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|  | BRIDGEPORT POLICE DEPARTMENT | Distribution | General Order Number |
| | POLICY AND PROCEDURE GENERAL ORDER | ALL PERSONNEL | 5.06 |
| | | Original Issue Date | Reissue/Effective Date |
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| Order Title: MENTALLY ILL AND HOMELESS INDIVIDUALS | | Accreditation Standard: | Section |
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| | | Section Title PATROL FUNCTIONS | |
| Rescinds: | | Rebeca Garcia, Chief of Police | |

This General Order is for departmental use only and does not apply in any criminal or civil proceeding. This General Order should not be construed as creation of a higher legal standard of safety or care in an evidentiary sense with respect to third party claims. Violations of this General Order will only form the basis for departmental administrative sanctions. Violations of law will form the basis for civil and criminal sanctions in a recognized judicial setting

I. PURPOSE

The purpose of this General Order is to establish guidelines, policies, and procedures for Bridgeport Police Department members for the handling of persons who, due to mental illness, present a danger to themselves or others and cannot meet their basic needs or ordinary demands of life.

II. POLICY

Mental illness or homelessness is not a crime and does not, in itself, justify or require police intervention. Many mentally ill persons are capable of functioning on their own without danger to themselves or others. When persons appear to be mentally ill, however, the Department's primary concern shall be to protect the mentally ill person and other citizens.

III. DEFINITIONS

Mentally Ill Individual: A person who has a substantial disorder of thought, mood, perception, orientation, or memory that grossly impairs judgment, behavior, capacity to recognize reality, or ability to meet the ordinary demands of life.

Homeless Individual: An individual who lacks a fixed, regular, and adequate nighttime residence or has a primary nighttime residency that is: (1) A supervised publicly or privately-operated shelter designed to provide temporary living accommodations, or (2) A private place not designed for, or ordinarily used as a regular sleeping accommodation for human beings.

IV. PROCEDURES

A. Protective Custody

Connecticut General Statutes Section 17a-503 permits law enforcement officers to take into protective custody individuals who require treatment if the law enforcement officer has reasonable cause to believe that a person is mentally ill, and, who as a result of that mental illness, is a danger to himself or herself or others or gravely disabled, and in need of immediate care and treatment.

B. Recognizing Abnormal Behavior

1. Mental illness is often difficult for even the trained professional to define in a given individual. Officers are not expected to make judgments of mental or emotional disturbances but rather to recognize behavior that is potentially dangerous or destructive to self or others.
2. When Bridgeport officers are confronted with a situation involving a mentally ill individual, the officer should endeavor to gain as much background information about the individual as possible. Some of the signs to help recognize mental illness in a person relate to significant changes in behavior, including:
 - a. Others saying that the person is not “him/herself;”
 - b. They may behave in a way dangerous to themselves or to others;
 - c. They may withdraw into themselves, talking only to themselves;
 - d. Mentally ill persons may show signs of strong and unrelenting fear of persons, places, or things. The fear of people or crowds, for example, may make the individual extremely reclusive or aggressive without apparent provocation.
 - e. They may have sensations that are not based on reality, such as:
 - 1) Visions, strange odors, peculiar tastes or voices
 - 2) Unrealistic ideas or grand thoughts about themselves
 - 3) Believing that they are worthless (extreme depression)
 - 4) Delusions (unrealistic ideas) about the world
 - 5) Exaggerate events that occur
 - 6) Believe the world is more unfriendly than it is
 - 7) Strange losses of memory or not know the time, or where or who they are
3. The types of impaired (abnormal) behavior that are most dangerous are the violent, depress/suicidal, or where physical illness or loss of memory is involved. Impaired behaviors seen most often by officers include the:

- a. Psychopathic personality
 - b. Alcoholic
 - c. Drug addict
 - d. Sex offender
 - e. Mentally retarded
 - f. Mental disorders of old age
4. If the officer observing the conduct of the individual has any doubt as to whether or not the individual is a "person requiring treatment," the officer shall request a Crisis Intervention Trained Officer (CIT).
 5. The CIT officer shall determine if the individual is a "person requiring treatment." If a CIT officer is not available and the officer requires further assistance then the officer shall contact a field supervisor. When the decision is made to convey, the officer observing the conduct will make the conveyance. 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 individual shall not be taken to Booking nor be registered on an arrest card.
 6. Officers shall complete Incident Report along with the Request for Examination form to document the incident.

C. Dealing with the Mentally Ill

Should the officer determine that an individual may be mentally ill and a potential threat to themselves, the officer, or others, or may otherwise require law enforcement intervention; the following responses provide general guidelines. (Officers shall also refer to General Order 7.05, Crisis Intervention Team, for incidents involving individuals with mental or behavioral health problems.)

1. Take steps to calm the situation. Where possible, eliminate emergency lights and sirens, disperse crowds, and assume a quiet non-threatening manner when approaching or conversing, with the individual;
2. Move slowly and do not excite the disturbed individual. Provide reassurance that the police are there to help and that they will be provided with appropriate care;
3. Avoid topics that may agitate the individual and guide the conversation toward subjects that help bring the individual back to reality;

4. Always attempt to be truthful with the individual. If a subject becomes aware of deception, they may withdraw from contact in distrust and may become hypersensitive or retaliate in anger.
5. Officers must be mindful to never jeopardize their safety or the safety of other officers when dealing with the Mentally Ill.
6. In order to enhance communications with juveniles and adults with autism spectrum disorder, cognitive impairment and nonverbal learning disorder, Bridgeport Police Department shall maintain, in any vehicle used by its personnel, a paper or electronic copy, of a communication aid for use in emergencies when verbal communication may be hindered or impossible as developed by the University of Connecticut Center for Excellence in Developmental Disabilities.

D. Accessing Available Community Mental Health Resources

1. Bridgeport employees should be aware of available community mental health resources in the area. A listing of these agencies is kept in the Dispatch Center, and includes:
 - The Connecticut Department of Mental Health and Addiction Services
 - Bridgeport Hospital – 267 Grant Street
 - St. Vincent’s Hospital – 2600 Main Street
 - Greater Bridgeport Mental Health – 1635 Central Avenue
 - Crisis Intervention: (203) 358-8500, 1-800-586-9903
 - Southwest Connecticut Mental Health System - 97 Middle St · (203) 579-7300 Alzheimer’s Safe Return Program: 1-800-272-3900
 - Bridgeport Department of Human Services

E. Conveyance when Presented with a Court Ordered Admission

1. When a court determines that there is probable cause to believe that an individual has “psychiatric disabilities” and is dangerous to himself or herself or others, or gravely disabled, that court may order that such an individual be taken into custody and transported to a general hospital for examination. Under these circumstances, the officer shall take the individual named in the document into protective custody and convey the individual to the appropriate treatment facility for examination.

V. HOMELESS PERSONS

While it is clear that all homeless persons are not mentally ill, it is evident that many persons who are homeless suffer from varying degrees of mental illness and/or substance abuse.

A. Procedure for Homeless Persons

At any time, and for any reason, a Bridgeport officer may approach a homeless person, who has not been observed engaging in any criminal activity, to advise him or her of shelters, services, or assistance, which are currently available. The homeless person may or may not accept the advice or referral and may even walk away from the officer. The homeless person is under no legal obligation to remain and is free to walk away. The sole rationale is to proactively provide referrals to the homeless.

B. Transporting Homeless Persons

Officers may transport homeless persons to homeless shelters when the person accepts such referrals. The homeless person shall be searched for weapons before being transported. Officers transporting a homeless person to any shelter shall comply with the intake procedures of the chosen organization. The name of the intake worker shall be noted on the officer's Incident Report (or CAD.)

C. Arrests

Arrests of all persons, including those defined as homeless, shall comply with all applicable laws and departmental policies and procedures. However, when encountering a homeless person who has committed a misdemeanor law violation (e.g., pan handling, etc.,) where the continued freedom of the individual would not result in disorderly conduct or a more serious offense, officers are encouraged to utilize referral services or other appropriate social service agencies in lieu of a physical arrest. It must be recognized that such referral is contingent on the voluntary agreement of the homeless person to accept such referral. The discretion to make a physical arrest of a person determined to be homeless for misdemeanor violations shall be the responsibility of the individual officer.

VI. TRAINING

- A. All officers shall receive training regarding interactions with persons who have mental or physical disabilities, as well as with persons who are deaf, hard of hearing, or deaf-blind as part of their basic training.
- B. As part of their review training program, each officer shall receive training regarding law enforcement interactions with persons who have mental or physical disabilities, as well as with persons who are deaf, hard of hearing or deaf-blind, in accordance with POSTC mandated training guidelines.