



Training Bulletin

SANTA BARBARA POLICE DEPARTMENT



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Responding to People in Crisis

Crisis Intervention is a process that helps individuals in crisis find a solution, and first responding police officers are part of that process. In 2017, SBPD officers were dispatched to 501 suicidal subjects/ suicide attempt calls. This year from January 1, 2018 to August 10, 2018 we have responded to 283 calls for service for suicidal subjects and/or suicide attempts.

Goals and Objectives:

The goal of this training is to increase your safety and the safety of all those involved in calls for service, dealing with people in crisis. This bulletin is intended to expose officers to tactics and concepts that will help increase safety and efficiency when engaged in these incidents. Each call is different and officers are expected to be flexible and adapt as needed.

Concepts to be Aware of When Dealing with a Person in Crisis	
Increase time and distance	Use their first name
“Lower and slower approach”	Help them focus
Reduce distractions	Be respectful and polite
Utilize contact and cover	Be calm, firm and non-confrontational
Be truthful	Use active listening techniques
Show empathy	Help problem solve

(Ventura County CIT program)

Recognizing a Person in Crisis:

When someone is in crisis, often there was a precipitating event that made the person unable to resolve the problem using normal coping methods. Emotions and irrational reasoning control the person’s actions, and he or she is likely to experience high levels of frustration and aggravation. This crisis may be a result of mental disorders, physical or developmental disabilities, a major incident in one’s life or a combination of factors.

Patrol officers are not expected to be able to clinically diagnose a person in crisis. However, officers are more effective and safer during critical incidents when they can recognize the common signs of a person who may be in crisis.

How Does a Crisis Typically Occur?

Often there is a precipitating event such as: the death of a loved one, an act of violence, divorce, job loss, a reaction to medication or a reaction caused by a failure to take medication. The person’s perception of the event

may be accurate, erroneous, or somewhere in between. Normal methods of coping and problem solving fails, resulting in a breakdown in control, an inability to respond appropriately and a general feeling of “overwhelmed.”

Factors Influencing a Person In Crisis	
Mental Illness	It is important for officers to understand that mental illness is a biological illness, like heart disease, cancer, or diabetes. Nobody chooses to develop a mental illness, and one in four families is affected. There is no cure, but many people stabilize to live full, productive lives. Medications often help, but they are not perfect and there can be side effects or episodes even when people are taking their medications.
Substance Abuse	Certain drugs can create problems that trigger mental health symptoms. In other cases, substances can create the appearance of mental health symptoms like paranoia, delusions or depression while the person is under the influence of the drug. When these symptoms last after the drugs wear off, then it can indicate a co-occurring mental health disorder
Medical Condition	The onset and existence of medical health issues and illnesses may contribute to feelings of sadness, anxiety, depression and/or anger. A mental health professional may be able to help individuals cope with any challenges that arise as they face a difficult or debilitating illness.
Situational Stress	A job loss, financial problems, troubled personal relationships or other situations may contribute to a personal crisis.
Developmental Disabilities	Are severe, long-term problems. They may be physical, such as blindness, they may affect mental ability, such as learning disorders or the problem can be both physical and mental, such as Down Syndrome.

Officer’s Contact and Interaction

The role of the first officers on scene of a subject in crisis is not to diagnose the behavior, but to help de-escalate the situation as much as possible. The Officer’s goals should then be to try and engage the subject to reason more clearly (employing any of the concepts listed above) and assist in getting the subject connected with resources, like speaking with professional help.

De-escalation tactics and techniques are those actions undertaken by an officer to avoid physical confrontations, unless immediately necessary to protect someone or to stop dangerous behavior. These tactics, when the totality of the circumstances and time permits, also help minimize the need to use force during these incidents and increases the likelihood of voluntary compliance and cooperation.

Examples:

- Request backup and specialized help, such as officers or teams of officers and mental health workers who have received crisis intervention training.
- Not rushing into situations unless immediate action is required. Move slowly, calm the situation, and strive to reduce the stress level.

(Police Executive Research Forum)

De-escalation does *not* take away or restrict officers' discretion to make an arrest if it is necessary, or to use force against an imminent threat. However, arrests and force should generally be considered last resorts in dealing with Emotionally Distressed Persons.

It is the practice of this department that when all of the reasonably known circumstances indicate it is safe, prudent, and feasible to do so, an officer should attempt to slow down, reduce the intensity or stabilize the situation so that more options, time and/or resources can become available for incident resolution.

When time and circumstances reasonably permits, an officer should consider whether a subject's lack of compliance is a deliberate attempt to resist or is the result of an inability to comply based on factors including, but not limited to:

- Medical conditions
- Mental impairment
- Developmental disability
- Physical limitation
- Language barrier
- Drug interaction
- Behavioral crisis

An officer's awareness of these possibilities should be balanced against the facts of the incident and then consider which tactical options are the most appropriate to bring the situation to a safe resolution. An officer is not expected to engage in de-escalation measures that could jeopardize the safety of the community or of any employee.

Where circumstance and time also reasonably permits, officers should take reasonable and prudent actions that work to mitigate any immediate threat, which in turn gives the officer more time to call for further resources (like Crisis Negotiators) and utilize other tactics. The more resources that are available for an officer to use, the more likely it is to have a reduction in the overall force used in these incidents.

Examples of Actions Used to Mitigate Immediate Threats:

- Decrease your exposure to the potential threat by using distance or physical barriers between you and the uncooperative subject
- Contain the threat (using more officers as cover/containment around the subject)
- Maximize the use of cover or concealment to reduce officer's exposure, placing the officer(s) in a safer position as it relates to the potential threat
- Communicate from a safe position while attempting to gain the subject's compliance through the use of verbal persuasion, advisements, and/or warnings. Generally, communication techniques should engage active listening to calm agitated individuals and promote rational decision-making.
- The officer's physical actions may also de-escalate a potentially volatile/violent situation; i.e., exhibiting a relaxed body language.

Legal Scope:

Pursuant to the community caretaking exception, police officers are expected to check on the welfare of people who cannot care for themselves or need emergency services. (Ray, supra, 21 Cal.4th at pp. 471-472, 88 Cal.Rptr.2d 1, 981 P.2d 928.)

Community Caretaking

Under the Fourth Amendment, warrantless searches of private property are presumptively illegal. Case law has created some exceptions to the warrant requirement. These exceptions are: (1) consent searches; (2) searches incident to custodial arrest; (3) probation/parole searches; (4) searches pursuant to "exigent circumstances;" and (5) **community caretaking**.

"**Community caretaking**" refers to the reasonable belief by a law enforcement officer or officers that an occupant within a private premises is at imminent risk of harm; or there is some other serious emergency. If an officer reasonably believes a person inside an area that would be considered private property may be injured, ill, or a victim of a crime, and is in immediate need of assistance; the officer or officers may enter the property to render aid without a warrant."

The Courts have provided police officers with three basic guidelines that should be used in determining whether it is objectively reasonable for them to enter private property:

1. **The reliability of information**—Was the need for the warrantless entry and/or search based upon reliable information;
2. **Likelihood of occurrence**—Did it appear that the threat was real; or was it merely "within the realm of possibilities;" and
3. **No basis for a warrant**—Would the circumstances have satisfied the issuance of a warrant under normal circumstances.

***An "Emergency aid "entry is permitted only if at least two of these three requirements is met.**

(Ref. Police Magazine 4/2016)

Officer Safety and public safety must continually be weighed against the need to make entry.

Utilizing resources

South County Crisis Services aka CARES 24/7	1-805-884-6850
SAFTY	1-888-334-2777
National Alliance of Mental Illness (NAMI)	1-805-884-8440
National Suicide Prevention Hotline	1-800-273-8255