

Legislative/Regulatory Requirements

Section 29 of the Adequacy Standards Regulation requires a police services board to have a policy on the police response to persons who are emotionally disturbed or have a mental illness or a developmental disability. In addition, section 13(1)(g) requires the Chief of Police to establish procedures and processes in respect of the police response to persons who are emotionally disturbed or have a mental illness or a developmental disability.

Sample Board Policy

Board Policy # _____

It is the policy of the _____ Police Services Board with respect to the police response to persons who are emotionally disturbed or have a mental illness or a developmental disability that the Chief of Police will:

- a) work, where possible, with appropriate community members and agencies, health care providers, government agencies, municipal officials, other criminal justice agencies, and the local Crown to address service issues relating to persons who have a mental illness or developmental disability;
- b) establish procedures and processes that address the police response to persons who are emotionally disturbed or have a mental illness or a developmental disability; and
- c) ensure that the police service's skills development and learning plan addresses the training and sharing of information with officers, communications operators /dispatchers and supervisors on:
 - i) local protocols; and
 - ii) conflict resolution and use of force in situations involving persons who may be emotionally disturbed, or may have a mental illness or developmental disability.

Police Service Guidelines

Local Service Coordination

1. Every Chief of Police, or designate, should work, where possible, with appropriate community members and agencies, health care providers, government agencies, municipal officials, other criminal justice agencies, and the local Crown to address service issues relating to persons who have a mental illness or developmental disability in that community.

Protocol

2. Every Chief of Police should work, where possible, with local hospitals and psychiatric facilities, where ones exist, towards developing a protocol that should address:



- a) the admission of a person who is emotionally disturbed or has a mental illness who has been arrested or transported by the police;
- b) criminal offences by a person who is emotionally disturbed or has a mental illness within that facility/hospital; and
- c) unauthorized absences by persons who are emotionally disturbed or have a mental illness from that facility/hospital.

Procedures

3. Every police service's procedures and processes on the police response to persons who may be emotionally disturbed, or may have a mental illness or developmental disability should:
 - a) require communications operators/dispatchers to provide information to officers, if known, on:
 - i) any medications being taken by the person or that are prescribed;
 - ii) whether the individual is under the influence of illicit drugs and/or alcohol;
 - iii) whether the individual has a history of violence;
 - iv) whether the individual is presently armed or may have access to a firearm;
 - v) whether the individual is in a public/open area or is barricaded;
 - vi) whether there are any reported injuries;
 - vii) whether the individual is involved with any community agencies or local health care providers; and
 - viii) whether the police have previously attended the same address or had prior contacts with the same individual(s) involved;
 - b) address the steps for a police officer, or communications operator/dispatcher to obtain assistance from, or refer a call/situation to, another agency;
 - c) set out the circumstances in which more than one officer should be dispatched to a call, where practical, or where containment or tactical support should be provided;
 - d) set out the steps to be taken by a police officer when invoking the provisions under the *Mental Health Act*;
 - e) require that, where an officer has reasonable grounds to believe that the individual has committed a violent crime, the officer should consider charging the individual and not consider voluntary or involuntary hospitalization as a substitute to laying a charge, absent compelling circumstances;
 - f) require that in those circumstances where the suspect is taken to a hospital, the police officer shall advise the hospital as to the circumstances of the occurrence, the background of the person, whether he or she may be suicidal, and other such information as may be provided;
 - g) address the transportation of persons who may be emotionally disturbed, or may have a mental illness to a psychiatric facility or hospital; and
 - h) set out the procedures for responding to calls for service at a local psychiatric facility, where one exists, or hospital, including where the call relates to an

unauthorized absence of an individual who is emotionally disturbed or has a mental illness from the facility.

Training

4. Every Chief of Police should ensure that the police service's skills development and learning plan addresses the training and sharing of information with officers, communications operators/dispatchers and supervisors on:
 - a) local protocols;
 - b) conflict resolution and use of force in situations involving persons who may be emotionally disturbed, or may have a mental illness or developmental disability;
 - c) the relevant provisions of the *Mental Health Act*, *Substitute Decisions Act* and *Health Care Consent Act*;
 - d) the recognition of common mental illnesses; and
 - e) providing assistance to families of persons who have a mental illness.