



Jimenez OLD Recommendations

Community Police Review Commission (CPRC)

Wednesday, August 24, 2016

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Integrity Service Excellence

Recommendation #1

Continue to expand the Department's Mental Health program and if at all possible, that team should be dispatched when appropriate.

The police department concurs with this recommendation. The new five year strategic plan has already identified this as a need for our community. Over the next five years we will strive to devise a means to obtain additional resources for this program. When appropriate and available, such teams may be dispatched to calls involving the mentally ill.



Recommendation #2

Continue to train all existing and new officers in recognition and proper handling of mentally ill subjects.

The police department concurs with this recommendation.
The Riverside Police Department currently provides Mental Health Critical Incidents and Tactics (MHCIT) training to all current and newly hired officers. The training includes recognition of mental health subjects, and proper responses to contacts with subjects suffering from these types of medical issues.



Recommendation #3

For safety purposes, premise history should be provided on all calls while officers are going to the call. This will alert responding officers to the possibility they will be engaging a mentally ill subject and attempt to provide greater information.

The police department concurs with this recommendation. Riverside Police Department Dispatchers make every effort to ensure that all information is obtained and disseminated to responding units. This is particularly true regarding calls where officers are potentially responding to violent subjects known to be suffering from mental health problems. Every officer has the ability to view all premise hazards when dispatched to a call on his/her MDC.



Recommendation #4

Use all tools available to an officer including a canine. However, if a canine handler cannot calm the dog, it should be removed from the scene.

The police department concurs with this recommendation. The tactics involved in the deployment of Police Service Dogs is a subject that is constantly discussed and evaluated. It is important to realize that the use of the dog is only done so when apprehending suspects who are physically resisting, or who have shown their intent to physically resist. Nevertheless, the Commission's recommendation serves as an excellent training reminder for all of our K-9 teams to be mindful of the dog's demeanor, and how it can relate to the actions of the suspect. This is especially true if the suspect is suffering from mental health issues.



Recommendation #5

Establish a policy guiding an officer's response to a mentally ill or suicidal subject. The following should be included in such a policy:

The police department concurs with this recommendation.
A policy to provide guidelines to officers dealing with a mentally ill or suicidal subject will enhance the outcomes of such responses.



Recommendation #5

continued....

- a. If dispatchers or first responding officers believe they are dealing with a mentally ill or suicidal subject, immediately dispatch the county mental health team.

The police department **does not** concur with this recommendation. The creation of a policy requiring such action without discretion is highly impractical and may inappropriately place civilian employees in overly dangerous situations. Additionally, Riverside County has oversight for such resources and it would be inappropriate for our police department to decide on their deployment. For each call, responding officers should be allowed to evaluate the resources needed and request what they need via a supervisor.



Recommendation #5

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- b. If the County Mental Health Team is not available, dispatch an officer who has specifically undergone training in recognition and handling of a mentally ill or suicidal subject.**

The police department concurs with this recommendation. If available, members of the RPD Mental Health Program should respond as they are certainly the most qualified in the area of dealing with suicidal and/or mentally ill subjects. However, with the large number of calls being received, it may not be practical to require such a response. Therefore, it would be more practical to depend on the training provided to all officers when responding to incidents involving such subjects



Recommendation #5

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- c. Immediately dispatch two supervisors to all calls involving a mentally ill or suicidal subject. One supervisor should assess and manage the scene and the other should manage the tactical deployment of resources and implementation of an operational plan while maintaining communication with the on scene or first supervisors.

The police department **does not** concur with this recommendation. In most cases a supervisor may not be required. Officers responding to the scene may be sufficient resources to resolve the case. The initial responding officers assess the situation and request additional resources as needed. Currently, RPD Dispatch has a protocol wherein supervisors are notified that officers are responding to critical incidents, in particular calls involving mentally ill and suicidal subjects. In turn, supervisors check the circumstances of the call and make the determination that resources are being properly allocated for the incident, to include their response to the scene.



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Recommendation #5

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- d. Upon arrival and when safe to do so, all family and bystanders should be removed from the premises.**

The police department concurs with this recommendation.
This is currently being done. Family and bystanders will be brought to safety as soon as possible.



Recommendation #5

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- e. When approaching a mentally ill or suicidal subject, and if safe to so do, officers should slow their approach. They should resist the temptation to move in too quickly. They should attempt to calm the scene using compassion and active listening.**

The police department concurs with this recommendation. Additional training is provided to RPD officers concerning Critical Issues and Tactics training, in particular during the Tactical Communication phase of training. During both types of training, the officers are instructed to slow their initial approach, talk softly, and make every attempt to calm the situation thereby preventing further agitating the involved subject. This training is on-going, and the Training Bureau is constantly looking for ways to improve.



Recommendation #5

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- f. Officers should keep a safe distance from the subject to avoid limiting their options of interaction and safe apprehension.**

The police department concurs with this recommendation. Similar to the response provided to recommendation “e”, maintaining a safe distance while evaluating options is a practice that RPD officers are trained to do, in particular to incidents involving subjects that are mentally ill or suicidal.



Recommendation #5

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- g. Officers should have less-lethal weapons available. If deployment becomes necessary, officers should maintain a safe distance from the subject to keep the weapon in less-lethal status. The distance is negated if the officer or citizen is threatened and lethal use is required.**

The police department concurs with this recommendation. Officers receive training on less-lethal weapons in the academy, upon graduation, and during advanced officer training. Additional training will be received during roll-call discussions with supervisors. However, situations such as those involving mentally ill or suicidal subjects are often dynamic and rapidly changing, and officers must be ready to make tactical adjustments as needed.



Conclusion

Of the 12 recommendations, the police department agrees with 10, or 83%. Of the 4 recommendations in disagreement, they are generally due to our need to have discretion over resources, safety, and not being able to direct another agency's personnel.

