

NFSTAC PRESENTS

Family Support and Crisis Intervention Team Training

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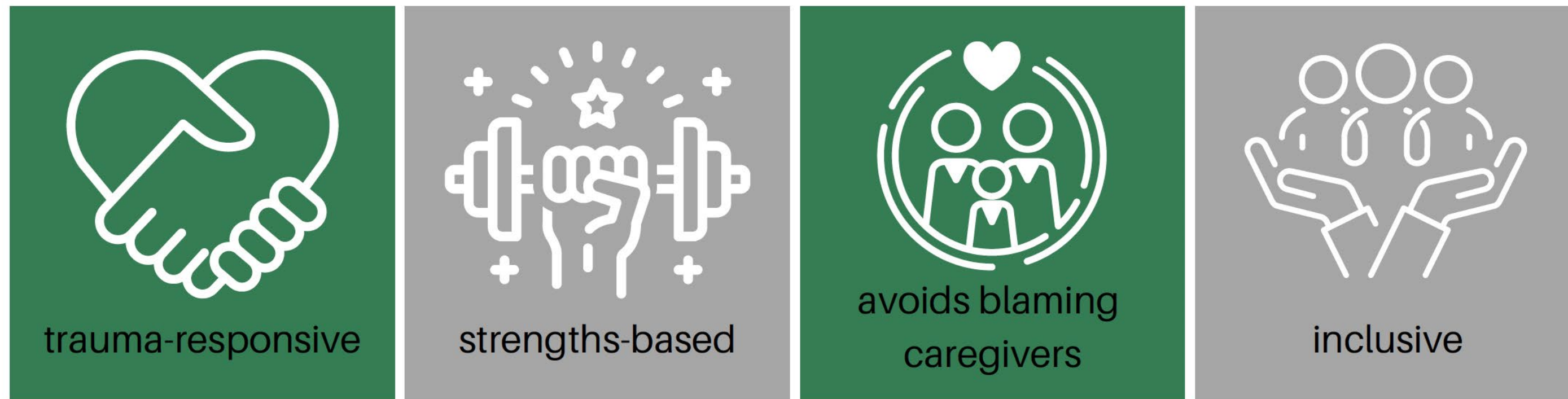
**NAMI Guilford Board
President
NAMI**
madonna@namiguilford.org

**Wednesday
March 15, 2023
2:00 pm. ET**

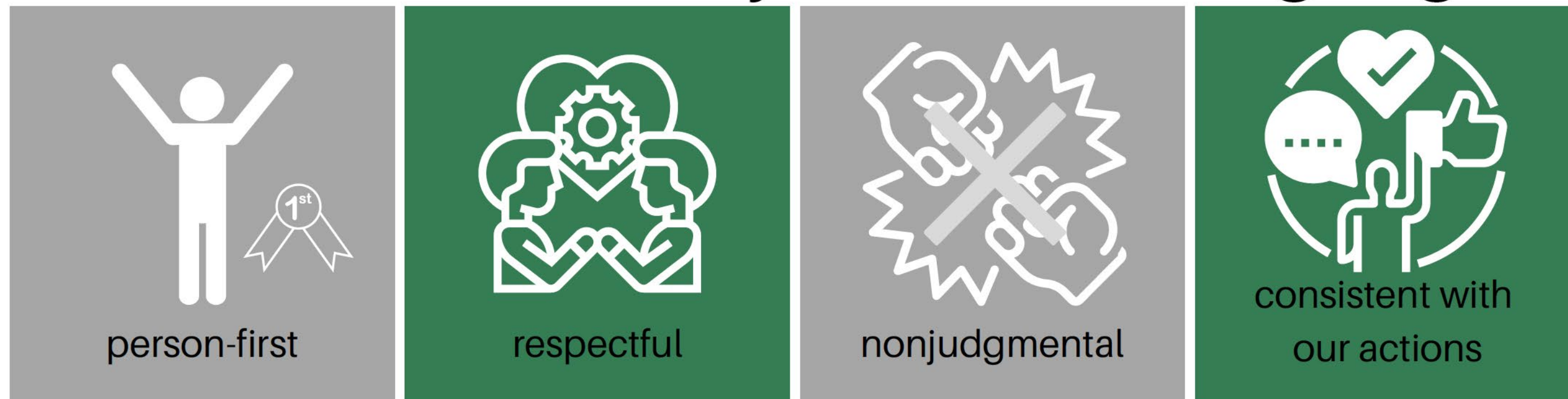
Disclaimer

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NFSTAC uses family-centered language!



SAME BOOK/DIFFERENT CHAPTER

- MENTAL HEALTH ACCEPTANCE
- INFORMAL SUPPORTS
- BUILDING RAPPORT WITH LAW ENFORCEMENT
- LAW ENFORCEMENT INTERACTION

MURIEL JONES

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Via e-mail: [REDACTED]

August 10, 2015

Chief [REDACTED]
[REDACTED] Police Department
[REDACTED]
[REDACTED] New Jersey [REDACTED]

RE: [REDACTED] (son)
Runaway incident on Saturday, August 8, 2015

Dear Chief [REDACTED]:

This letter is to commend the [REDACTED] Police Department concerning my son, [REDACTED] (25 yrs old). [REDACTED] suffers with a mental health challenge and is on the autism spectrum.

I received a phone call approximately 12:53 a.m. on Saturday, August 8th from an officer advising that a call was received from the group home residence, [REDACTED] reporting that my son ran away. The officer identified himself and, unfortunately, I do not recall his name. It is my hope that your call log will reflect the officers involved including dispatch.

I was able to track down my son via his cell phone and advised dispatch. I was on the phone with my son when the unit arrived at the BP Station on [REDACTED]. The approach by the officers was absolutely amazing and brought me to tears. I am not sure if they were CIT trained but their approach was sensitive and professional.

I truly appreciate the professionalism of dispatch and the officers who encountered my son. I thank them from the bottom of my heart.

Sincerely,



Muriel Jones
Parent/Legal Guardian

cc: Mayor [REDACTED]



On Tue, Aug 11, 2015 at 6:33 AM, [REDACTED] wrote:

Ms. Jones,

Thank you for recognizing my officers. We do have specialized training to deal with people that have autism and special needs. It is something I identified as a need upon being Chief of Police. It is imperative that we meet the needs of all our residents to provide the best possible quality of life.

I am away this week on vacation but I am having the reports pulled so I can forward your letter to all the officers and communications staff involved. I will place this letter in their personal files. Complimentary letters are considered for performance evaluations, special assignments, and promotions.

On a personal note I want to tell you I sincerely appreciate the compliment. I am sure you are aware that law enforcement has been under a great deal of scrutiny and criticism lately. It is quite refreshing when my officers are recognized for their hard work and dedication.

Feel free to contact me if I can ever be of assistance. Have a great week.

Sincerely,

Chief [REDACTED]

Sent from my Verizon Wireless 4G LTE DROID

CIT Officers' Saved My Son's Life

- The family “secret”— well, not really
- We can do everything the best we can, and still our children can use
- We don't treat this disease as we do other diseases
- Knowing what we are willing to do and not willing to do, the costs of our willingness

Link to source, if needed

CIT Officers' Saved My Son's Life



- CRAFT/ITC: loving, relational, personal, invitational, evidence-based approach
- CIT experiences: learning we could ask for help
- Treatment that looked beyond symptoms to the deeper why—trauma and use
- Recovery: a lifelong journey for all of us

Link to source, if needed



- City of Minnetonka
- County of Hennepin
- Population of 53,266
- Land size of 28 sq. miles



Mental Health Unit: CIT & MHET

Minnetonka Police

- 57 Sworn Police Officers
 - 21 CIT Officers
 - 13 Patrol
 - 1 SRO
 - 6 Special Assignments
- MHET 7

**CIT - Crisis Intervention Team
Officers with 40 hour Basic
CIT Certification**

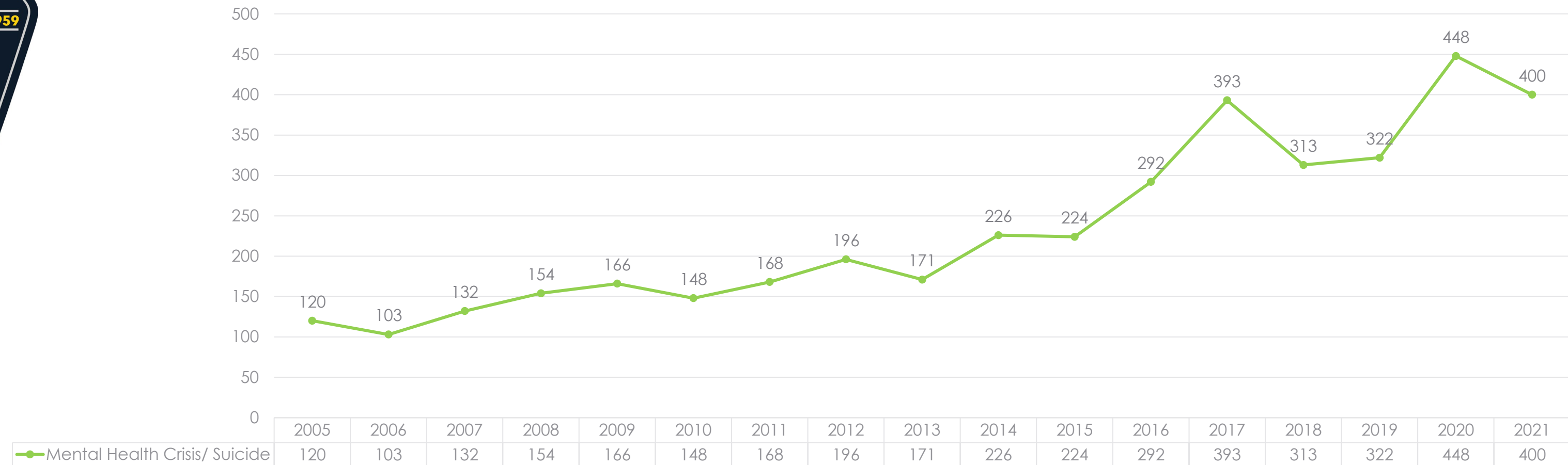


MHET - Mental Health Evaluation Team

Volunteer CIT Officers w/additional training
& Complete follow-up visits

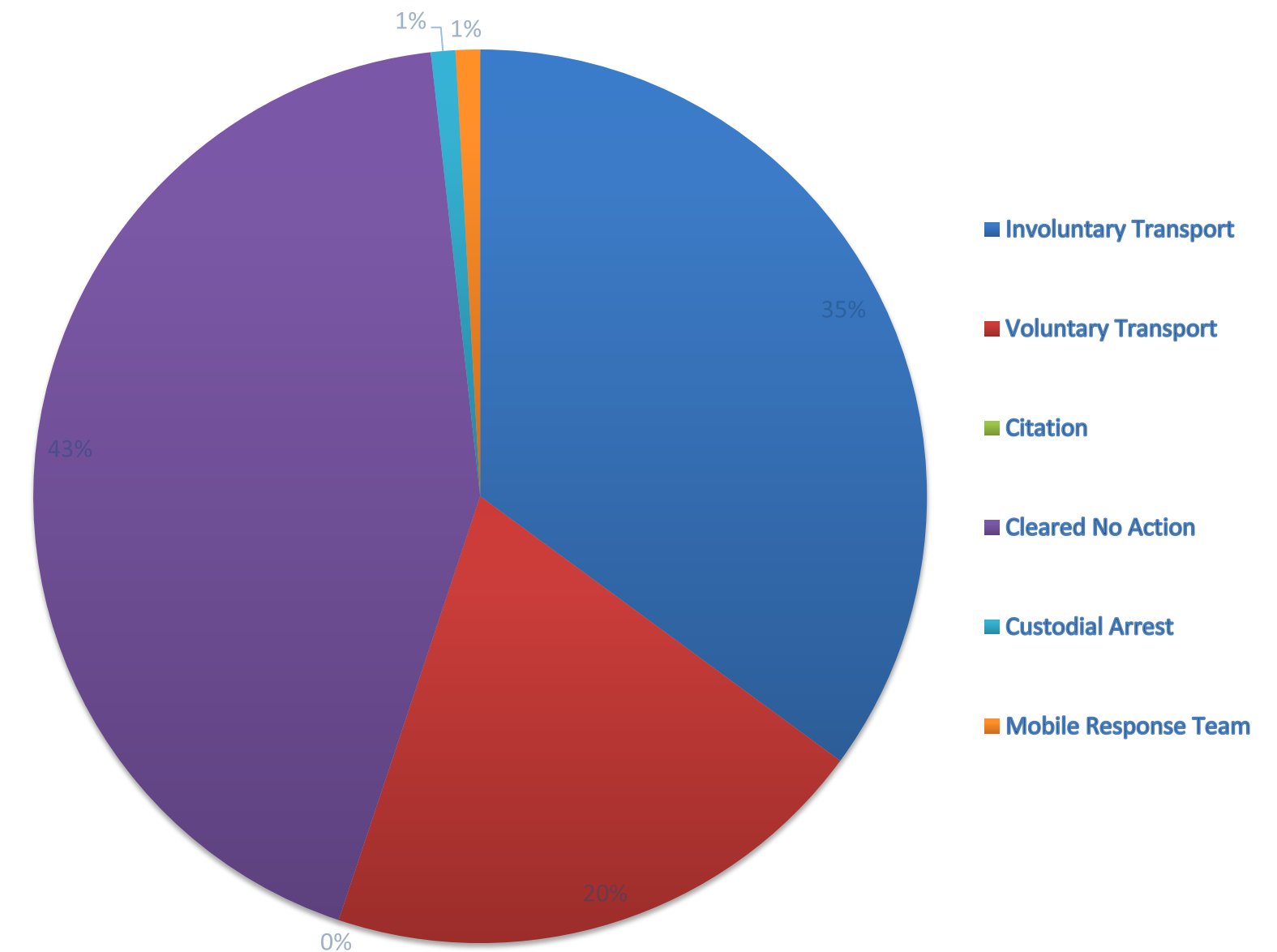
Minnetonka Police Department

Calls For Service Mental Health Crisis and Suicidal Threats/Attempts

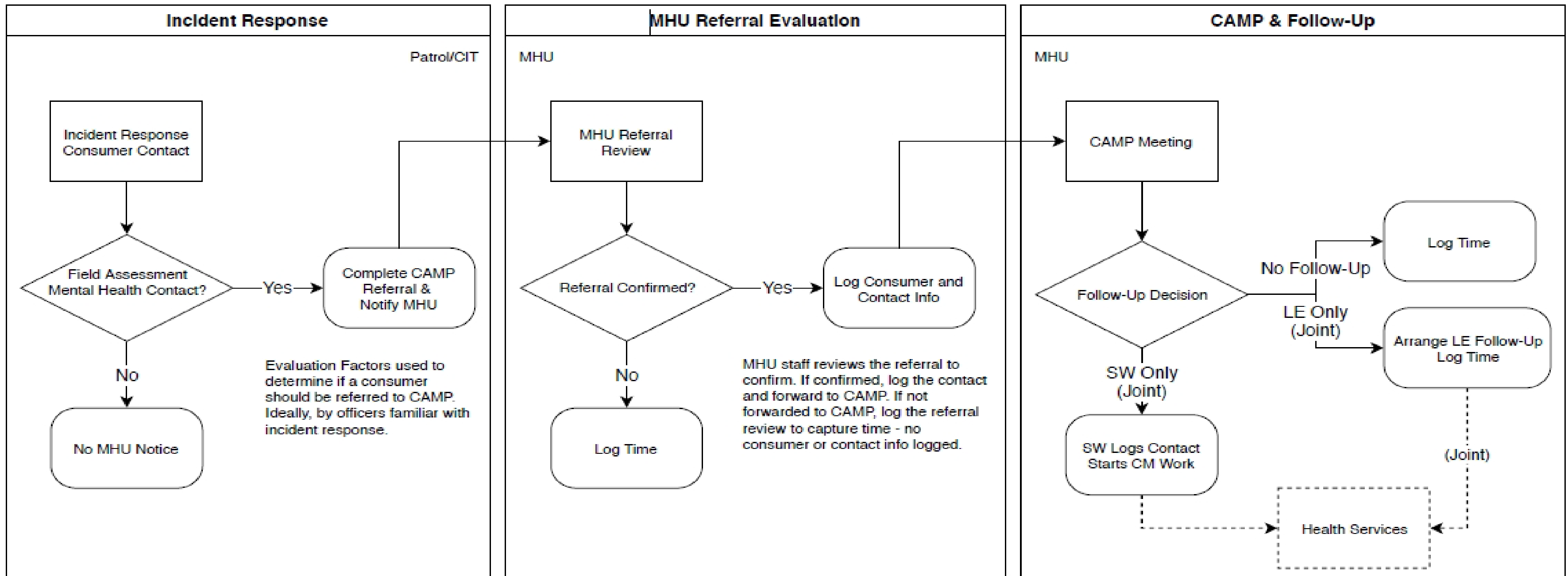


Disposition 2021

On Scene Incident Information



Case Assessment Management Program (CAMP)



Mental Health follow-up

Incident reports are written on every mental health call.

Reports are used for historical data, follow-up and service referral.

MHU Coordinator makes referral to CAMP

- MHU Coordinators & Hennepin County Social Worker meet for follow-up assessment
- Follow-up completed by
 - Hennepin Only
 - Law Enforcement
 - LE & Hennepin County

Follow-up may include

- Assessment of needs
- Psychoeducation
- Education of non-emergency services
- Referral to resources
- Case management
- Pre-petition hearing
- Mental Health Court

Use of Force

2021

Defined

- Hobble

Aerosol

Expandable

Baton

Taser

Pressure Point

Seat Belt

Less Lethal

Impact

Joint

Manipulation

Take Down

Strikes/Kicks/

Stuns

Deadly Force

Other

Incident Metrics				
Use of Force	Contacts	<18 yo	>=18 yo	%Total
Force Used	23	13	10	6%
Force Not Used	377	87	290	94%

Minnesota State Statute



Minnesota State Statute



253B.05



Emergency Admission

Subd. 2. Peace or health officer authority.

(a) A peace or health officer may take a person into custody and transport the person to a licensed physician or treatment facility if the officer has reason to believe, either through direct observation of the person's behavior, or upon reliable information of the person's recent behavior and knowledge of the person's past behavior or psychiatric treatment, that the person is mentally ill or developmentally disabled and in danger of injuring self or others if not immediately detained. A peace or health officer or a person working under such officer's supervision, may take a person who is believed to be chemically dependent or is intoxicated in public into custody and transport the person to a treatment facility. If the person is intoxicated in public or is believed to be chemically dependent and is not in danger of causing self-harm or harm to any person or property, the peace or health officer may transport the person home. The peace or health officer shall make written application for admission of the person to the treatment facility. The application shall contain the peace or health officer's statement specifying the reasons for and circumstances under which the person was taken into custody. If danger to specific individuals is a basis for the emergency hold, the statement must include identifying information on those individuals, to the extent practicable. A copy of the statement shall be made available to the person taken into custody. The peace or health officer who makes the application shall provide the officer's name, the agency that employs the officer, and the telephone number or other contact information for purposes of receiving notice under subdivision 3, paragraph (d).

(b) As far as is practicable, a peace officer who provides transportation for a person placed in a facility under this subdivision may not be in uniform and may not use a vehicle visibly marked as a law enforcement vehicle.

Application by Peace Officer for Emergency Evaluation

In the Matter of:

Minnetonka PD Case Number:

Event ID #:

#Error

First Name

Middle Name

Last Name

Date of Birth / Age

#Error

#Error

#Error

Address

City

State

Zip Code

Phone

Alleged (check applicable):

- ☐ Unable to safely care for self
- ☐ Mentally ill
- ☐ Developmentally Disabled
- ☐ Intoxicated/Impaired

I, the undersigned, being a Peace Officer, have taken the above named person into custody and hereby direct that he/she be transported to a licensed provider or treatment facility. I believe this person is mentally ill, developmentally disabled or intoxicated/impaired, and is in danger of injuring self or others if not immediately detained. This person was taken into custody under the following circumstances and for the following reasons:

Behaviors:

- ☐ Suicide attempt*
- ☐ Suicidal ideation*
- ☐ Disregard for personal safety*
- ☐ Isolating self*
- ☐ Endangering or threatening others*
- ☐ Violent, belligerent, or hostile behavior*
- ☐ Indicators of depression
- ☐ Lack of self-care
- ☐ Mood swings
- ☐ Anxious or fearful

Thinking:

- ☐ Hears voices not present*
- ☐ Sees objects not present*
- ☐ Confused or disoriented*
- ☐ Forgetful
- ☐ Suspicious or paranoid

Health:

- ☐ Alcohol/Drug use*
- ☐ Drug paraphernalia found*
- ☐ Misuse of medication*
- ☐ Medical complications
- ☐ Not eating
- ☐ Weightloss/gain
- ☐ Not sleeping
- ☐ Dressed inappropriately for conditions

Communication:

- ☐ Repeats same topics/thoughts excessively*
- ☐ Inappropriate*
- ☐ Non-communicative
- ☐ Mania (rapid speech, flight of ideas, agitation)
- ☐ Quickly changes or avoids topics
- ☐ Expresses no hope

History:

- ☐ Recent/pertinent hospitalizations*
- ☐ Prior call(s) involving weapons*
- ☐ Assaultive history*
- ☐ Unknown/checks not made

Specify why emergency evaluation is appropriate and explain checked asterisked* observations:

Other Information Source:

Relationship:

Phone #:

I hereby apply for the emergency evaluation of the above named person transported to:

Name of Treatment Facility

Transported By

Run #

BRUCKNER, MICHAEL 62134

02/13/2023 12:07:00

Signature

Officer Name/Badge #

Phone #

Date/Time

- ☐ **HIGH PRIORITY:** Law Enforcement requests notification of release as soon as practical.
- ☐ Please contact the Minnetonka Police Department if the above named person leaves without permission or is released sooner than 72 hour. Contact can be made through the Hennepin County Dispatch Center (952-258-5321) or the on-duty supervisor (952-939-8581).

If a treatment facility releases a person during the 72-hour hold period, the head of the treatment facility shall notify the agency which employs the peace or health officer who transported the person to the treatment facility under M.S. 253B.051 Subd. 3(g).

First Copy: Treatment Facility Second Copy: Person Taken Into Protective Custody Third Copy: Transporting Agency Fourth Copy: Minnetonka Police Department

Crisis Intervention Team Training

Our Commitment

Keep people safe
during a mental health
crisis

Our Goals:

Improve safety during law enforcement encounters with people experiencing a mental health crisis, for everyone involved.

Increase connections to effective and timely mental health services for people in mental health crisis.

Use law enforcement strategically during crisis situations

Reduce the trauma that people experience during a mental health crisis

How?

CIT Training

Covers topics such as recognizing and responding to mental health crises, de-escalation techniques, suicide prevention, and communication skills. It is crucial for officers to better understand the nature of mental illness, how to recognize the signs of a mental health crisis, and how to respond appropriately.

Community Partnerships

A successful CIT program is a collaboration and partnership between law enforcement, mental health professionals, and other community support. This includes developing relationships with local mental health providers and community organizations, such as NAMI and other community-based resources.

forum for effective problem-solving

community-based programs that bring together law enforcement, mental health professionals, mental health advocates

focus on improving the crisis response system

advocating for needed services

strengthening partnerships across the community

*CIT IS MORE THAN
TRAINING...
it's a community program.*

Follow Up and Next Steps

In our follow up email, within 3-5 business days, look for:

- A link to the recording of today's presentation
- Today's presentation slides
- Invitations to upcoming events
- Additional resources
- Ways to stay connected with us
- A letter of participation emailed to you

www.nfstac.org



Upcoming event announcement

April 19th

Relapse, Resiliency and Recovery

Feedback Survey



Thank you for joining us!

Please complete the SAMHSA-required Feedback Survey you will be directed to when the webinar ends.

CONTACT INFORMATION

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Thank You For Joining Us!