Law Enforcement And The Mentally Ill

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EMERGING INTEREST

IACP NATIONAL POLICY SUMMIT*
Building Safer Communities: Improving Police Response to Persons with Mental Illness

May 2009

* Co-sponsored by BJA, JEHT Foundation, and SAMHSA

- PROBLEM

- BACKGROUND

- SEQUENTIAL INTERCEPT MODEL

- EMERGENCY RESPONSE MODELS

- HONOLULU MODEL

PROBLEM :
FINDING AN ALTERNATIVE TO CRIMINALIZATION OF THE MENTALLY ILL

WHO CARES?

CRIMINAL JUSTICE SYSTEM:

LIABILITY FOR LAW ENFORCEMENT OFFICERS AND LAW ENFORCEMENT AGENICES

BURDEN ON THE CRIMINAL JUSTICE SYSTEM (Courts, Jails, Prisons)

FINANCIAL COST TO SOCIETY $60 BILLION PER YEAR

PROBLEM :
FINDING AN ALTERNATIVE TO CRIMINALIZATION
OF THE MENTALLY ILL

WHO CARES?

LAW ENFORCEMENT OFFICERS:

- DANGER TO LAW ENFORCEMENT OFFICERS
  1999 STUDY OF 174 POLICE DEPARTMENT IN 42 STATES
  SHOWED THAT 7-10% OF ALL POLICE INTERACTIONS
  INVOLVE INTERACTION WITH SMI PERSONS

- OVER HALF OF ARRESTS AT HPD IN 2011 WERE HOMELESS,
  MENTALLY ILL OR BOTH

- EMOTIONALLY DISTURBED PERSONS ARE 5.5 TIMES AS
  LIKELY (550% MORE LIKELY) TO BE INVOLVED IN THE
  MURDER OF POLICE OFFICERS

PROBLEM :
FINDING AN ALTERNATIVE TO CRIMINALIZATION OF THE MENTALLY ILL

WHO CARES?

THE COMMUNITY:

PERCEPTION OF DANGER
UNCOMFORTABLE
FEAR – ANXIETY
COST OF CARE

PROBLEM :
FINDING AN ALTERNATIVE TO CRIMINALIZATION OF THE MENTALLY ILL

WHO CARES?

MENTALLY ILL PERSONS:

SMI ARE 11.5 TIMES (1,150%) MORE LIKELY TO BE VICTIMS OF CRIME THAN THE GENERAL POPULATION

90% OF SUICIDES LINKED TO MENTAL ILLNESS

TURNING THE TIDE:
FROM HOSPITALIZATION TO INCARCERATION

STATE MENTAL HOSPITALS FORMED IN 1890

"DEINSTITUTIONALIZATION"
   Began in 1955
      558,239 severely mentally ill inpatients
      National census: 164 million

By 1994 . . .

     71,619 SMI inpatients

     National Census: 260 million

1955 SMI adjusted for 1994 census =

     885,010 or

     92% reduction from 1955

By 2003 . . .

only 49,437 inpatient psychiatric beds

2012: inpatient psychiatric beds
estimated at 100,000

People with Mental Illness in Jails and Prisons:

　　1996: 283,800 (BJS, July 1999)

　　2005: 1,255,700 (BJS, Sep 2006)

PRIOR TO DEINSTUTIONALIZATION:

LESS THAN 1% OF THOSE INCARCERATED WERE MENTALLY ILL

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TODAY

21 TO 24 PERCENT IN JAILS AND PRISONS ARE SERIOUSLY MENTALLY ILL (SMI)

OVER 90% IN SOME FACILITIES ARE MI

TODAY

OVER 450,000 INDIV WITH SMI INCARCERATED

VIRTUAL 1:1 RELATIONSHIP BETWEEN DECREASE IN INPATIENT PSYCHIATRIC PATIENTS AND INCREASE IN JAILED INDIV W/SMI

A Systematic Approach to the Criminalization Problem

- **There is no single solution to the problem we are calling "criminalization of people with mental illness"**

- **The problem must be attacked from multiple levels**

- **The "Sequential Filters" Model (Sequential Intercept Model) is a series of filters. Each filter provides a point to "catch" an individual with mental illness. Over time the filter rate should increase earlier in the sequence.**
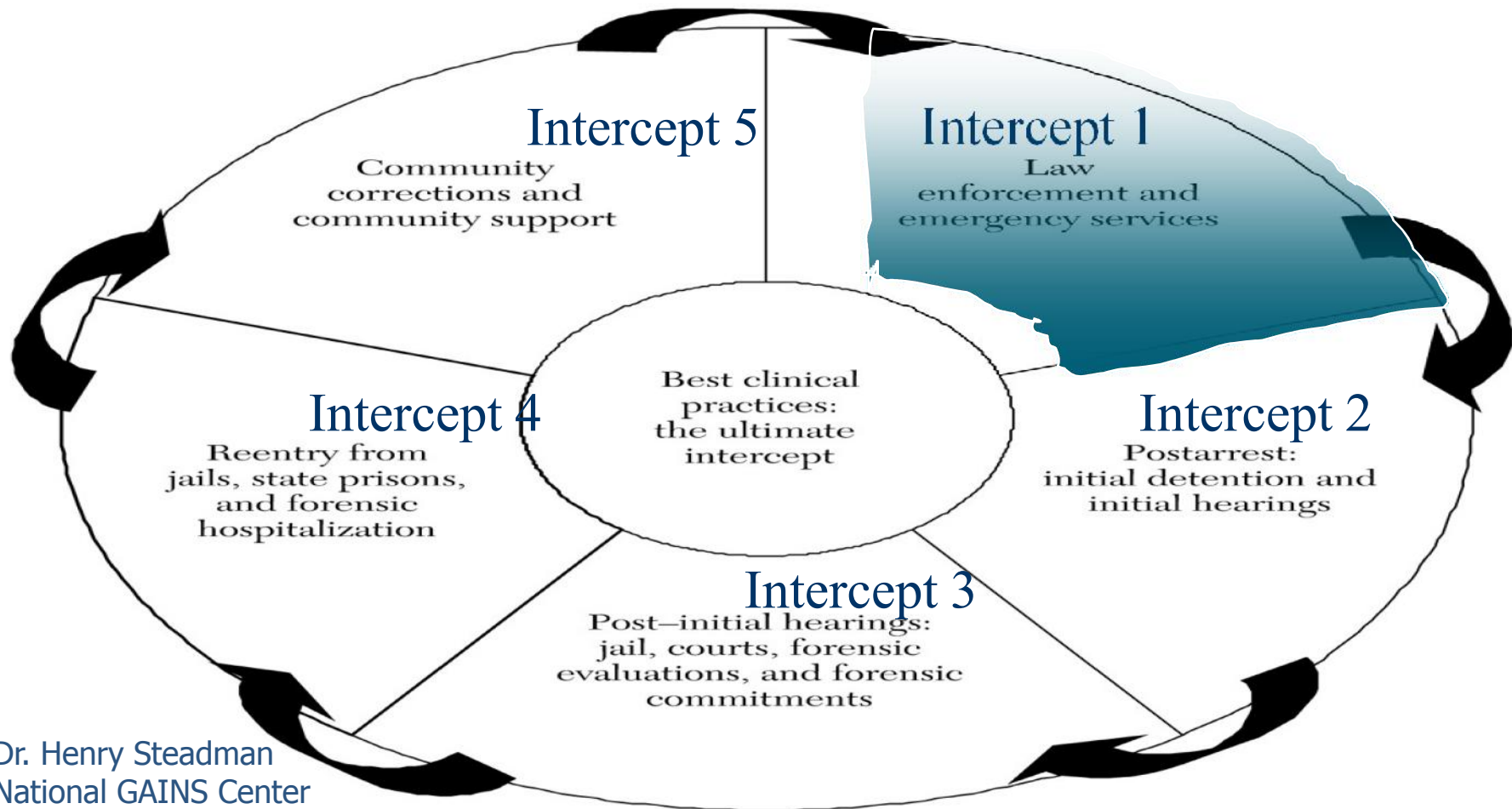
SEQUENTIAL INTERCEPT MODEL

Figure 2

The Sequential Intercept Model from a revolving-door perspective with best practices at the core

Intercept 5
Community corrections and community support

Intercept 1
Law enforcement and emergency services

Best clinical practices: the ultimate intercept

Intercept 4
Reentry from jails, state prisons, and forensic hospitalization

Intercept 2
Postarrest: initial detention and initial hearings

Intercept 3
Post–initial hearings: jail, courts, forensic evaluations, and forensic commitments
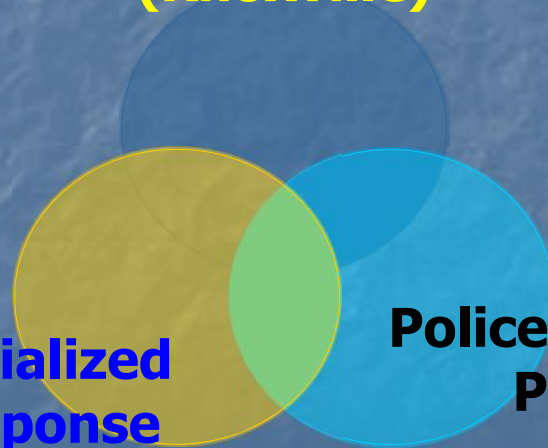
Dr. Henry Steadman
National GAINS Center

Emergency Response Models

Mental health-based specialized Mental health response (Knoxville)

Police-based specialized Mental health response (Birmingham)

Police-based specialized Police response (Memphis) (CIT)

HONOLULU MODEL
A HYBRID MODEL

**Police-based
Specialized Police -
Specialized Mental Health
Response**

IMPACT ON LAW ENFORCEMENT

- 7-10% OF ALL POLICE INTERACTIONS INVOLVE SMI

- HPD ESTIMATES 19,000 TO 26,000 INTERACTIONS W/SMI PER YEAR

PROJECT OUTREACH

- HPD EMPLOYED AN OUTREACH WORKER IN 1996
- FOCUSED ON JAIL DIVERSION FOR SMI AND HOMELESS

SEPTEMBER 2006 – Mission reassigned to Police Psychologists

HPD EMERGENCY PSYCHOLOGICAL SERVICES/ JAIL DIVERSION PROGRAM

(EPSJDP)

COMMUNITY PARTNERSHIP PROGRAM

- HONOLULU POLICE DEPARTMENT
- STATE DEPARTMENT OF HEALTH
- 3 MEDICAL CENTERS
- EMERGENCY MEDICAL SERVICES
- INSTITUTE OF HUMAN SERVICES

HAWAII REVISED STATUTE

REQUIRES POLICE OFFICERS TO CALL FOR ASSISTANCE:

IMMINENTLY DANGEROUS

GRAVELY DISABLED

OBVIOUSLY ILL

SUICIDAL

- <u>ALL</u> POLICE OFFICERS TRAINED IN ENGAGING PERSONS IN CRISIS

- POLICE PSYCHOLOGIST ON-CALL 24/7

- APPROVE INVOLUNTARY EMERGENCY PSYCHIATRIC EVALUATION
- REFER TO CRISIS MOBILE OUTREACH SERVICES
- REFER TO CASE MANAGER
- AUTHORIZE RELEASE

POLICE OFFICER TRAINING

GOALS FOR TRAINING:

- RECOGNIZE MENTAL ILLNESS AND SEVERE EMOTIONAL DISTURBANCE

- DE-ESCALATE CRISIS SITUATIONS

- PROCEDURES FOR GETTING PIC APPROPRIATE SERVICES

POLICE OFFICER TRAINING

GUIDANCE FROM CASE LAW:

- ❑ ENABLE OFFICERS TO RECOGNIZE "UNUSUAL, BIZARRE, AND ABNORMAL BEHAVIOR"
- ❑ ALTERNATIVE TO STANDARD FIELD TACTICS
- ❑ CONDUCT LIVE SCENARIO TRAINING

POLICE OFFICER TRAINING

- RECRUIT CLASS
- ANNUAL RECALL TRAINING
- ON-LINE REFRESHER TRAINING

POLICE OFFICER TRAINING

- 7-module multi-modal training program for dealing with persons-in-crisis

- The training includes in-class, intranet, and live scenario training.

POLICE OFFICER TRAINING

(2007) **The Role of the Police Psychologist and Recognizing Persons-in-Crisis** – This module focuses on recognizing different types of mental illness and the policies and procedures of the EPSJDP, as well as basic "do"s and "don't"s of dealing with PICs..

POLICE OFFICER TRAINING

(2009) **Understanding and Responding to the Risks of Interacting with Persons-in-Crisis (PICs)** – This module provides an introduction to de-escalation techniques, but focuses on helping officers understand the psychological dynamics of these interactions, and how standard procedures can decrease safety and increase risks of violence.

POLICE OFFICER TRAINING

(2011) **Suicide Risk Recognition, Prevention and Intervention** - This module focuses on teaching police officers how to recognize persons (civilians and officers) who are thinking of suicide, and what to do to get them the help they need.

POLICE OFFICER TRAINING

(2012) **Trauma Informed Crisis Responding** - This module focuses on recognizing signs of trauma and understanding how trauma impacts behavior in both citizens and police officers.

POLICE OFFICER TRAINING

(2013) **Responding to Domestic Violence** - This module will focus on how to de-escalate domestic violence situations, recognize mental illness and trauma, and how to better utilize the services of the EPSJDP in situations of domestic violence.

POLICE OFFICER TRAINING

(2014) **Responding to Emotionally Disturbed or Mentally Ill Juveniles** - The focus will be on recognizing mental illness and emotional disturbance in juveniles, which presents much different than in adults, and how to better utilize the services of the EPSJDP for juveniles.

POLICE OFFICER TRAINING

(2015) **Responding to Emotionally Disturbed or Mentally Ill Elderly Persons** - The focus of this module will be on recognizing and dealing with persons with dementia and other age related forms of mental illness, and how to better utilize the services of the EPSJDP for the elderly.

APRN-RX PROJECT

A Post-booking Initiative

ADVANCED PRACTICE REGISTERED NURSES WITH PRESCRIPTIVE AUTHORITY ASSIGNED TO HPD CENTRAL RECEIVING DIVISION

PHARMACY PROJECT

ESTABLISH A "SUITECASE" PHARMACY WITHIN THE CENTRAL RECEIVING DIVISION WITH PSYCHOTROPIC FORMULARY

HAWAII GOVERNOR'S SPECIAL ACTION TEAM 2012

STATEWIDE INITIATIVES

STREAMLINE THE MENTAL HEALTH SYSTEM
INCREASE MENTAL HEALTH SERVICES

STREAMLINE THE CRIMINAL JUSTICE SYSTEM
INCREASE JAIL DIVERSION PROGRAMS

ALOHA

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