



DE-ESCALATION:

Improve Police Interaction with Individuals who Suffer from Mental Illness

Establish Officer Safety...FIRST!

- ▶ Officers **must** handcuff the subject, per Manual §4/217.36
- ▶ Operate from a position of tactical advantage
- ▶ begin “the process” of de-escalation **AFTER** you establish that there is no **immediate** threat, such as:
 - 415 Suspects
 - Possible Jumpers
 - Barricaded Suspects
 - Mentally Ill Subjects (i.e., Suicide-By-Cop, etc.)

The Basics...

Time

- ▶ Time is on your side
- ▶ There is no need to rush...slow down!
- ▶ It may take time to resolve the situation peacefully...be patient...

Space

- ▶ Give the subject space, yet maintain control
- ▶ Let the subject know that you will respect their space
- ▶ Remove distractions (limit number of officers, turn down radios, clear people from scene)

Background Information (Medications, Diagnosis, Family/Friends, Issues, etc...)

- ▶ Obtain information from the subject, PR, neighbors, relatives, witnesses...
- ▶ Establish one point of contact for the subject (someone to whom he/she responds)
- ▶ Introduce yourself by your first name
- ▶ Ask only one question at a time
 - “Why are you here?”
 - “Do you want to hurt yourself?”
 - “Who do you think you are talking to?” (test the subject’s perception)
 - “I believe that you feel you are hearing voices.”
- ▶ Identify Hooks & Triggers
 - Focus on those things to which the subject responds
 - Avoid those things that aggravate the subject
- ▶ Repeat yourself as necessary to build rapport and influence the subject
- ▶ Display patience and sincerity when speaking to the subject
- ▶ Limit emotionality
- ▶ Don’t make promises you can’t keep - Keep the promises you make (only after subject complies, *for example: Give the subject water AFTER he steps off the ledge, NOT BEFORE*)

IF THE SUBJECT IS TALKING... YOU ARE WINNING!