

## SCENARIO 1

### **Scenario 1 Directions/Expectations:**

Before entering the scenario, you will need the following equipment:

- Duty belt
- Blue handle weapon
- Blue handle CEW

Just because you have this equipment on your duty belt for the scenarios does **NOT** mean you are required to use or that we are looking for you to use as we evaluate. However, it is all dependent on **YOUR** interpretation of the threat level and **YOUR** assessment of the situation. Every day in patrol, you have all of your equipment. Same as in patrol, just because you have it doesn't mean you'll use it every day or in every situation. Your equipment is for when/if you need it.

When you enter this scenario, you will notice that there is a blue mat, in the event of a necessary take-down. Just because the mat is present does **NOT** mean you are required to take-down an individual or that we are looking for you to take-down someone. Scenarios are dependent on your interaction with the role-players. Depending on the situation, you may or may not need to engage this way. You will need to assess this situation to determine how you and your partner will engage. Your interactions have a chain reaction of potential events.

You and your partner are expected to use your radios and engage in de-escalation.

### **Setting the Stage – Scenario Overview BEFORE Police Response:**

A call for service was received from a neighbor stating an individual who lives next door is outside, visibly bleeding and screaming for help. The neighbor reports that the individual is walking around, shouting, and appears to have an injury to their hand.

EMS is dispatched to the location.

Upon EMS arrival to the location, they make contact with the person in crisis. This person is outside on the front porch of the residence. The fire department begins to assess what's wrong and begins their assessment of capacity. The patient isn't making sensible communication. The fire department closes distance on the patient and attempts to have him/her sit down to take blood pressure. As EMS personnel attempt to attach the cuff, the patient flails and takes a swing with a closed fist at personnel. The fire department then calls for police assistance.

EMS radios their dispatch, generating a call for service to assist the fire department.

## SCENARIO 1

**DISPATCHER:** *“Fire Department personnel at \_\_\_\_\_ location and are reporting a combative patient. Please respond to assist.”*

### **Desired Response/Actions of BPD:**

- Officer acknowledges by saying, “10-4. In route.”
- Activation of BWC
- Both officers arrive at location.
- Officer acknowledges by saying, “10-23.”

Patient is pacing in front of the house, shouting, *“Stay away from me!”* Neighbor is nowhere to be found.

EMS personnel are at a distance.

One medic tells the responding officers, *“From what we can tell, there’s no one else here. We don’t see any major injuries. The hand has a minor cut.”*

### **Desired Responses/Actions of BPD:**

- Officer introduces themselves to the patient by name, first name.
- Officer asks the patient what has happened to them (*use verbal de-escalation techniques*)
- Officer attempts to ask questions such as: *“Is there anyone else in the house?”*, *“Is anyone else injured?”*, *“How did you hurt yourself?”*, *“Are you in pain? I see that you have a cut on your hand.”*

This proves to be ineffective as the patient will immediately begin approaching EMS personnel, angrily shouting, *“I told you to stay away! I’m going to kill you. You called the police on me!”*

The patient takes a fighting stance, raising fist at EMS personnel. The EMS personnel back up.

### **Desired Responses/Actions of BPD:**

- Officer(s) acknowledge that it must feel frustrating to have the police called, but that they’re there to help
- Officer(s) tells patient to back away.

Patient does not back away and says, *“You’re going to have to kill me before I kill them. The voices told me to anyway!”*

### **Desired Responses/Actions of BPD:**

- Recognition of patient potentially having a mental health disorder
- Verbal de-escalation attempts are made again

### **Undesired Responses/Actions of BPD**

- Officer(s) use weapons



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to engage the individual, expressing empathy for the individual's sense of fear, etc.

- "Why don't you tell me what has you so upset?"
- "I want to talk to you. I want to help you."
- "I understand that you are hearing voices, and I can see how that can be stressful."
- Would it help if I asked EMS to step outside? (Note that aggression has been toward EMS, not BPD, and this might help de-escalate by reinforcing the individual's sense of some control over the crisis situation)

*\*If weapon is used, end scene. This will result in a failure and immediate instructor feedback will be provided.*

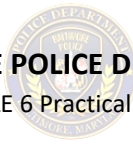
Patient yells, "Those guys..." Patient takes a few more steps toward EMS and attempts to swing fist.

### **Desired Responses/Actions of BPD:**

- Recognition of patient being a danger to themselves or others (*though injury to self, if self-inflicted, was minor*)
- One or both officers place themselves in front of patient and in between EMS
- One or both officers physically seize the patient (*Each officer taking an arm so patient cannot advance forward OR one or both officers safely taking patient to the ground on designated mat.*)

### **Undesired Responses/Actions of BPD**

- Officers do not place themselves in front of patient and in between EMS  
*\*If this occurs, the patient should attack EMS and the instructor should end the scenario. This will result in a fail and immediate instructor feedback will be provided.*
- Officers do not physically seize the patient  
*\*If this occurs, the patient should attack EMS and the instructor should end the scenario. This will result in a fail and immediate instructor feedback will be provided.*
- Officer(s) use weapons  
*\*If weapon is used, end scene. This will result in a fail and immediate instructor feedback will be provided.*



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**\*If each officer takes an arm so the patient cannot advance forward.** – Patient realizes being overcome by police and submits, still yelling, *“Get your hands off me!”*

### **Desired Responses/Actions of BPD:**

- Recognition of minor injury
- Officers indicate to individual, *“For your safety and the safety of others, we’re going to place you in handcuffs, but shortly after we arrive at the hospital, they will come off. You are not under arrest.”*
- One officer says, *“Put your hands behind your back.”*
- One or both officers put handcuffs on individual
- Escort to police car for transport

**\*If one or both officers safely take-down patient to the ground on designated mat.** – Patient realizes being overcome by police and submits, still yelling, *“Ok. Ok. Ok! Get off me!”*

### **Desired Responses/Actions of BPD:**

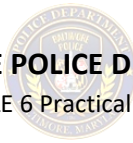
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- One officer says, *“Put your hands behind your back.”*
- One officer says, *“Put your hands behind your back.”*
- One or both officers put handcuffs on individual
- Asks patient about having weapons, *“Do you have any weapons on you or something that might hurt me?”*
- Engages in pat-down for weapons – *No weapons found.*
- Escorts to police car for transport

**\*\*END SCENE\*\***

## POST SCENARIO 1: FOLLOW-UP

**INSTRUCTOR:** You just put this patient in handcuffs.

<u><b>Instructor Questions:</b></u>	<u><b>Desired Responses from BPD:</b></u>
1. Where are you taking them?	<ul style="list-style-type: none"> <li>Transporting to hospital</li> </ul>
2. What factors would have supported a decision to connect this person with mental health services via MCT?	<ul style="list-style-type: none"> <li>Officers were successful in de-escalating and the individual was no longer combative</li> <li>Individual was agreeable to accepting help</li> </ul>
3. What is the next step?	<ul style="list-style-type: none"> <li>Upon arrival at hospital, determine if the individual is willing to be evaluated voluntarily</li> <li>If not, complete EP paperwork</li> </ul>
4. Why is an EP appropriate?	<ul style="list-style-type: none"> <li>Individual articulated a threat to others and attempted to hurt others before officers tried to place the individual in handcuffs and remove from home.</li> <li>Individual could not be successfully de-escalated to the point of being uncombative (<i>i.e. no longer a danger to self or others</i>)</li> <li>It is possible that their actions are a result of mental illness given what was observed.</li> </ul>
5. In the event that the neighbor was on scene, what questions would you have asked them, and how would you have used this information?	<ul style="list-style-type: none"> <li>Does the person have a history of mental illness? (<i>Use it by asking the individual if there is a doctor or therapist that might help</i>)</li> <li>Have they ever harmed themselves or others before? (<i>Use it by asking the individual what has helped in the past when they've been in crisis</i>)</li> <li>Do you know anyone we could contact for this person? (<i>Use it by asking if the individual would like to speak to a trusted relative or friend</i>)</li> </ul>



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# SCENARIO 2

### **Directions/Expectations:**

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### **Setting the Stage – Scenario Overview BEFORE Police Response:**

There is a call for service from a citizen who states that their sister/brother just ingested a significant amount of pills after stating thoughts of suicide just an hour before the call. The person is still conscious and breathing but is becoming lethargic. The pill bottle that was once full, is significantly depleted. The prescription was originally prescribed for pain, Oxycodone, from a prior injury.

## SCENARIO 2

**DISPATCHER:** *“Respond to \_\_\_\_\_ location for a report of a possible suicide in progress or attempt suicide.”*

### **Desired Responses/Actions of BPD:**

- One of the officers says, *“10-4. In route.”*

The officers arrive on the scene and meet EMS.

Officers enter the dwelling where EMS is triaging.

The person in crisis is alone, but conscious and breathing.

### **Desired Responses/Actions of BPD:**

- Officers begin asking identifying questions, *“What is your name?”, “What is your date of birth?”, “How many pills did you swallow?”, “What kind of medication was it?”*
- Officers ask, *“Did you take these pills to end your own life?”*

The person in crisis responds to questions asked by BPD...

- States that their sibling must have called 911 for them.
- States name and date of birth
- Indicates about 20 pills of Oxycodone

The person states, *“Yes. I don’t want to live anymore.”*

### **Desired Responses/Actions of BPD:**

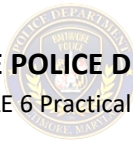
- Officers say, *“I’m glad we reached you in time. That is a lethal dose. You’re going to need to go to the hospital.”*

Person in crisis responds, *“Ok. I already regret what I did. I was just really upset.”*

Medics say, *“We’re going to take you to the hospital now.”*

### **Desired Responses/Actions of BPD:**

- Officers ask Medics, *“What is your Medic number?”* and *“What hospital are you going to?”*



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**\*\*END SCENE\*\***

### POST SCENARIO 2: FOLLOW-UP

<b><u>Instructor Question:</u></b>	<b><u>Desired Responses from BPD:</u></b>
1. What is the next step(s)?	<ul style="list-style-type: none"><li>• Write a Behavioral Health Report</li></ul>
2. In the event that the sibling was on scene, what questions would you have asked them?	<ul style="list-style-type: none"><li>• Does the person have a history of mental illness?</li><li>• Is the person currently in treatment?</li><li>• Have they ever done this before?</li><li>• Are they prescribed a medication for the illness? If so, what is it?</li></ul>