

BALTIMORE POLICE DEPARTMENT – EDUCATION AND TRAINING SECTION

LESSON PLAN

COURSE TITLE: Crisis Intervention Team (CIT)

LESSON TITLE: De-Escalation

New or Revised Course: New Revised

Prepared By: Elizabeth Wexler and Sgt Smith **Date: 2/17/21**

Academic Director Approval: **Date:**

PARAMETERS	Lesson hours: 1	<input type="checkbox"/> Entry-level
	Class size: max 25	<input type="checkbox"/> Continuing Education
	Space needs: E & T classroom	<input checked="" type="checkbox"/> Other

STUDENT/COURSE PREREQUISITES/QUALIFICATIONS (if any)
Accepted via application and screening to CIT program

LESSON HISTORY (previous versions, titles if applicable)

PERFORMANCE OBJECTIVES

- Given a group activity, participants will identify and explain de-escalation tactics and techniques to the satisfaction of the facilitator.
- Given a scenario, participants will maneuver and engage in de-escalation strategies, such as The Four Plays and 12 Guardrails to the satisfaction of the facilitator.
- Through facilitated discussion, participants will identify and explain how to adjust strategies to accommodate changing circumstances to the satisfaction of the facilitator.

ASSESSMENT TECHNIQUE

Group Activity
Facilitated Discussion
Scenario

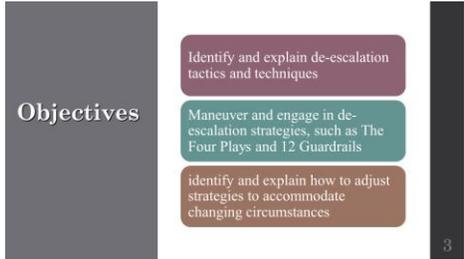
COURSE DESCRIPTION
This course was adapted from Sam Cochran’s CIT “12 Guardrails”. This course will build upon knowledge and skill sets for interacting with persons suffering from BH disabilities, focused on de-escalating crisis calls.
MPCTC OBJECTIVES (if applicable) <i>(Include all terminal objectives. 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>
N/A
INSTRUCTOR MATERIALS
<i>De-Escalation</i> PowerPoint
TECHNOLOGY/EQUIPMENT/SUPPLIES NEEDED
Computer Whiteboard
STUDENT HANDOUTS
Needed 25 Title TBD

METHODS/TECHNIQUES
Facilitated discussion, group activity, scenario
REFERENCES
“12 Guardrails” by Sam Cochran, CIT
GENERAL COMMENTS
This lesson will build upon knowledge and skill sets for interacting with persons suffering from BH disabilities, focused on de-escalating crisis calls.

COURSE TITLE: Crisis Intervention Team (CIT)

LESSON TITLE: De-Escalation

PRESENTATION GUIDE	FACILITATOR NOTES
<p>I. ANTICIPATORY SET Good morning, everyone. Over the past few days, we have covered a lot of ground and gained insight on behavioral health issues and disabilities. For the next hour, we are going to build upon your knowledge and skill sets for interacting with persons who have BH disabilities, focused on de-escalating crisis calls.</p> <p>There is no way to predict an outcome of a CIT call, with the understanding that every crisis is unique. You are here this week to continue to gain the tools necessary to take on a leadership position in a behavioral health crisis call for service.</p> <p>This next hour will focus on a key CIT model. The material is based on a train-the-trainer by Sam Cochran, MS (retired Memphis PD), who was instrumental in creating CIT in 1988.</p>	<p>Time <i>Facilitators should introduce themselves and briefly explain what the lesson is about and why it is important.</i></p> <p>Slide 1</p> 
<p>GROUP ACTIVITY: De-Escalation Before we get started, let’s review strategies, tactics, and techniques that you as officers have used in the field to de-escalate a person in crisis.</p> <p>On the chart paper, you and your group will list de-escalation strategies, tactics, and techniques. On your chart paper, you may choose to create a web, chart, or list.</p> <p>Your group will have 5 minutes and at the end, one group member will come up and post their group’s chart on the wall here.</p> <p>Let’s review. Each group will choose 2 to share and explain. Let’s try not to repeat any of the techniques shared.</p>	<p>Slide 2</p>  <p><i>The instructor should have groups share 2 techniques, but also challenge participants NOT to repeat any of the ones named.</i></p> <p>Desired Responses:</p> <ul style="list-style-type: none"> • Responses will vary but should be to the satisfaction of the facilitator. Responses should also reflect previous de-

	<p>escalation training techniques.</p> <p>De-Escalation Techniques:</p> <ul style="list-style-type: none"> • ICAT: Distance + Cover = Time • Create safety <i>*trauma informed policing</i> • Slowing down • Listening • Reflecting back what you see and hear • Offering reassurance, you are there to help • Allowing subject to vent • Playing down authority • Reframe cooperation as strength <p>Unhelpful Techniques:</p> <ul style="list-style-type: none"> • Interrupting • Moving in too quickly • Flexing authority • Yelling • Not listening • Dismissing expressed emotions
<p>II. INSTRUCTIONAL INPUT (CONTENT)</p> <p>PERFORMANCE OBJECTIVES This training will build your confidence and enhance your skill set so you can resolve a crisis, while maximizing safety.</p> <p>Throughout this training, we will focus on the following objectives...</p> <ul style="list-style-type: none"> • Given a group activity, participants will identify and explain de-escalation tactics and techniques to the satisfaction of the facilitator. • Given a scenario, participants will maneuver and engage in de-escalation strategies, such as The Four Plays and 12 Guardrails to the satisfaction 	<p>Time</p> <p><i>Facilitators should begin by clearly explaining what students will learn in the lesson, and how.</i></p> <p>Slide 3</p> 

<p>of the facilitator.</p> <ul style="list-style-type: none"> • Through facilitated discussion, participants will identify and explain how to adjust strategies to accommodate changing circumstances to the satisfaction of the facilitator. 	
<p>What’s the “Never” Plan? “Never” seems like a strange word to start out talking about de-escalation; yet it is a good way to remember this very important fundamental principle: that it is...</p> <ul style="list-style-type: none"> • never too early to develop a plan • never a bad time idea to assess or re-assess a plan, and • never too late to change a plan <p>TURN & TALK: With the officer next to you, share a time where either you or an officer you know utilized one or more of the “never” plans and successfully de-escalated a person in crisis.</p> <p>ASK: Does anyone have an experience to share where one or more of these “never” plans played a key role in successfully de-escalating a person in crisis?</p>	<p>Slide 4</p> <p>The slide features an illustration of two figures, one green and one orange, interacting with gears. To the right is a green signpost with a white arrow pointing left and the text 'Good Choice' above 'Bad Choice' with a white arrow pointing right. Below the illustration and signpost are three bullet points: 'Never too early to develop a plan', 'Never a bad idea to assess or re-assess a plan', and 'Never too late to change a plan'. The slide number '4' is in the bottom right corner.</p> <p><i>While participants share with partner, the instructor should facilitate around to partners to listen and keep everyone on task.</i></p> <p>Desired Responses:</p> <ul style="list-style-type: none"> • Officers will share experiences of successfully de-escalating a person in crisis.
<p>Listen – Listen – And Listen It is ingrained in all of your training and experience to listen to the person you are trying to assist. It’s just as important-especially as a CIT officer-to listen to YOUR thoughts, feelings, and instincts. It’s critical to understand that the individual in crisis is also “listening”, observing, and evaluating your behavior as well.</p> <p>In contrast to a call where you might be interviewing a potential suspect, where you are law-enforcement focused rather than assistance-focused, keep in mind that your non-verbal behavior and physical cues “say” and convey to the individual that you are there to help.</p>	<p>Slide 5</p> <p>The slide features a large red speech bubble with the text 'Listen, Listen, and Listen' inside. To the right are three bullet points: 'Non-verbal communication is still communication.', 'What does the Consumer see in you?', and 'Don't ignore your thoughts, experiences, instincts, feelings, surroundings – listen carefully to the person who is in a crisis, but also, listen to yourself.' Below these is another bullet point: 'You have time...Does the Consumer see your time in your listening skills?'. The slide number '5' is in the bottom right corner.</p>

<p>Planning & Understanding the Crisis Event While our main purpose on a CIT call is to assist, we can only provide that assistance by maintaining a safe and secure scene.</p> <ul style="list-style-type: none"> • Some key points to remember are: Setting limits is part of safety. • You can remain empathic and calm while still maintaining safety. • Every person’s crisis is different. • A person with a mental illness MAY have a weapon or “instrument” for safety rather than assault. Some may have these weapons/instruments because they are contemplating self-harm. <p>ASK: Can anyone give me an example setting limits for safety, remaining empathetic, and staying calm from your police work?</p>	<p>Slide 6</p>  <p>Planning & Understanding the Crisis Event</p> <ul style="list-style-type: none"> ❑ Setting limits is part of Safety Procedures ❑ Every person’s crisis is different ❑ A person with a mental illness MAY have a weapon or “instrument” for safety rather than assault <p>Desired Responses:</p> <ul style="list-style-type: none"> • Officer(s) share anecdotes from patrol where they have maintained calm and empathy while, for example, working with a person who exhibiting extreme agitation.
<p>Encounters to Avoid We’re going to start by talking about what to AVOID when possible.</p> <p>It’s important to understand that there are certain encounters that are likely to escalate the situation more, such as:</p> <ul style="list-style-type: none"> • Shouting • Commands simultaneously made by multiple officers • Sudden movements and/or rapid commands • Maintaining direct and continuous eye contact (which can be intimidating) • Touching the person – even necessary touching can escalate a person in crisis. As an officer, you must find the balance of what the person is comfortable with and if touching is necessary for safety. Think back to Trauma Informed Policing...always enable prediction. Let them 	<p>Slide 7</p>  <p>Encounters to Avoid</p> <ul style="list-style-type: none"> Shouting...more shouting, and louder shouting Sudden movements and/or rapid commands/orders Forced discussion Maintaining direct, continuous eye contact Touching the person (unless necessary) <p><small>*Think back to Trauma-Informed Policing</small></p>

know you are going to touch them and why, if possible.

- Forcing the person in crisis into a discussion that may cause them to re-live their trauma

Encounters to Avoid, Cont'd.

Here is a continuation of the list of encounters to avoid in order to show respect for the individual's current crisis. Additional encounters to avoid include the following:

- Crowding the person
- Needlessly rushing the communication; not allowing the person to feel that he/she is being heard
- Body or verbal language expressing anger, impatience, or irritation
- Assuming that a person who does not respond cannot hear or understand
- Using inflammatory language such as: "crazy", "psycho", or "mental".
- Challenging delusional or hallucinatory statements
- Misleading the person: Don't promise what you cannot deliver

ASK: All of these fall under trauma-informed policing- can anyone tell me how?

EXPLAIN: Successful de-escalation requires that you as an officer respect-and convey that respect-for their current suffering.

The Four Plays

One of the biggest assets in crisis intervention calls is building rapport at the scene. The Four Plays, from the original CIT model, is a great basic framework to connect initially, as well as throughout the interaction, with a subject in distress.

The Four Plays includes the following 4 steps:

Slide 8

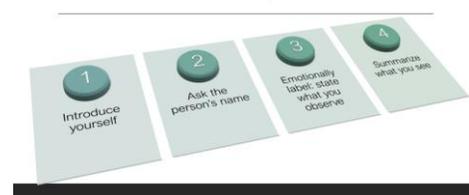


Desired Responses:

- When someone is in crisis, they are having a trauma response in the brain.
- These things (*the list on the slide*) all have the potential to fuel or increase that trauma response, which makes it more difficult to de-escalate the situation.

Slide 9

The Four Plays



<p>PLAY 1: Introduce yourself. This plays down your authority and starts to immediately build a sense of control for the person in crisis.</p> <p>PLAY 2: Ask their name.</p> <p>PLAY 3: Emotional labeling. This means to name what you see.</p> <p>ASK: Can anyone give me an example of how to do this?</p> <p>This can be done as much as needed.</p> <p>PLAY 4: Summarize what you see, and what they tell you. This can also be done as many times as it's indicated.</p> <p>ASK: What purpose does summarizing what you see and hear have with your relationship to the individual in crisis?</p> <p>EXPLAIN: Play 4 helps you to build rapport and show you are listening. It also helps to ensure you understand what they are telling you.</p> <p>ASK: How can achieving these purposes (<i>building rapport and ensure you understand what they are telling you</i>) help to possibly de-escalate the situation?</p>	<p>Desired Responses:</p> <ul style="list-style-type: none"> • “I can see you are very upset.” • “You seem confused.” <p>Desired Responses:</p> <ul style="list-style-type: none"> • To build rapport and show you are listening. • To ensure you understand what they are telling you. <p>Desired Responses:</p> <ul style="list-style-type: none"> • People who feel they are being listened to may feel less threatened because they are more in control of the situation.
<p>SCENARIO: Four Plays We're going to do a scenario using the Four Plays.</p> <p>ASK: Can I have a volunteer?</p> <p>During this role-play scenario, be prepared to provide feedback on what you saw. What did the officer do? Is there anything you would have done differently?</p>	<p>Slide 10</p> <p style="text-align: center;">SCENARIO</p> <p>While observing this role-play scenario, think about the following:</p> <ul style="list-style-type: none"> • What feedback do you have for the officer? • What would you have done differently?

<p>Now, let's talk about what you saw.</p> <p>ASK: What feedback do you have for the officer?</p> <p>ASK: Are there questions, or thoughts about the Four Plays?</p>	<p><i>The instructor should play the role of someone in crisis, very agitated and upset, perhaps tearful - Talking a lot, emotions very high and intense.</i></p> <p>Expectation:</p> <ul style="list-style-type: none"> • The officer will use the four plays in order to try to begin to build rapport and de-escalate the situation. <p>Desired Responses: (if applicable)</p> <ul style="list-style-type: none"> • Officer's tone of voice was non-threatening. • Used all 4 plays successfully. • Showed active listening. <p><i>The instructor should answer questions.</i></p>
<p>“12 Guardrails” for CIT Officers</p> <p>Now we are going to take a deeper dive into techniques of de-escalation. This framework of the Twelve Guardrails was also created by Sam Cochran.</p>	<p>Slide 11</p> 
<p>Guardrail 1: Presence of Crisis Emotions</p> <p>There are two aspects to assessing a clinical state: what you observe, and what the individual tells you. Your 1st priority is your observation of people and their emotions. Think back to Plays 3 (<i>stating what you observe</i>) & 4 (<i>summarizing what you see</i>). When someone feels listened to, they will most likely feel less threatened and more in control. Your 2nd priority is to make sure people understand you are aware of their emotions.</p> <p>These often overlap, sometimes they conflict, but the more you have of both, the best picture you can develop. In addition, communicating this back is vital</p>	<p>Slide 12</p> 

to building rapport.

Guardrail 2: Assess & Manage Threats

This was addressed a bit earlier when we talked about planning and understanding a crisis event. Safety of both you and anyone on the scene is paramount.

Your 1st priority is to identify threat(s).

ASK: Can fear be a level of threat?

Your 2nd priority is to make sure the person is aware of your concern and/or attention to the level(s) of threat(s).

With a CIT call, there can be more to balance. It's not safety OR empathy - it's BOTH.

ASK: How do you accomplish this balance?

Guardrail 3: Level of Responsibility

Being a CIT officer carries with it a higher level of responsibility and leadership. Priority 1 is to establish the CIT role and responsibilities. Are you in charge? Your planning helps to exhibit authority and leadership. Priority 2 is to make sure the person understands your CIT officer role and that YOU are in charge.

ASK: How can you accomplish this?

This specialized training gives you a broader view, and more tools, to utilize in crisis situations. This places a

Slide 13



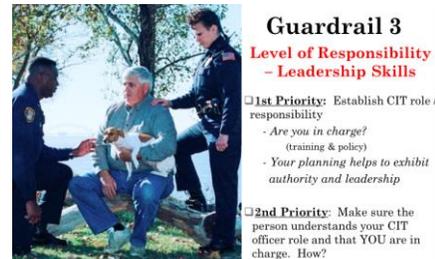
Desired Response:

- Yes, it can.
- An unhealthy fear of an anticipated action or consequence can escalate, rather than de-escalate, a crisis situation. This can be either the officer's fear, the subject's fear, or both.

Desired Responses:

- Acknowledge the concern and the risk.
- For example: "I understand that you are very worried your daughter will harm herself." OR "I can see that you are very angry that we were called here and uncertain about what will happen next."

Slide 14



Desired Responses:

- Introduce yourself, including the fact that you have special training
- Explain that you were

responsibility on you more than just a patrol officer.

SCENARIO

Now we are going to do a quick scenarios using Guardrail 3. Can I have a volunteer? (once volunteer is selected)

I am going to be the person in crisis that you, as a CIT officer, have been called to assist. For this scenario, you are going to establish what your role is as a CIT officer with the goal of making me more comfortable.

called to this situation to HELP the person

- Inform them the special training is in helping people in crisis

Instructor should role play someone in crisis, asking “who are you? Why did they send another cop? All cops are bad! None of you help me!”

Desired Responses:

- “My name is _____. What is your name?”
- (address by name): I can see you are really struggling. I am here because I am an officer who has special training to help people in crisis. I’m sorry you’ve had bad experiences before, but I am here to help.”

Guardrail 4: Uniqueness of the Crisis & Individual

Every situation and person are different. All individuals should be treated with respect and dignity. This also demonstrates respect for the individual’s civil rights.

ASK: How can we do this?

EXPLAIN: Individualizing the encounter, reminds you that a previous encounter with another individual will not be the SAME as another encounter. While there may be similarities, it’s important to remember that this person is an individual and unique. What they feel, think, and say will be different than someone else. How they will react and/or respond will also be unique. Treating each individual as unique will allow for you to better assist.

Slide 15



Guardrail 4 **1st Priority:** Treat every crisis & person as “unique” - “UNIQUE” – How?

Desired Responses:

- Observe surroundings
- Learn about the person
- **INDIVIDUALIZE THE ENCOUNTER**

Guardrail 5: Setting Limits - Part of Safety Procedures

As a continuation of the “not safety OR empathy, but both” theme:

1. **Setting limits.** When possible, this should be collaborative. For example, ask the person where they would feel comfortable talking to you. Move to more-clear limit setting only when necessary. For example, say, “In order for me to be more helpful...”
2. **Providing structure.** This is vital as a person in crisis by definition feels out of control. Structure can be helpful in de-escalating the situation for the subject. One way of providing structure is to acknowledge or praise the person for helping to calm things. This will likely lead to the person in crisis to feel a sense of regaining healthy control. As officers, our goal is to help the individual achieve a sense of control, with the assistance of an officer, as needed.
3. **Addressing Fear.** Make sure the person feels HEARD, and that what can be done to address the fear is done. Asking the person what “things”, even if they are relatively small, could help reduce their sense of fear. For example: removing the person from a place where they do not feel safe, neutral ground.

SCENARIO

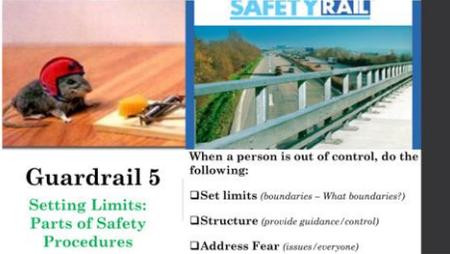
We are going to do a scenario for this guardrail.

Can I have a volunteer?

I will be playing the person in distressed you have been called to assist.

Your response should reflect the tactic of setting limits and creating a sense of safety.

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Guardrail 5
Setting Limits:
Parts of Safety
Procedures

When a person is out of control, do the following:

- Set limits (boundaries – What boundaries?)
- Structure (provide guidance/control)
- Address Fear (issues/everyone)

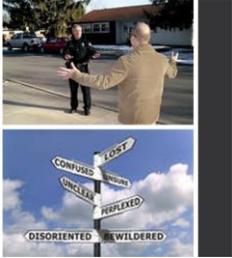
Instructor should be very distressed as the subject: yelling, crying, difficulty engaging with officer. Perhaps moving around.

Desired Responses:

- calm demeanor
- adequate distance and cover
- establish that you are there to help

Depending on how much instructor calms down:

1. If considerable, praise “you are really doing great. We’re going to

	<p>figure this out”</p> <p>2. If they cannot calm down: “I am here to help, what do you need to be able to talk with me?”</p> <p>3. If they escalate: “I see you are really having a hard time, I am here to help. Is there a place where you would feel safer to talk? Is there someone we can call to come support you?”</p>
<p>Guardrail 6: Do everything with CLARITY As a CIT officer, you will need to put your best foot forward in an effort to be transparent. The officer should not assume that their intentions, needs, wants or desires are inferred or implied.</p> <p>Therefore, do everything with clarity! Clarity can be accomplished by your:</p> <ul style="list-style-type: none"> • Verbal directions / demands • Body positioning • Hand gestures • Verbal directions and hand gestures <ul style="list-style-type: none"> - “soft” stop (verbal, gently worded) - “hard” stop (more strongly expressed/more authoritative) - “reduce” speech volume / rate <p><i>Note:</i> Remember this from trauma-informed policing? We talked about enabling prediction, letting the subject know your intentions and next moves.</p> <p>ASK: Can anyone provide an example from your experience when you either did-or did not-achieve this?</p>	<p>Slide 17</p> <p>Guardrail 6 <i>Do Everything (intervention) with CLARITY</i></p> <ul style="list-style-type: none"> <input type="checkbox"/> Verbal directions / demands <input type="checkbox"/> “Body” positioning <input type="checkbox"/> Hand gesture(s) <input type="checkbox"/> Verbal directions and hand gesture(s) <ul style="list-style-type: none"> - “Soft” stop - “Hard” stop - “Reduce” speech volume/rate  <p>Desired Response:</p> <ul style="list-style-type: none"> • Officers sharing their experiences; expect robust discussion about this
<p>Guardrail 7: Providing (reasonable) Choices As a CIT officer, you will be in many situations where you have made a decision, yet you want the person to feel as much in control as possible.</p> <p>The following is important to remember...</p> <ul style="list-style-type: none"> • Introduce and promote good choices. This = 	<p>Slide 18</p>

control.

- You're in charge. Fairness reflects "leadership".
- Look for ways to assist the person... "saving face"

ASK: What are some "saving face" approaches, plans, or efforts?

Guardrail 7
Providing Choices... Reasonable Choices

- Introduce and promote good choices = "control"
- You're in charge: Fairness reflects "leadership"
- Look for ways to assist the person... "saving face"

What are some "saving face" approaches / plans / efforts?



Desired Responses:

- Knowing you need to get someone to an emergency evaluation, asking them if they have a facility where they are already connected to care, or have been before and prefer.
- My helping you here is similar to your behavioral health providers - we keep it confidential as we are able.
- Give person options of how visible the intervention is (i.e., taking them into custody out of view of the public)

Guardrail 8: Seek and Absorb Information
 Gathering as much information as possible, interacting and engaging with the individual, will only help you have the clearest understanding of how they got to this point, and how best to serve them.

- Note past crisis history, likes, dislikes, violence, etc.
- Be sensitive to personal information and topics
 For example: *"What is important for us to know to help you right now?"* Rather than guessing, let them choose what they share. Allow the individual to identify relevant information. Be sensitive to seeking information that could feel very personal/violating/retriggering such as asking about trauma history.
- Have support personnel to assist in gathering

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Guardrail 8
Seek & Absorb Information

- Past crisis history, likes, dislikes, violence, etc.
- Be sensitive to personal information and topics
- Have support personnel to assist in gathering and sharing information
- Remove distractions



<p>and sharing information</p> <ul style="list-style-type: none"> • Remove distractions <p>SCENARIO</p> <p>We are going to do a brief scenario now. Could I have a volunteer?</p> <p>I am going to be a person you've been called to assist as a CIT officer. Demonstrate how you would seek and absorb information.</p>	<p><i>Instructor to role play a person in great distress, experiencing a trauma trigger. Yelling, tearful, saying "get away! You are too close to me!"</i></p> <p>Desired Responses:</p> <ul style="list-style-type: none"> • Back away from the person • "Do you feel like you can tell me what is going on?" • "Did something happen?" • Active listening, reflecting "What can we do to help you right now? Would going somewhere quieter be helpful?" • "We would like to understand what is happening so we can help you." • Reflecting back what person in crisis says to let them know you are listening and taking it in.
<p>Guardrail 9: You are the Conductor</p> <p>As a CIT officer, you take both a leadership role with your fellow officers, as well as being there to reassure the person in crisis that you are there help. At a CIT call, it is important to limit contact with an individual to one primary officer.</p> <p>It is not only okay to switch that role with a cover officer if indicated, but it is also an embodiment of the leadership of this role to know your limits.</p> <p>Note that cover officers should never step in but communicate their questions or suggestions to whomever is primary at that time.</p>	<p>Slide 20</p> <p>Guardrail 9</p> <p>You are the "conductor" of the crisis event.</p> <ul style="list-style-type: none"> <input type="checkbox"/> Hand-off primary role when appropriate <input type="checkbox"/> Assess memory and the person's level of "control" - <i>Do you remember my name?</i> <input type="checkbox"/> Frequently reassure the person is SAFE and/or YOU will help to provide safety 

Guardrail 10: Look for Areas of Agreement

As a CIT officer, you are likely to receive the fallout of any past experiences the person has had with law enforcement that were negative. There are also times when individuals have experienced situations where they found police helpful.

If positive, you can ask, *“What was helpful to you last time?”*

In the event of a negative experience with police in the past, this is an opportunity to both acknowledge their prior experiences, and offer a new, more positive one.

The view of a person in crisis might be: *“Police officers don’t care about nobody but themselves and they just want to arrest people – put people in jail...keep people in jail.”*

The CIT response would be: *“Yes, you’re correct. “Some” officers are not very sensitive, and I am sorry to say some are not caring, but I am not like that, I care, and I would like to help you. The more you can help me understand what you need, the better.”*

The response changed from ALL officers to SOME.

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Guardrail 10 Look for Areas of Agreement

This may require officers to “rephrase the topic of discussion or point.”

□ View of Person in Crisis:
“Police officers don’t care about nobody but themselves and they just want to arrest people – put people in jail...keep people in jail.”

□ CIT Response:
“It sounds like you have had negative experiences in the past. I’m sorry about that, and I want you to know that I care, and I would like to help you.”

The response changed from ALL officers to SOME.

Guardrail 11: Reassurance & Acknowledgment

Assuming that you have been successful thus far in your attempts to de-escalate the situation and convey empathy to the individual, this is not where the intervention ends. Remember: if the individual is willing to go to the emergency department voluntarily, they do not need to be restrained. Transporting an individual voluntarily is governed by BPD’s Policy 503, *Transportation of Passengers*.

As long as you are with the individual, you need to be reassuring you are there to help, and acknowledging the inherent difficulties for them (i.e., being taken into custody, if necessary).

Slide 22



When in custody:
monitor and be aware of
other officers speaking
as if the person cannot
hear or understand.

Guardrail 11 Reassurance & Acknowledgment

- Reassure
 - Continue your efforts to be supportive (ex: transports)
 - Continue reassuring he/she is safe
- Acknowledge handcuffs or restraints
 - Person’s dislike of “handcuffs”
 - Feelings of being treated like a criminal
 - Handcuffs during transport is a policy requirement
 - Seek ways to minimize embarrassment and/or discomfort

Acknowledge the following:

- a person’s dislike of handcuffs (if the person expresses dislike, “I can understand that. We will try to make it as comfortable and brief as possible’)
- feelings of being treated like a criminal (“you are not in any trouble, you are not being arrested.”)_
- handcuffs during transport is a policy requirement (“these are used to ensure your safety, and mine, and they will be removed once you are in the facility’)
- seek ways to minimize embarrassment and/or discomfort (see question below)

ASK: What are some ways you can minimize embarrassment or discomfort of a person in crisis?

When in custody, monitor and be aware of other officers speaking as if the person cannot hear or understand.

Desired Responses:

- Escort subject transfer in least visible manner (*For example: leading subject to vehicle where the least amount of people might see.*)
- When in custody, monitor and be aware of other officers speaking as if the person cannot hear or understand.
- Keep voice volume down as to not draw attention.

Facilitator Note:

Facilitator should be prepared to discuss the finer points of handcuffs or restraints for transporting someone experiencing a behavioral health crisis. As a matter of protocol, if a person is to be transported for an involuntary evaluation (i.e., EP) then they will be restrained during transport. The presence and procedure of restraints themselves can be escalatory and traumatic, so members will be expected to employ the de-escalation tips in the instructional material (talk the evaluatee through the process, reassure them that the restraints are

	<p>for their safety, answer any questions they may have, tell them exactly what is going to happen next, etc.).</p>
<p>Guardrail 12: Every Person’s Crisis Feelings are DIFFERENT</p> <p>This final guardrail ties together the previous eleven; there are many additional tactics, some nuanced, that are required of the CIT officer.</p> <ul style="list-style-type: none"> • Your uniform may be intimidating and/or contribute to feelings of stress • Background noise can be very disturbing / distracting • Maintaining appropriate distance (safety) is always helpful • Leadership and calmness is essential • Your words must “match your body language <p>ASK: How can you relate each item on the bulleted list on this slide that has been touched upon in the previous Guardrails?</p>	<p>Slide 23</p> <div data-bbox="1003 436 1432 667"> <p>Guardrail 12 Every Person's Crisis Feelings are DIFFERENT</p> <ul style="list-style-type: none"> <input type="checkbox"/> Your uniform may be intimidating and/or contribute to feelings of stress <input type="checkbox"/> Background noise can be very disturbing / distracting (<i>people talking or "voices" or police radio noise</i>) <input type="checkbox"/> Maintaining appropriate distance (safety) is always helpful <input type="checkbox"/> Leadership and calmness is essential <input type="checkbox"/> Your words must "match" your body language </div> <p>Desired Responses:</p> <ul style="list-style-type: none"> • Guardrail 3 • Guardrail 8 • Guardrail 5 • Guardrail 9 • Guardrail 6
<p>Don't Forget...The Four Plays</p> <p>Always keep in mind The Four Plays - the backbone of all of these Guardrails, to be used as much as needed on a given call.</p>	<p>Slide 24</p> <p>Don't Forget... The Four Plays</p> <div data-bbox="987 1276 1432 1453"> </div>
<p>SCENARIO: Facilitated Discussion</p> <p>Patrol officers receive a call for service for a behavioral crisis. Caller states there is a man at the Inner Harbor, near the Amphitheater, who is screaming and yelling that someone is trying to hurt him, but he does not seem to be directing his aggression towards anyone specific. It appears he is referring to someone not on the scene. Patrol officers respond to the call for service, locate the individual, and make attempts to communicate with him</p>	<p>Slide 25</p> <p>SCENARIO</p> <hr/> <p>Listen carefully to the scenario.</p> <p>As a CIT officer, what would you do?</p> <hr/> <p>Facilitated discussion should</p>

<p>that are not successful-he is not able to calm down or respond appropriately.</p> <p>Patrol officers request a CIT officer to respond to the scene. A CIT-trained officer arrives and makes contact with patrol officer. Patrol officer explains that the only thing they have been able to surmise is that the individual is in fear that he is being followed by some sort of government entity. The patrol officer was only gathering this additional information: these thoughts and fears of being followed seems to have coincided around the same time the individual was unable to refill his medication. Officer unable to obtain name of medication....</p> <p>ASK: What would you do as a CIT-trained officer in this situation?</p>	<p>include these desired responses:</p> <ul style="list-style-type: none"> • Introduce self, explain you are a CIT officer, there to help. <i>“I am specially trained to help people in situations just like this one.”</i> • Ask the person’s name • Reflect back-emotional labeling. Allow the person an opportunity to express why he/she is fearful. • Summarize periodically • Slow down, ask the person if you can talk with them to understand what is happening • Ask if there is a person you can call (<i>ex: family</i>) that may be able to help • Provide reasonable concessions (<i>i.e., move to a quieter place, offer a drink or snack</i>) • As you are building rapport, try to ascertain current treatment providers, if any • Ask about medications, where they get them, what they need to get prescription
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<p>III. REVIEW/EVALUATION/CLOSURE</p> <p>1 Sentence Wrap-Up You will have 2 minutes to write 1 sentence that describes the importance of this training, key concepts, and/or an overarching theme. After those 2 minutes, be prepared to share.</p> <p>We’ll go around the room and have each person share</p>	<p>Time</p> <p><i>The facilitator should have all participants share. This could also be done in groups or with partners if time is running out.</i></p> <p>Desired Responses:</p> <ul style="list-style-type: none"> • Responses will vary but should highlight key concepts
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their 1 sentence wrap-up.

What Questions do you have?

and overarching themes taught
in this training.

Slide 26



*The facilitator should answer
questions of participants.*