

BALTIMORE POLICE DEPARTMENT – EDUCATION AND TRAINING SECTION
LESSON PLAN

COURSE TITLE: BPD / BCFD Collaboration

LESSON TITLE: Module 2 – 911 Diversion & 988 Protocols

New or Revised Course: New Revised

Prepared By: Ryan Slade **Date:** 1-23-23

Academic Director Approval: Director Gary Cordner **Date:**

PARAMETERS	Lesson hours: 30 minutes	<input type="checkbox"/> Entry-level
	Class size: 20-25	<input checked="" type="checkbox"/> Continuing Education
	Space needs: E&T Classroom	<input type="checkbox"/> Other

STUDENT/COURSE PREREQUISITES/QUALIFICATIONS (if any)
 Participants should be all members of the Baltimore Police Department.
 Participants should have completed Module 1.

LESSON HISTORY (previous versions, titles if applicable)
 N/A

PERFORMANCE OBJECTIVES

1. Through facilitated discussion, students will describe when to utilize the 988 HelpLine and the responsibility of BPD members when responding to a behavioral health-related call, to the satisfaction of the facilitator.
2. Through facilitated discussion, students will describe BPD, BCFD, and BCRI’s role with 911 diversion, expansion plans, and various resources BCRI currently offers, to the satisfaction of the facilitator.

ASSESSMENT TECHNIQUE

1. Facilitated Discussion
2. Facilitated Discussion

<p>3. Given a group activity, students will participate in practical scenarios to demonstrate their knowledge of BPD responsibilities when responding to a behavioral health-related call, per BPD policy guidelines.</p>	<p>3. Group Activity (<i>Practical Scenarios</i>)</p>
---	---

<p style="text-align: center;">COURSE DESCRIPTION</p> <p><i>Module 2 – 988 Protocols & 911 Diversion</i> reviews the current 911 diversion protocols and the responsibilities of BPD members when responding to a BH-related crisis. Data from BPD and the BCFD dashboard will also augment the training. This module will include a review of the planned expansion of the 911 diversion program pilot and how this will affect the role that BPD plays in responding to BH-related calls. Within this training, students will discuss BCRI’s role in the 988 hotline and 911 diversion, including the various resources they currently offer, such as Mobile Crisis Teams (MCT). Different BPD policies will be referenced and analyzed for applicability. Students will demonstrate their understanding by participating in practical scenarios utilizing the flowchart within <i>Policy 713</i>.</p>				
<p style="text-align: center;">MPCTC OBJECTIVES (if applicable)</p> <p><i>(Include all terminal objectives. Include supporting objectives if they help elaborate what needs to be covered in the lesson. Ensure that all terminal objectives mentioned here are also added to the “Facilitator Notes” column where they are addressed in the lesson.)</i></p> <p>N/A</p>				
<p style="text-align: center;">INSTRUCTOR MATERIALS</p> <p><i>Module 2 – 911 Diversion & 988 Protocols</i> lesson plan <i>Module 2 – 911 Diversion & 988 Protocols</i> PowerPoint</p>				
<p style="text-align: center;">TECHNOLOGY/EQUIPMENT/SUPPLIES NEEDED</p> <p>Laptop Projection device Chart Paper Markers</p>				
<p style="text-align: center;">STUDENT HANDOUTS</p> <table border="0"> <tr> <td># Needed</td> <td>Title</td> </tr> <tr> <td></td> <td><i>Student Resource Binder</i></td> </tr> </table>	# Needed	Title		<i>Student Resource Binder</i>
# Needed	Title			
	<i>Student Resource Binder</i>			

METHODS/TECHNIQUES

Facilitated discussion and group activity (role-playing scenarios)

REFERENCES

BCFD Internal Documents:

- *Operations Memo 03-22*
- *Manual of Procedure 809-3*
- *Navigating the Issue of Restraint training*

BPD Documents:

- *Use of Force 2019*
- *BPD's Core Principles Governing Crisis Response*
- *BPD Policy 503 – Transportation of Passengers*
- *BPD Policy 1114 – Persons in Police Custody*
- *BPD Policy 713 – Petitions for Emergency Evaluation & Voluntary Admission*
- *BPD Policy 712 – Crisis Intervention Program*
- *BPD Policy 1107 – De-Escalation*
- *BPD Policy 1115 – Use of Force*
- *BPD Policy 1202 – Interactions with Youth*
- *BPD DRAFT Policy 1739 – Reasonable Accommodations*

GENERAL COMMENTS

This module should be taught by a certified Crisis Response Team member. When possible, a BCFD member should co-facilitate. Both instructors should have an in-depth understanding of the governing policies associated with their department, current 911 diversion protocols, and how to assess capacity. The BPD instructor should also have an in-depth understanding of how to successfully utilize de-escalation techniques and resources provided by BCRI.

Lesson Plan Checklist (Part 1)

Format	Yes	No	N/A
1. All sections and boxes are completed.	X		
2. Performance objectives are properly worded and included in content.	X		
3. Assessment techniques are aligned with performance objectives.	X		
4. Copies of handouts and other instructional aids (if any) are included.	X		
5. References are appropriate and up-to-date.	X		
6. Instructions to facilitators are in the right-hand column.	X		
7. Content is in the left-hand column.	X		
8. Timing of instructional content and activities is specified.	X		
9. Instructional content and PowerPoint slides are consistent & properly aligned.	X		
10. Student engagement/adult learning techniques are included.	X		
a. Instructional content is not primarily lecture-based.	X		
b. Questions are posed regularly to engage students and ensure material is understood.	X		
c. Case studies, role-playing scenarios, and small group discussions are included where appropriate.	X		
11. Videos are incorporated.	X		
a. Video introductions set forth the basis for showing the video and key points are highlighted in advance for students.	X		
b. Videos underscore relevant training concepts.	X		
c. Videos do not contain crude or offensive language or actions that are gratuitous or unnecessary.	X		
d. Videos portray individuals of diverse demographics in a positive light.	X		
12. Meaningful review/closure is included.	X		
a. Important points are summarized at the end of lesson plan.	X		
b. Assessments are provided to test knowledge of concepts.	X		

Lesson Plan Checklist (Part 2)

Integration	Yes	No	N/A
13. Does the lesson incorporate BPD technology?	X		
14. Does the lesson plan integrate BPD policies?	X		
15. Does the lesson reinforce BPD mission, vision, and values?	X		
16. Does the lesson reinforce the Critical Decision-Making Model?	X		
17. Does the lesson reinforce peer intervention (EPIC)?			X
18. Does the lesson incorporate community policing principles?	X		
19. Does the lesson incorporate problem solving practices?	X		
20. Does the lesson incorporate procedural justice principles?	X		
21. Does the lesson incorporate fair & impartial policing principles?	X		
22. Does the lesson reinforce de-escalation?	X		
23. Does the lesson reinforce using most effective, least intrusive options?	X		
24. Does the lesson have external partners involved in the development of training?	X		
25. Does the lesson have external partners in the delivery of training?	X		
Subject Matter Expert: Ryan Slade	Date: 1-23-23 4-20-23		
Curriculum Specialist: Dawn Peake	Date: 1-24-23, 1-31-23 6-7-23, 7-14-23 8-3-23, 8-7-23		
Reviewing Supervisor: Sgt. Thomas Smith & Lt. Gary Edmondson	Date: 7-14-23, 8-3-23 8-7-23, 8-9-23		
Reviewing Commander: Major Derek Loeffler	Date: 8-9-23		

SAY: A 24/7 free and confidential crisis and suicide hotline available to anyone in suicidal crisis or emotional distress. The caller is routed to their nearest crisis center (BCRI) to receive immediate counseling from trained professionals and local mental health referrals.

ASK: How does this relate to 911 diversion?

SAY: When an eligible call results in a “warm” handoff to BCRI. The caller’s needs are successfully addressed by BCRI. This eliminates unnecessary responses from BPD, BCFD, or EMS.

Click twice to reveal desired responses & slide content.



Desired Responses:

- Calls deemed appropriate are transferred to BCRI
- Allows for less police-involvement

II. INSTRUCTIONAL INPUT (CONTENT)

PERFORMANCE OBJECTIVES

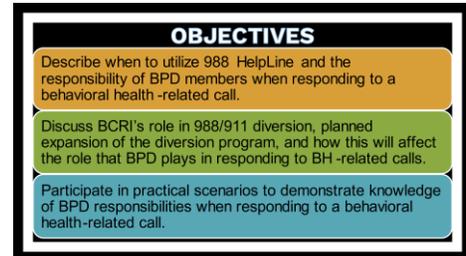
SAY: Within this module, we will focus on the following objectives...

- Describe when to utilize 988 HelpLine and the responsibility of BPD members when responding to a behavioral health-related call.
- Discuss BCRI’s role in 988/911 diversion, planned expansion of the diversion program, and how this will affect the role that BPD plays in responding to BH-related calls.
- Participate in practical scenarios to demonstrate knowledge of BPD responsibilities when responding to a behavioral health-related call.

Time: 13 minutes

NOTE: *The instructor should frequently reference the “Top 5” lists displayed in the classroom as various topics are addressed within the full day training.*

Slide 3



SAY: First up, let's review the current 988 HelpLine.

ASK: We've talked about what 988 is. Now, what are some specific reasons a person may call them?

SAY: Here are some reasons to call 988.

- drug use
- feeling depressed
- mental and physical illness
- loneliness
- trauma

Also...

- thoughts of suicide
- relationships
- economic worries
- anxiety
- issues around sexual identity
- drinking too much

Slide 4

NOTE: There are animations hiding content on this slide.



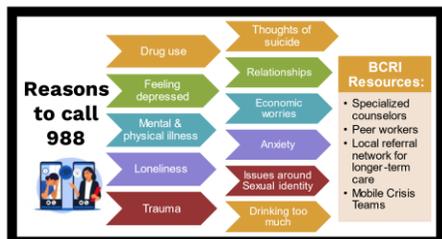
Desired Responses:

- thoughts of suicide
- relationships
- economic worries
- anxiety
- issues around sexual identity
- drinking too much
- drug use
- feeling depressed
- mental and physical illness
- loneliness
- trauma

Click to reveal the first list.



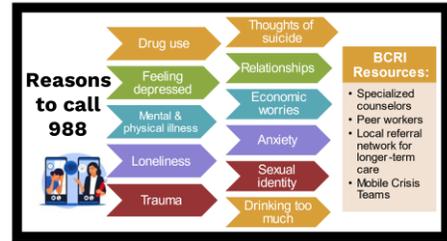
Click again to reveal second list.



EXPLAIN: If a person is experiencing any of those factors, they are encouraged to call 988 and a specialized counselor from BCRI will speak with them to provide emotional support and share resources for longer-term support if needed. One of their resources is their Mobile Crisis Team. The Mobile Crisis Team is a team of mental health professionals including psychiatrists, social workers, peers, and nurses who can be dispatched to any Baltimore City location to provide immediate assessment, intervention, and treatment currently operational 24 hours a day.

The MCTs do NOT involve BPD unless the situation is assessed, and the person becomes a violent threat to themselves or others

Click to reveal BCRI resources.



Potential Misconception:

- *Students may be under the assumption that the Mobile Crisis Team (MCT) is the same as the Crisis Response Team (CRT) involving a BPD member.*

BCRI CASE STUDY

Under Development

SAY: The 911 Diversion Program Pilot has been in place for over a year. Its goal is to provide the least police-involved response to behavioral health-related calls and ensure BPD members respond to persons experiencing a behavioral health crisis in a manner that respects their civil rights, contributes to their overall health and welfare, provides appropriate crisis response techniques, promotes a connection to the behavioral health system, and decreases inappropriate criminal justice involvement for persons with behavioral health disabilities or experiencing a crisis.

Slide 5



SAY: Further expansions are being planned to include additional resources for youth and support for the 911 call center.

- Criteria for diversion currently requires that a caller be 18 years and older, meaning youth that call 911 and meet the diversion criteria cannot be diverted. Creating child and youth-focused Mobile Crisis Teams will allow the pilot to expand capacity so that calls received by 911 from youth and families can be safely diverted to Mobile Crisis Teams that can serve any child in the city, further lessening police involvement.

Slide 6



SAY: This flowchart is a representation of who responds to people experiencing BH crises.

Take a second to open your *Student Resource Binder* to access the flowchart. We'll be using this chart for other activities as well, so keep it out.

The first 3 crisis types include...

- Serious Mental Illness + Danger to Life and Safety of Self or Others
- Not Danger to Life and Safety of Self or Others
- Non-Behavioral Health-Related Medical Issue

As you can see, each type then branches out into a range of actionable steps.

We're going to focus our attention on the first 2 crisis types. The last one, "Non-Behavioral Health-Related Medical Issue" results in an EMS only response.

Starting at the top, there's a call for service for "Serious Mental Illness + Danger to Life and Safety of Self or Others". The next actionable step is whether or not the

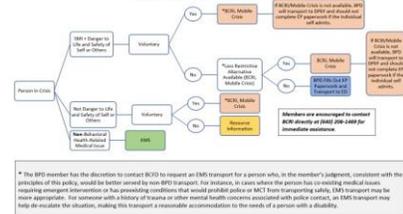
Slide 7

NOTE: There are animations hiding content on this slide.

The instructor should direct students to the *Student Resource Binders* to access the flowchart.

The instructor should point to various stages of crisis intervention while reviewing the flowchart.

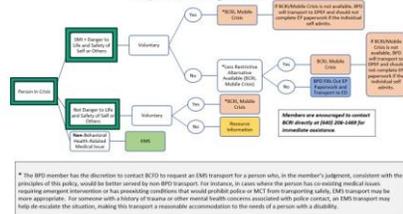
Who Responds to People with SMI that are Experiencing Crises



* The BHI member has the discretion to contact 911 to request an EMS transport for a person who, in the member's judgment, consistent with the principles of this policy, would be better served by non-BHI transport. For instance, in cases where the person has an existing medical issue, requiring emergent attention or has preexisting conditions that would prohibit police or MCT from transporting safely, EMS transport may be more appropriate. For someone with a history of trauma or other mental health concerns associated with police contact, an EMS transport may help de-escalate the situation, making the transport a reasonable accommodation to the needs of a person with a disability.

Click to reveal boxes around focal areas.

Who Responds to People with SMI that are Experiencing Crises



* The BHI member has the discretion to contact 911 to request an EMS transport for a person who, in the member's judgment, consistent with the principles of this policy, would be better served by non-BHI transport. For instance, in cases where the person has an existing medical issue, requiring emergent attention or has preexisting conditions that would prohibit police or MCT from transporting safely, EMS transport may be more appropriate. For someone with a history of trauma or other mental health concerns associated with police contact, an EMS transport may help de-escalate the situation, making the transport a reasonable accommodation to the needs of a person with a disability.

person voluntarily submits to receive mental health care, which can include an emergency evaluation.

If yes, BPD will call BCRI. If BCRI options (such as phone counseling or referral to a same-day appointment) are not enough, and a Mobile Crisis team is not reasonably available, BPD will transport to DPEF (*Designated Psychiatric Emergency Facility*) and should not complete EP paperwork if the person self admits.

If the person does not want to seek care, members should still first see if a Less Restrictive Alternative to BPD transport is Available (*BCRI, Mobile Crisis*) as one way to de-escalate the situation. BPD will contact BCRI for assistance. If BCRI options are not enough, and a Mobile Crisis team is not reasonably available, BPD will transport to DPEF, but should not complete EP paperwork if the person self admits.

The second type of call for service is for a person who is “Not a Danger to Life and Safety of Self or Others”. The next actionable step is whether or not the person voluntarily accepts mental health care. If so, BPD will call BCRI for phone counseling, a same-day appointment, or MCT. If the person does not voluntarily accept, BPD provides information regarding resources and clears the scene.

As you can see on the flowchart, there are a few different situations where BPD may call EMS for assistance in transport. For instance, if a MCT isn’t available for response in a reasonable amount of time, then EMS transport may be more appropriate than BPD transport for someone with a history of trauma or where EMS would help de-escalate the situation. If the person has co-occurring medical issues, then EMS transport may be more appropriate than either BPD or MCT response.

SAY: In a minute, you are going to work in groups, with a scenario, to evaluate decision-points officers will encounter when responding to people with SMI who are in crisis.

Before you work in groups, we're going to look at an example scenario and do the first one together.

This is a Homeless Encampment example...

Officers are dispatched to a homeless encampment for removal of property. City workers are requesting police because the last time they did an encampment removal they were threatened with violence. On arrival, most people have voluntarily left with their belongings. One female is refusing to take down her tent or remove her property.

When approached by city workers the woman became verbally abusive and stated, *"I know you're with the FBI! Stop following me. I've already contacted the President!"*

City workers have tried to tell her that they are not with the FBI but are unsuccessful in getting her to believe them. When they request her to move again, she then said, *"If I can't live here, I've got nowhere else to go and I might as well kill myself!"*

EXPLAIN: You'll notice below that there are 5 discussion points for your group...

1. What factors are the basis for officers' decision-making?
2. How will the "totality of circumstances" be applied in decision-making?
3. What are the safety considerations?
4. Are there any suspected or known special needs of the individual? If so, what?
5. Using the flowchart, describe the most logical response's sequence of events, in keeping with the policies we've discussed.

We're going to use the questions at the bottom of the scenario to guide our thinking before we use the

Slide 8

NOTE: There are animations hiding content on this slide.

Homeless Encampment

Officers are dispatched to a homeless encampment for removal of property. City workers are requesting police because the last time they did an encampment removal they were threatened with violence. On arrival, most people have voluntarily left with their belongings. One female is refusing to take down her tent or remove her property.

When approached by city workers the woman became verbally abusive and stated, "I know you're with the FBI! Stop following me. I've already contacted the President!"

City workers have tried to tell her that they are not with the FBI but are unsuccessful in getting her to believe them. When they request her to move again, she then said, "If I can't live here, I've got nowhere else to go and I might as well kill myself!"



The instructor should read the example aloud to students.

Click to reveal content on slide.

Homeless Encampment

Officers are dispatched to a homeless encampment for removal of property. City workers are requesting police because the last time they did an encampment removal they were threatened with violence. On arrival, most people have voluntarily left with their belongings. One female is refusing to take down her tent or remove her property.

When approached by city workers the woman became verbally abusive and stated, "I know you're with the FBI! Stop following me. I've already contacted the President!"

City workers have tried to tell her that they are not with the FBI but are unsuccessful in getting her to believe them. When they request her to move again, she then said, "If I can't live here, I've got nowhere else to go and I might as well kill myself!"

In your group, discuss the following...

1. What factors are the basis for officers' decision-making?
2. How will the "totality of circumstances" be applied in decision-making?
3. What are the safety considerations?
4. Are there any suspected or known special needs of the individual? If so, what?
5. Using the flowchart, describe the most logical response's sequence of events.



<p>flowchart.</p> <p>ASK: What factors are the basis for officers’ decision-making?</p> <p>ASK: How will the “totality of circumstances” be applied in decision-making?</p> <p>ASK: What are the safety considerations?</p> <p>ASK: Are there any suspected or known special needs of the individual? If so, what?</p>	<p>Desired Responses:</p> <ul style="list-style-type: none"> • Environment itself – homeless encampment • De-escalation • Resources to assist <p>Desired Response:</p> <ul style="list-style-type: none"> • Determine if her language is passive suicidal ideation or non-specific comment from frustration—or, in contrast, a real threat <p>Desired Responses:</p> <ul style="list-style-type: none"> • Availability to weapons • Possession of weapons <p>Desired Response:</p> <ul style="list-style-type: none"> • This appears to be a person who is homeless who is upset about having to leave and is displaying characteristics of someone with SMI (<i>accusing city workers of being with the FBI and following her, as well as, non-descript threats to kill herself</i>).
--	---

III. REVIEW / SCENARIO / EVALUATION / CLOSURE

SAY: We will now move on to the group task for the scenarios. You will have about 3 -5 minutes to discuss your assigned scenario, just as I just modeled with you. Be prepared to share out.

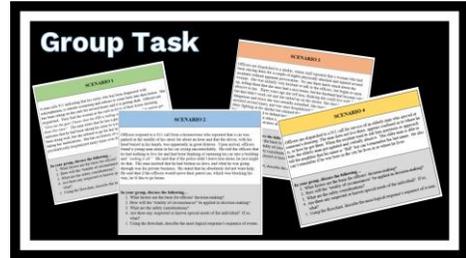
EXPLAIN: Before you get started, it is important to note that in a “perfect world,” all eligible BH calls will be diverted by the 911 Call Specialists to minimize/eliminate unnecessary police involvement. However, what if the caller doesn’t supply the necessary information and you are dispatched. Upon your arrival, you assess the situation and determine (*whether or what*) diversion is best.

In the *Student Resource Binder*, you will notice that there are 4 scenarios. I’m going to assign each table group a scenario.

You have 5 minutes to discuss the five points. Be prepared to share, using the flowchart.

Time: 10 minutes

Slide 8



The instructor must set the preface that in a “perfect world,” all eligible BH calls will be diverted by the 911 Call Specialists to minimize/eliminate unnecessary police involvement-

The instructor will assign groups of 4-5. The preferred number is 4 in each group.

The instructor should direct students to the Student Resource Binders to access each of the scenarios, as well as the flowchart.

The instructor will provide each group one of the following four scenarios.

While students are working, the instructor should circulate to each group, providing clarity and/or addressing misconceptions.

After 5 minutes, students should be directed back to their seats to share out with the class.

The instructor should call on each group to share the discussion points and model the decision points officers will make, utilizing the flowchart.

Let's have the second group now.

3. Could lead to Voluntary services (*with current MH provider or hospital evaluation*) with assistance of Mobile Crisis

The instructor should have the second scenario group share out with the class.

While the group shares out, the instructor should use the desired responses below to check for understanding and clarify any misconceptions.

The instructor should ensure students use the flowchart to show the decision-points.

Desired Responses:

Significant Factors –

- Limited information, man is not cooperative
- Appears to be depressed
- Refuses help
- Expresses suicidal threat and potential plan (*ramming car into building*)
- Access to means (*his car*)
- Likely need for immediate actions to ensure safety (*e.g., exit from car/ensuring it is not able to be operated*), call for CRT assistance

Flowchart Sequence –

1. Person in Crisis

Now, let's have the third group.

2. Probable SMI and Danger to Life
3. Not Voluntary
4. No evident less-restrictive alternative available
5. If further efforts to engage the man in voluntary treatment fail: EP and transport

The instructor should have the third scenario group share out with the class.

While the group shares out, the instructor should use the desired responses below to check for understanding and clarify any misconceptions.

The instructor should ensure students use the flowchart to show the decision-points.

Desired Responses:

Significant Factors –

- Known SMI
- Assaultive
- May be hearing voices
- Was able to be engaged and appeared to be a good informant
- Trauma history
- Doesn't feel safe and wants help to leave shelter
- No evident support system

Flowchart Sequence –

1. Person in Crisis

Okay, and the last group.

2. Potential danger to others
3. Potential voluntary (*wants help*)
4. Mobile Crisis
5. If MC unavailable and BPD transports, need to be mindful of trauma history (*e.g., regarding handcuffing*)

The instructor should have the last scenario group share out with the class.

While the group shares out, the instructor should use the desired responses below to check for understanding and clarify any misconceptions.

The instructor should ensure students use the flowchart to show the decision-points.

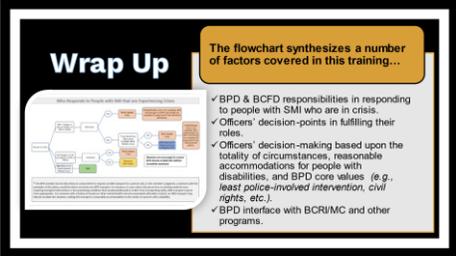
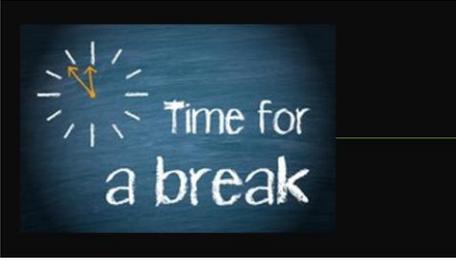
Desired Responses:

Significant Factors –

- Possible Dementia/Alzheimer's
- Need information about health, doctor offices, hospitals visited, and determine address
- Try to find out if he has friends/family/neighbors nearby to help provide such information
- Take steps to de-escalate

Flowchart Sequence –

1. Not a danger to self or others
2. Voluntary – yes
3. MCT or ambulance to

	hospital
<p>SAY: The flowchart synthesizes a number of factors covered in this training...</p> <ul style="list-style-type: none"> • BPD & BCFD responsibilities in responding to people with SMI who are in crisis. • Officers' decision-points in fulfilling their roles. • Officers' decision-making based upon the totality of circumstances, reasonable accommodations for people with disabilities, and BPD core values (<i>e.g., least police-involved intervention, civil rights, etc.</i>). • BPD interface with BCRI/MC and other programs. 	<p>Slide 10</p> 
<p>SAY: This concludes <i>Module 2 – 988 Protocols & 911 Diversion</i>.</p> <p>ASK: Before we get into our next lesson, what questions about diversion do you have for me?</p>	<p>Slide 11</p>  <p><i>The instructor should answer as many questions as time allows.</i></p>
<p>SAY: Let's take a break.</p>	<p>Slide 12</p>  <p><i>The instructor should note the time and when to report back.</i></p>