



Annual Report 2021

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SUMMARY OF 2021 OPERATIONS

The conclusion of 2021 signified another year of oversight for the Syracuse Citizen Review Board. The ensuing details offer a synopsis of the CRB's operational highlights in 2021. Throughout the year, the CRB received a total of 54 new complaints and processed 47 cases. Among these, 17 cases proceeded to a hearing, while 30 cases resulted in a no-hearing vote by the Board. Additionally, and 1 case fell outside the CRB's jurisdiction.

- 54 complaints received.
- 17 hearings held.

HEARINGS & DISCIPLINARY RECOMMENDATIONS

Once the full CRB Board votes to send a case to a panel hearing, a panel is composed of three members of the CRB (one mayoral appointee, one district councilor appointee, and one at-large councilors' appointee) and the hearing is typically held within two to three weeks based on the availability of the complainant and witnesses.

- 17 hearings were held resulting in the following outcomes.
 - 10 Sustained findings by the hearing panel for allegations of Excessive Force and Demeanor.

*Complaints have multiple allegations *

- A sustained finding means that the panel found that there was substantial evidence that the alleged misconduct did occur.

SPD DISCIPLINARY ACTION RATE:

- The disciplinary action rate (or rate of agreement) is the rate at which the Chief of Police imposes discipline when the CRB recommends it. Local Law 1 of 2011 requires the CRB to report to the public the number of times that the Chief of Police imposed disciplinary sanctions when the CRB sustained an allegation against an officer and recommended discipline. The CRB received 3 responses from the Chief of Police to the 17 hearings in which a CRB held.
- Chief Buckner agreed with the CRB in cases where the alleged allegations were determined to be lacking sufficient evidence and exoneration. The CRB received a total of 3 response letters from the Chief for cases reviewed in 2021.

MISSION & OBJECTIVES

The purpose of the Citizen Review Board, all of whose members are volunteers, is to provide an open, independent, and impartial review of allegations of misconduct by members of the Syracuse Police Department; to assess the validity of those allegations through the investigation and hearing of cases; to recommend disciplinary sanctions where warranted; and to make recommendations on Syracuse police policies, practices, and procedures.

In fulfillment of its legislative purpose and mission, the Board is committed to:

- Creating an institution that encourages citizens to feel welcome in filing a complaint when they believe that they have been subject to police misconduct.
- Making the public aware of the CRB's existence and process through ongoing community outreach events and coverage by local media.
- Completing investigations and reviews of complaints in a thorough, yet timely fashion.
- Remaining unbiased, impartial, objective, and fair in the investigation, evaluation, and hearing of complaints.
- Engaging in community dialog that encourages citizen input with the CRB.
- Respecting the rights of complainants and subject officers.
- Upholding the integrity and purpose of the CRB's enabling legislation.
- Reporting to the Mayor, the Common Council, the Chief of Police, and the public any patterns or practices of police misconduct discovered during the course of investigation and review of complaints; and
- Operating in an open and transparent manner to the extent permitted by applicable municipal and state laws, regulations, and ordinances.

BOARD MEMBERS & TERMS

The Syracuse CRB is composed of an 11-member board, all serving staggered three-year terms as unpaid volunteers. These dedicated individuals are appointed by the Mayor, District, and At-large Councilors across the city and undergo confirmation by the full Council for appointment. Residency within the city is a requirement unless exceptions are granted through legislative action, and individuals holding public office or employed by the City of Syracuse Police Department are ineligible for board membership.

Board members devote an average of ten hours per month to CRB matters, encompassing attendance at monthly meetings, preparation for and participation in panel hearings, training sessions, and active involvement in community outreach initiatives. The commitment also includes the attendance of a minimum of three community outreach events annually, as mandated by the 2016 ordinance revision.

For those interested in learning more about the Board members, biographies of each volunteer can be accessed on the CRB website at www.syr.gov.net/crb/Members.aspx.

Members of the Syracuse Citizen Review Board

As of December 31, 2021

Mayoral Appointees
Mr. Joseph Favata- term expires December 31, 2022
Mr. Jose Marrero - term expires December 31, 2023
Ms. Mae Carter - term expires December 31, 2023

District Councilor Appointees
Mr. Richard Levy - 1st District - term expires December 31, 2023
Mr. Harry Pratt- 2nd District – term expires December 31, 2022
Ms. Lori Nilsson Board Chair- 3rd District - term expires December 31, 2024
Ms. Ruth Kutz, - 4th District - term expires December 31, 2022
Ms. Cynthia Brunson- 5th District - term expires December 31, 2022

At-Large Councilor Appointees
Mr. Clifford Ryans - term expires December 31, 2022
Mr. Jah-Quan Bey-Wright, - term expires December 31, 2024
Ms. Hatisha Holmes, Vice Chair – term expires December 31, 2022

Board members shall serve staggered three (3) year terms and maybe reappointed for another three (3) year term, after which, however the member shall not be reappointed for at-least one (1) year. If a person is appointed to complete an unexpired term of a former Board member, the newly appointed Board member shall be eligible to be appointed to serve two (2) successive three (3) year terms.

FILING A COMPLAINT WITH THE CRB

The Syracuse CRB accepts complaints against members of the Syracuse Police Department (SPD) that involve allegations of misconduct potentially violating SPD rules and regulations, as well as state, local, and/or federal laws. The CRB considers complaints regarding active misconduct, such as excessive force, constitutional violations, harassment, racial or gender bias, poor demeanor, search and seizure violations, theft or damage to property, untruthfulness, and false arrest. Additionally, it addresses passive misconduct, including failure to respond, failure to intercede, or refusal to accept a complaint.

The filing process for a complaint with the Syracuse CRB is accessible to any member of the public, regardless of residency in the City of Syracuse or U.S. citizenship. Complaints can be submitted in various ways, including walking into the CRB office at City Hall Commons (201 East Washington Street, Suite 705) to complete a form, contacting the CRB office for the mailing of a complaint form, downloading the form from the CRB website, or requesting a home visit if needed. Completed complaint forms can be hand-delivered or sent by mail to the CRB office. For further information, the CRB website is www.syr.gov.net/CRB.aspx, and the CRB office can be reached by telephone at 315-448-8750 or via email at crb@syr.gov.net.

PUBLIC MEETINGS

The Syracuse CRB holds its monthly meetings on the first Thursday evening at 5:30 PM in the Common Council chambers at City Hall. For your convenience, the meeting schedule is accessible at local libraries, on the CRB website, and on the calendar of the City's main webpage. These meetings are a crucial forum for the development and refinement of CRB policies and procedures, emphasizing an open, transparent, and accountable approach. Our agenda typically includes a vote on items requiring Board approval, presentations by the Chairman for the Board's consideration, a comprehensive report on the CRB's monthly activities presented by the Administrator, various committee reports, and a dedicated time for public comment.

After the public comment period, the Board transitions into a confidential Executive Session where they deliberate and vote on whether to advance investigated complaints to a hearing. We strongly encourage community members to attend these meetings, participate in the public comment period, and actively contribute to the ongoing efforts of the CRB.



OUTREACH

The CRB legislation requires the agency to conduct at least five outreach events annually, one in each Council District.

Name & Time	Host	CC District	Date
Syracuse Academy of Science and Citizenship		Zoom	Virtual
Syracuse Academy of Science and Citizenship		301 Valley Drive	3rd
Tommy Abbot Market Outreach		1213 Almond St	4th
Mask Mania	Mercy Works	1121 S Salina	4th
Neighborhood Power Walk	City of Syracuse	South Side	4th
We March Because We care		8717 E Willow St	1st
Neighborhood Power Walk	City of Syracuse	2801 James St	5th

OPERATIONS

Throughout the calendar year spanning January 1 to December 31, 2021, the Syracuse CRB actively conducted 12 monthly business meetings, all of which were open to the public. These gatherings served as crucial forums for addressing community concerns, developing policies, and fostering transparency in the oversight process. Over the course of the year, the CRB received a total of 49 complaints from community members, demonstrating a significant engagement with the public. Notably, the board dedicated substantial efforts to thoroughly processing these cases, successfully completing the review and resolution of 47 cases during the same period. This commitment underscores the CRB's dedication to addressing community grievances and promoting accountability within the Syracuse Police Department.

BOARD TRAINING AND DEVELOPMENT

The Syracuse CRB recognizes the essential role that well-trained board members play in ensuring effective oversight and fostering community trust. Our comprehensive training program is designed to equip board members with the knowledge, skills, and ethical principles necessary for their crucial responsibilities. The training curriculum covers a range of topics. The Board held Board Development training with Bob Stewart in August 2021.

2021 ANNUAL POLICY & TRAINING RECOMMENDATIONS

In the Annual Report, the CRB issues recommendations concerning police policy, training, and procedures with the aim of fostering constructive dialogue. These recommendations are forwarded to the mayor's office, the Common Council, and the Chief of Police, initiating discussions on enhancing specific aspects of the Syracuse Police Department. We firmly believe that the adoption of these recommendations would not only benefit the public but also contribute to the well-being of the City's police officers. The CRB puts forth these recommendations under the authority granted by Section Three, Paragraph (6) of the CRB legislation.

2021 POLICY RECOMMENDATIONS

Revise the Body Worn Camera Policy (BWC) (Volume 1 Article 3, Section 83).

The CRB attended the public forums conducted by the Syracuse Police Department and the Mayor's Office related to BWC policy and provided the below information to be considered in drafting the policy. We were advised the drafting team was provided with a copy of our recommendations which were considered, and some language was inserted to address some of the CRB's recommendations.

1. The SPD should adopt a policy known as "Clean reporting"; Officers should write the report, then watch the BWC footage then complete a supplemental report. The CRB expresses extreme concern related to a policy that allows an Officer to view the BWC footage and then write his/her report. We believe it is imperative to preserve the independent evidentiary value of Officers reports.
2. Subsection 83.13(A)(1): CRB recommends the removal of the word "preferably" related to when the BWC should be activated by a member to upon being dispatched and prior to exiting their police vehicle, or prior to commencing any activity if on patrol members will activate their BWC.
3. Subsection 83.15: CRB should be listed as a party to receive access to any BWC footage necessary during their independent investigation of civilian complaints. This access should be permitted even in circumstances in which the Office of Professional Standards does not request, or review said footage.
4. The CRB recommends that all specialized unit members be provided with BWC's regardless of their seniority with the SPD. These specialized units should specifically include the Crime Reduction Team and the Gang Task Force.

Civil Rights Principals on Body Worn Cameras

- Develop a BWC policy that includes the public's input. Encourage community forums to engage the community in discussions related to policy and community concerns. Make the SPD policy public and available on its website immediately.
- Ensure that the Officers entrusted with BWC's have the appropriate training on a well-defined purpose and ensure said cameras are not used to further demean those communities where heavy police presence is the norm.
- Actively and effectively communicate the operational policies related to recording, retention, and access, and enforce strict disciplinary protocols for policy violations immediately and without hesitation.
- Make footage available to promote accountability with appropriate privacy safeguards in place while ensuring the public has access in a timely manner.

- Provide all footage to the CRB related to an open complaint during its investigative process to promote accountability and transparency.

Syracuse University Body Worn Camera Policy includes many provisions that the CRB recommends SPD adopt as follows:

- The Officer will activate his/her BWC when they are dispatched and responding to a call.
- The Officer will activate his/her BWC before leaving his/her patrol vehicle and the BWC will remain activated until the event is completed.
- When Officer(s) makes a decision to self-initiate a traffic stop he/she will activate the BWC.
- When an Officer is in response to another call for service or flagged down by a person for service, their BWC will be activated.
- If the BWC is turned off, document in reports with a statement verbally on record and also in their written report. While interviewing sexual assault victims, a young child, or a person who is in a state of undress or in an area with an expectation of privacy the BWC can be turned off.
- When responding to incidents, inform person(s) that they are being recorded.
- An access log will be maintained by the Chief or his designee showing the names and dates associated with the release of BWC recordings, intended use and supervisor authorizing the release.
- The original BWC footage shall not be released, redacted, or modified in any way; a copy of the original recording will be made, and any such redacting will be made to the copy only.
- Any and all disclosure of BWC data must be consistent with the department's record release policy and applicable statutes regarding, but not limited to, evidence discovery and disclosure pursuant to the Freedom of Information Law (FOIL). The Chief will work with Administration and legal counsel to review and appropriately redact (or authorize a designee to copy and redact) applicable footage to be released.
- BWC data will not be edited, altered, erased, duplicated, copied, shared, or otherwise distributed in any manner by any member of the SPD without consultation with Chief and legal counsel. All requests and final decisions will be kept on file. All requests must be submitted in writing.
- Include a copy of the AXON BWC User Manual to the BWC Policy.
- Lieutenants, Patrol Sergeants, or unit supervisors will randomly review BWC recordings of Officers assigned to their shift or unit.
- Progressive BWC Discipline will be detailed in the SPD Policy.

Change policy related to interaction with Mentally Ill Persons:

The CRB discussed the draft policy from IACP with the Department and received feedback related to the training and partnerships they have with a local hospital, the Office of Mental Health (OMH) and the Division of Criminal Justice Services (DCJS).

The CRB recommends that the SPD change Volume 1, Article 3-Operations Section 50.00 related to Mentally Ill Persons to reflect the attached Model Policy developed by International Association of Chief's of Police (IACP) updated in August 2019 and also become a One Mind Department which seeks to "ensure successful interactions between police officers and person affected by mental illness. These practices include establishing a clearly defined and sustainable partnership with a community mental health organization, developing a model policy to implement police response to persons affected by mental illness, training and certifying sworn officers and selected non-sworn staff in mental health first aid training or other equivalent mental health awareness course, and providing crisis intervention team training." See Appendix I and II.

Requirements for School Resource Officers (SRO's) or School Information and Resource Officer (SIRP):

The CRB discussed this recommendation with the Department and received feedback related to the internal process and the Syracuse City School Districts involvement in the hiring of SRO's and SIRP Officers.

A Memorandum of Understanding (MOU) between the Syracuse Police Department and the Syracuse City School District helps to establish roles and responsibilities of SIRP's. SIRP selection and training impact the quality of student interaction therefore the Board recommends the School District be involved in the vetting process of the SIRP's to ensure officers placed in buildings have appropriate interpersonal skills and have specialized training related to adolescent development. When the department decides that an officer should be an SIRP a psychological fitness for duty evaluation should be administered as a legal duty to ensure that police officers under their command are mentally and emotionally fit to perform their duties. If said officer has displayed behavior that raises concerns that the officer may be unstable, a physical danger to self and others, or ineffective in discharging responsibilities it is reasonable to believe such behavior may occur on duty and may include excessive force, domestic violence, lack of alertness, substance abuse or other counterproductive behaviors.

As we have seen across America the school to prison pipelines awareness and concern is on the rise therefore it is imperative that we ensure those officers working with the community's most vulnerable and impressionable have been properly vetted and trained.

PREVIOUS POLICY RECOMMENDATIONS FROM 2012 THROUGH 2017 ARE RE-AFFIRMED IN PART OR WHOLE WITH SHORT SUMMARY

The SPD Should Adopt a Modern Comprehensive Use of Force Policy. The CRB has proposed a model policy in the annual reports. The policy should be based on national best practices, model policies from other police departments, and requirements outlined by the U.S. Department of Justice in consent decrees with other cities. It should include: A delineation of all force options, including all department-approved lethal and less-lethal weapons, and specific guidance on when each force option is appropriate and not appropriate.

Precise definitions of key terms including but not limited to imminent threat, force transition, de-escalation, reportable force, and the definitions and correlation of various levels of subject resistance (passive, active, aggressive and aggravated aggressive) to levels of force; A discussion of what constitutes "objectively reasonable" force under the U.S. Supreme Court's Graham v. Connor (1989) decision; Specific prohibitions on when certain forms of force should not be used. A more prominent emphasis placed on the limitation of the use of impact weapons to strike the head or neck area to deadly force situations; The limitation of respiratory restraints (i.e. "chokeholds") and vascular (or carotid) restraints only to situations where deadly force is justified.

A "**Duty to Intervene**" and a "**Duty to Report**" policy which dictates that any officer present and observing another officer using force that is clearly beyond that which is objectively reasonable under the circumstances shall, when in a position to do so, intercede to prevent the use of unreasonable force and promptly report these observations to a supervisor; A prohibition on officers firing at or from a moving vehicle when the moving vehicle constitutes the only threat.

Inclusion of a Non-Retaliation Clause in the SPD's Complaint Procedures. The CRB recommends the inclusion of an unambiguous clause that restricts any manner of retaliation or intimidation against any individual who files a complaint, seeks to file a complaint, or cooperates with the investigation into a complaint against a member of the SPD.

In-service Training on High-Risk Traffic Stops. All SPD officers should undergo in-service training on the procedures for conducting felony stops and on identifying conditions when the procedures should be followed.

In-service Training on Reducing or Eliminating Charges in Exchange for Information or Cooperation. During 2013, the CRB investigated five separate complaints involving officers making offers to suspects to reduce or eliminate criminal charges in exchange for cooperation leading to the seizure of an illegal gun, information on the local drug trade, or information on recent homicides. This is commonly known as "working off charges" and is contrary to departmental procedures, which require the involvement and approval of the District Attorney's office in any deals reached with cooperating suspects.

The CRB strongly supports the SPD's ongoing efforts to remove illegal guns and drugs from the streets and to vigorously pursue and solve the city's major crimes. The CRB recognizes that this is a valuable investigative tool to law enforcement. However, SPD policy requires officers to take enforcement action against a criminal offence. Moreover, the practice of making informal and unofficial offers can lead to baseless allegations by an individual desperate to avoid charges and it can leave criminal suspects vulnerable to acts of retribution.

The CRB's understanding of the DA's position is that officers are allowed to ask suspects for information but cannot offer to ignore evidence of a crime in exchange for cooperation. Officers are allowed to tell a suspect that notice of their cooperation will be forwarded to the DA's office for the DA's consideration in the final disposition of their charges, but the authority to make that decision resides with the DA's office.

Develop a Policy on the Use of Police Vehicles when Chasing a Suspect who is on Foot or Bicycle. In two cases, individuals have alleged that police used their vehicle to bump or cut them off as they were either running or riding a bike.

Develop and Implement a Disciplinary Matrix to bring consistency and predictability to the department's disciplinary process. A matrix, a common disciplinary tool used by employers both inside and outside of policing, categorizes violations into various levels of severity and provides disciplinary options for each level. A degree of administrative discretion can be built into the matrix by including mitigating and aggravating factors that can increase or decrease the level of discipline.

Adopt a Policy to Immediately Retrieve and Secure Video from the COPS Platform cameras or nearby private surveillance cameras anytime there is a use of force incident within range or as soon as a complaint has been made against an officer (either through 911, at the scene, or later through OPS).

Extend the timeframe that COPS Platform camera videos are available so the videos will more likely be available for complaint investigations.

The Office of Professional Standards should Conduct Recorded Interviews with Subject Officers and Acquire Police Radio Transmissions as a routine part of their internal affairs investigations. The recording of interviews with officers who are the subject of a complaint or who are a witness to the incident is a widely accepted best practice for internal affairs investigations. The recording of interviews tends to improve the quality of the interview and preserves the interview for review by outside agencies when necessary. The routine acquisition of police radio transmissions would

provide investigators with additional context and the ability to verify critical aspects of an officer's account of a given incident.

Install Seatbelts and Cameras in the Rear Compartment of Police Transport Vans that can record and store for a reasonable time period audio and video. The transport vans were previously equipped at the time this recommendation was made with holding straps and cameras which do not record audio or video. We are advised that seat belts have been installed.

Purchase and Install Dashboard Cameras and Audio Mics in all SPD Patrol Vehicles. The in-car dashboard cameras and audio mics could be fully integrated with a new body camera system providing the maximum possible coverage.

Include a Policy which Outlines the Proper Procedures for Conducting Eyewitness Identifications including photo lineups, live lineups, show up identifications, and field view identifications.

Securing Entryways following a Forced Entry. SPD should adopt a policy similar to that of the DPW board-up crews, to ensure security following a forced entry.

Provision of Property Receipts for Seized Currency. SPD should make the provision of property receipts (Form 5.4) mandatory at the point of seizure, provided doing so does not jeopardize the safety or security of the officer or any other person. If the officer does not have a property receipt at the point of seizure, then the officer should request one through dispatch.

CASE SUMMARIES OF PANEL HEARINGS

Case Number	Allegation	Allegation 2	Allegation 3	Allegation 4	Allegation 5	Allegation 6	Response From Chief
Case 1	False Arrest- Not Sustained	Untruthfulness- Sustained	Ordinances- Sustained	Obedience to laws- Sustained	Unsatisfactory Performance- Sustained	Submitting Reports- Sustained	No
Case 2	False Arrest- Unfounded	Excessive Force- Insufficient Evidence					No
Case 3	Demeanor- Insufficient Evidence	Failure To Activate BWC- Sustained					Yes
Case 4	Demeanor- Insufficient Evidence	Excessive Force- Unfounded					Yes
Case 5	Demeanor- Insufficient Evidence	Failure To Activate BWC- Sustained					Yes
Case 6	Demeanor- Sustained						No
Case 7	Demeanor- Sustained	Excessive Force- Unfounded					Yes
Case 8	Failure To Act- Insufficient Evidence						No
Case 9	Excessive Force- Not Sustained	Demeanor- Not Sustained					No
Case 10	Excessive Force- Sustained						No
Case 11	Failure To Act- Insufficient Evidence						No
Case 12	Excessive Force- No Jurisdiction	Demeanor- No Jurisdiction					Yes
Case 13	Demeanor- Unfounded	Unnecessary Force- Insufficient Evidence	Medical Treatment- Exonerated				No
Case 14	Conduct- Sustained						No
Case 15	Conduct- Sustained	Unnecessary Force- Insufficient Evidence					Yes
Case 16	Demeanor- Insufficient Evidence	Failure To Act- Unfounded					Yes
Case 17	Demeanor- Sustained	Excessive Force- Unfounded					No

CRB adjudication decisions include the following:

- **Unfounded:** The review or investigation shows that the act or acts complained of did not occur or were misconstrued.
- **Exonerated:** The acts that provide the basis for the complaint occurred, but the review or the investigation shows such acts were lawful or proper.
- **Sustained:** The review or investigation discloses sufficient facts to prove the allegation(s) made in the complaint.
- **Not sustained:** The review or the investigation fails to disclose sufficient facts to prove or disprove the allegation(s).
- **Insufficient Evidence:** The evidence fails to meet the burden of proof and is inadequate to prove the allegation(s).

BOARD HEARINGS AND ADJUDICATION

Upon completing investigations, the CRB Administrator or Private Investigator prepares detailed reports with recommended decisions, covering hearings, closures, or policy/training suggestions. The Administrator then provides recommendations based on their or the investigator's findings, and the CRB Board determines discipline or further action. The case summary goes to the board for an executive session. Complainants and subject officers are notified, with both having the option to attend. During board meetings, each case is discussed, and the board votes on recommendations. Following the board's decision, the SPD (Syracuse Police Department) is notified of these recommendations and may choose to accept them.

Figure 1 provides a graphical summary of the investigation and adjudication process.

Figure 1. Summary of the Citizen Review Board Investigation and Adjudication Process



BUDGET

Citizens Review Board 01.10500

	<u>FY20</u> <u>Actual</u>	<u>FY21</u> <u>Adopted</u>	<u>FY21</u> <u>Projected</u>	<u>FY22</u> <u>Adopted</u>
Personal Services				
510100 Salaries	97,085	102,140	102,140	102,460
510300 Temporary Services-P/T	697	0	0	0
Total Personal Services	97,782	102,140	102,140	102,460
Contractual & Other Expenses				
540300 Office Supplies	2,103	2,700	2,250	2,600
540500 Operating Supplies & Expenses	519	7,984	2,000	5,375
541500 Professional Services	17,861	16,450	16,000	23,450
541600 Travel, Training & Development	4,259	4,545	2,300	4,065
Total Contractual & Other Expenses	24,742	31,679	22,550	35,490
TOTAL:	122,524	133,819	124,690	137,950

2021 Proposed Positions:

Program Coordinator-Citizen Review Board
Data Analyst
Community Engagement Specialist
Legal Secretary I

2021 Approved Positions:

Program Coordinator-Citizen Review Board
Legal Secretary I

SUMMARY OF CASES 2021

2021 Totals

Total Complaints Received during 2021: _54_

The number of cases processed and closed by the Board during 2021: _47_

The number of complaints processed and not sent to a panel hearing during 2021: _29_

The number of complaints processed and closed for lacking jurisdiction: _1_

The number of cases that successfully were routed to conciliation: _0_

The number of complainants who initiated extended contact with the CRB but did not follow through with a formal signed complaint: _5_

The number of complaints in which the Board recommended that the City provide restitution to the complainant and type of restitution recommended: _0_

The number of complainants who filed a Notice of Claim against the City of Syracuse while their complaint was being considered by the Board: _7_

Hearing outcomes

Panel hearings scheduled: _19_

Panel hearings held: _17_

Panel hearings resulting in disciplinary recommendations from CRB: _10_

Panel hearings resulting in no disciplinary recommendations from CRB: _8_

CATEGORIES OF COMPLAINTS RECEIVED BY THE CRB DURING 2021

**Categories of Complaints Received by the CRB during 2021*
Number & Percent of Annual Intake**

Demeanor	Violation of Rules	Failure To Arrest	Sexual Assault	Failure to Act
5	3			12

Racial Slur	Unsatisfactory Performance	Failure to Provide Medical Treatment	Drug Use	Sexual Assault
1			1	1

Untruthfulness	Harassment	Conduct	Unnecessary Force	Excessive Force	Unlawful Search
	2	8	1	6	1

Unsatisfactory Performance	False Arrest	Customer Service	Property Hold	Property Damage	Obedience to law
	7	1	1	4	

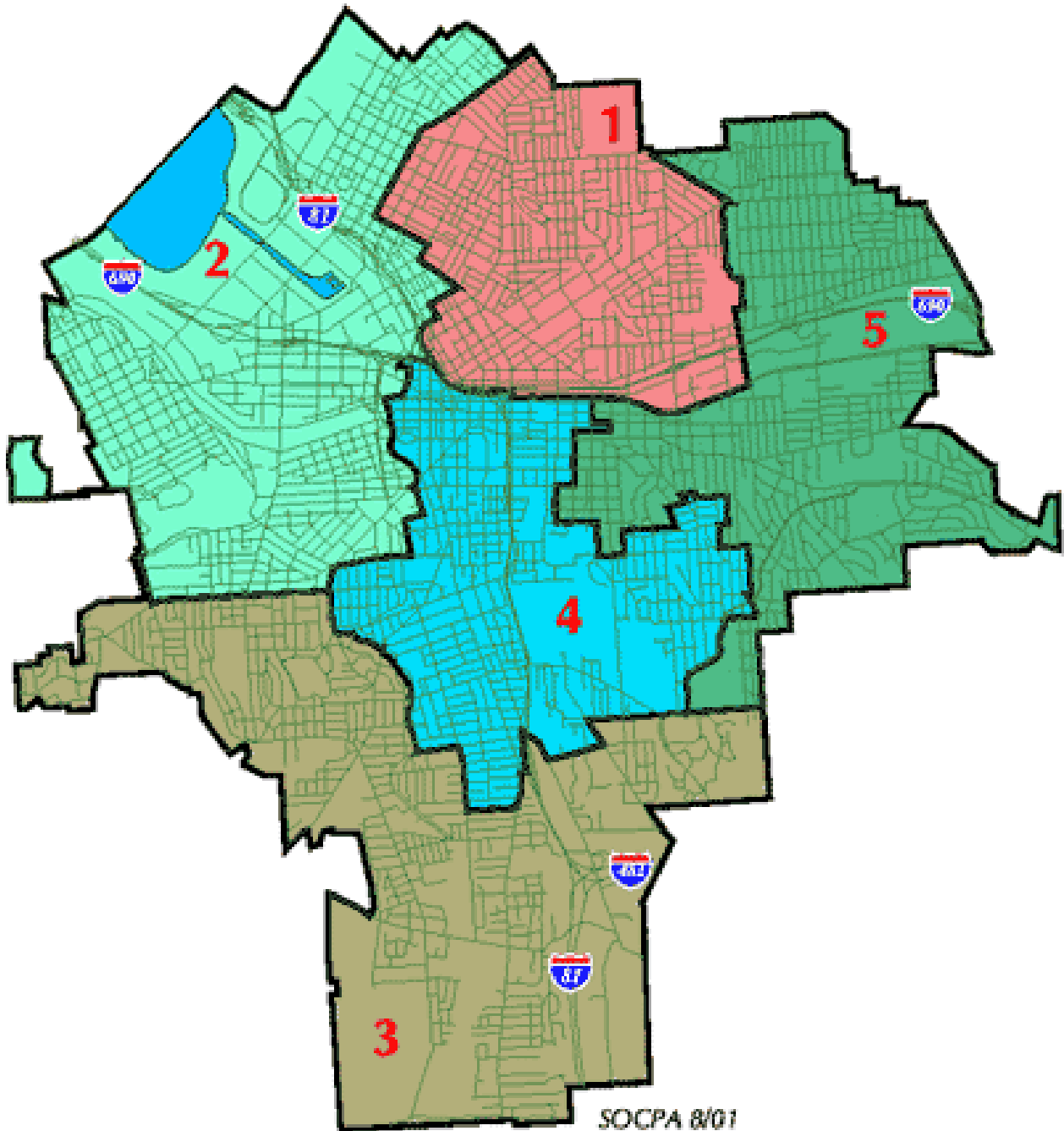
*Some individual complaints include multiple allegations

**Typically, not discovered until after a complaint is filed and police reports have been acquired.

Complaints Received per Common Council District for 2021

*See the following page for a map of the Common Council Districts

CITY OF SYRACUSE COMMON COUNCIL DISTRICTS



COMPLAINANT DEMOGRAPHICS FOR ALL COMPLAINTS RECEIVED IN 2021

Ethnicity	#	% of city population*
*Black	29	69%
*White	10	20%
*Latino	2	4%
Asian	1	2%
Other	2	4%
Biracial	0	0%
Unknown	5	10%
Total	49	100%

*Based on 2010 census

Sex	#	% of city population*
Male	34	59%
Female	13	27%
Other	0	0%
Unknown	2	4%
Total	49	100%

Age	#	% of city population *
Under 18	1	2%
19-35	18	37%
36-50	12	24%
51+	16	33%
Unknown	2	4%
Total	49	100%

*Disability information and languages other than English were not indicated by the complainants.

* In cases where the complaint was filed by the parent/guardian on behalf of a child the age, gender, and race are counted separately to accurately reflect the information related to each complainant.

APPENDIX I



No. 202.33

EXECUTIVE ORDER

Continuing Temporary Suspension and Modification of Laws Relating to the Disaster Emergency

WHEREAS, on March 7, 2020, I issued Executive Order Number 202, declaring a State disaster emergency for the entire State of New York; and

WHEREAS, both travel-related cases and community contact transmission of COVID-19 have been documented in New York State and are expected to continue;

NOW, THEREFORE, I, Andrew M. Cuomo, Governor of the State of New York, by virtue of the authority vested in me by Section 29-a of Article 2-B of the Executive Law to issue any directive during a disaster emergency necessary to cope with the disaster, I do hereby issue the following directives for the period from the date of this Executive Order through June 21, 2020:

- Executive Order 202.10, as later extended by Executive Order 202.18, Executive Order 202.29 and as extended and amended by Executive Order 202.32, which prohibited all non-essential gatherings of any size for any reason, except for any religious service or ceremony, or for the purposes of any Memorial Day service or commemoration, which allowed ten or fewer individuals to gather, provided that social distancing protocols and cleaning and disinfection protocols required by the Department of Health are adhered to is hereby modified to permit any non-essential gathering of ten or fewer individuals, for any lawful purpose or reason, provided that social distancing protocols and cleaning and disinfection protocols required by the Department of Health are adhered to.



GIVEN under my hand and the Privy Seal of the
State in the City of Albany this
twenty-second day of May in the year
two thousand twenty.

A handwritten signature in black ink, appearing to read "Andrew M. Cuomo".

BY THE GOVERNOR

A handwritten signature in black ink, appearing to read "Ms. C".
Secretary to the Governor

APPENDIX II



OFFICE OF THE MAYOR MAYOR BEN WALSH

EXECUTIVE ORDER SYRACUSE POLICE REFORM EFFECTIVE JUNE 19, 2020

WHEREAS, the killing of George Floyd, and the subsequent outpouring of grief and concern over police conduct nationwide has led to calls from the Syracuse community for immediate police reform; and

WHEREAS, improving police-community relations and updating key policies to reflect best practices in 21st century policing has been a priority of my administration since taking office; and

WHEREAS, under the leadership of Chief Kenton Buckner, Syracuse has already taken important steps in police reform, including but not limited to the expansion of body worn cameras and the implementation of a new body worn camera policy; the issuance of a revised use of force policy in July 2019; the restructuring and relocating of the department's internal affairs function; enhanced focus on diversity recruitment; and the creation of citizen advisory committees; and

WHEREAS, the Syracuse Common Council has indicated its desire for police reform, and will consider legislation that seeks greater police transparency, which will complement the steps to be taken below; and

WHEREAS, I support the police reforms already passed this month by New York State, including the repeal of Civil Rights Law Sec. 50-a; and

WHEREAS, I recognize the dedication of the members of the Syracuse Police Department, and intend the steps outlined below to better equip officers with the training and policies they need to enhance their ability to protect and serve all members of the Syracuse community equally, and to build the community's trust in our officers; and

Office of the Mayor
233 E. Washington St.
201 City Hall
Syracuse, N.Y. 13202

Office 315 448 8005
Fax 315 448 8067

www.syr.gov.net

WHEREAS, in response to the concerns of the Syracuse community, more action on police reform is urgent, necessary and appropriate; and

WHEREAS, I will engage in a robust community dialogue to further explore and consider areas for reform and improvement over the coming months beyond those set forth below, culminating in a plan and report in the spirit of and in compliance with Governor Cuomo's Executive Order No. 203, New York State Police Reform and Reinvention Collaborative;

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

NOW, THEREFORE, as Mayor of the City of Syracuse, by the authority vested in me by the City Charter and applicable laws, and in consultation with the Chief of Police, I hereby direct the following actions as soon as practicable:

1. Review, revise and amend the policies and procedures of the Syracuse Police Department (SPD) to ensure the principles embodied in the New York City Right to Know Act are incorporated into the department's policies and procedures, including but not limited to self-identification to citizens, provision of written identification to citizens, obtaining consent to searches, recording consent and making the record of the consent available to the subject of the search. This will be done in conjunction with legislative action by the Syracuse Common Council, which will seek to codify the Right to Know principles related to the reporting of investigative encounters.
2. Revise SPD's 2019 use of force policy to ensure that it is compliant with recent changes in New York State law, and fully consider any policy changes requested by the Syracuse community.
3. Revise SPD's current body worn camera policy to ensure that officers record the entirety of their presence on the scene of a police encounter.
4. Complete the department's efforts to obtain additional body worn cameras so that all uniformed officers assigned to patrol or who otherwise respond to citizen calls will be equipped with cameras.
5. Develop and implement a plan to deploy dashboard cameras on all SPD marked vehicles.
6. Conduct a complete inventory of all equipment acquired through military surplus programs that are in possession of the SPD; establish policies and procedures regarding the use of such equipment; and establish parameters for future procurement of such equipment.
7. Post on the City of Syracuse and/or SPD's website:
 - a. The collection of documents that together comprise the most recent collective bargaining agreement with the Syracuse Police Benevolent Association (PBA); and
 - b. A comprehensive summary of that collection of documents, which my administration prepared and presented to the PBA for review and acceptance in 2019; and
 - c. The Tentative Agreement reached with the PBA in November 2019, which has not been approved, and which is now the subject of the impasse resolution process set forth in the New York State Taylor Law.
8. Make SPD policies publicly available on the SPD website.
9. Develop a process to ensure legal compliance with New York State's repeal of Civil Rights Law Sec. 50-a and related amendments to the Freedom of Information Law, which require the city to disclose copies of certain police personnel records upon request.
10. Continue to actively oppose any legal attempt to dissolve or otherwise eliminate the judicial consent decree which continues to be a critically necessary tool to improve the diversity of our police department.

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

11. Review the department's procedure and approval process regarding the application of search warrants that seeks a "no-knock" provision from a court to ensure compliance with Constitutional standards.
12. Continue to improve collaboration with the Syracuse Citizen Review Board (CRB) to ensure the flow of documents and information as embodied in Local Law No. 11. Further, commit to:
 - a. Reviewing the disciplinary recommendations presented by the CRB prior to making a final determination of discipline of an officer; and
 - b. In cases where the Chief issues no discipline, or discipline that is lesser than is that recommended by the CRB, provide to the CRB a written explanation of the reason for such level of discipline or lack thereof.
13. Develop and deliver training on the history of racism in Syracuse and the United States, both in the police academy and during in-service training, such that 100% of the membership of SPD receives this training. Additionally, deliver department-wide training in cultural competency for law enforcement.
14. Continue to review and upgrade the department's recruitment, screening and hiring practices, with an aim to increase the diversity of the department's membership.
15. Research and consider innovative, community-based strategies for responding to non-criminal calls, with a goal of shifting the paradigm from primary police response, to response by non-police professionals in relevant fields.
16. Develop and implement, in coordination with the Syracuse City School District, a new model for school safety and security.

G I V E N under my hand and the Seal of the City of Syracuse this nineteenth day of June in the year two thousand twenty.

BY THE MAYOR

ATTEST:



Benjamin R. Walsh, Mayor

John P. Copanas, City Clerk

Dated: June 19, 2020

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

APPENDIX III



DEPARTMENT OF POLICE CITY OF SYRACUSE, MAYOR BEN WALSH

Kenton T. Buckner
Chief of Police

August 14, 2020

Joseph L. Cecile
First Deputy Chief

Ranette Releford
Administrator

Derek McGork
Deputy Chief

Citizen Review Board
201 E. Washington Street, Suite #705
Syracuse, NY 13202

Richard F. Shoff, Jr.
Deputy Chief

Richard H. Trudell
Deputy Chief

Dear Ms. Releford:

I am writing in response to Mayor Walsh's Executive Order: Syracuse Police Reform effective June 19, 2020 to make you aware of our commitment to fulfill item #12.

The Syracuse Police Department (SPD) affirms our commitment to ensure the flow of documents and information as embodied in Local Law No. 11.

The SPD further commits to making no final decision on discipline of an officer(s) until the Chief of Police has received the results of both the Office of Professional Standards investigation and the CRB recommendations of the same complaint.

In addition, the Chief of Police will provide the CRB a letter of explanation if the decided discipline falls to a level lower than is recommended by the CRB.

As you are aware, Corporation Counsel and CRB's outside counsel are currently discussing ways in which the timelines in the ordinance could be adjusted to reflect pragmatic operational realities. Those discussions reflect the parties' consensus, based on past experience, that additional time is sometimes required to allow both sides to complete a thorough and effective investigation. The parties also understand, however, that any proposed revisions will not permit delays which prevent discipline from being imposed within the eighteen month deadline provided for in the New York Civil Service Law. Indeed, it is our belief that such revisions will actually serve to speed-up investigations by increasing efficiency. Ultimately, any changes to the ordinance would need to be presented and approved by the Common Council, but I am hopeful that SPD and the CRB will agree on a process that works for all the stakeholders. The SPD commits to being compliant with any revisions going forward.

Regards,

A handwritten signature in black ink, appearing to read "Kenton Buckner".

Kenton Buckner
Chief of Police

KTB/mb-f

Department of Police
511 S. State Street
Syracuse, NY 13202

O. 315.442.5250

www.syracusepolice.org

APPENDIX IV

Ranette L. Releford
Administrator
RReleford@syr.gov.net



CITIZENS REVIEW BOARD

Benjamin R. Walsh, Mayor

November 13, 2020

Kenton Buckner, Chief
Syracuse Police Department
511 South State Street
Syracuse, New York 13202

Re: Draft Revised Use of Force and Body Worn Camera Policies

Dear Chief Buckner:

The Citizen Review Board ("CRB") submits the following comments to the Syracuse Police Department's ("SPD") draft Revised Use of Force ("UOF") and Body Worn Camera ("BWC") policies, which have been uploaded to the City's portal for a public engagement process.

These documents incorporate many of the recommendations CRB has made over the years. CRB's recommendations reflect its statutory obligation to "identify, analyze, and make recommendations about police policies, procedures, practices or other systemic concerns about police conduct . . ." With reference to that obligation, although CRB is disappointed that it was offered only a *de minimis* role in the drafting process, we are nonetheless pleased that many of our recommendations have been received and incorporated.

Use of Force

As set forth above, the UOF draft incorporates several CRB recommendations. In particular, as recommended in our letter of February 7, 2019, this draft includes precise definitions of key terms; a discussion of "objectively reasonable" force; specific prohibitions on certain force such as chokeholds (although not on carotid restraints as we had recommended); and a duty to intervene and report, among other things.

Generally, CRB continues to recommend a blanket prohibition on firing from or at moving vehicles, in such situations where the vehicle itself presents the only risk. Further, the UOF policy should incorporate the International Association of Chiefs of Police ("IACP") recommendations on responding to persons experiencing a mental health crisis when addressing those issues in the UOF policy. And finally, CRB requests that any documented use of force should be promptly forwarded to CRB for its own review.

Besides these general comments, CRB's specific edits / comments are as follows:

1. Section 300.1 Paragraph B, add to the sentence (change in bold): "In granting officers the authority to use **objectively** reasonable force, the Department acknowledges its responsibility to train, monitor and evaluate officers to ensure **adherence to** the use of force authorizations and limitations set forth in this policy . . .";
2. Section 300.1 Paragraph C, add referral to CRB;
3. Section 300.2: Paragraph G-I, and K, provide a citation for these definitions. Also add definitions for:
 - a. Known – be aware of through observation, inquiry or information.
 - b. Verbal warning –
 - c. Pre-assault indicators –
 - d. Kinetic body movements –
 - e. Un-directed over-compliance –
 - f. Defensive or offensive physical posturing –
 - g. Physical non-compliance –
 - h. Target glance –
 - i. Verbal aggression –
 - j. Exigent circumstances –
4. Section 300.3 Paragraph C, change to "Officers are not expected to compromise safety in order to de-escalate a situation if **there is an objectively reasonable likelihood it will** result in harm . . .";
5. Section 300.04 Paragraph A, clarify the standard (here or elsewhere) for determining when an officer is "in possession of all necessary facts";

6. Section 300.04 Paragraph B, add to the end of the sentence that ". . . shall report the force to any supervisor and/or the Office of Professional Standards immediately, **and that person or OOPS shall immediately investigate and forward the results of said investigations to CRB.**";
7. Section 300.5 Paragraph A, add to the sentence ". . . reasonably appears necessary to **accomplish those items set forth at 300.6,** given the objective";
8. Section 300.5 B, provide a citation for this standard;
9. Section 300.5 Paragraph E add to the sentence ". . . encounter is to avoid **in pursuit of an authorized objective and where de-escalation techniques are impossible based on an objectively reasonable standard** or minimize";
10. Section 300.6 Paragraph A 6, add to the sentence "overcoming **physical** resistance";
11. Section 300.7 Paragraph A 9, clarify how a person becomes "visibly pregnant";
12. Section 300.7 Paragraph A 4, define "apparent need";
13. Section 300.7 Paragraph A 17, clarify "prior contact", perhaps by modifying to include "prior contact **resulting in an arrest, detention, or involving domestic violence**";
14. Section 300.8 Paragraph B 1, add to sentence "to **obtain or seek to obtain** a confession";
15. Section 300.8 Paragraph B 4, add to sentence "coerce, **intentionally harm,** or punish";
16. Section 300.8 Paragraph B 5, change the word injected to ingested;
 - a. In addition, CRB poses the question as to the acceptable level of force in this situation and notes that, previously, striking the face was commonly applied;
17. Section 300.8 paragraph B 6, define "exigent circumstances";
18. Section 300.8 Paragraph B, add a subparagraph 7 that, "**the use of handcuffs tightly fastened on a subject shall be considered a prohibited use of force and handcuffs should not be used in any way other than to detain or arrest a subject**";

19. Section 300.9 Paragraph A, add to the last sentence " . . . the circumstances **that the officer or someone else is at risk of immediate death or serious bodily harm.**"
20. Section 300.9 Paragraph B 1, add to the first sentence "...the subject has a **deadly** weapon . . . "
21. Section 300.9 Paragraph B 4, remove in its entirety;
22. Section 300.9 Paragraph C, remove "force where safe and feasible" and add "**unless it would be impossible, under the circumstances to do so.**" Also, define the manner in which officers are expected to issue a warning.
23. Section 300.10 Paragraph D, change the sentence ". . . where there is **an objectively** reasonable belief there is a possibility of **serious bodily harm or death** to the officer or others. **Under no circumstances should officers draw or display firearms as a means of de-escalation . . .**";
24. Section 300.10 Paragraph E 2, change the last sentence to say ". . . may cause the vehicle to **lose control.**";
25. Section 300.12 Paragraph D, change to state "Individuals shall not be placed on their stomachs **unless it is necessary to do so.**"
26. Section 300.12 Paragraph H, add a requirement that witnessing officers must document whether they observed a request for or refusal of medical treatment.

Body Worn Camera

This policy similarly incorporates some of the suggestions provided for in CRB's July 2, 2018 letter on this topic. There are substantial considerations for individual privacy, and our recommendation to have random reviews of BWC has also been incorporated.

The draft policy does not address CRB's proposal for "clean reporting". This would provide that incident reports be written before the officer has the benefit of reviewing BWC footage, and that the footage should only be reviewed thereafter. CRB also suggests, generally, that the BWC "user manual" be attached to the policy itself. Finally, CRB proposes additional language (below) that will ensure that the cameras are to be activated during all law enforcement activity, with an exception only for officer safety.

Separately, CRB hereby renews its request for unfettered access to BWC footage.

CRB's specific edits / comments are as follows:

1. Section 424.2 Paragraph A, take out of the last sentence "their duties" and add **law enforcement activities**;
2. Section 424.4 Paragraph A, in the second sentence removed at the end of the sentence "and feasible". In the last sentence after "is not safe" remove "and feasible";
3. Section 424.4 Paragraph B, remove "or until the situation no longer fits the criteria for activation";
4. Section 424.4 Paragraph D, should be moved to definitions of law enforcement;
5. Section 424.6 Paragraphs A and B and Section 424.7 Paragraph E, add a requirement to notify the officer's superior officer in any such instance;
6. Section 424.9 Paragraph B, add a reference to Section 424.2 Paragraph B;
7. Section 424.15, Add a Paragraph B that states "**The coordinator will establish regular interactions with the CRB which shall provide recommendations regarding BWC Policy and Procedures**";

Sincerely,

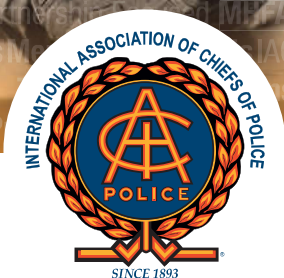
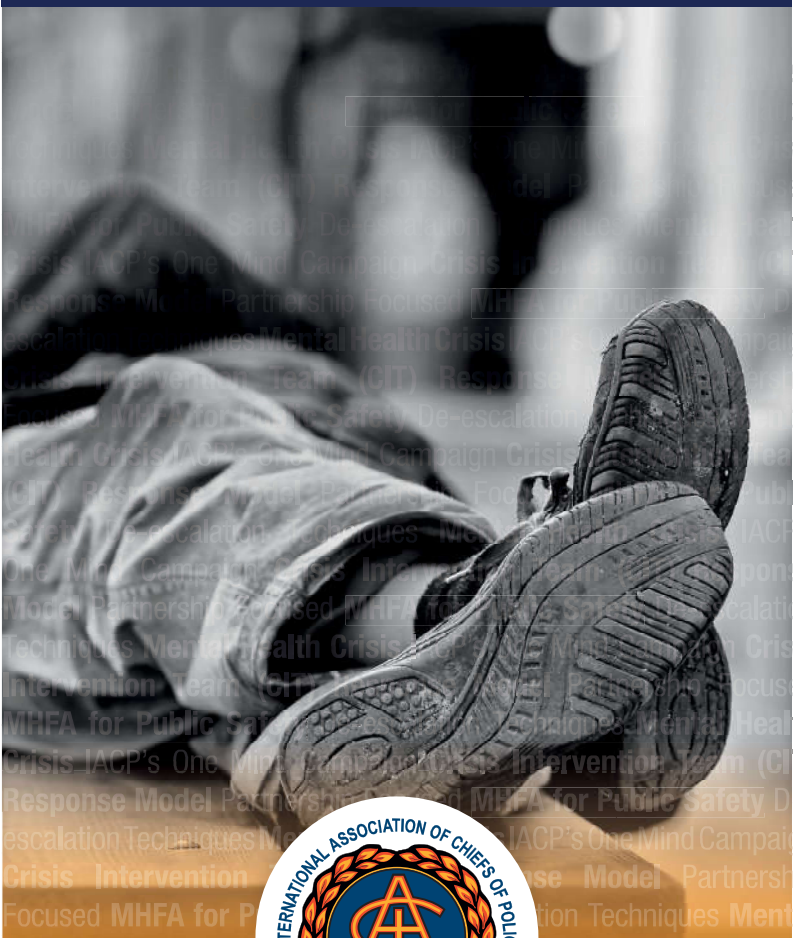
Ranette L. Releford

Ranette L. Releford, MPS
Administrator

cc: Benjamin R. Walsh, Mayor
Sharon F. Owens, Deputy Mayor
City of Syracuse Common Councilors
Amanda Harrington, Esq. Corporation Counsel
Kristen Smith, Esq. Corporation Counsel
Sgt. Mark Rusin
Media

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Improving POLICE RESPONSE to Persons Affected by MENTAL ILLNESS



*Report from the
March 2016 IACP Symposium*

EXTENT OF THE ISSUE

Law enforcement agencies across the world are increasingly required to respond to and intervene on behalf of people who are affected by mental illness.

There is compelling evidence to suggest that law enforcement agencies need to enhance their training on interactions with persons affected by mental illness. Research conducted by the *Washington Post* and the Treatment Advocacy Center (TAC) highlight how often the interactions between persons affected by mental illness and the police can lead to injury or fatality.

- In 2015, the *Washington Post* noted that victims who were mentally ill or experiencing an emotional crisis accounted for one-fourth of those killed in officer-involved shootings.¹
- The Treatment Advocacy Center (TAC) found that persons with severe mental illnesses are 16 times more likely to be killed by police than other civilians.²
- According to the American Psychiatric Association (APA), in a large urban police department, 11 percent of officer-involved shootings in a ten-year period were identified as suicide-by-cop.³
- Studies conducted in both Canada and the United Kingdom suggest that police response to persons affected by mental illness is not a United States-centric issue.

1 Kimberly Kindy et al., "A Year of Reckoning: Police Fatally Shoot Nearly 1,000," <http://www.washingtonpost.com/sf/investigative/2015/12/26/a-year-of-reckoning-police-fatally-shoot-nearly-1000>.

2 "Mentally Ill Are 16 Times More Likely to Be Killed by Police," *Sott.net* (Signs of the Times), <http://www.sott.net/article/308250-Report-Mentally-ill-are-16-times-more-likely-to-be-killed-by-police>.

3 *Ibid.* The APA discounted other studies reporting even higher percentages.

Promising Programs and Services

- **The Crisis Intervention Team (CIT)** program is a collaborative initiative between law enforcement officers and mental health experts to provide crisis intervention for persons affected by mental illness and focus on diversion and treatment over arrest and incarceration.
- **Mental Health First Aid (MHFA)** is an eight-hour course focused on mental illnesses and addictions as well as providing law enforcement with effective response options in order to de-escalate incidents without compromising safety.
- **Smart 9-1-1** is a private service that allows citizens to provide personal details in a secure online "Safety Profile" that is accessible to 9-1-1 dispatchers.

CHANGES AND CHALLENGES

Recent Changes Affecting Mental Health Services

- Bi-partisan criminal justice reform programs, such as the *Final Report of the President's Task Force on 21st Century Policing*, provide a contemporary framework for discussion about improving law enforcement services.
- The widespread use of social media, and in particular each department's ability to respond effectively through their own social media platforms creates an opportunity for the public to more fully understand each incident in question.
- Synthetic drug distribution and abuse has increased in recent years, to which persons affected by mental illness may be particularly vulnerable.
- Changes in insurance laws provide more access to health insurance, including mental health and substance use disorder treatment, to those who previously did not qualify.

Challenges to Improving Law Enforcement Response

- The creation and maintenance of strong partnerships with mental health advocacy organizations, hospitals, jails, schools, churches, legislatures, and government.
- The need for wider implementation of a response model that meets the needs of police agencies in their individual communities.
- When state and local laws/policies need to be amended, such changes require action by legislators, administrative bodies, and policy makers.

Platforms to Address These Challenges

- Effective partnerships are the key platform to facilitating change in the way law enforcement responds to persons affected by mental illness.
- Police training is a critical venue for change. Delivering effective training is a challenge, particularly for smaller agencies that lack the necessary resources or personnel; however, providing consistent training is important.
- Smartphone applications (apps) can be ideal opportunities to provide police officers with easy access to information about local service programs and providers, diversion opportunities, and training tools.
- The IACP's One Mind Campaign is a platform from which to launch enhanced law enforcement services to persons affected by mental illness.

THE ONE MIND CAMPAIGN

The One Mind Campaign seeks to ensure successful interactions between police officers and persons affected by mental illness. To join the campaign, law enforcement agencies commit to implementing four promising practices over a 12-36 month timeframe. Agencies demonstrating a serious commitment to implementing all four required strategies in a timely fashion will become publicly recognized members of IACP's One Mind Campaign.

Four Required Practices:

1. **ESTABLISH** a clearly defined and sustainable relationship with at least one community mental health organization. This partnership will serve to institutionalize effective collaboration between the police agency and the mental health community. Where appropriate, a Memorandum of Understanding can be crafted.
2. **DEVELOP** and implement a written policy addressing law enforcement response to persons affected by mental illness. A written policy ensures that the department is taking a holistic approach and setting minimum standards for necessary training, officer response, and evaluation of outcomes.
3. **DEMONSTRATE** that 100 percent of sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in MHFA. Officers who have taken this eight hour course are able to employ a variety of de-escalation and communication techniques to reduce the likelihood of an unfavorable outcome.
4. **DEMONSTRATE** that a minimum of 20 percent of all sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in CIT. This comprehensive course

uses a team approach, which connects officers with mental health professionals during a law enforcement response.

Beyond the four campaign strategies, there are multiple approaches that hold promise as well. These action items are promoted by the campaign as optional, but worthy of serious consideration:

- Provide mental health training in academies and routinely implement updated training in department roll calls.
- Partner with a state association of chiefs or sheriffs to adopt a statewide model.
- Effectively utilize technology to enhance awareness of community mental health services.
- Take a leadership role with City/County/State government in supporting the establishment of a mental health court.
- Implement routine diversity and cultural awareness trainings, focused on where culture or language barriers make effective response more difficult.
- Consider the benefit of enrolling in the Stepping Up Initiative, which was initiated in May 2015 by The Council of State Governments Justice Center, The National Association of Counties, and The American Psychiatric Association Foundation.

How to Join the One Mind Campaign:

Take the pledge today! Join your colleagues in enhancing your community by reducing injuries, saving lives, and strengthening community-police relations.

Visit <http://www.theIACP.org/onemindcampaign> to take the pledge and for further information.

RESOURCES

The One Mind Campaign

www.theIACP.org/onemindcampaign

IACP Model Policy

Responding to Persons Affected
by Mental Illness or in Crisis

www.theIACP.org/MPMentalIllness

MHFA

Mental Health First Aid

www.mentalhealthfirstaid.org/cs

CIT

Crisis Intervention Team International

www.citinternational.org



International Association of Chiefs of Police

44 Canal Center Plaza, Suite 200
Alexandria, VA 22314

703.836.6767 • FAX 703.836.4743 • www.theIACP.org

Appendix II



Model Policy

Responding to Persons Experiencing a Mental Health Crisis

Updated: August 2018

I. PURPOSE

It is the purpose of this policy to provide guidance to law enforcement officers when responding to or encountering persons experiencing a mental health crisis. For the purposes of this document, the term person in crisis (PIC) will be used.

II. POLICY

Responding to situations involving individuals reasonably believed to be PIC necessitates an officer to make difficult judgments about the mental state and intent of the individual and necessitates the use of special skills, techniques, and abilities to effectively and appropriately resolve the situation, while minimizing violence. The goal is to de-escalate the situation safely for all individuals involved when reasonable and consistent with established safety priorities. Applicable law of the jurisdiction shall guide the detention of PIC.

It is the policy of this agency that officers be provided with training to determine whether a person's behavior is indicative of a mental health crisis and with guidance, techniques, response options, and resources so that the situation may be resolved in as constructive, safe, and humane a manner as possible.

III. DEFINITIONS

Mental Health Crisis: An event or experience in which an individual's normal coping mechanisms are overwhelmed, causing them to have an extreme emotional, physical, mental, and/or behavioral response. Symptoms may include emotional reactions such as fear, anger, or excessive giddiness; psychological impairments such as inability to focus, confusion, or nightmares, and potentially even psychosis; physical reactions like vomiting/stomach issues, headaches, dizziness, excessive tiredness, or insomnia; and/or behavioral reactions including the trigger of a "freeze, fight, or flight" response. Any individual can

experience a crisis reaction regardless of previous history of mental illness.

Mental Illness: An impairment of an individual's normal cognitive, emotional, or behavioral functioning, caused by physiological or psychosocial factors. A person may be affected by mental illness if they display an inability to think rationally (e.g., delusions or hallucinations); exercise adequate control over behavior or impulses (e.g., aggressive, suicidal, homicidal, sexual); and/or take reasonable care of their welfare with regard to basic provisions for clothing, food, shelter, or safety.

IV. PROCEDURES

A. Recognizing Atypical Behavior

Only a trained mental health professional can diagnose mental illness, and even they may sometimes find it difficult to make a diagnosis. Officers are not expected to diagnose mental or emotional conditions, but rather to recognize behaviors that are potentially indicative of PIC, with special emphasis on those that suggest potential violence and/or danger. The following are generalized signs and symptoms of behavior that may suggest an individual is experiencing a mental health crisis, but each should be evaluated within the context of the entire situation. However, officers should not rule out other potential causes, such as effects of alcohol or psychoactive drugs, temporary emotional disturbances that are situational, or medical conditions.

1. Strong and unrelenting fear of persons, places, or things.
2. Extremely inappropriate behavior for a given context.
3. Frustration in new or unforeseen circumstances; inappropriate or aggressive behavior in dealing with the situation.

4. Memory loss related to such common facts as name or home address, although these may be signs of other physical ailments such as injury, dementia, or Alzheimer's disease.
5. Delusions, defined as the belief in thoughts or ideas that are false, such as delusions of grandeur ("I am Christ") or paranoid delusions ("Everyone is out to get me").
6. Hallucinations of any of the five senses (e.g., hearing voices, feeling one's skin crawl, smelling strange odors, seeing things others cannot see).
7. The belief that one suffers from extraordinary physical ailments that are not possible, such as persons who are convinced that their heart has stopped beating for extended periods of time.
8. Obsession with recurrent and uncontrolled thoughts, ideas, and images.
9. Extreme confusion, fright, paranoia, or depression.
10. Feelings of invincibility.

B. Assessing Risk

1. Most PIC are not violent and some may present dangerous behavior only under certain circumstances or conditions. Officers may use several indicators to assess whether a PIC represents potential danger to themselves, the officer, or others. These include the following:
 - a. The availability of any weapons.
 - b. Threats of harm to self or others or statements by the person that suggest that they are prepared to commit a violent or dangerous act. Such comments may range from subtle innuendo to direct threats that, when taken in conjunction with other information, paint a more complete picture of the potential for violence.
 - c. A personal history that reflects prior violence under similar or related circumstances. The person's history may already be known to the officer, or family, friends, or neighbors might provide such information.
 - d. The amount of self-control that the person exhibits, particularly the amount of physical control, over emotions such as rage, anger, fright, or agitation. Signs of a lack of self-control include extreme agitation, inability to sit still or communicate effectively, wide eyes, and rambling thoughts and speech. Clutching oneself or other objects to maintain control, begging to be left alone, or offering frantic assurances that one is all right may also suggest that the individual is close to losing control.

- e. Indications of substance use, as these may alter the individual's self-control and negatively influence an officer's capacity to effectively use de-escalation strategies.
 - f. The volatility of the environment. Agitators that may affect the person or create a particularly combustible environment or incite violence should be taken into account and mitigated. For example, the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon may be seen as a threat to a PIC and has the potential to escalate a situation. Standard law enforcement tactics may need to be modified to accommodate the situation when responding to a PIC.
 - g. Aggressive behaviors such as advancing on or toward an officer, refusal to follow directions or commands combined with physical posturing, and verbal or nonverbal threats.
2. Failure to exhibit violent or dangerous behavior prior to the arrival of the officer does not guarantee that there is no danger.
 3. A PIC may rapidly change their presentation from calm and command-responsive to physically active. This change in behavior may come from an external trigger (such as an officer stating "I have to handcuff you now") or from internal stimuli (delusions or hallucinations). A variation in the person's physical presentation does not necessarily mean they will become violent or threatening, but officers should be prepared at all times for a rapid change in behavior.
 4. Context is crucial in the accurate assessment of behavior. Officers should take into account the totality of circumstances requiring their presence and overall need for intervention.

C. Response to PIC

If the officer determines that an individual is experiencing a mental health crisis and is a potential threat to themselves, the officer, or others, law enforcement intervention may be required, as prescribed by statute. All necessary measures should be employed to resolve any conflict safely using the appropriate intervention to resolve the issue. The following responses should be considered:

1. Request a backup officer. Always do so in cases where the individual will be taken into custody.

2. Request assistance from individuals with specialized training in dealing with mental illness or crisis situations (e.g., Crisis Intervention Team (CIT) officers, community crisis mental health personnel, crisis negotiator, or police psychologist).
 3. Contact and exchange information with a treating clinician or mental health resource for assistance, based on law and statute.¹
 4. Take steps to calm the situation. Where possible, eliminate emergency lights and sirens, disperse crowds, lower radio volume, and assume a quiet nonthreatening manner when approaching or conversing with the individual. Where violence or destructive acts have not occurred, avoid physical contact, and take time to assess the situation. Officers should operate with the understanding that time is an ally and there is no need to rush or force the situation.
 5. Create increased distance, if possible, in order to provide the officer with additional time to assess the need for force options.
 6. Utilize environmental controls, such as cover, concealment, and barriers to help manage the volatility of situations.
 7. Move slowly and do not excite the individual. Provide reassurance that officers are there to help and that the individual will be provided with appropriate care.
 8. Ask the individual's name or by what name they would prefer to be addressed and use that name when talking with the individual.
 9. Communicate with the individual in an attempt to determine what is bothering them. If possible, speak slowly and use a low tone of voice. Relate concern for the individual's feelings and allow the individual to express feelings without judgment.
 10. Where possible, gather information on the individual from acquaintances or family members and/or request professional assistance, if available and appropriate, to assist in communicating with and calming the individual.
 11. Do not threaten the individual with arrest, or make other similar threats or demands, as this may create additional fright, stress, and potential aggression.
 12. Avoid topics that may agitate the individual and guide the conversation toward subjects that help bring the situation to a successful conclusion. It is often helpful for officers to apologize for bringing up a subject or topic that triggers the PIC. This apology can often be a bridge to rapport building.
 13. Attempt to be truthful with the individual. If the individual becomes aware of a deception, they may withdraw from the contact in distrust and may become hypersensitive or retaliate in anger. In the event an individual is experiencing delusions and/or hallucinations and asks the officer to validate these, statements such as "I am not seeing what you are seeing, but I believe that you are seeing (the hallucination, etc.)" are recommended. Validating and/or participating in the individual's delusion and/or hallucination is not advised.
- D. Taking Custody or Making Referrals to Mental Health Professionals
1. Based upon the overall circumstances of the situation, applicable law and statutes, and agency policy, an officer may take one of several courses of action when responding to a PIC.
 - a. Offer mental health referral information to the individual and/or family members.
 - b. Assist in accommodating a voluntary admission for the individual.
 - c. Take the individual into custody and provide transportation to a mental health facility for an involuntary psychiatric evaluation.
 - d. Make an arrest.
 2. When circumstances indicate an individual meets the legal requirements for involuntary psychiatric evaluation and should be taken into custody and transported to a mental health facility, or when circumstances indicate that an arrest is necessary, the officer should, when possible, request the assistance of crisis intervention specialists to assist in the custody and admission process, as well as any interviews or interrogations.
 3. Officers should be aware that the application or use of restraints may aggravate any aggression being displayed by a PIC.
 4. In all situations involving a PIC, officers should
 - a. Continue to use de-escalation techniques and communication skills to avoid escalating the situation.

¹ Officers in the United States can provide the HIPAA exemption reference number (45 CFR 164.512(j)(1)(i)(A)) for the clinician's reference, if necessary. This exemption states that it is allowable for a covered entity to disclose protected health information to law enforcement if it "is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public."

- b. Remove any dangerous weapons from the area.
- c. Where applicable, ensure that the process for petition for involuntary committal has been initiated by the appropriate personnel.

E. Documentation

Officers should

1. Document the incident, regardless of whether or not the individual is taken into custody. Where the individual is taken into custody or referred to other agencies, officers should detail the reasons why.
2. Ensure that the report is as specific and explicit as possible concerning the circumstances of the incident and the type of behavior that was observed. Terms such as “out of control” or “mentally disturbed” should be replaced with descriptions of the specific behaviors, statements, and actions exhibited by the person.
3. In circumstances when an individual is transported to a mental health facility for a psychiatric evaluation, and agency policy permits, provide documentation to the examining clinicians detailing the circumstances and behavior leading to the transport.

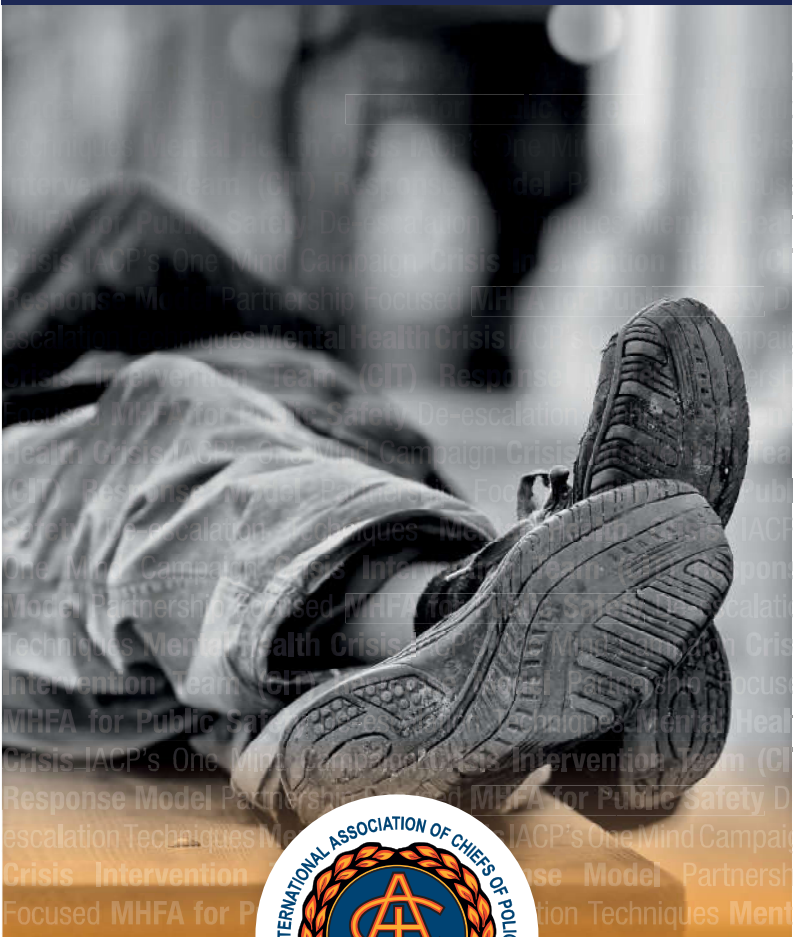
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This document is not intended to be a national standard.

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Improving POLICE RESPONSE to Persons Affected by MENTAL ILLNESS



*Report from the
March 2016 IACP Symposium*

EXTENT OF THE ISSUE

Law enforcement agencies across the world are increasingly required to respond to and intervene on behalf of people who are affected by mental illness.

There is compelling evidence to suggest that law enforcement agencies need to enhance their training on interactions with persons affected by mental illness. Research conducted by the *Washington Post* and the Treatment Advocacy Center (TAC) highlight how often the interactions between persons affected by mental illness and the police can lead to injury or fatality.

- In 2015, the *Washington Post* noted that victims who were mentally ill or experiencing an emotional crisis accounted for one-fourth of those killed in officer-involved shootings.¹
- The Treatment Advocacy Center (TAC) found that persons with severe mental illnesses are 16 times more likely to be killed by police than other civilians.²
- According to the American Psychiatric Association (APA), in a large urban police department, 11 percent of officer-involved shootings in a ten-year period were identified as suicide-by-cop.³
- Studies conducted in both Canada and the United Kingdom suggest that police response to persons affected by mental illness is not a United States-centric issue.

1 Kimberly Kindy et al., "A Year of Reckoning: Police Fatally Shoot Nearly 1,000," <http://www.washingtonpost.com/sf/investigative/2015/12/26/a-year-of-reckoning-police-fatally-shoot-nearly-1000>.

2 "Mentally Ill Are 16 Times More Likely to Be Killed by Police," *Sott.net* (Signs of the Times), <http://www.sott.net/article/308250-Report-Mentally-ill-are-16-times-more-likely-to-be-killed-by-police>.

3 *Ibid.* The APA discounted other studies reporting even higher percentages.

Promising Programs and Services

- **The Crisis Intervention Team (CIT)** program is a collaborative initiative between law enforcement officers and mental health experts to provide crisis intervention for persons affected by mental illness and focus on diversion and treatment over arrest and incarceration.
- **Mental Health First Aid (MHFA)** is an eight-hour course focused on mental illnesses and addictions as well as providing law enforcement with effective response options in order to de-escalate incidents without compromising safety.
- **Smart 9-1-1** is a private service that allows citizens to provide personal details in a secure online "Safety Profile" that is accessible to 9-1-1 dispatchers.

CHANGES AND CHALLENGES

Recent Changes Affecting Mental Health Services

- Bi-partisan criminal justice reform programs, such as the *Final Report of the President's Task Force on 21st Century Policing*, provide a contemporary framework for discussion about improving law enforcement services.
- The widespread use of social media, and in particular each department's ability to respond effectively through their own social media platforms creates an opportunity for the public to more fully understand each incident in question.
- Synthetic drug distribution and abuse has increased in recent years, to which persons affected by mental illness may be particularly vulnerable.
- Changes in insurance laws provide more access to health insurance, including mental health and substance use disorder treatment, to those who previously did not qualify.

Challenges to Improving Law Enforcement Response

- The creation and maintenance of strong partnerships with mental health advocacy organizations, hospitals, jails, schools, churches, legislatures, and government.
- The need for wider implementation of a response model that meets the needs of police agencies in their individual communities.
- When state and local laws/policies need to be amended, such changes require action by legislators, administrative bodies, and policy makers.

Platforms to Address These Challenges

- Effective partnerships are the key platform to facilitating change in the way law enforcement responds to persons affected by mental illness.
- Police training is a critical venue for change. Delivering effective training is a challenge, particularly for smaller agencies that lack the necessary resources or personnel; however, providing consistent training is important.
- Smartphone applications (apps) can be ideal opportunities to provide police officers with easy access to information about local service programs and providers, diversion opportunities, and training tools.
- The IACP's One Mind Campaign is a platform from which to launch enhanced law enforcement services to persons affected by mental illness.

THE ONE MIND CAMPAIGN

The One Mind Campaign seeks to ensure successful interactions between police officers and persons affected by mental illness. To join the campaign, law enforcement agencies commit to implementing four promising practices over a 12-36 month timeframe. Agencies demonstrating a serious commitment to implementing all four required strategies in a timely fashion will become publicly recognized members of IACP's One Mind Campaign.

Four Required Practices:

1. **ESTABLISH** a clearly defined and sustainable relationship with at least one community mental health organization. This partnership will serve to institutionalize effective collaboration between the police agency and the mental health community. Where appropriate, a Memorandum of Understanding can be crafted.
2. **DEVELOP** and implement a written policy addressing law enforcement response to persons affected by mental illness. A written policy ensures that the department is taking a holistic approach and setting minimum standards for necessary training, officer response, and evaluation of outcomes.
3. **DEMONSTRATE** that 100 percent of sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in MHFA. Officers who have taken this eight hour course are able to employ a variety of de-escalation and communication techniques to reduce the likelihood of an unfavorable outcome.
4. **DEMONSTRATE** that a minimum of 20 percent of all sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in CIT. This comprehensive course

uses a team approach, which connects officers with mental health professionals during a law enforcement response.

Beyond the four campaign strategies, there are multiple approaches that hold promise as well. These action items are promoted by the campaign as optional, but worthy of serious consideration:

- Provide mental health training in academies and routinely implement updated training in department roll calls.
- Partner with a state association of chiefs or sheriffs to adopt a statewide model.
- Effectively utilize technology to enhance awareness of community mental health services.
- Take a leadership role with City/County/State government in supporting the establishment of a mental health court.
- Implement routine diversity and cultural awareness trainings, focused on where culture or language barriers make effective response more difficult.
- Consider the benefit of enrolling in the Stepping Up Initiative, which was initiated in May 2015 by The Council of State Governments Justice Center, The National Association of Counties, and The American Psychiatric Association Foundation.

How to Join the One Mind Campaign:

Take the pledge today! Join your colleagues in enhancing your community by reducing injuries, saving lives, and strengthening community-police relations.

Visit <http://www.theIACP.org/onemindcampaign> to take the pledge and for further information.

RESOURCES

The One Mind Campaign

www.theIACP.org/onemindcampaign

IACP Model Policy

Responding to Persons Affected
by Mental Illness or in Crisis

www.theIACP.org/MPMentalIllness

MHFA

Mental Health First Aid

www.mentalhealthfirstaid.org/cs

CIT

Crisis Intervention Team International

www.citinternational.org



International Association of Chiefs of Police

44 Canal Center Plaza, Suite 200
Alexandria, VA 22314

703.836.6767 • FAX 703.836.4743 • www.theIACP.org

Appendix II



Model Policy

Responding to Persons Experiencing a Mental Health Crisis

Updated: August 2018

I. PURPOSE

It is the purpose of this policy to provide guidance to law enforcement officers when responding to or encountering persons experiencing a mental health crisis. For the purposes of this document, the term person in crisis (PIC) will be used.

II. POLICY

Responding to situations involving individuals reasonably believed to be PIC necessitates an officer to make difficult judgments about the mental state and intent of the individual and necessitates the use of special skills, techniques, and abilities to effectively and appropriately resolve the situation, while minimizing violence. The goal is to de-escalate the situation safely for all individuals involved when reasonable and consistent with established safety priorities. Applicable law of the jurisdiction shall guide the detention of PIC.

It is the policy of this agency that officers be provided with training to determine whether a person's behavior is indicative of a mental health crisis and with guidance, techniques, response options, and resources so that the situation may be resolved in as constructive, safe, and humane a manner as possible.

III. DEFINITIONS

Mental Health Crisis: An event or experience in which an individual's normal coping mechanisms are overwhelmed, causing them to have an extreme emotional, physical, mental, and/or behavioral response. Symptoms may include emotional reactions such as fear, anger, or excessive giddiness; psychological impairments such as inability to focus, confusion, or nightmares, and potentially even psychosis; physical reactions like vomiting/stomach issues, headaches, dizziness, excessive tiredness, or insomnia; and/or behavioral reactions including the trigger of a "freeze, fight, or flight" response. Any individual can

experience a crisis reaction regardless of previous history of mental illness.

Mental Illness: An impairment of an individual's normal cognitive, emotional, or behavioral functioning, caused by physiological or psychosocial factors. A person may be affected by mental illness if they display an inability to think rationally (e.g., delusions or hallucinations); exercise adequate control over behavior or impulses (e.g., aggressive, suicidal, homicidal, sexual); and/or take reasonable care of their welfare with regard to basic provisions for clothing, food, shelter, or safety.

IV. PROCEDURES

A. Recognizing Atypical Behavior

Only a trained mental health professional can diagnose mental illness, and even they may sometimes find it difficult to make a diagnosis. Officers are not expected to diagnose mental or emotional conditions, but rather to recognize behaviors that are potentially indicative of PIC, with special emphasis on those that suggest potential violence and/or danger. The following are generalized signs and symptoms of behavior that may suggest an individual is experiencing a mental health crisis, but each should be evaluated within the context of the entire situation. However, officers should not rule out other potential causes, such as effects of alcohol or psychoactive drugs, temporary emotional disturbances that are situational, or medical conditions.

1. Strong and unrelenting fear of persons, places, or things.
2. Extremely inappropriate behavior for a given context.
3. Frustration in new or unforeseen circumstances; inappropriate or aggressive behavior in dealing with the situation.

4. Memory loss related to such common facts as name or home address, although these may be signs of other physical ailments such as injury, dementia, or Alzheimer's disease.
5. Delusions, defined as the belief in thoughts or ideas that are false, such as delusions of grandeur ("I am Christ") or paranoid delusions ("Everyone is out to get me").
6. Hallucinations of any of the five senses (e.g., hearing voices, feeling one's skin crawl, smelling strange odors, seeing things others cannot see).
7. The belief that one suffers from extraordinary physical ailments that are not possible, such as persons who are convinced that their heart has stopped beating for extended periods of time.
8. Obsession with recurrent and uncontrolled thoughts, ideas, and images.
9. Extreme confusion, fright, paranoia, or depression.
10. Feelings of invincibility.

B. Assessing Risk

1. Most PIC are not violent and some may present dangerous behavior only under certain circumstances or conditions. Officers may use several indicators to assess whether a PIC represents potential danger to themselves, the officer, or others. These include the following:
 - a. The availability of any weapons.
 - b. Threats of harm to self or others or statements by the person that suggest that they are prepared to commit a violent or dangerous act. Such comments may range from subtle innuendo to direct threats that, when taken in conjunction with other information, paint a more complete picture of the potential for violence.
 - c. A personal history that reflects prior violence under similar or related circumstances. The person's history may already be known to the officer, or family, friends, or neighbors might provide such information.
 - d. The amount of self-control that the person exhibits, particularly the amount of physical control, over emotions such as rage, anger, fright, or agitation. Signs of a lack of self-control include extreme agitation, inability to sit still or communicate effectively, wide eyes, and rambling thoughts and speech. Clutching oneself or other objects to maintain control, begging to be left alone, or offering frantic assurances that one is all right may also suggest that the individual is close to losing control.

- e. Indications of substance use, as these may alter the individual's self-control and negatively influence an officer's capacity to effectively use de-escalation strategies.
 - f. The volatility of the environment. Agitators that may affect the person or create a particularly combustible environment or incite violence should be taken into account and mitigated. For example, the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon may be seen as a threat to a PIC and has the potential to escalate a situation. Standard law enforcement tactics may need to be modified to accommodate the situation when responding to a PIC.
 - g. Aggressive behaviors such as advancing on or toward an officer, refusal to follow directions or commands combined with physical posturing, and verbal or nonverbal threats.
2. Failure to exhibit violent or dangerous behavior prior to the arrival of the officer does not guarantee that there is no danger.
 3. A PIC may rapidly change their presentation from calm and command-responsive to physically active. This change in behavior may come from an external trigger (such as an officer stating "I have to handcuff you now") or from internal stimuli (delusions or hallucinations). A variation in the person's physical presentation does not necessarily mean they will become violent or threatening, but officers should be prepared at all times for a rapid change in behavior.
 4. Context is crucial in the accurate assessment of behavior. Officers should take into account the totality of circumstances requiring their presence and overall need for intervention.

C. Response to PIC

If the officer determines that an individual is experiencing a mental health crisis and is a potential threat to themselves, the officer, or others, law enforcement intervention may be required, as prescribed by statute. All necessary measures should be employed to resolve any conflict safely using the appropriate intervention to resolve the issue. The following responses should be considered:

1. Request a backup officer. Always do so in cases where the individual will be taken into custody.

2. Request assistance from individuals with specialized training in dealing with mental illness or crisis situations (e.g., Crisis Intervention Team (CIT) officers, community crisis mental health personnel, crisis negotiator, or police psychologist).
 3. Contact and exchange information with a treating clinician or mental health resource for assistance, based on law and statute.¹
 4. Take steps to calm the situation. Where possible, eliminate emergency lights and sirens, disperse crowds, lower radio volume, and assume a quiet nonthreatening manner when approaching or conversing with the individual. Where violence or destructive acts have not occurred, avoid physical contact, and take time to assess the situation. Officers should operate with the understanding that time is an ally and there is no need to rush or force the situation.
 5. Create increased distance, if possible, in order to provide the officer with additional time to assess the need for force options.
 6. Utilize environmental controls, such as cover, concealment, and barriers to help manage the volatility of situations.
 7. Move slowly and do not excite the individual. Provide reassurance that officers are there to help and that the individual will be provided with appropriate care.
 8. Ask the individual's name or by what name they would prefer to be addressed and use that name when talking with the individual.
 9. Communicate with the individual in an attempt to determine what is bothering them. If possible, speak slowly and use a low tone of voice. Relate concern for the individual's feelings and allow the individual to express feelings without judgment.
 10. Where possible, gather information on the individual from acquaintances or family members and/or request professional assistance, if available and appropriate, to assist in communicating with and calming the individual.
 11. Do not threaten the individual with arrest, or make other similar threats or demands, as this may create additional fright, stress, and potential aggression.
 12. Avoid topics that may agitate the individual and guide the conversation toward subjects that help bring the situation to a successful conclusion. It is often helpful for officers to apologize for bringing up a subject or topic that triggers the PIC. This apology can often be a bridge to rapport building.
 13. Attempt to be truthful with the individual. If the individual becomes aware of a deception, they may withdraw from the contact in distrust and may become hypersensitive or retaliate in anger. In the event an individual is experiencing delusions and/or hallucinations and asks the officer to validate these, statements such as "I am not seeing what you are seeing, but I believe that you are seeing (the hallucination, etc.)" are recommended. Validating and/or participating in the individual's delusion and/or hallucination is not advised.
- D. Taking Custody or Making Referrals to Mental Health Professionals
1. Based upon the overall circumstances of the situation, applicable law and statutes, and agency policy, an officer may take one of several courses of action when responding to a PIC.
 - a. Offer mental health referral information to the individual and/or family members.
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Officers should

1. Document the incident, regardless of whether or not the individual is taken into custody. Where the individual is taken into custody or referred to other agencies, officers should detail the reasons why.
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