

Hamden Police Department General Orders

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Section: Patrol

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Title: Managing Encounters with
Persons in Crisis and Risk Protection
Warrants and Orders

Approved By: Hamden Police Commission
Approval Date: May 11, 2023

PURPOSE

This order establishes guidelines and procedures that will guide police officers in their operations with, and coordinate a response in, providing services to persons in crisis as well as working with Risk warrants, Risk Protection Orders (RPO) and associated investigations and procedures. This policy and these procedures are meant to provide general guidelines to personnel with regard to crisis intervention.

POLICY

It is the policy of the Hamden Police Department to respond to incidents involving individuals in crisis and with mental or behavioral health problems with professionalism, compassion, and concern for the safety of all involved. During these incidents, officers shall consider using a Crisis Intervention Team (CIT) member as a resource for identifying and providing services for the individual in crisis.

In the absence of a supervisor, during the initial Patrol Division response to a crisis incident, as defined in the definition section of this policy, if available, a senior CIT officer on scene has the authority to direct police activities. The CIT officer shall relinquish such authority, at the direction of a supervisor. Non-CIT trained supervisors shall confer, when possible, with CIT officers in a unified effort to obtain a positive outcome in a crisis incident.

The Hamden Police Department shall follow procedures set forth in the Connecticut General Statutes regarding Risk Warrants and Risk Orders of Protection. This policy and procedure is for Hamden Police Department use only and is not meant to enhance an officer's criminal or civil liability in any way. It should not be construed as the creation of a higher standard of safety or care in an evidentiary sense, with respect to third party claims.

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DEFINITIONS

Ammunition: Pursuant to C.G.S. §29-38c, means a loaded cartridge, consisting of a primed case, propellant or projectile, designed for use in any firearm.

CIT Officer: A police officer trained and certified in first response crisis intervention. The CIT officer works in partnership with the CIT clinician to respond to incidents of persons in crisis.

CIT or Mobile Crisis Clinician: A mental health professional who is trained in mobile outreach crisis intervention and works in partnership with CIT trained police officers to effectively respond to incidents of persons in crisis.

Crisis Incident: Any call in which an individual would benefit from the specialized training and knowledge of the CIT member. Crisis incidents include but are not limited to calls involving; persons known to have mental illness who are experiencing a crisis; persons displaying behavior indicative of mental illness; attempted or threatened suicides; incidents involving gravely disabled individuals or incidents in which individuals may be experiencing emotional trauma.

Crisis Intervention Team: (CIT) A partnership between the police, mental health professionals, and the community that seeks to achieve the common goals of safety, understanding, and service to persons in crisis, people with mental illnesses and their families.

Deadly Weapon: Means any weapon, whether loaded or unloaded, from which a shot may be discharged, or a switchblade knife, gravity knife, billy, blackjack, bludgeons, or metal knuckles. Smaller caliber guns using spring pressure, mechanically pressurized air and carbon dioxide propellant to shoot lead or steel pellets or BBs are considered weapons for this purpose. An airsoft gun that used air pressure to propel a 6mm plastic ball was not considered a weapon.

Family or Household Member: Means (A) a person eighteen years of age or older who is a: (i) Spouse, (ii) parent, (iii) child, (iv) sibling, (v) grandparent, (vi) grandchild, (vii) step-parent, (viii) step-child, (ix) step-sibling, (x) mother or father-in law, (xi) son or daughter-in-law, or (xii) brother or sister-in-law of the person who is the subject of a third party risk protection order application; (B) a person residing with the person who is the subject of the application; (C) a person who has a child in common with the person who is the subject of the application; (D) a person who is dating or an intimate partner of the person who is the subject of the application; or (E) a person who is the legal guardian or former legal guardian of the person who is the subject of the application

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Gravely Disabled: A condition in which a person, as a result of mental or physical impairment, is in danger of serious harm, as a result of an inability or failure to provide for their human needs, such as essential food, clothing, shelter or safety, and such person is mentally incapable of determining whether or not to accept such treatment (that meaning hospital treatment is available).

Incapacitated Person: A condition in which a person, as a result of alcohol, drug use, dementia or otherwise that has their judgment impaired, so that they are incapable of realizing and making a rational decision regarding the need for medical treatment or ability to care for themselves.

Medical Professional: Pursuant to C.G.S. 29-38c, means any person who has examined the person who is the subject of the application and who is (A) a physician or physician assistant licensed under chapter 370, (B) an advanced practice registered nurse licensed under chapter 378, (C) a psychologist licensed under chapter 383, or (D) a clinical social worker licensed under chapter 383b

Mentally Ill: A person who has a mental or emotional condition, which has substantial adverse effects on their ability to function and who requires care and treatment.

Risk Protection Order: An order signed by a judge, prohibiting the subject of the warrant from acquiring or possessing a firearm or other deadly weapon, or ammunition.

Risk Warrant: A warrant, applied for by law enforcement, seeking judicial authority to search for a seize firearms and other deadly weapons and ammunition.

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PROCEDURES

I. Managing Encounters with Persons in Crisis

A. Identifying CIT Calls for Service

1. Central Communications is the primary source for identifying CIT calls. However, officers investigating an incident may classify it as a CIT situation.
2. Types of calls where a CIT officer response may be considered include, but are not limited to:
 - a. Mental health disorders
 - b. Traumatic incidents
 - c. Sudden deaths
 - d. Attempted suicides
 - e. Medical assistance/well-being checks,
 - f. Breach of peace/disorderly conduct
 - g. Trespassing/refusing to leave property

B. Central Communications Responsibility

1. Tele-communicators shall attempt to obtain as much information as possible at the time of call intake and record the information in the comments section of the CAD screen.
2. The Tele-communicators shall alert the on-duty shift supervisor of a CIT call for service.
3. Tele-communicators shall coordinate with the on-duty shift supervisor and attempt to dispatch a CIT officer to CIT calls. CIT officers should be a responder, along with the area unit. If a CIT officer is not available at the time of dispatch, then they will respond when they become available.
4. At the direction of the on-duty shift supervisor or the officer on scene, the desk officer shall alert the CIT or Mobile Crisis clinician (860-388-7855) and inform the clinician of the CIT call if a determination is made that one will be of use. Every effort shall be made to provide the clinician with as much information as possible, such as the subject/client's name, address and behavior.

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5. If the immediate services of a CIT or mobile crisis clinician are not required (at the discretion of the shift supervisor or officer on scene) a copy of the PEER form or police incident report can be faxed to the mobile crisis team, requesting a clinician to follow up.
6. In the event that the person with a mental illness is a child/juvenile under 18 years of age, the officer may alert Emergency Mobile Psychiatric Services (EMPS) by calling 211, option 1 and inform them of the call. EMPS will either respond to the scene within 30 minutes or follow up during regular business hours.
7. The Tele-communicators shall amend CAD information based on the initial information received from the officer on scene.
8. Other local social service contact numbers, as well as other supporting agencies, shall be maintained in the dispatch center.

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- C. Responsibilities of the Patrol Officer (CIT and Non-CIT)
1. Supervisors should be aware of CIT certified officers working under their direction.
 2. Officers, upon arriving at the incident and identifying it as a CIT incident, shall confer with the on-duty shift supervisor to aid in determining if a clinician shall be notified to respond to the scene or to make contact by telephone. Clinicians may be able to identify whether the subject is an existing client, assist in accessing the proper care and the disposing of the case. CIT officers should confer with the clinician for advice. **The final decision as to the outcome or arrest of the subject is the responsibility of the police officer and supervisor.**
 3. Officers shall complete a case incident report and any other documentation using the standards in section G. "Reporting and Documenting CIT calls" of this order. A copy of the report shall be forwarded to the clinician.
 4. **In arrest cases officers shall notify any transporting officer(s) and the on-duty supervisor that the prisoner is the subject of a CIT call, so that necessary precautions can be taken.** The on-duty shift supervisor and the arresting officer shall take every precaution to eliminate potential harm and/or suicide risk.
 5. When possible, CIT officers may volunteer for CIT calls as primary or secondary responders, if they are available. Non-CIT officers may request assistance from CIT officers when necessary.

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D. Responsibilities of the On-Duty Shift Supervisor

1. Supervisors shall monitor the dispatching of officers to CIT calls and ensure that the clinicians are contacted by officers as soon as practical for consultation and follow-up when applicable.
2. Supervisors shall ensure that the dispatching of a CIT officer to a call for service does not create a void in coverage in an area.
3. Supervisors shall ensure that an incident report is properly completed and that the report is forwarded to the CIT or Mobile Crisis Clinician as applicable.
4. Supervisors shall ensure that the clinician is called to critical incidents involving individuals that have been exposed to traumatic situations.
5. CIT events shall be documented via email by the Supervisor.

E. Responsibilities of the CIT Clinician or Mobile Crisis Clinician

1. CIT or Mobile Crisis Clinicians may attend roll call with the approval of the Chief of Police or his designee.
2. CIT or Mobile Crisis Clinicians, with the approval of the Chief of Police or his designee, may ride with CIT and non-CIT officers and supervisors in department vehicles. *It is not required that a clinician ride with a CIT officer. This decision is left to the discretion of the law enforcement agency and their mental health partner.*
3. CIT or Mobile Crisis Clinicians may be escorted across police barriers after showing proper identification and the notification and approval of an on-scene supervisor.

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4. CIT or Mobile Crisis Clinicians shall retrieve and review CIT reports and follow up with any individuals as needed. Information in the police report will be considered confidential and may be used for clinical purposes only.
5. The CIT or Mobile Crisis Clinician may monitor the police radio frequencies and respond to calls as needed. They may be contacted and advised of the CIT call by:
 - a. The desk officer requesting response to a scene or hospital.
 - b. The CIT officer on scene.
 - c. The supervisor at the scene or at any critical incident.
 - d. The Chief of Police or his designee requesting response to headquarters or the hospital.
6. At the request of a police supervisor, CIT officers or Mobile Crisis Clinicians may interview prisoners identified as CIT clients in the booking or interview room, hospital emergency room or other locations.
7. The CIT or Mobile Crisis Clinician shall contact the CIT coordinator regarding any problems or concerns. If the CIT coordinator is not on duty and the issue is urgent, the clinician may contact the on-duty shift supervisor to assist them.
8. Hamden Police Officers shall follow policy regarding the use of body worn cameras in a hospital type setting.

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F. Responsibilities of the CIT Program Coordinator

1. The Chief of Police shall designate a CIT coordinator. The CIT coordinator will serve as a liaison between the Police Department and the agency appointed by the Department of Mental Health and Addiction Services (DMHAS).
2. The coordinator will handle issues arising from the implementation of the CIT program.
3. The CIT coordinator shall review reports, evaluate outcomes, prepare and forward a quarterly report to the Chief of Police, outlining the status of the team, response to calls for CIT service, statistics and issues/recommendations.
4. The Chief of Police or designee shall select the officers for CIT certification. Candidates shall attend a certification program and receive in-service training as needed.
5. The CIT coordinator shall ensure that all CIT officers complete the basic certification program and attend ongoing training sessions sponsored by DHMAS.
6. The CIT coordinator shall review and compile all incident reports documenting CIT incidents for the CIT clinician who will retrieve them as needed.

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G. Reporting and Documenting CIT Calls

1. An incident report shall be completed for incidents involving mentally ill or gravely disabled individuals, whether handled by a CIT officer or a non-CIT officer. An emergency evaluation form shall be completed by the officer and a copy attached to the incident report, when the officer determines that the evaluation is warranted.

2. The incident report should include the following information:
 - a. CIT subject/client personal identification information,
 - b. Who, what, where, when etc. (narrative section),
 - c. Any visible injury to the subject or others,
 - d. Location of treatment of the subject,
 - e. Name, address and phone number of any responsible family member on scene,
 - f. Any appearance of alcohol or drug use shall be documented,
 - g. The name of the CIT clinician that responded,
 - h. Action taken/referrals made,
 - i. Name of the supervisor who was notified of the CIT situation.

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II. Risk Warrants and Risk Protection Orders (RPO)

Note: this General Order does not preclude the immediate seizure of weapons based on probable cause that the person is a danger to themselves or others.

A. Risk Warrant Procedures

a. Risk Warrant Application

- i. Any two sworn officers may submit a warrant to the Superior Court based on probable cause that a person poses a risk of imminent personal injury to themselves or another person and the officers have probable cause to believe that;
 1. Such person possess one or more firearms or other deadly weapons; and
 2. Such firearms or other deadly weapons are within or upon any place, thing or person.
- ii. The judge shall issue a warrant commanding the police officers to enter into or upon such place or thing, search the same or the person and take into such officers custody any and all firearms and other deadly weapons and ammunition.
- iii. Such warrant may not be approved until the officer(s) have completed an independent investigation and determined that probable cause exists.

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B. Third Party Application

- a. A Family or Household Member who has a good faith belief that a person poses an imminent risk to themselves or others may make application to the superior court of any geographical area.
 - i. The application must include:
 - 1. A factual basis for the applicant's belief that such person poses an imminent risk to themselves or others;
 - 2. Whether such person possesses a Connecticut Pistol Permit or eligibility certificate, if known;
 - 3. Whether such person currently possesses one or more firearms or other deadly weapons or ammunition, if known; and
 - 4. The location of any firearms, deadly weapons or ammunition, if known.

- b. A Medical Professional who has a good faith belief that a person poses an imminent risk to themselves or others may make application to the superior court of any geographical area.
 - i. The application must include:
 - 1. A factual basis for the applicant's belief that such person poses an imminent risk to themselves or others;
 - 2. Whether such person possesses a Connecticut Pistol Permit or eligibility certificate, if known;
 - 3. Whether such person currently possesses one or more firearms or other deadly weapons, if known; and
 - 4. The location of any firearms, deadly weapons or ammunition, if known.

- c. Upon receipt of such application, if the court finds that there is a good faith belief that a person poses a risk of imminent personal injury to themselves or others, the court shall order a risk protection order investigation to determine if the person who is the subject of the order possesses a risk of imminent personal injury to themselves or others.

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C. Court Order of Investigation

- a. Upon a good faith belief that a person poses an imminent risk to themselves or others, the court shall immediately give notice of the order and transmit the order, application, and affidavit upon which the order is based to the law enforcement agency in the town where the subject of the investigation resides.
- b. Upon receipt of the order, application and affidavit, the Hamden Police Department shall immediately investigate whether the subject of the order poses a risk of imminent personal injury to themselves or others.
- c. If the Hamden Police Department determines that there is probable cause to believe that the subject of the investigation poses a risk of imminent personal injury to himself or herself or to another person, the Department shall seek a risk protection order, and when applicable, a warrant not later than twenty-four hours after receiving the investigation order, or, if the Department needs additional time to complete the investigation, as soon thereafter as is practicable. A copy of the order shall be given within a reasonable time to the person named in the order together with notice informing the person that he or she has the right to a hearing in accordance with law, the telephone number of the court clerk who can inform the person of the date and time of such a hearing if known and the right to be represented by counsel at such hearing.
- d. If the Hamden Police Department determines that there is no probable cause to believe that the subject of the investigation poses a risk of imminent personal injury to themselves or to another person, the Department shall notify the court, the applicant, and the Commissioner of Emergency Services and Public Protection, of such determination, **in writing**, not later than forty-eight hours after receiving the investigation order, if practicable, or, if the Department needs additional time to complete the risk warrant investigation, as soon thereafter as is practicable.

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D. Court Considerations for Risk Protection Order and Warrants

- a. In determining whether there is probable cause for a Risk Protection Order and Warrant, the court will consider:
 - i. Recent threats or acts of violence by such person directed toward other persons;
 - ii. Recent threats or acts of violence by such person directed toward himself or herself; and
 - iii. Recent acts of cruelty to animals.

- b. In evaluating whether such recent threats or acts of violence constitute probable cause to believe that such person poses a risk of imminent personal injury to himself or herself or to others, the judge may consider other factors including, but not limited to:
 - i. The reckless use, display or brandishing of a firearm or other deadly weapon by such person,
 - ii. A history of the use, attempted use or threatened use of physical force by such person against other persons,
 - iii. Prior involuntary confinement of such person in a hospital for persons with psychiatric disabilities, and
 - iv. The illegal use of controlled substances or abuse of alcohol by such person.

- c. If the judge is satisfied that the grounds for the complaint exist or that there is probable cause to believe that such grounds exist, such judge shall issue a risk protection order and warrant, if applicable, naming or describing the person, and, in the case of the issuance of a warrant, the place or thing to be searched. If the requisite circumstances are met, the judge shall issue a risk protection order regardless of whether the person is already ineligible to possess a firearm.

- d. The order and warrant (if applicable) shall state the grounds or probable cause for issue and, in the case of a warrant, the warrant shall command officers to search within a reasonable time the person, place or thing named for any and all firearms and other deadly weapons and ammunition.

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- e. *In the case of a Risk Warrant*, the Hamden Police Department shall file a copy of the application and all affidavits with the clerk of the court and with the State's Attorney's office no later than the next business day following execution of the warrant.
- f. *In the case of a Risk Protection Order*, not later than the next business day following services of the order, the Hamden Police Department shall file a copy of the order with the court and the State's Attorney's Office, stating the date and time that the order was served.
- g. The Court shall hold a hearing on the Risk Warrant or Risk Order of Protection within fourteen (14) days of the execution or service, to determine if the order shall stay in effect and/or if the firearms, deadly weapons and ammunition shall be returned.

E. Retention of Seized Firearms

- a. Return of Firearms, Deadly Weapons or Ammunition
 - i. Firearms, deadly weapons and ammunition shall continue to be held pursuant to a risk warrant until the person named in the order petitions the court to terminate the order and warrant. The order will remain in effect until such time as the court terminates the order.
- b. Transfer of Firearms and Ammunition
 - i. Any person whose firearm or firearms and ammunition have been ordered seized, may transfer such firearm or firearms and ammunition in accordance with the provisions of section 29-33 or other applicable state or federal law, to a federally licensed firearm dealer.
- c. Destruction after 1-year
 - i. The Hamden Police Department holding on behalf of said commissioner any such firearm or firearms or other deadly weapon or deadly weapons or ammunition, shall not destroy any such firearm or other deadly weapon or ammunition ***until at least one year has passed since date of the termination of a warrant*** as per CT state law.

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F. Considerations Regarding Risk Orders, Warrants and Commitments

- a. C.G.S. 17a-503 (a) provides: Any police officer who has reasonable cause to believe that a person has psychiatric disabilities and is dangerous to himself or herself or others or “*gravely disabled*” and in need of immediate care and treatment, may take such person into custody and take or cause such person to be taken to a general hospital for emergency examination. The officer shall execute a written request for emergency examination detailing the circumstances under which the person was taken into custody, and such request shall be left with the facility. The person shall be examined within twenty-four hours and shall not be held for more than seventy-two hours unless committed under section C.G.S. 17a-502.
- b. Absent additional information demonstrating the existence of one or more of the factors that a judge considers in determining whether to issue a risk protection order, as previously set forth in section D above, an emergency commitment based solely on the person being “*gravely disabled*” provides an insufficient basis on which to seek a risk protection order or a risk warrant.
- c. Reasonable Cause versus Probable Cause – The structure and purpose of C.G.S. 17a-503 and its legislative history suggest that reasonable cause likely means something less than probable cause. The legislature has never defined reasonable cause and whatever distinction that may exist between it and probable cause has never been explored or made clear in case law as of the effective date of this policy. As a practical matter it is difficult to articulate and discern the difference.
- d. At the very least however, reasonable cause to believe that a person has psychiatric disabilities and is a danger to himself or others and in need of immediate care and treatment (for reasons other than simply being gravely disabled) provides a good faith belief justifying some further investigation that focuses on developing information regarding the various factors set forth in section D above that a judge considers in deciding whether to order a risk protection investigation and/or to issue a risk order.

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- e. The statute does not require the police to seek a risk protection order based on any act of violence committed by one person upon another. It requires a showing that a person “poses a risk of imminent personal injury to himself or to another person”. Imminent means “ready to take place” or “threateningly hanging over one’s head” or a condition is “so likely to cause harm” that a duty to act to prevent harm is triggered.

- f. The fact that an altercation or argument has occurred, or an act of violence has been committed by one person upon another, likely does not in and of itself present the necessary imminent risk of injury to justify seeking a risk protection order. If, however, the occurrence or act involves a threat by the person to harm himself or herself or another, it is advisable to seek a risk protection order and, if sufficient additional information exists regarding firearms or other deadly weapons, and their present location, a search and seizure risk warrant.

G. Training

- a. All sworn officers shall receive training on their responsibilities under this policy and the Connecticut General Statutes.