Elk Grove Police Department Crisis Intervention Team Training Expanded Course Outline

I. Administration and Paperwork

- A. Paperwork
 - 1. POST Roster
 - 2. Department or Regional attendance roster
 - 3. Class networking roster
 - 4. Name tents
- B. Housekeeping
 - 1. Restrooms
 - 2. Facility security, if applicable
 - 3. Designated smoking areas
 - 4. Breaks including breakroom and/or vending machines
 - 5. Parking
 - 6. Local eating establishments and area information

II. Introductions

- A. Instructors
- B. Students
- C. Class Goals
 - 1. Define role as it is viewed by the public, officers, and managers
 - a. Leader
 - b. Guardian
 - c. Warrior
 - d. Helper
 - e. Peer
 - f. Social Worker
 - 2. Define the red flags of interaction
 - a. Officer safety
 - b. Subject safety
 - 3. Provide resources
 - a. Diversion programs
 - b. Industry best practices

II. (C) for Officer Safety

II. (D) for Class exercises/stu dent evaluation testing

Also V. (C) and VI for same

- c. Stress management techniques
- D. Learning activity and student assessment #1 Stop the Stigma
 - 1. Students will watch a video case study
 - 2. Students will assess the effectiveness or a law enforcement officer encountering a mentally ill individual
 - 3. Students will explore alternative interaction techniques to de-escalate a situation rather than to escalate it further

III. Mental Health Information

- A. Organic mental disorders
 - 1. Alzheimer's disease symptoms
 - a. Low energy
 - b. Less social activity interest
 - c. Loss of recent memories
 - d. Language problems
 - e. Coordination problems
 - f. Mood swings
 - 2. Dementia symptoms
 - a. Memory loss
 - b. Trouble finding the right words
 - c. Problems planning and carrying out tasks
 - d. Trouble exercising judgement
 - 3. Autism and symptoms
 - a. Problems developing nonverbal communication skills
 - b. Failure to establish friendships
 - c. Lack of interest in sharing enjoyment
 - d. Lack of empathy
 - 4. Traumatic Brain Injury symptoms
 - a. Fatigue or drowsiness
 - b. Blurred vision
 - c. Ringing in the ears
 - d. Memory or concentration problems

- e. Mood changes
- B. Psychiatric mental disorders
 - 1. Schizophrenia symptoms
 - a. Hallucinations
 - b. Delusions
 - c. Confused thoughts and speech
 - d. Trouble concentrating
 - e. Different movements
 - 1) Jumpy
 - 2) Twitchy
 - 2. Bipolar Disorder symptoms
 - a. Manic-depression
 - b. Mania or hypomania
 - c. Depression
 - 3. Depression symptoms
 - a. Difficulty concentrating
 - b. Fatigue
 - c. Feelings of guilt or worthlessness
 - d. Insomnia
 - e. Feelings of hopelessness
 - 4. Post-Traumatic Stress Disorder symptoms
 - a. Reliving the event
 - b. Avoiding situations that remind victim of event
 - c. Feeling bad about themselves or others
 - d. Increased emotional arousal
- C. Drug Induced Psychosis symptoms
 - 1. Agitation/excitement
 - 2. Irritability
 - Confusion/disorientation
 - 4. Delirium
 - 5. Sudden mood changes

D. Excited Delirium Syndrome symptoms

- 1. Paranoia
- 2. Disorientation
- 3. Dissociation
- 4. Hyper-aggression
- 5. Tachycardia

IV. T.A.C.T. Communication Elements

A. Tone

- 1. It is not what you say, but how you say it
- 2. Calm and firm demeanor
- 3. Non-confrontational
- 4. Avoid impatience, sarcasm, or condescension
- 5. Be patient, polite and truthful
- 6. Use encouragement

B. Atmosphere

- 1. Reduce distractions
- 2. Calm the scene
- 3. Lowe radio volume
- 4. Reduce the number of disruptive people
- 5. Provide personal space

C. Communication

- 1. Use first name(s)
- 2. Only have one officer speak at a time
- 3. Use a calm, slow, and firm voice
- 4. Give simple directions
- 5. Use appropriate language while avoiding inappropriate language
- 6. Wait for their response, do not rush them
- 7. Repeat commands or requests as many times as necessary
- 8. Ensure subject understands your directions
- 9. Build a sense of security
- 10. Persuade through rapport and clear communication

IV. For communications elements

III. (C)(5) For appropriate language

III. (C)(10) for Persuasion

D. Time

- 1. Be willing to take the time needed to safely complete the event
- 2. Time is needed to process information
- 3. The goal is to gain voluntary compliance
- 4. Allows for de-escalation
- 5. Allows for venting
- 6. Rushing can lead to unplanned and violent responses
- 7. Allows for officers to disengage, re-assess, and make plans
- 8. Actively listen to the subject
- E. How to apply these techniques during:
 - 1. Officer to officer situations
 - 2. Officer to suspect situations
 - 3. Officer to citizen situations
 - 4. Officer to victim situations

V. Red Flags

- A. Red-flag investigation model Questioning Techniques
 - 1. Officers apply investigative techniques to crime
 - 2. Officers can apply investigative techniques to contacts with mental illness consumers
 - 3. Officers can use red flags to formulate a response
- B. Supervisor's role
 - 1. Use or force oversight
 - 2. Ensure safety guidelines are met
 - 3. Help work towards the best possible outcome
 - 4. Ensure proper documentation through report writing and photographs
 - Recognize officers for a job well done
- C. Learning activity and student assessment #2 Red Flag Indicators
 - 1. Students will identify potential red flags on various police contacts, such as:
 - a. Driving Under the Influence
 - b. Stolen vehicles
 - c. Domestic violence

III. (D)(8) for listening skills

III. (E) for officer to officer/sus pect/citizen /victim

V. (B)(2) for Officer Safety

V.(A) For questioning techniques

- d. Mental illness
- Students will explore various techniques on how to identify red flags when technology (License Plate Reader, Preliminary Alcohol Screening) is not available
- 3. Students will formulate a response plan based on the red flags identified, using the techniques in step 2

VI. Final Voice Simulator Scenarios

- A. Learning activity and student assessment #3 Scenario Simulator
 - 1. Students will encounter several scenarios using a voice simulator
 - Students will have to utilize techniques learned during the course to identify intentional and unintentional contact escalation versus de-escalations while considering:
 - a. Mental health conditions and symptoms
 - b. T.A.C.T
 - c. Red flags
 - 3. Students will be assessed by instructors based on their displayed skill and understanding of the course content during these simulations

VII. Evaluations and Conclusion

VI. (A)(2) for Intentional /Unintentional contact escalation vs. deescalation