

	TYPE OF DIRECTIVE LINE PROCEDURE	NUMBER LP-28-18
	SUBJECT MENTALLY ILL PERSONS	EFFECTIVE DATE 07/01/18
	REFERENCE EL-22, CODE OF VIRGINIA	RESCINDS LP-28-16

PURPOSE

To establish procedures for handling mentally ill persons.

DISCUSSION

Division members frequently encounter persons who appear to have a mental illness and, as a result, may cause serious harm to themselves or others, or suffer serious harm due to a lack of capacity to protect themselves or to provide for their basic needs. Members of Henrico County’s Crisis Intervention Team (CIT) can be valuable in assisting members with these individuals. The CIT is a partnership with Henrico Police, Henrico Fire, Henrico Sheriff’s Office, and Henrico Mental Health.

Any health information disclosed to an officer acting under this directive shall not be used for any other purpose and shall not be further disclosed.

Nothing in this directive shall prohibit any officer from initiating lawful arrest procedures whenever appropriate.

PROCEDURES

I. INITIAL RESPONSE

- A. A police officer who encounters a person who appears to have a mental illness and may be in need of emergency evaluation for hospitalization or treatment shall make an effort to have a CIT first responder assist with the citizen in crisis. The CIT first responder shall be used as a consultant, not the reporting officer.
- B. The primary officer shall complete an ICR on all Mental Health calls for service. A CIT Staffing Referral form (HCPD-141) shall also be completed and e-mailed to the Commander of Prevention Services / CIT by the end of his shift if any of the below circumstances exist:
 - 1. The officer repetitively encounters an individual who appears to have a mental illness and one or more of the following exists:
 - a. Risk – Some indication of risk, including a history or risk of serious harm to self or others or substantial inability to care for self but the citizen may not reach the threshold currently for an Emergency Custody Order (ECO);
 - b. Frequent public safety involvement – The citizen frequently calls 911 or has other means of frequently interacting with the Police Division;

MENTALLY ILL PERSONS LP-28-18

- c. Failure to succeed in previous mental health treatment – The citizen has a history of multiple mental health hospitalizations, whether voluntary or involuntary, or refusal or inability to engage in outpatient mental health treatment.
2. If the officer encounters a situation where the mentally ill individual will not be accepted (i.e. at the jail, at a hospital), contact a member of the Prevention Services / CIT Unit.
3. If the call for service is not a mental health call, reclassify and clear normally. All Mental Health calls shall have an ICR completed.
4. Use the email address, Police-CIT@henrico.us, to relay any pertinent information to the CIT Unit and the Services to Aid Recovery (STAR) Teams.
5. For additional assistance regarding mental health calls for service, use the on-call list established for the Prevention Services / CIT Unit, which is maintained by Communications.

II. CRITERIA FOR AN ECO

- A. Per Code of Virginia §37.2-808, the criteria for emergency custody of an adult are met if the officer has probable cause to believe the person:
 1. Has a mental illness and there exists a substantial likelihood that, as a result of that mental illness, the person will, in the near future:
 - a. Cause serious physical harm to himself or others as evidenced by recent behavior causing, attempting, or threatening harm and other relevant information, if any; or
 - b. Suffer serious harm due to his lack of capacity to protect himself from harm or to provide for his basic human needs;
 2. Is in need of hospitalization or treatment; and
 3. Is unwilling to volunteer or is incapable of volunteering for hospitalization or treatment.
- B. Per Code of Virginia §16.1-340, the criteria for emergency custody of a minor are met if:
 1. Because of mental illness, the minor:
 - a. Presents a serious danger to himself or others to the extent that severe or irreparable injury is likely to result, as evidenced by recent acts or threats; or
 - b. Is experiencing a serious deterioration of his ability to care for himself in a developmentally age-appropriate manner, as evidenced by delusory

MENTALLY ILL PERSONS LP-28-18

thinking or by a significant impairment of functioning in hydration, nutrition, self-protection, or self-control; and

2. The minor is in need of compulsory treatment for a mental illness and is reasonably likely to benefit from the proposed treatment.

NOTE: Under Code of Virginia §16.1-338 a minor younger than 14 years of age may be admitted to a willing mental health facility for inpatient treatment upon application and with the consent of a parent. A minor 14 years of age or older may be admitted to a willing mental health facility for inpatient treatment upon the joint application and consent of the minor and the minor's parent.

- C. Under Code of Virginia, §37.2-808, a law enforcement officer who, based upon his observation or the reliable reports of others, has probable cause to believe that a person meets the criteria for emergency custody may take that person into custody and transport that person to an appropriate location to assess the need for hospitalization or treatment without prior authorization.

While mental health clinicians may assist the officer in making a decision, only an officer or a magistrate has the authority to issue an ECO. Consultation with mental health is strongly encouraged as they may have additional information needed for an evaluation.

III. EXECUTION OF AN ECO

- A. Once a decision is made to place a person under an ECO, the officer shall notify mental health immediately and consult with mental health on an appropriate location for an evaluation. The subject may be kept at their current location or transported to one of the following locations:

1. Parham Doctors' Hospital (PDH) Crisis Receiving Center
7700 East Parham Rd
Henrico, VA 23294 –If an ECO is brought to this location, Officers shall contact Mental Health Emergency Services at 804-727-8484 and the CRC Officer at 747-5780 to allow the officer to inform the hospital and get an appropriate room ready.
2. Henrico Mental Health
10299 Woodman Rd
Glen Allen, VA 23060
3. Saint Mary's Hospital – Emergency Room
5801 Bremo Rd
Richmond, VA 23226
4. An emergency facility as dictated by the patient's medical status. If the patient status requires transport to a facility outside of Henrico County, officers shall maintain custody of that subject and contact the local Community Services Board for that jurisdiction and they will perform the evaluation, not HMH. Officers shall follow all applicable hospital policies and procedures.

MENTALLY ILL PERSONS LP-28-18

5. Other locations may be agreed upon on a case-by-case basis.
- B. Code of Virginia §37.2-808, states that “Nothing herein shall preclude a law enforcement officer or alternative transportation provider from obtaining emergency medical treatment or further medical evaluation at any time for a person in his custody.”

It is possible at some point during the evaluation, a clinician or Medical Doctor may request a medical evaluation of the patient prior to conclusion of the evaluation.

- C. Code of Virginia §37.2-808 states:
1. The period of custody shall not exceed eight hours from the time the officer takes the person into custody.
 2. Prior to the expiration of the eight hour time limit, consultation shall occur with Henrico Mental Health who will contact the applicable state hospital for assistance in bed placement.
 3. The person shall remain in protective custody until deemed safe to the citizen and the public or until a Temporary Detention Order (TDO) is issued.
 4. As soon as reasonably possible, the Explanation of Emergency Custody Procedures (Form DC-4050) shall be given to the person under ECO. This is a state form and copies are available at the CRC and all three stations.

D. Medical ECO and TDO

1. Code of Virginia §37.2-1103 states: upon the opinion of a licensed physician that an adult person is incapable of making an informed decision as a result of a physical injury or illness and the medical standard of care indicates that testing, observation, and treatment are necessary to prevent imminent and irreversible harm, a magistrate may issue, for good cause shown, an emergency custody order for the adult person to be taken into custody and transported to a hospital emergency room for testing, observation or treatment.

The code also states the person shall remain in custody until the medical evaluation is performed, but in no event shall the period of custody exceed four hours. If during the medical evaluation, probable cause regarding the above is developed and given to the magistrate, a medical TDO pursuant to §37.2-1104 will be issued.

2. After a physician has petitioned for an ECO and the magistrate has issued one, officers shall take custody of the person and assist in transporting them to the listed hospital. Henrico Fire may be called to facilitate the transport; however, officers shall maintain custody during the transport. Officers shall continue to maintain custody until either the medical TDO is issued and the patient is admitted, the patient is treated and released, or the four hour time limit expires.

IV. CRISIS RECEIVING CENTER (CRC)

- A. The CRC is based at Parham Doctors' Hospital (PDH) Campus Emergency Department and is open seven days a week, 365 days a year, from 8:00 a.m. to 2:00 am. (804)747-5780.
- B. The CRC adheres to principles of recovery, which emphasizes dignity, respect, trauma informed care, and consumer and family choice. Individuals and their family will actively participate in the treatment choices and will be informed throughout the process.
- C. Referrals to the CRC are accessed by police officers through a call to the Mental Health Emergency Services Program at (804) 727-8484. The CRC is not a drop off center for evaluation. Only those subjects under an ECO by law enforcement should be brought to the CRC. The CRC is for subjects under an ECO for involuntary committals.

D. Henrico County Police Responsibilities

- 1. Safety should be the first priority when making an ECO, voluntary, or transportation decision. Before making this decision, officers should look at the subject's history and consult with Mental Health staff, Fire, Sheriff's deputies, and hospital staff. Officers should be mindful of the subject's previous histories of mental illness, violence, and/or calls for service.

If the person wishes to be evaluated on a voluntary basis, family or friends may transport the person to the requested hospital. Rescue / EMS should only be used as a last resort or if there are extenuating circumstances.

- 2. When someone is under an ECO, officers shall contact Mental Health Emergency Services and provide them with the following:
 - a. Probable cause for the reason subject is placed under an ECO (i.e. for their safety or the safety of others (in the near to immediate future));
 - b. That an ECO is being issued; and
 - c. The name, date of birth, and any other available information regarding the subject.
 - d. If the CRC is available, give an estimated time of arrival to the clinician.

Subjects should not be brought to the CRC without consultation with Mental Health.

- 3. Officers will enter the CRC through the Emergency Medical Services entrance and inform the CRC security personnel (employed by PDH) of their arrival.
- 4. Officers will discuss the situation with the CRC security personnel and the Mental Health clinician to evaluate the CRC's ability to provide the level of security necessary for the individual. This decision is based on their evaluation of the need,

MENTALLY ILL PERSONS LP-28-18

general activity level of the facility at that time, and any other factors they deem relevant.

- a. Upon favorable determination of PDH's ability to provide necessary security, the CRC officer will accept transfer of custody and the officer who initiated the ECO will complete the CRC Supplemental form through ICR Builder. The CRC officer shall be responsible for updating the supplemental form in ICR Builder when the subject is released from the CRC. This form shall include the date and time of execution for any law enforcement officer initiated assessment. All supplemental forms shall be reviewed and analyzed for quality assurance by the Police Crisis Intervention Team Unit. Communication and consultation between the primary officer and CRC officer should happen to ensure all the required paperwork is properly completed and submitted.
 - b. Upon determination that any factor, or combination of factors, indicates the level of security required may exceed the facility's ability at that time, the CRC security personnel will advise the officer of those factors and request he maintain custody of the subject until such time as the factors impeding security are resolved or the ECO concludes.
5. All officers shall search subjects coming into the CRC and the CRC officer will search during transfer of custody.
 6. All officers shall secure the subject's belongings, to include medications, purses, wallets, etc., in a hospital bag and maintain custody until the transfer of custody is complete. Once complete, the officer shall turn the belongings into the CRC officer. Officers shall ensure the Explanation of Emergency Custody Procedures (Form DC-4050) has been given to the person under ECO.
 7. While maintaining custody of the subject, all officers shall ensure the subject is in their sight at all times.
 - a. There will be no transfer of custody to PDH after 1:30a.m.
 - b. If there are subjects in custody, Patrol officers will respond by 1:30 a.m. to accept custody.
 8. If a person leaves the CRC during an ECO, immediately put out a BOLO and request for additional officers to respond to assist with searching the hospital. Notify Patrol supervision and the Commander, Prevention Services immediately.

V. EMERGENCY EVALUATION OUTCOMES

Once an ECO is issued, there are three possible outcomes:

A. Temporary Detention is Recommended

1. After consultation with Mental Health, if the clinician recommends a TDO, the officer shall take the subject into custody and take them to an agreed upon

MENTALLY ILL PERSONS LP-28-18

location to await the TDO.

2. The evaluator will recommend to the magistrate that a Temporary Detention Order (TDO) be issued. The magistrate will notify the Sheriff's Office upon issuance of the TDO. The Sheriff's Office is responsible for serving the TDO and transporting the person.
3. The officer shall maintain custody of the person pending arrival of Sheriff's Deputies.
4. In situations where the Sheriff's Office is unable to make a timely response or if the magistrate so orders, an officer may serve the TDO and transport the person to the specified facility. Any transportation outside of Henrico County's jurisdiction shall be approved by a supervisor.

B. Voluntary Hospitalization is Recommended

The person wishes to be hospitalized voluntarily. Family members or friends should be encouraged to make the transport; however, the officer can transport the subject if no other safe option is available.

C. Hospitalization is Not Recommended

1. When the mental health evaluator recommends that the person not be subject to temporary detention, the Henrico Mental Health evaluator (MHE) will notify the officer who initiated the ECO of the recommendation if that officer is present for the evaluation. If the initiating officer is not present, MHE will notify the officer who has accepted custody of the individual of its recommendation not to pursue a TDO. The officer who has accepted custody will make all reasonable efforts to contact the officer who originally initiated the ECO to communicate the MHE's recommendation within an hour. All efforts to contact the officer should be documented in the ICR.
2. Once informed of the MHE's recommendation not pursue a TDO and if the initiating officer believes that a TDO should be pursued, the initiating officer will contact a member of the CIT Unit to consult regarding next steps.
3. The initiating officer, after consulting with a member of the CIT Unit, is responsible for notifying the MHE of their decision to concur or oppose with the recommendation of the MHE.
4. If the initiating officer disagrees with the MHE's recommendation, the MHE will notify the magistrate the findings of their evaluation, facilitate communication between the initiating officer and the magistrate and make arrangements for the initiating officer to communicate with the magistrate before the expiration of the period of emergency custody.

MENTALLY ILL PERSONS LP-28-18

5. The individual will remain in custody until the magistrate has made a determination regarding issuance of a TDO.
6. In situations where either (a) the MHE does not recommend a TDO and that recommendation is not contested by the initiating officer or (b) the magistrate declines to issue a TDO, the officer who has custody of the individual shall return the individual to his original or other safe location.

VI. OUTSTANDING TEMPORARY DETENTION ORDERS

In those instances when an officer locates a subject for whom a Temporary Detention Order is outstanding, the officer shall detain the subject until the Sheriff's Office responds to serve the order and provide transportation.

VII. Firearms and F Code

A. Seizure of weapons:

For weapons seized during mental health calls for service, officers shall follow Evidence and Logistics Procedures outlined in RP-02.

B. Prohibition on Purchase, Possession, or Transport of Firearms

Code of Virginia §18.2-308.1:3 prohibits any person, who has been (i) involuntarily admitted to a facility or ordered to mandatory outpatient treatment *pursuant to §19.2-169.2*, (ii) *involuntarily admitted to a facility or ordered to mandatory outpatient treatment as the result of a commitment hearing pursuant to §37.2-814*, (iii) *involuntarily admitted to a facility or ordered to mandatory outpatient treatment as a minor 14 years of age or older as the result of a commitment hearing*, (iv) the subject of a TDO and subsequently agreed to voluntary admission, *or (v) who, as a minor 14 years of age or older, was the subject of a temporary detention order and subsequently agreed to voluntary admission* from purchasing, possessing or transporting firearms.

Issuance of an ECO or TDO, without subsequent commitment, is insufficient to bar a person from purchasing, possessing or transporting a firearm.

C. CCRE - "F Code"

Information concerning a person's prior commitment history will appear as "involuntarily commitment" on a person's criminal record (CCRE) along with the date of commitment. Officers may obtain this information by contacting the Criminal Records Unit and requesting an "F Code" be run on the subject.

D. Criminal Charges

Under the Code of Virginia, § 18.2-308.1:3 makes it a Class 1 Misdemeanor for a person meeting the criteria outlined in section VII. B to purchase, possess or transport a firearm. If an officer has reasonable articulable suspicion that a person meets these criteria and that person is in possession of a firearm, officers shall conduct an F Code CCRE check

MENTALLY ILL PERSONS LP-28-18

before placing charges. Officers placing charges pursuant to this code section shall maintain a copy of the CCRE report for court.

E. Weapons Release

The release of firearms seized shall be governed by SOP EL-22.

1. If during a call for service an officer takes possession of a firearm belonging to a person subsequently subject to a TDO, the officer shall conduct an F Code CCRE check prior to releasing the firearm to the subject.
2. In the absence of reliable evidence showing that the person was not admitted to outpatient treatment, the Division may hold the firearm 90 days to ensure sufficient time has passed for the CCRE to accurately reflect the outcome of commitment proceedings.
3. The Division will release the firearm to a family member or other lawful assignee that is legally able to possess a firearm in conjunction with procedures set forth in SOP EL-22.

By Order of:

Humberto I. Cardounel, Jr.
Chief of Police