



# Use of Force Training for Police Including De-escalation Techniques for Dealing with People in Crisis

## Mobile Crisis Response Team

---

### Background

Eastern Health's Mobile Crisis Response Team (MCRT) was established in April 2010 and is comprised of a team of psychiatric nurses, licensed practical nurses and social workers, who travel as a team to assist mental health clients determined to be in crisis.

There are challenges in the current MCRT providing this service to clients in 'crisis' due to safety concerns, information sharing, and a limited level of response/availability. There is also a less than ideal relationship between police, health care professionals and consumers due to a lack of understanding of each other's roles, responsibilities and knowledge base.

In most instances, the RNC is the initial contact for many people experiencing mental health crisis. Being the most available does not necessarily mean a police response is the most appropriate in all situations. Many of those experiencing a mental health crisis do not want to talk to police nor have police come to their homes.

The RNC completed a nation-wide scan in 2014 to determine the best approach to mental health crisis. The Memphis Model is an organizational and community intervention that involves changes in police department procedures as well as collaboration with mental health providers and other community stakeholders. This model is utilized in many law enforcement agencies and is considered a "Best Practice" model in law enforcement. The Memphis Model is an internationally recognized model that allows for the community demographics and its available services to shape the unit to best fit the needs and capabilities of the community.

The Memphis model has a foundation in Crisis Intervention Team (CIT) training which is designed to improve officers' ability to de-escalate and safely intervene, link individuals to mental health services, and divert them from the criminal justice system when appropriate.

One of the core elements of the model is collaboration with community partners, including mental health providers. This collaboration involves the training of RNC officers in Crisis Intervention Training alongside health professionals, social workers, and community advocates. It also includes expanding the current MCRT to include 4 plain clothed police officers to increase the response to higher risk crisis incidents by the MCRT mental health professionals. By expanding the MCRT it will also increase the availability of the team to respond to crisis situations.

The Honourable Donald S. Luther released his findings and recommendations into the sudden deaths of Norman Edward Reid and Darryl Brandon Power on December 16, 2003.

- Recommendation #15:

*“It is further recommended that the Regional Health Boards establish mobile health units to respond to mentally ill persons in crisis where no criminal offence is alleged. Each unit would be developed locally and based on local needs. In the greater St. John’s area, a model along the lines of Vancouver’s Car 87 or Hamilton’s Coast Programme should be developed. In other areas, the models would vary. Intervention would be by experienced mental health workers. Police officers would only be called to assist where the workers determine there is a concern for personal safety.”*

The concept of a combined unit for crisis intervention incorporating mental health professionals and the police is in practice across Canada. The configurations of those combined units take into consideration the demographics and best interest of the communities. Vancouver has a Mental Health Team, “CAR 87”, this team is a uniformed police officer and a psychiatric nurse operating out of a marked police unit; Calgary also has a co-responder response, the “PACT” team which also contains a uniformed officer and a nurse or social worker operating out of a marked “Mental Health Services” unit. London and Halifax have implemented their mental health teams based on the CIT Memphis Model and their teams are comprised of an un-uniformed police officer and a nurse or social worker in an unmarked vehicle that does not identify as a police unit.

- Recommendation #36:

*“it is hereby recommended that the RNC develop an organized comprehensive database, consistent with principles of patient confidentiality, so the relevant, important information for its members is made available when dealing with mentally ill persons who are dangerous.”*

The collaboration within the combined MCRT of mental health professionals and police would include the sharing of information as it specifically relates to determining the best health care plan to the individual in crisis. In the absence of a mental health professional, the training of the first responder RNC officers in Crisis Intervention would create a line of communications between the Mental Health & Addictions Crisis Line and would also include some sharing of information to ensure the best health response is actioned.

## **Recommendations**

Develop a collaborative approach that safely and effectively addresses the needs of persons experiencing a mental health crisis, links them to appropriate services and diverts them from the Criminal Justice System, when appropriate.

- A collaborative approach by the Department of Health and Community Services and the RNC in responding to persons experiencing mental health crises.

- Establishment of an Implementation Team, comprised of an RNC representative, mental health professional and community advocate.
- Crisis Intervention Team (CIT) training and Train the Trainer for specified RNC officers, Communications Technicians and mental health professionals.
- A Mobile Crisis Response Team (MCRT) comprised of:
  - Clinical Team Lead (nurse/social worker) – New position required for Eastern Health
  - mental health professionals (current resources only)
  - 4 plain clothed RNC officers (current resources only)