CIT coordinators mail box.
- g. When possible, CIT officers shall volunteer for CIT calls as the primary or secondary responders if they are available.
- h. CIT Officer can ask dispatch to flag in PRIORS the CIT calls for service location when deemed appropriate.

4. Supervisory Responsibilities.

- a. Supervisors may monitor the dispatching of CIT officers to the appropriate calls and ensure that appropriate resources are available to assist the officer. This includes calls at Community Health Resources (CHR).
- b. They shall ensure that the Incident Report is properly filled out and that a report is left for the CIT coordinator.
- c. In the event that a Sergeant or Lieutenant has completed CIT training, that supervisor will serve as a CIT field supervisor on shift and, if needed, at the scene of CIT calls.

5. CIT Program Coordinator.

- a. The Chief of Police will assign an officer to serve as the CIT Coordinator. The CIT Coordinator will serve as a liaison between the Police Department and the Department of Mental Health or its subcontracted agency providing Mobile Crisis Services and any other mental health provider in the Town of Manchester.
 - b. The CIT Coordinator will review reports, PEER forms, evaluate outcomes, prepare and forward a monthly report to the Chief of Police or his designee, outlining the status of the team, response to calls for CIT service statistics and attend Compstat meetings to make recommendations and resolve issues related to repeat calls for service.
 - c. The CIT Coordinator will ensure there are regular meetings held with the Mobile Crisis Unit Coordinator and will provide that unit coordinator with necessary reports to ensure proactive service is provided to those individuals identified by CIT officers as in crisis.
 - d. The Chief of Police or designee shall select the officers for CIT certification. Candidates shall attend a 40 hour certification program and receive in-service training as needed.
6. The CIT Coordinator will provide crime analysis for the Chief's monthly Compstat Meetings. A timely and accurate CIT analysis report on number and location of mental health calls for service will be available for the Compstat meetings.

Manchester Police Department

Standard Operating Procedures

G. Seizure of Firearms of Person Posing Risk of Imminent Personal Injury to Self or Others (Legal Authority CGS 29-38c).

1. In the event that any two police officers have probable cause to believe that a person who possesses a firearm or firearms poses a risk of imminent personal injury to self or others, those officers shall file a complaint and affidavit for a warrant to a judge of the Superior Court for seizure of such firearm or firearms. Probable cause must exist to believe that:
 - a. Such person poses a risk of imminent personal injury to self or other individuals.
 - b. Such person possesses one or more firearms.
 - c. Such firearm or firearms are within or upon anyplace, thing, or person.
2. Probable cause may be based on:
 - a. Recent threats or acts of violence directed towards self or others.
 - b. Recent acts of cruelty to animals.
 - c. Reckless use of brandishing of a firearm.
 - d. A history of use or threatened use of physical force against others.
 - e. Illegal use of controlled substances and/or abuse of alcohol.
 - f. Involuntary confinement to a mental hospital.
3. Police officers must have conducted an independent investigation and after such independent investigation, have determined that such probable cause exists and that there is no reasonable alternative to prevent such person from causing imminent personal injury to self or to others.
4. A copy of the warrant shall be given to the person named therein together with a notice informing the person that such person has the right to a hearing and the right to be represented by counsel.

H. REACT Model.

1. Officers shall determine whether an arrestee is caring for children or other dependents.
 - a. Arresting officers shall make reasonable attempts to directly ask the arrestee if he/she is caring for minor children or other dependents, even if they are not present at the scene.
 - b. The officer shall observe for signs that suggest the presence of children or other dependents even if they are not present at the time of arrest (e.g. toys, diapers, strollers).

Manchester Police Department

Standard Operating Procedures

2. Officers shall make reasonable efforts to provide persons taken into custody with an opportunity to arrange care for children dependent upon the arrestee for care. The existence of dependence; however, should not be the determining factor as to whether the arrestee is held in custody or released.
3. Whenever an arrestee is taken into custody, and is accompanied by a child or other dependent, the following procedures are to be followed:
 - a. When possible, the arrest shall be made out of the dependent's view
 - b. The officer will ask the arrestee about his/her preferences for the child or dependent's care and will attempt to place the child or dependent in the care of a suitable adult when possible. If another responsible and suitable adult is present with the arrestee, the arrestee may place the dependent in the care of that adult.
 - c. If it is determined by the responding officer that there are child(ren) and family needs that would be better served by an EMPS clinician, the officer will call 211/EMPS mobile crisis and request to have an EMPS clinician respond to assist with the child(ren) and family's needs. If a caregiver refuses 211/EMPS mobile crisis or the officer is unable to call 211/EMPS, the officer will leave information describing how to contact 211/EMPS mobile crisis in case the caregiver would like services in the future.
 - d. If the officer has concerns for the dependent's safety or cannot identify a suitable alternate caregiver, the officer will call the Department of Children and Families to ensure the alternative caregiver is appropriate.
 - e. An attempt will be made to ensure the children are informed in age-appropriate language about their caregiver's arrest, next steps, and who will care for the child while the arrestee is in custody. This could be done by the arrestee (if cooperative), alternate caregivers or family members, an officer, an EMPS clinician, or other responsible adult. The arrestee will be given the opportunity to speak with and reassure the child when feasible, safe, and in the child's best interest.
 - f. If another responsible adult is not present or refuses custody of dependent, the dependent will be transported to police headquarters in accordance with department guidelines. A reasonable effort will then be made to arrange for alternate care, taking into consideration the arrestee's wishes for alternate caregivers. If alternate arrangements are unable to be made in a reasonable time period, the investigating officer will contact the Department of Children and Families or other appropriate social service agency to make temporary custody arrangements.
 - g. Attempts will be made to provide remaining caregivers with basic information about the booking process and detention as well as how to follow-up on an arrestee's placement.

Heather Martel 11/7/2013 1:22 PM

Formatted: No bullets or numbering,
Tabs:Not at 0.5"

Danielle Stone-Mit..., 11/8/2013 12:24 PM

Formatted: No bullets or numbering,
Tabs: 1.36", Left + 7.3", Right + Not at

Danielle Stone-Mitc..., 11/8/2013 1:01 PM

Formatted: Font color: Red

Danielle Stone-Mit..., 11/8/2013 12:24 PM

Formatted: No bullets or numbering,
Tabs:Not at 0.5"

Manchester Police Department

Standard Operating Procedures

4. When making a full custody arrest, a child is present at the time of arrest, the arrestee is the caregiver of said child, and a decision has been made by a responding Officer or Supervisor to contact 211/EMPS, the following protocol will be followed:
 - a. The Manchester Police Department will make a REACT referral when a caregiver is arrested and a child is present at the time of arrest.
 - b. In order to make a REACT referral, the officer will call 211/EMPS, then press 1.
 - c. The officer may call 211/EMPS from the scene.
 - d. The officer will provide the 211/EMPS hotline worker with the following information: location, names of persons involved, age of the child(ren).
 - e. The officer will remain on scene, if necessary, until EMPS personnel arrives; however, if the scene is safe to clear, the officer will do so.
 - f. The officer will explain to the caregiver that EMPS will be contacting them.
 - g. The officer will document that a REACT referral was made in their report. The officer will also check the REACT box on the general tab in the PRIORS Incident report.

5. When an arrestee is taken into custody and it is determined that the arrestee cares for a child or dependent who is NOT at the scene, the officer will ensure that the child or dependent is safe.
 - a. The officer will ask the arrestee about his/her preferences for the child of dependent's care and who should be notified about the arrest.
 - b. The officer will notify appropriate adults in order to confirm the child or dependent will be cared for (e.g. not sent home from school when nobody is home following the arrest)
 - c. If another appropriate adult is not available, the Department of Children and Families or other appropriate social service agency will be notified.
 - d. If an arrestee indicates that he/she is the caregiver of a dependent and the dependent was not at the scene of the arrest (e.g., at school), if appropriate and necessary, an arrestee may be granted additional phone calls to ensure an alternate caregiver is available to care for his/her dependent.

Manchester Police Department