



# Annual Report 2022



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# SUMMARY OF 2022 OPERATIONS

The conclusion of 2022 marked yet another active year of oversight for the Syracuse Citizen Review Board. The following information provides a summary of the CRB's operational highlights in 2022. Over the course of the year, the CRB received a total of 72 complaints and effectively handled 63 cases. Out of these, 3 cases advanced to a hearing, and 47 cases concluded with a no-hearing vote by the Board. Moreover, 13 cases were determined to be outside the CRB's jurisdiction.

- 72 complaints received.
- 3 hearings held.

## HEARINGS & DISCIPLINARY RECOMMENDATIONS

Once the full CRB votes to send a case to a panel hearing, a panel is composed of three members of the CRB (one mayoral appointee, one district councilor appointee, and one at-large councilors' appointee) and the hearing is typically held within two to three weeks based on the availability of the complainant and witnesses.

- 3 hearings were held resulting in the following outcomes.
  - 3 Sustained findings by the hearing panel for allegations of Excessive Force and Demeanor.

\*Complaints have multiple allegations \*

- A sustained finding means that the panel found that there was substantial evidence that the alleged misconduct did occur.

## SPD DISCIPLINARY ACTION RATE:

- The disciplinary action rate (or rate of agreement) is the rate at which the Chief of Police imposes discipline when the CRB recommends it. Local Law 1 of 2011 requires the CRB to report to the public the number of times that the Chief of Police imposed disciplinary sanctions when the CRB sustained an allegation against an officer and recommended discipline. The CRB received 0 responses from the Chief of Police to the 3 hearings in which a CRB held.
- Chief Buckner agreed with the CRB in cases where the alleged allegations were determined to be lacking sufficient evidence and exoneration. The CRB received a total of 0 response letters from the Chief for cases reviewed in 2022

## MISSION & OBJECTIVES

The purpose of the Citizen Review Board, all of whose members are volunteers, is to provide an open, independent, and impartial review of allegations of misconduct by members of the Syracuse Police Department; to assess the validity of those allegations through the investigation and hearing of cases; to recommend disciplinary sanctions where warranted; and to make recommendations on Syracuse police policies, practices, and procedures.

In fulfillment of its legislative purpose and mission, the Board is committed to:

- Creating an institution that encourages citizens to feel welcome in filing a complaint when they believe that they have been subject to police misconduct.
- Making the public aware of the CRB's existence and process through ongoing community outreach events and coverage by local media.
- Completing investigations and reviews of complaints in a thorough, yet timely fashion.
- Remaining unbiased, impartial, objective, and fair in the investigation, evaluation, and hearing of complaints.
- Engaging in community dialog that encourages citizen input with the CRB.
- Respecting the rights of complainants and subject officers.
- Upholding the integrity and purpose of the CRB's enabling legislation.
- Reporting to the Mayor, the Common Council, the Chief of Police, and the public any patterns or practices of police misconduct discovered during the course of investigation and review of complaints; and
- Operating in an open and transparent manner to the extent permitted by applicable municipal and state laws, regulations, and ordinances.

# BOARD MEMBERS & TERMS

The Syracuse CRB is composed of a 10-member board, all serving staggered three-year terms as unpaid volunteers. These dedicated individuals are appointed by various entities across the city and undergo confirmation by the Syracuse City Council. Residency within the city is a requirement unless exceptions are granted through legislative action, and individuals holding public office or employed by the City of Syracuse are ineligible for board membership.

Board members devote an average of ten hours per month to CRB matters, encompassing attendance at monthly meetings, preparation for and participation in panel hearings, training sessions, and active involvement in community outreach initiatives. The commitment also includes the attendance of a minimum of three community outreach events annually, as mandated by the 2016 ordinance revision.

For those interested in learning more about the Board members, biographies of each volunteer can be accessed on the CRB website at [www.syr.gov.net/crb/Members.aspx](http://www.syr.gov.net/crb/Members.aspx).

## Members of the Syracuse Citizen Review Board

As of December 31, 2022

Mayoral Appointees
<b>Mr. Joseph Favata- term expires December 31, 2022</b>
<b>Mr. Jose Marrero - term expires December 31, 2023</b>
<b>Ms. Mae Carter - term expires December 31, 2023</b>

District Councilor Appointees
<b>Mr. Richard Levy - 1st District - term expires December 31, 2023</b>
<b>Mr. Harry Pratt- 2nd District – term expires December 31, 2022</b>
<b>Ms. Lori Nilsson Board Chair- 3rd District - term expires December 31, 2024</b>
<b>Ms. Ruth Kutz, - 4th District - term expires December 31, 2022</b>
<b>Ms. Cynthia Brunson- 5th District - term expires December 31, 2022</b>

At-Large Councilor Appointees
<b>Mr. Clifford Ryans - term expires December 31, 2022</b>
<b>Mr. Jah-Quan Bey-Wright, - term expires December 31, 2024</b>
<b>Ms. Hatisha Holmes, Vice Chair – term expires December 31, 2022</b>

Board members shall serve staggered three (3) year terms and maybe reappointed for another three (3) year term, after which, however the member shall not be reappointed for at-least one (1) year. If a person is appointed to complete an unexpired term of a former Board member, the newly appointed Board member shall be eligible to be appointed to serve two (2) successive three (3) year terms.

## FILING A COMPLAINT WITH THE CRB

The Syracuse CRB accepts complaints against members of the Syracuse Police Department (SPD) that involve allegations of misconduct potentially violating SPD rules and regulations, as well as state, local, and/or federal laws. The CRB considers complaints regarding active misconduct, such as excessive force, constitutional violations, harassment, racial or gender bias, poor demeanor, search and seizure violations, theft or damage to property, untruthfulness, and false arrest. Additionally, it addresses passive misconduct, including failure to respond, failure to intercede, or refusal to accept a complaint.

The filing process for a complaint with the Syracuse CRB is accessible to any member of the public, regardless of residency in the City of Syracuse or U.S. citizenship. Complaints can be submitted in various ways, including walking into the CRB office at City Hall Commons (201 East Washington Street, Suite 705) to complete a form, contacting the CRB office for the mailing of a complaint form, downloading the form from the CRB website, or requesting a home visit if needed. Completed complaint forms can be hand-delivered or sent by mail to the CRB office. For further information, the CRB website is [www.syr.gov.net/CRB.aspx](http://www.syr.gov.net/CRB.aspx), and the CRB office can be reached by telephone at 315-448-8750 or via email at [crb@syr.gov.net](mailto:crb@syr.gov.net).

## PUBLIC MEETINGS

The Syracuse CRB conducts its monthly meetings on the first Thursday evening at 5:30 PM in the Common Council chambers at City Hall. The meeting schedule is conveniently accessible at local libraries, on the CRB website, and on the calendar of the City's main webpage. These sessions play a crucial role in shaping and refining CRB policies and procedures, emphasizing transparency, openness, and accountability. The agenda typically includes voting on items requiring Board approval, presentations by the Chairman for the Board's consideration, a comprehensive report on the CRB's monthly activities presented by the Administrator, committee reports, and a dedicated time for public comment.

Following the public comment period, the Board moves into a confidential Executive Session to deliberate and vote on whether to advance investigated complaints to a hearing. We strongly encourage community members to attend these meetings, participate in the public comment period, and actively contribute to the ongoing initiatives of the CRB.



## OUTREACH

The CRB legislation requires the agency to conduct at least five outreach events annually, one in each Council District.

Name & Time	Host	CC District	Date
Duck Race to End Racism	InterFaith Works	1st	6/11/2022
Family Fun Fair	Black Health	5th	8/10/2022
Neighborhood Power Walk	City of Syracuse	2nd	9/15/2022
Safe Surrender	Victory Temple	1st	8/17/2022
Harvest Festival Community Day	Prince of Peace	3rd	10/31/2022
Gratitude Networking Event	Syracuse Community Connections	4th	11/21/2022
World AIDS Day	FACES and JEWELS	4th	12/1/2022

## OPERATIONS

Throughout the calendar year of 2022, from January 1 to December 31, the Syracuse CRB actively conducted 12 monthly business meetings, all of which were open to the public. These meetings served as crucial platforms for addressing community concerns, developing policies, and enhancing transparency in the oversight process. Over the course of the year, the CRB received a total of 72 complaints from community members, indicating significant public engagement. Notably, the board dedicated substantial efforts to thoroughly processing these cases, successfully reviewing and resolving 63 cases during the same period. This commitment underscores the CRB's dedication to addressing community grievances and promoting accountability within the Syracuse Police Department.

## BOARD TRAINING AND DEVELOPMENT

The Syracuse CRB acknowledges the vital importance of well-trained board members in facilitating effective oversight and building community trust. Our extensive training program is crafted to provide board members with the knowledge, skills, and ethical principles essential for their critical responsibilities. Covering a variety of topics, the training curriculum includes online Board Development sessions. Additionally, on August 16, 2022, board members participated in the Policing Regulation and Oversight: Trends, Problems, and Solutions training.



# 2022 ANNUAL POLICY & TRAINING RECOMMENDATIONS

The Annual Report from the CRB includes recommendations addressing police policy, training, and procedures, fostering constructive dialogue. These recommendations are transmitted to the mayor's office, the Common Council, and the Chief of Police, initiating discussions aimed at improving specific aspects of the Syracuse Police Department. We are confident that adopting these recommendations would not only serve the public interest but also enhance the well-being of the City's police officers. The CRB asserts these recommendations under the authority granted by Section Three, Paragraph (6) of the CRB legislation.

## 2022 POLICY RECOMMENDATIONS

### **Enhancements to Body Worn Camera Policy (BWC):**

Building upon our commitment to accountability and transparency, the CRB recommends further improvements to the Body Worn Camera (BWC) policy:

1. **Real-time Reporting:** Advocate for the integration of real-time reporting features in BWC technology, enabling officers to submit reports concurrently with video footage. This ensures immediate documentation without influencing the independent evidentiary value of their accounts.
2. **Standardized Activation Procedures:** Propose the establishment of standardized activation procedures for BWCs, ensuring consistent and clear guidelines for officers in various scenarios. This includes specific activation protocols during traffic stops, public interactions, and emergency responses.
3. **Community Input Sessions:** Strengthen community engagement by conducting regular input sessions to gather public opinions on BWC policies. This inclusive approach ensures that the community's concerns and expectations are considered in the development and revision of BWC policies.

### **Civil Rights Principles on Body Worn Cameras:**

4. **Community Oversight Board:** Advocate for the creation of a Community Oversight Board to actively participate in the review and development of BWC policies, fostering a collaborative approach between law enforcement and the community.
5. **Comprehensive Training:** Emphasize comprehensive training for officers on the ethical and respectful use of BWCs, with a focus on de-escalation techniques and cultural sensitivity to maintain positive community interactions.

**Integration of Advanced Technologies:** Explore and recommend the integration of advanced technologies, such as artificial intelligence and machine learning, into BWC systems. These technologies can assist in automating the analysis of footage, ensuring timely and accurate reviews while upholding privacy standards.

### **Expanding Mental Health Response Policies:**

In line with our commitment to improving interactions with individuals affected by mental illness, the CRB recommends:

6. **Crisis Intervention Team (CIT) Expansion:** Advocate for the expansion of Crisis Intervention Team (CIT) training for all officers to enhance their ability to handle situations involving individuals experiencing a mental health crisis.

7. Community Mental Health Partnerships: Strengthen partnerships with local mental health organizations to ensure officers have access to resources and support when responding to mental health-related incidents.
8. Reevaluation of School Resource Officer (SRO) Policies:

Building upon previous recommendations, the CRB suggests further measures for School Resource Officer (SRO) policies:

9. Annual Training Requirements: Recommend the establishment of annual training requirements for SROs, covering topics such as adolescent development, conflict resolution, and cultural competence.
10. Community Involvement in Selection: Reinforce the involvement of the Syracuse City School District in the selection process of SROs, ensuring officers placed in educational settings possess the necessary interpersonal skills and training.

These recommendations aim to continually improve policies, promote community engagement, and uphold the values of transparency and accountability within the Syracuse Police Department.

## **PREVIOUS POLICY RECOMMENDATIONS FROM 2012 THROUGH 2017 ARE RE-AFFIRMED IN PART OR WHOLE WITH SHORT SUMMARY**

### **Comprehensive Use of Force Policy:**

Reaffirming the importance of a modern Use of Force Policy, the CRB suggests an update based on national best practices and DOJ guidelines. The policy should include:

- Clear delineation of all force options, including lethal and less-lethal weapons.
- Precise definitions of terms like imminent threat, de-escalation, reportable force, and levels of subject resistance.
- Emphasis on limitations of impact weapons and respiratory restraints.
- Incorporation of a "Duty to Intervene" and "Duty to Report" policy.
- Prohibition on firing at or from a moving vehicle when it constitutes the only threat.

11. Non-Retaliation Clause in Complaint Procedures: Recommendation for the inclusion of a non-retaliation clause in SPD's Complaint Procedures, ensuring protection for individuals filing or cooperating with complaints against SPD members.
12. High-Risk Traffic Stops Training: Advocacy for in-service training on procedures for high-risk traffic stops, enhancing officers' skills in conducting felony stops and identifying conditions requiring these procedures.
13. Policy on Reducing Charges for Cooperation: Reiteration of the importance of adherence to SPD procedures regarding the reduction of criminal charges in exchange for cooperation, emphasizing the need for involvement and approval from the District Attorney's office.
14. Use of Police Vehicles in Foot or Bicycle Pursuits: Proposal for the development of a policy outlining the use of police vehicles during foot or bicycle pursuits to prevent allegations of inappropriate vehicle use in these situations.
15. Disciplinary Matrix Implementation: Recommendation for the creation and implementation of a disciplinary matrix to bring consistency and predictability to the department's disciplinary process, categorizing violations into severity levels.
16. Immediate Retrieval of Video from COPS Platform: Advocacy for a policy to immediately retrieve and secure video from the COPS Platform or nearby private surveillance cameras in use-of-force incidents or upon receiving complaints against an officer.

17. Extended Availability of COPS Platform Videos: Suggestion to extend the timeframe that COPS Platform camera videos are available, increasing the likelihood of their availability for complaint investigations.
18. Recorded Interviews and Police Radio Transmissions: Encouragement for the routine recording of interviews with subject officers and the acquisition of police radio transmissions as part of internal affairs investigations.
19. Seatbelts and Cameras in Police Transport Vans: Request for the installation of seatbelts and audio-video recording capabilities in the rear compartment of police transport vans to enhance safety and accountability.
20. Dashboard Cameras and Audio Mics in Patrol Vehicles: Advocacy for the purchase and installation of dashboard cameras and audio mics in all SPD patrol vehicles, integrating them with the body camera system for comprehensive coverage.
21. Eyewitness Identifications Policy: Inclusion of a policy outlining proper procedures for conducting eyewitness identifications, covering photo lineups, live lineups, show-up identifications, and field view identifications.
22. Securing Entryways following Forced Entry: Recommendation for SPD to adopt a policy, similar to DPW board-up crews, to ensure security following a forced entry.
23. Provision of Property Receipts for Seized Currency: Proposal to make the provision of property receipts for seized currency mandatory at the point of seizure, ensuring transparency and accountability.

These recommendations are presented under the authority granted by Section Three, Paragraph (6) of the CRB legislation, with the aim of fostering constructive dialogue and contributing to the continuous improvement of the Syracuse Police Department.

## CASE SUMMARIES OF SUSTAINED FINDINGS

Case Number	Allegation	Allegation 2	Allegation 3	Response From Chief
Case 1	Excessive Force- <b>Sustained</b>	Demeanor- <b>Sustained</b>		No
Case 2	Excessive Force- <b>Sustained</b>	Demeanor- <b>Sustained</b>		No
Case 3	Demeanor- <b>Sustained</b>	Excessive Force- <b>Exonerated</b>	Excessive Force- <b>Sustained</b>	No

CRB adjudication decisions include the following:

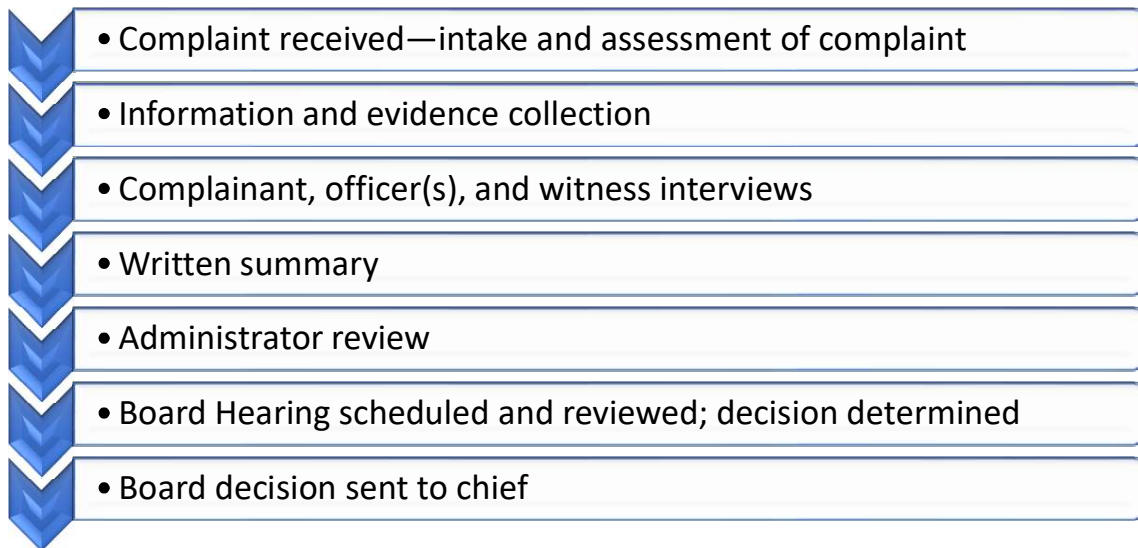
- **Unfounded:** The review or investigation shows that the act or acts complained of did not occur or were misconstrued.
- **Exonerated:** The acts that provide the basis for the complaint occurred, but the review or the investigation shows such acts were lawful or proper.
- **Sustained:** The review or investigation discloses sufficient facts to prove the allegation(s) made in the complaint.
- **Not sustained:** The review or the investigation fails to disclose sufficient facts to prove or disprove the allegation(s).
- **Insufficient Evidence:** The evidence fails to meet the burden of proof and is inadequate to prove the allegation(s).

# BOARD HEARINGS AND ADJUDICATION

- Upon completion of an investigation, CRB Administrator or Private Investigator prepares a detailed investigative report containing recommended adjudications for each allegation and recommended discipline. Once the Administrator approves the investigation, the board reviews the investigative findings in an executive session. Complainants and subject officers are notified of the date of the meeting regarding their complaint, and both complainant and officer(s) involved may be present during the executive session. During the board’s meetings, each scheduled case is reviewed and openly discussed between board members and investigative staff. The board can vote to accept staff recommendations or to assign a different finding to a complaint.

Figure 1 provides a graphical summary of the investigation and adjudication process.

**Figure 1. Summary of the Citizen Review Board Investigation and Adjudication Process**



# BUDGET

## Citizens Review Board 01.10500

	<b>FY21 Actual</b>	<b>FY22 Adopted</b>	<b>FY22 Projected</b>	<b>FY23 Adopted</b>
<b>Personal Services</b>				
510100 Salaries	101,681	102,460	99,353	205,673
<b>Total Personal Services</b>	<b>101,681</b>	<b>102,460</b>	<b>99,353</b>	<b>205,673</b>
<b>Contractual &amp; Other Expenses</b>				
540300 Office Supplies	1,566	2,600	2,350	2,650
540500 Operating Supplies & Expenses	553	5,375	1,724	5,100
541500 Professional Services	20,215	23,450	23,000	47,450
541600 Travel, Training & Development	2,406	4,065	2,865	4,065
<b>Total Contractual &amp; Other Expenses</b>	<b>24,741</b>	<b>35,490</b>	<b>29,939</b>	<b>59,265</b>
<b>TOTAL:</b>	<b>126,422</b>	<b>137,950</b>	<b>129,292</b>	<b>264,938</b>

### 2022 Proposed Positions:

Program Coordinator-Citizen Review Board  
Data Analyst  
Community Engagement Specialist  
Legal Secretary I

### 2022 Approved Positions:

Program Coordinator-Citizen Review Board  
Data Analyst  
Community Engagement Specialist

# SUMMARY OF CASES 2022

## 2022 Totals

Total Complaints Received during 2022:   72  

The number of cases processed and closed by the Board during 2022:   63  

The number of complaints processed and not sent to a panel hearing during 2022:   47  

The number of complaints processed and closed for lacking jurisdiction:   13  

The number of cases that successfully were routed to conciliation:   0  

The number of complainants who initiated extended contact with the CRB but did not follow through with a formal signed complaint:   31  

The number of complaints in which the Board recommended that the City provide restitution to the complainant and type of restitution recommended:   0  

The number of complainants who filed a Notice of Claim against the City of Syracuse while their complaint was being considered by the Board:   6  

## Hearing outcomes

Panel hearings scheduled:   3  

Panel hearings held:   3  

Panel hearings resulting in disciplinary recommendations from CRB:   3  

Panel hearings resulting in no disciplinary recommendations from CRB:   2

# CATEGORIES OF COMPLAINTS RECEIVED BY THE CRB DURING 2022

## Categories of Complaints Received by the CRB during 2022\* Number & Percent of Annual Intake

Demeanor	Violation of Rights	Illegal Eviction	Tempering	Failure to Act
9	1	1	1	17

Racial Slur	Unsatisfactory Performance	Illegal Eviction	Drug Use	Racial Profiling
		1		2

Untruthfulness	Harassment	Conduct	Unnecessary Force	Excessive Force	Illegal Search
3	6	7	1	13	5

Unsatisfactory Performance	False Arrest	Customer Service	Improper Search	Property Damage	False Accusation
	8		1	1	1

\*Some individual complaints include multiple allegations

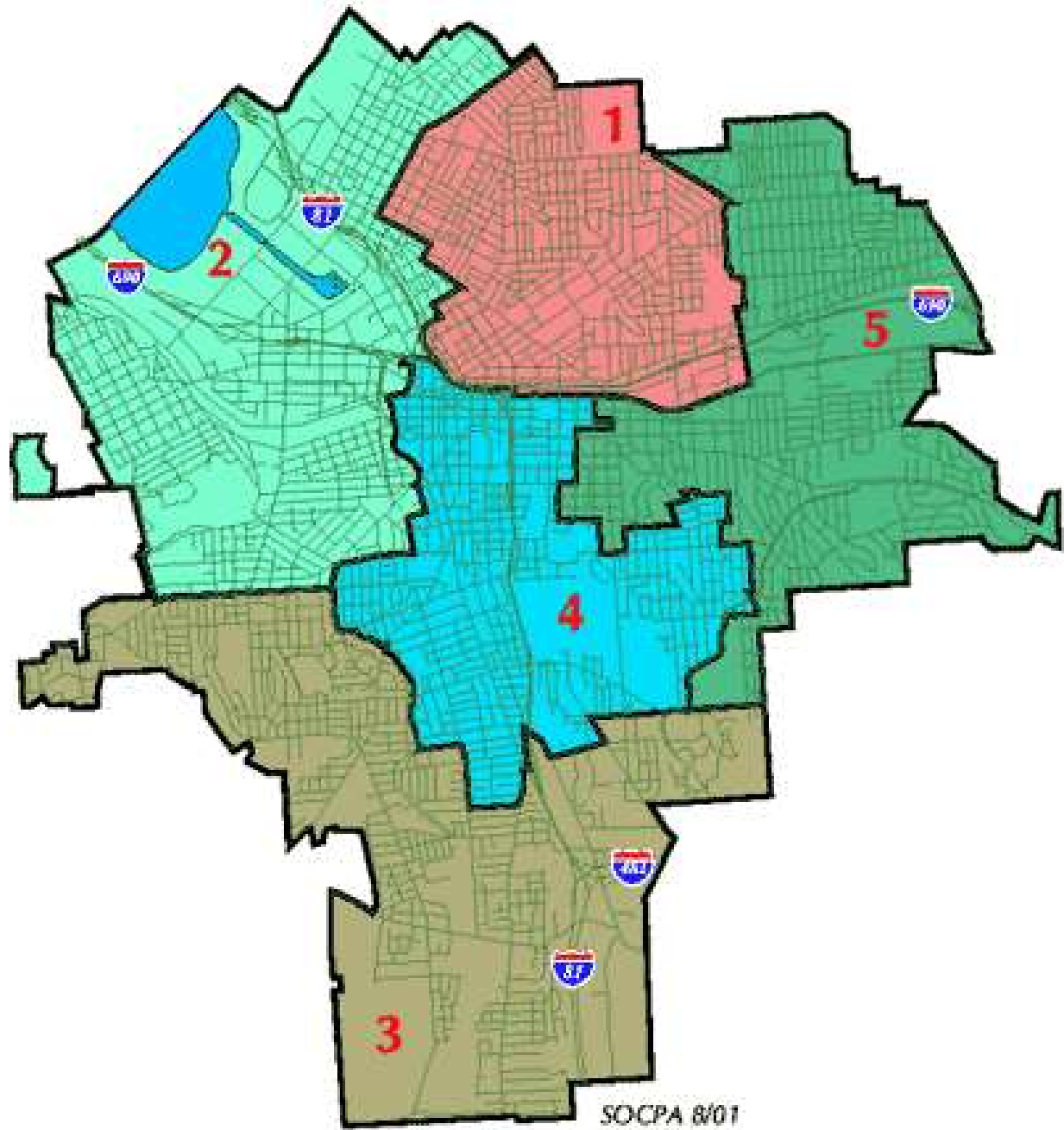
\*\*Typically, not discovered until after a complaint is filed and police reports have been acquired.

## Complaints Received per Common Council District for 2022

\*See the following page for a map of the Common Council Districts



# CITY OF SYRACUSE COMMON COUNCIL DISTRICTS



# COMPLAINANT DEMOGRAPHICS FOR ALL COMPLAINTS RECEIVED IN 2022

Ethnicity	#	% of city population*
<b>*Black</b>	45	76%
<b>*White</b>	3	5%
<b>*Latino</b>	2	3%
<b>Asian</b>	1	2%
<b>Other</b>	0	0%
<b>Biracial</b>	0	0%
<b>Unknown</b>	8	14%
<b>Total</b>	59	100%

\*Based on 2010 census

Sex	#	% of city population*
<b>Male</b>	34	76%
<b>Female</b>	22	37%
<b>Other</b>	0	0%
<b>Unknown</b>	3	5%
<b>Total</b>	59	100%

Age	#	% of city population *
<b>18</b>	0	0%
<b>19-35</b>	21	36%
<b>36-50</b>	22	37%
<b>51+</b>	15	25%
<b>Unknown</b>	1	2%
<b>Total</b>	0	100%

\*Disability information and languages other than English were not indicated by the complainants.

\* In cases where the complaint was filed by the parent/guardian on behalf of a child the age, gender, and race are counted separately to accurately reflect the information related to each complainant.

# APPENDIX I



No. 202.33

## EXECUTIVE ORDER

### Continuing Temporary Suspension and Modification of Laws Relating to the Disaster Emergency

WHEREAS, on March 7, 2020, I issued Executive Order Number 202, declaring a State disaster emergency for the entire State of New York; and

WHEREAS, both travel-related cases and community contact transmission of COVID-19 have been documented in New York State and are expected to continue;

NOW, THEREFORE, I, Andrew M. Cuomo, Governor of the State of New York, by virtue of the authority vested in me by Section 29-a of Article 2-B of the Executive Law to issue any directive during a disaster emergency necessary to cope with the disaster, I do hereby issue the following directives for the period from the date of this Executive Order through June 21, 2020:

- Executive Order 202.10, as later extended by Executive Order 202.18, Executive Order 202.29 and as extended and amended by Executive Order 202.32, which prohibited all non-essential gatherings of any size for any reason, except for any religious service or ceremony, or for the purposes of any Memorial Day service or commemoration, which allowed ten or fewer individuals to gather, provided that social distancing protocols and cleaning and disinfection protocols required by the Department of Health are adhered to is hereby modified to permit any non-essential gathering of ten or fewer individuals, for any lawful purpose or reason, provided that social distancing protocols and cleaning and disinfection protocols required by the Department of Health are adhered to.



GIVEN under my hand and the Privy Seal of the  
State in the City of Albany this  
twenty-second day of May in the year  
two thousand twenty.

A handwritten signature in black ink, appearing to read "Andrew M. Cuomo".

BY THE GOVERNOR

A handwritten signature in black ink, appearing to read "M. C.", followed by the text "Secretary to the Governor".

Secretary to the Governor

# APPENDIX II



## OFFICE OF THE MAYOR MAYOR BEN WALSH

### EXECUTIVE ORDER SYRACUSE POLICE REFORM EFFECTIVE JUNE 19, 2020

WHEREAS, the killing of George Floyd, and the subsequent outpouring of grief and concern over police conduct nationwide has led to calls from the Syracuse community for immediate police reform; and

WHEREAS, improving police-community relations and updating key policies to reflect best practices in 21<sup>st</sup> century policing has been a priority of my administration since taking office; and

WHEREAS, under the leadership of Chief Kenton Buckner, Syracuse has already taken important steps in police reform, including but not limited to the expansion of body worn cameras and the implementation of a new body worn camera policy; the issuance of a revised use of force policy in July 2019; the restructuring and relocating of the department's internal affairs function; enhanced focus on diversity recruitment; and the creation of citizen advisory committees; and

WHEREAS, the Syracuse Common Council has indicated its desire for police reform, and will consider legislation that seeks greater police transparency, which will complement the steps to be taken below; and

WHEREAS, I support the police reforms already passed this month by New York State, including the repeal of Civil Rights Law Sec. 50-a; and

WHEREAS, I recognize the dedication of the members of the Syracuse Police Department, and intend the steps outlined below to better equip officers with the training and policies they need to enhance their ability to protect and serve all members of the Syracuse community equally, and to build the community's trust in our officers; and

WHEREAS, in response to the concerns of the Syracuse community, more action on police reform is urgent, necessary and appropriate; and

WHEREAS, I will engage in a robust community dialogue to further explore and consider areas for reform and improvement over the coming months beyond those set forth below, culminating in a plan and report in the spirit of and in compliance with Governor Cuomo's Executive Order No. 203, New York State Police Reform and Reinvention Collaborative;

Office of the Mayor  
233 E. Washington St.  
201 City Hall  
Syracuse, N.Y. 13202

Office 315 448 8005  
Fax 315 448 8067  
[www.syr.gov.net](http://www.syr.gov.net)

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

NOW, THEREFORE, as Mayor of the City of Syracuse, by the authority vested in me by the City Charter and applicable laws, and in consultation with the Chief of Police, I hereby direct the following actions as soon as practicable:

1. Review, revise and amend the policies and procedures of the Syracuse Police Department (SPD) to ensure the principles embodied in the New York City Right to Know Act are incorporated into the department's policies and procedures, including but not limited to self-identification to citizens, provision of written identification to citizens, obtaining consent to searches, recording consent and making the record of the consent available to the subject of the search. This will be done in conjunction with legislative action by the Syracuse Common Council, which will seek to codify the Right to Know principles related to the reporting of investigative encounters.
2. Revise SPD's 2019 use of force policy to ensure that it is compliant with recent changes in New York State law, and fully consider any policy changes requested by the Syracuse community.
3. Revise SPD's current body worn camera policy to ensure that officers record the entirety of their presence on the scene of a police encounter.
4. Complete the department's efforts to obtain additional body worn cameras so that all uniformed officers assigned to patrol or who otherwise respond to citizen calls will be equipped with cameras.
5. Develop and implement a plan to deploy dashboard cameras on all SPD marked vehicles.
6. Conduct a complete inventory of all equipment acquired through military surplus programs that are in possession of the SPD; establish policies and procedures regarding the use of such equipment; and establish parameters for future procurement of such equipment.
7. Post on the City of Syracuse and/or SPD's website:
  - a. The collection of documents that together comprise the most recent collective bargaining agreement with the Syracuse Police Benevolent Association (PBA); and
  - b. A comprehensive summary of that collection of documents, which my administration prepared and presented to the PBA for review and acceptance in 2019; and
  - c. The Tentative Agreement reached with the PBA in November 2019, which has not been approved, and which is now the subject of the impasse resolution process set forth in the New York State Taylor Law.
8. Make SPD policies publicly available on the SPD website.
9. Develop a process to ensure legal compliance with New York State's repeal of Civil Rights Law Sec. 50-a and related amendments to the Freedom of Information Law, which require the city to disclose copies of certain police personnel records upon request.
10. Continue to actively oppose any legal attempt to dissolve or otherwise eliminate the judicial consent decree which continues to be a critically necessary tool to improve the diversity of our police department.

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

11. Review the department's procedure and approval process regarding the application of search warrants that seeks a "no-knock" provision from a court to ensure compliance with Constitutional standards.
12. Continue to improve collaboration with the Syracuse Citizen Review Board (CRB) to ensure the flow of documents and information as embodied in Local Law No. 11. Further, commit to:
  - a. Reviewing the disciplinary recommendations presented by the CRB prior to making a final determination of discipline of an officer; and
  - b. In cases where the Chief issues no discipline, or discipline that is lesser than is that recommended by the CRB, provide to the CRB a written explanation of the reason for such level of discipline or lack thereof.
13. Develop and deliver training on the history of racism in Syracuse and the United States, both in the police academy and during in-service training, such that 100% of the membership of SPD receives this training. Additionally, deliver department-wide training in cultural competency for law enforcement.
14. Continue to review and upgrade the department's recruitment, screening and hiring practices, with an aim to increase the diversity of the department's membership.
15. Research and consider innovative, community-based strategies for responding to non-criminal calls, with a goal of shifting the paradigm from primary police response, to response by non-police professionals in relevant fields.
16. Develop and implement, in coordination with the Syracuse City School District, a new model for school safety and security.

G I V E N under my hand and the Seal of the City of Syracuse this nineteenth day of June in the year two thousand twenty.

BY THE MAYOR

ATTEST:



Benjamin R. Walsh, Mayor

John P. Copanas, City Clerk

Dated: June 19, 2020

GROWTH. DIVERSITY. OPPORTUNITY FOR ALL.

## APPENDIX III



### DEPARTMENT OF POLICE CITY OF SYRACUSE, MAYOR BEN WALSH

Kenton T. Buckner  
Chief of Police

August 14, 2020

Joseph L. Cecile  
First Deputy Chief

Ranette Releford  
Administrator

Derek McGork  
Deputy Chief

Citizen Review Board  
201 E. Washington Street, Suite #705  
Syracuse, NY 13202

Richard F. Shoff, Jr.  
Deputy Chief

Richard H. Trudell  
Deputy Chief

Dear Ms. Releford:

I am writing in response to Mayor Walsh's Executive Order: Syracuse Police Reform effective June 19, 2020 to make you aware of our commitment to fulfill Item #12.

The Syracuse Police Department (SPD) affirms our commitment to ensure the flow of documents and information as embodied in Local Law No. 11.

The SPD further commits to making no final decision on discipline of an officer(s) until the Chief of Police has received the results of both the Office of Professional Standards investigation and the CRB recommendations of the same complaint.

In addition, the Chief of Police will provide the CRB a letter of explanation if the decided discipline falls to a level lower than is recommended by the CRB.

As you are aware, Corporation Counsel and CRB's outside counsel are currently discussing ways in which the timelines in the ordinance could be adjusted to reflect pragmatic operational realities. Those discussions reflect the parties' consensus, based on past experience, that additional time is sometimes required to allow both sides to complete a thorough and effective investigation. The parties also understand, however, that any proposed revisions will not permit delays which prevent discipline from being imposed within the eighteen month deadline provided for in the New York Civil Service Law. Indeed, it is our belief that such revisions will actually serve to speed-up investigations by increasing efficiency. Ultimately, any changes to the ordinance would need to be presented and approved by the Common Council, but I am hopeful that SPD and the CRB will agree on a process that works for all the stakeholders. The SPD commits to being compliant with any revisions going forward.

Regards,

A handwritten signature in black ink, appearing to read "K. Buckner".

Kenton Buckner  
Chief of Police

KTB/mb-f

Department of Police  
511 S. State Street  
Syracuse, NY 13202

O. 315.442.5250

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# APPENDIX IV

Ranette L. Releford  
Administrator  
RReleford@syr.gov.net



## CITIZENS REVIEW BOARD

Benjamin R. Walsh, Mayor

November 13, 2020

Kenton Buckner, Chief  
Syracuse Police Department  
511 South State Street  
Syracuse, New York 13202

### **Re: Draft Revised Use of Force and Body Worn Camera Policies**

Dear Chief Buckner:

The Citizen Review Board ("CRB") submits the following comments to the Syracuse Police Department's ("SPD") draft Revised Use of Force ("UOF") and Body Worn Camera ("BWC") policies, which have been uploaded to the City's portal for a public engagement process.

These documents incorporate many of the recommendations CRB has made over the years. CRB's recommendations reflect its statutory obligation to "identify, analyze, and make recommendations about police policies, procedures, practices or other systemic concerns about police conduct . . . ." With reference to that obligation, although CRB is disappointed that it was offered only a *de minimis* role in the drafting process, we are nonetheless pleased that many of our recommendations have been received and incorporated.

### **Use of Force**

As set forth above, the UOF draft incorporates several CRB recommendations. In particular, as recommended in our letter of February 7, 2019, this draft includes precise definitions of key terms; a discussion of "objectively reasonable" force; specific prohibitions on certain force such as chokeholds (although not on carotid restraints as we had recommended); and a duty to intervene and report, among other things.

Generally, CRB continues to recommend a blanket prohibition on firing from or at moving vehicles, in such situations where the vehicle itself presents the only risk. Further, the UOF policy should incorporate the International Association of Chiefs of Police ("IACP") recommendations on responding to persons experiencing a mental health crisis when addressing those issues in the UOF policy. And finally, CRB requests that any documented use of force should be promptly forwarded to CRB for its own review.



Besides these general comments, CRB's specific edits / comments are as follows:

1. Section 300.1 Paragraph B, add to the sentence (change in bold): "In granting officers the authority to use **objectively** reasonable force, the Department acknowledges its responsibility to train, monitor and evaluate officers to ensure **adherence to** the use of force authorizations and limitations set forth in this policy . . .";
2. Section 300.1 Paragraph C, add referral to CRB;
3. Section 300.2: Paragraph G-I, and K, provide a citation for these definitions. Also add definitions for:
  - a. Known – be aware of through observation, inquiry or information.
  - b. Verbal warning –
  - c. Pre-assault indicators –
  - d. Kinetic body movements –
  - e. Un-directed over-compliance –
  - f. Defensive or offensive physical posturing –
  - g. Physical non-compliance –
  - h. Target glance –
  - i. Verbal aggression –
  - j. Exigent circumstances –
4. Section 300.3 Paragraph C, change to "Officers are not expected to compromise safety in order to de-escalate a situation if **there is an objectively reasonable likelihood it will** result in harm . . .";
5. Section 300.04 Paragraph A, clarify the standard (here or elsewhere) for determining when an officer is "in possession of all necessary facts";

6. Section 300.04 Paragraph B, add to the end of the sentence that ". . . shall report the force to any supervisor and/or the Office of Professional Standards immediately, **and that person or OOPS shall immediately investigate and forward the results of said investigations to CRB.**";
7. Section 300.5 Paragraph A, add to the sentence ". . . reasonably appears necessary to **accomplish those items set forth at 300.6,** given the objective . . . .";
8. Section 300.5 B, provide a citation for this standard;
9. Section 300.5 Paragraph E add to the sentence ". . . encounter is to avoid **in pursuit of an authorized objective and where de-escalation techniques are impossible based on an objectively reasonable standard** or minimize . . . .";
10. Section 300.6 Paragraph A 6, add to the sentence "overcoming **physical** resistance . . . .";
11. Section 300.7 Paragraph A 9, clarify how a person becomes "visibly pregnant";
12. Section 300.7 Paragraph A 4, define "apparent need";
13. Section 300.7 Paragraph A 17, clarify "prior contact", perhaps by modifying to include "prior contact **resulting in an arrest, detention, or involving domestic violence**";
14. Section 300.8 Paragraph B 1, add to sentence "to **obtain or seek to obtain** a confession . . . .";
15. Section 300.8 Paragraph B 4, add to sentence "coerce, **intentionally harm,** or punish . . . .";
16. Section 300.8 Paragraph B 5, change the word injected to ingested;
  - a. In addition, CRB poses the question as to the acceptable level of force in this situation and notes that, previously, striking the face was commonly applied;
17. Section 300.8 paragraph B 6, define "exigent circumstances";
18. Section 300.8 Paragraph B, add a subparagraph 7 that, "**the use of handcuffs tightly fastened on a subject shall be considered a prohibited use of force and handcuffs should not be used in any way other than to detain or arrest a subject**";

19. Section 300.9 Paragraph A, add to the last sentence ". . . the circumstances **that the officer or someone else is at risk of immediate death or serious bodily harm.**"
20. Section 300.9 Paragraph B 1, add to the first sentence "...the subject has a **deadly** weapon . . . "
21. Section 300.9 Paragraph B 4, remove in its entirety;
22. Section 300.9 Paragraph C, remove "force where safe and feasible" and add "**unless it would be impossible, under the circumstances to do so.**" Also, define the manner in which officers are expected to issue a warning.
23. Section 300.10 Paragraph D, change the sentence ". . . where there is **an objectively** reasonable belief there is a possibility of **serious bodily harm or death** to the officer or others. **Under no circumstances should officers draw or display firearms as a means of de-escalation . . .**";
24. Section 300.10 Paragraph E 2, change the last sentence to say ". . . may cause the vehicle to **lose control.**";
25. Section 300.12 Paragraph D, change to state "Individuals shall not be placed on their stomachs **unless it is necessary to do so.**"
26. Section 300.12 Paragraph H, add a requirement that witnessing officers must document whether they observed a request for or refusal of medical treatment.

### **Body Worn Camera**

This policy similarly incorporates some of the suggestions provided for in CRB's July 2, 2018 letter on this topic. There are substantial considerations for individual privacy, and our recommendation to have random reviews of BWC has also been incorporated.

The draft policy does not address CRB's proposal for "clean reporting". This would provide that incident reports be written before the officer has the benefit of reviewing BWC footage, and that the footage should only be reviewed thereafter. CRB also suggests, generally, that the BWC "user manual" be attached to the policy itself. Finally, CRB proposes additional language (below) that will ensure that the cameras are to be activated during all law enforcement activity, with an exception only for officer safety.

Separately, CRB hereby renews its request for unfettered access to BWC footage.

CRB's specific edits / comments are as follows:

1. Section 424.2 Paragraph A, take out of the last sentence "their duties" and add **law enforcement activities**;
2. Section 424.4 Paragraph A, in the second sentence removed at the end of the sentence "and feasible". In the last sentence after "is not safe" remove "and feasible";
3. Section 424.4 Paragraph B, remove "or until the situation no longer fits the criteria for activation";
4. Section 424.4 Paragraph D, should be moved to definitions of law enforcement;
5. Section 424.6 Paragraphs A and B and Section 424.7 Paragraph E, add a requirement to notify the officer's superior officer in any such instance;
6. Section 424.9 Paragraph B, add a reference to Section 424.2 Paragraph B;
7. Section 424.15, Add a Paragraph B that states "**The coordinator will establish regular interactions with the CRB which shall provide recommendations regarding BWC Policy and Procedures**";

Sincerely,

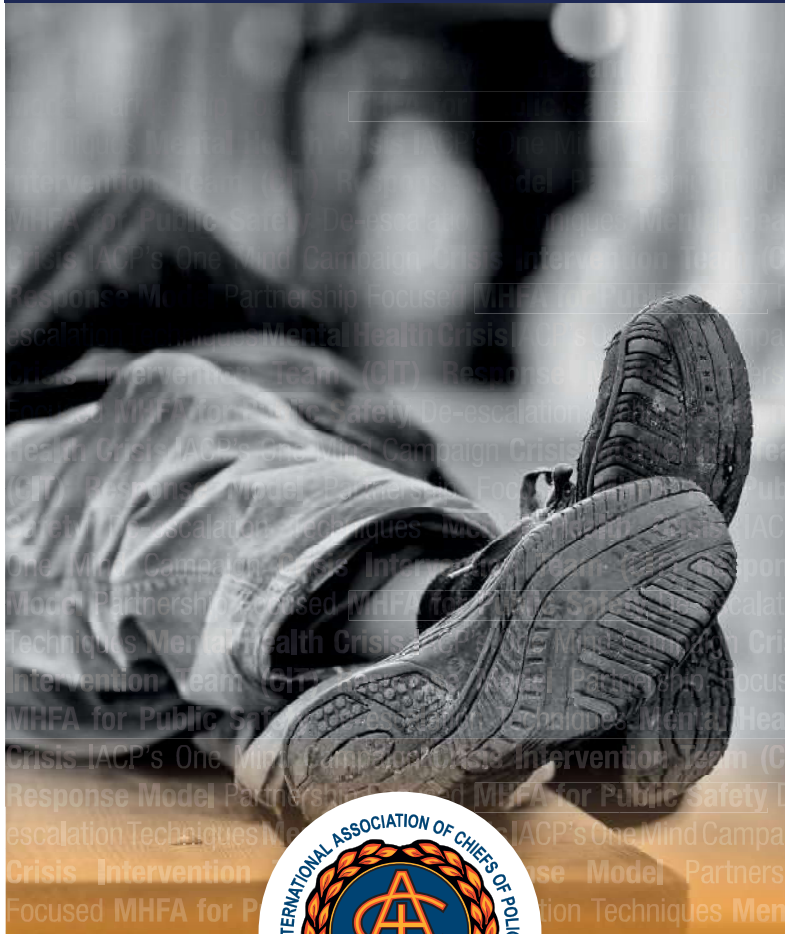
*Ranette L. Releford*

Ranette L. Releford, MPS  
Administrator

cc: Benjamin R. Walsh, Mayor  
Sharon F. Owens, Deputy Mayor  
City of Syracuse Common Councilors  
Amanda Harrington, Esq. Corporation Counsel  
Kristen Smith, Esq. Corporation Counsel  
Sgt. Mark Rusin  
Media

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**Improving**  
**POLICE RESPONSE**  
*to Persons*  
*Affected by* **MENTAL ILLNESS**



***Report from the***  
***March 2016 IACP Symposium***

# EXTENT OF THE ISSUE

**L**aw enforcement agencies across the world are increasingly required to respond to and intervene on behalf of people who are affected by mental illness.

There is compelling evidence to suggest that law enforcement agencies need to enhance their training on interactions with persons affected by mental illness. Research conducted by the *Washington Post* and the Treatment Advocacy Center (TAC) highlight how often the interactions between persons affected by mental illness and the police can lead to injury or fatality.

- In 2015, the *Washington Post* noted that victims who were mentally ill or experiencing an emotional crisis accounted for one-fourth of those killed in officer-involved shootings.<sup>1</sup>
- The Treatment Advocacy Center (TAC) found that persons with severe mental illnesses are 16 times more likely to be killed by police than other civilians.<sup>2</sup>
- According to the American Psychiatric Association (APA), in a large urban police department, 11 percent of officer-involved shootings in a ten-year period were identified as suicide-by-cop.<sup>3</sup>
- Studies conducted in both Canada and the United Kingdom suggest that police response to persons affected by mental illness is not a United States–centric issue.

1 Kimberly Kindy et al., “A Year of Reckoning: Police Fatally Shoot Nearly 1,000,” <http://www.washingtonpost.com/sf/investigative/2015/12/26/a-year-of-reckoning-police-fatally-shoot-nearly-1000>.

2 “Mentally Ill Are 16 Times More Likely to Be Killed by Police,” Sott.net (Signs of the Times), <http://www.sott.net/article/308250-Report-Mentally-ill-are-16-times-more-likely-to-be-killed-by-police>.

3 *Ibid.* The APA discounted other studies reporting even higher percentages.

## Promising Programs and Services

- **The Crisis Intervention Team (CIT)** program is a collaborative initiative between law enforcement officers and mental health experts to provide crisis intervention for persons affected by mental illness and focus on diversion and treatment over arrest and incarceration.
- **Mental Health First Aid (MHFA)** is an eight-hour course focused on mental illnesses and addictions as well as providing law enforcement with effective response options in order to de-escalate incidents without compromising safety.
- **Smart 9-1-1** is a private service that allows citizens to provide personal details in a secure online “Safety Profile” that is accessible to 9-1-1 dispatchers.

# CHANGES AND CHALLENGES

## Recent Changes Affecting Mental Health Services

- Bi-partisan criminal justice reform programs, such as the *Final Report of the President's Task Force on 21st Century Policing*, provide a contemporary framework for discussion about improving law enforcement services.
- The widespread use of social media, and in particular each department's ability to respond effectively through their own social media platforms creates an opportunity for the public to more fully understand each incident in question.
- Synthetic drug distribution and abuse has increased in recent years, to which persons affected by mental illness may be particularly vulnerable.
- Changes in insurance laws provide more access to health insurance, including mental health and substance use disorder treatment, to those who previously did not qualify.

## Challenges to Improving Law Enforcement Response

- The creation and maintenance of strong partnerships with mental health advocacy organizations, hospitals, jails, schools, churches, legislatures, and government.
- The need for wider implementation of a response model that meets the needs of police agencies in their individual communities.
- When state and local laws/policies need to be amended, such changes require action by legislators, administrative bodies, and policy makers.

## Platforms to Address These Challenges

- Effective partnerships are the key platform to facilitating change in the way law enforcement responds to persons affected by mental illness.
- Police training is a critical venue for change. Delivering effective training is a challenge, particularly for smaller agencies that lack the necessary resources or personnel; however, providing consistent training is important.
- Smartphone applications (apps) can be ideal opportunities to provide police officers with easy access to information about local service programs and providers, diversion opportunities, and training tools.
- The IACP's One Mind Campaign is a platform from which to launch enhanced law enforcement services to persons affected by mental illness.

# THE ONE MIND CAMPAIGN

The One Mind Campaign seeks to ensure successful interactions between police officers and persons affected by mental illness. To join the campaign, law enforcement agencies commit to implementing four promising practices over a 12-36 month timeframe. Agencies demonstrating a serious commitment to implementing all four required strategies in a timely fashion will become publicly recognized members of IACP's One Mind Campaign.

## Four Required Practices:

- 1. ESTABLISH** a clearly defined and sustainable relationship with at least one community mental health organization. This partnership will serve to institutionalize effective collaboration between the police agency and the mental health community. Where appropriate, a Memorandum of Understanding can be crafted.
- 2. DEVELOP** and implement a written policy addressing law enforcement response to persons affected by mental illness. A written policy ensures that the department is taking a holistic approach and setting minimum standards for necessary training, officer response, and evaluation of outcomes.
- 3. DEMONSTRATE** that 100 percent of sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in MHFA. Officers who have taken this eight hour course are able to employ a variety of de-escalation and communication techniques to reduce the likelihood of an unfavorable outcome.
- 4. DEMONSTRATE** that a minimum of 20 percent of all sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in CIT. This comprehensive course

uses a team approach, which connects officers with mental health professionals during a law enforcement response.

Beyond the four campaign strategies, there are multiple approaches that hold promise as well. These action items are promoted by the campaign as optional, but worthy of serious consideration:

- Provide mental health training in academies and routinely implement updated training in department roll calls.
- Partner with a state association of chiefs or sheriffs to adopt a statewide model.
- Effectively utilize technology to enhance awareness of community mental health services.
- Take a leadership role with City/County/State government in supporting the establishment of a mental health court.
- Implement routine diversity and cultural awareness trainings, focused on where culture or language barriers make effective response more difficult.
- Consider the benefit of enrolling in the Stepping Up Initiative, which was initiated in May 2015 by The Council of State Governments Justice Center, The National Association of Counties, and The American Psychiatric Association Foundation.

## How to Join the One Mind Campaign:

Take the pledge today! Join your colleagues in enhancing your community by reducing injuries, saving lives, and strengthening community-police relations.

Visit <http://www.theIACP.org/onemindcampaign> to take the pledge and for further information.



# RESOURCES

## The One Mind Campaign

[www.theIACP.org/onemindcampaign](http://www.theIACP.org/onemindcampaign)

## IACP Model Policy

Responding to Persons Affected  
by Mental Illness or in Crisis

[www.theIACP.org/MPMentalIllness](http://www.theIACP.org/MPMentalIllness)

## MHFA

Mental Health First Aid

[www.mentalhealthfirstaid.org/cs](http://www.mentalhealthfirstaid.org/cs)

## CIT

Crisis Intervention Team International

[www.citinternational.org](http://www.citinternational.org)



## **International Association of Chiefs of Police**

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Alexandria, VA 22314

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## Appendix II



# Model Policy

## Responding to Persons Experiencing a Mental Health Crisis

Updated: August 2018

### I. PURPOSE

It is the purpose of this policy to provide guidance to law enforcement officers when responding to or encountering persons experiencing a mental health crisis. For the purposes of this document, the term person in crisis (PIC) will be used.

### II. POLICY

Responding to situations involving individuals reasonably believed to be PIC necessitates an officer to make difficult judgments about the mental state and intent of the individual and necessitates the use of special skills, techniques, and abilities to effectively and appropriately resolve the situation, while minimizing violence. The goal is to de-escalate the situation safely for all individuals involved when reasonable and consistent with established safety priorities. Applicable law of the jurisdiction shall guide the detention of PIC.

It is the policy of this agency that officers be provided with training to determine whether a person's behavior is indicative of a mental health crisis and with guidance, techniques, response options, and resources so that the situation may be resolved in as constructive, safe, and humane a manner as possible.

### III. DEFINITIONS

*Mental Health Crisis:* An event or experience in which an individual's normal coping mechanisms are overwhelmed, causing them to have an extreme emotional, physical, mental, and/or behavioral response. Symptoms may include emotional reactions such as fear, anger, or excessive giddiness; psychological impairments such as inability to focus, confusion, or nightmares, and potentially even psychosis; physical reactions like vomiting/stomach issues, headaches, dizziness, excessive tiredness, or insomnia; and/or behavioral reactions including the trigger of a "freeze, fight, or flight" response. Any individual can

experience a crisis reaction regardless of previous history of mental illness.

*Mental Illness:* An impairment of an individual's normal cognitive, emotional, or behavioral functioning, caused by physiological or psychosocial factors. A person may be affected by mental illness if they display an inability to think rationally (e.g., delusions or hallucinations); exercise adequate control over behavior or impulses (e.g., aggressive, suicidal, homicidal, sexual); and/or take reasonable care of their welfare with regard to basic provisions for clothing, food, shelter, or safety.

### IV. PROCEDURES

#### A. Recognizing Atypical Behavior

Only a trained mental health professional can diagnose mental illness, and even they may sometimes find it difficult to make a diagnosis. Officers are not expected to diagnose mental or emotional conditions, but rather to recognize behaviors that are potentially indicative of PIC, with special emphasis on those that suggest potential violence and/or danger. The following are generalized signs and symptoms of behavior that may suggest an individual is experiencing a mental health crisis, but each should be evaluated within the context of the entire situation. However, officers should not rule out other potential causes, such as effects of alcohol or psychoactive drugs, temporary emotional disturbances that are situational, or medical conditions.

1. Strong and unrelenting fear of persons, places, or things.
2. Extremely inappropriate behavior for a given context.
3. Frustration in new or unforeseen circumstances; inappropriate or aggressive behavior in dealing with the situation.

4. Memory loss related to such common facts as name or home address, although these may be signs of other physical ailments such as injury, dementia, or Alzheimer's disease.
5. Delusions, defined as the belief in thoughts or ideas that are false, such as delusions of grandeur ("I am Christ") or paranoid delusions ("Everyone is out to get me").
6. Hallucinations of any of the five senses (e.g., hearing voices, feeling one's skin crawl, smelling strange odors, seeing things others cannot see).
7. The belief that one suffers from extraordinary physical ailments that are not possible, such as persons who are convinced that their heart has stopped beating for extended periods of time.
8. Obsession with recurrent and uncontrolled thoughts, ideas, and images.
9. Extreme confusion, fright, paranoia, or depression.
10. Feelings of invincibility.

#### B. Assessing Risk

1. Most PIC are not violent and some may present dangerous behavior only under certain circumstances or conditions. Officers may use several indicators to assess whether a PIC represents potential danger to themselves, the officer, or others. These include the following:
  - a. The availability of any weapons.
  - b. Threats of harm to self or others or statements by the person that suggest that they are prepared to commit a violent or dangerous act. Such comments may range from subtle innuendo to direct threats that, when taken in conjunction with other information, paint a more complete picture of the potential for violence.
  - c. A personal history that reflects prior violence under similar or related circumstances. The person's history may already be known to the officer, or family, friends, or neighbors might provide such information.
  - d. The amount of self-control that the person exhibits, particularly the amount of physical control, over emotions such as rage, anger, fright, or agitation. Signs of a lack of self-control include extreme agitation, inability to sit still or communicate effectively, wide eyes, and rambling thoughts and speech. Clutching oneself or other objects to maintain control, begging to be left alone, or offering frantic assurances that one is all right may also suggest that the individual is close to losing control.

- e. Indications of substance use, as these may alter the individual's self-control and negatively influence an officer's capacity to effectively use de-escalation strategies.
  - f. The volatility of the environment. Agitators that may affect the person or create a particularly combustible environment or incite violence should be taken into account and mitigated. For example, the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon may be seen as a threat to a PIC and has the potential to escalate a situation. Standard law enforcement tactics may need to be modified to accommodate the situation when responding to a PIC.
  - g. Aggressive behaviors such as advancing on or toward an officer, refusal to follow directions or commands combined with physical posturing, and verbal or nonverbal threats.
2. Failure to exhibit violent or dangerous behavior prior to the arrival of the officer does not guarantee that there is no danger.
  3. A PIC may rapidly change their presentation from calm and command-responsive to physically active. This change in behavior may come from an external trigger (such as an officer stating "I have to handcuff you now") or from internal stimuli (delusions or hallucinations). A variation in the person's physical presentation does not necessarily mean they will become violent or threatening, but officers should be prepared at all times for a rapid change in behavior.
  4. Context is crucial in the accurate assessment of behavior. Officers should take into account the totality of circumstances requiring their presence and overall need for intervention.

#### C. Response to PIC

If the officer determines that an individual is experiencing a mental health crisis and is a potential threat to themselves, the officer, or others, law enforcement intervention may be required, as prescribed by statute. All necessary measures should be employed to resolve any conflict safely using the appropriate intervention to resolve the issue. The following responses should be considered:

1. Request a backup officer. Always do so in cases where the individual will be taken into custody.

2. Request assistance from individuals with specialized training in dealing with mental illness or crisis situations (e.g., Crisis Intervention Team (CIT) officers, community crisis mental health personnel, crisis negotiator, or police psychologist).
  3. Contact and exchange information with a treating clinician or mental health resource for assistance, based on law and statute.<sup>1</sup>
  4. Take steps to calm the situation. Where possible, eliminate emergency lights and sirens, disperse crowds, lower radio volume, and assume a quiet nonthreatening manner when approaching or conversing with the individual. Where violence or destructive acts have not occurred, avoid physical contact, and take time to assess the situation. Officers should operate with the understanding that time is an ally and there is no need to rush or force the situation.
  5. Create increased distance, if possible, in order to provide the officer with additional time to assess the need for force options.
  6. Utilize environmental controls, such as cover, concealment, and barriers to help manage the volatility of situations.
  7. Move slowly and do not excite the individual. Provide reassurance that officers are there to help and that the individual will be provided with appropriate care.
  8. Ask the individual's name or by what name they would prefer to be addressed and use that name when talking with the individual.
  9. Communicate with the individual in an attempt to determine what is bothering them. If possible, speak slowly and use a low tone of voice. Relate concern for the individual's feelings and allow the individual to express feelings without judgment.
  10. Where possible, gather information on the individual from acquaintances or family members and/or request professional assistance, if available and appropriate, to assist in communicating with and calming the individual.
  11. Do not threaten the individual with arrest, or make other similar threats or demands, as this may create additional fright, stress, and potential aggression.
  12. Avoid topics that may agitate the individual and guide the conversation toward subjects that help bring the situation to a successful conclusion. It is often helpful for officers to apologize for bringing up a subject or topic that triggers the PIC. This apology can often be a bridge to rapport building.
  13. Attempt to be truthful with the individual. If the individual becomes aware of a deception, they may withdraw from the contact in distrust and may become hypersensitive or retaliate in anger. In the event an individual is experiencing delusions and/or hallucinations and asks the officer to validate these, statements such as "I am not seeing what you are seeing, but I believe that you are seeing (the hallucination, etc.)" are recommended. Validating and/or participating in the individual's delusion and/or hallucination is not advised.
- D. Taking Custody or Making Referrals to Mental Health Professionals
1. Based upon the overall circumstances of the situation, applicable law and statutes, and agency policy, an officer may take one of several courses of action when responding to a PIC.
    - a. Offer mental health referral information to the individual and/or family members.
    - b. Assist in accommodating a voluntary admission for the individual.
    - c. Take the individual into custody and provide transportation to a mental health facility for an involuntary psychiatric evaluation.
    - d. Make an arrest.
  2. When circumstances indicate an individual meets the legal requirements for involuntary psychiatric evaluation and should be taken into custody and transported to a mental health facility, or when circumstances indicate that an arrest is necessary, the officer should, when possible, request the assistance of crisis intervention specialists to assist in the custody and admission process, as well as any interviews or interrogations.
  3. Officers should be aware that the application or use of restraints may aggravate any aggression being displayed by a PIC.
  4. In all situations involving a PIC, officers should
    - a. Continue to use de-escalation techniques and communication skills to avoid escalating the situation.

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<sup>1</sup> Officers in the United States can provide the HIPAA exemption reference number (45 CFR 164.512(j)(1)(i)(A)) for the clinician's reference, if necessary. This exemption states that it is allowable for a covered entity to disclose protected health information to law enforcement if it "is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public."

- b. Remove any dangerous weapons from the area.
- c. Where applicable, ensure that the process for petition for involuntary committal has been initiated by the appropriate personnel.

E. Documentation

Officers should

1. Document the incident, regardless of whether or not the individual is taken into custody. Where the individual is taken into custody or referred to other agencies, officers should detail the reasons why.
2. Ensure that the report is as specific and explicit as possible concerning the circumstances of the incident and the type of behavior that was observed. Terms such as “out of control” or “mentally disturbed” should be replaced with descriptions of the specific behaviors, statements, and actions exhibited by the person.
3. In circumstances when an individual is transported to a mental health facility for a psychiatric evaluation, and agency policy permits, provide documentation to the examining clinicians detailing the circumstances and behavior leading to the transport.

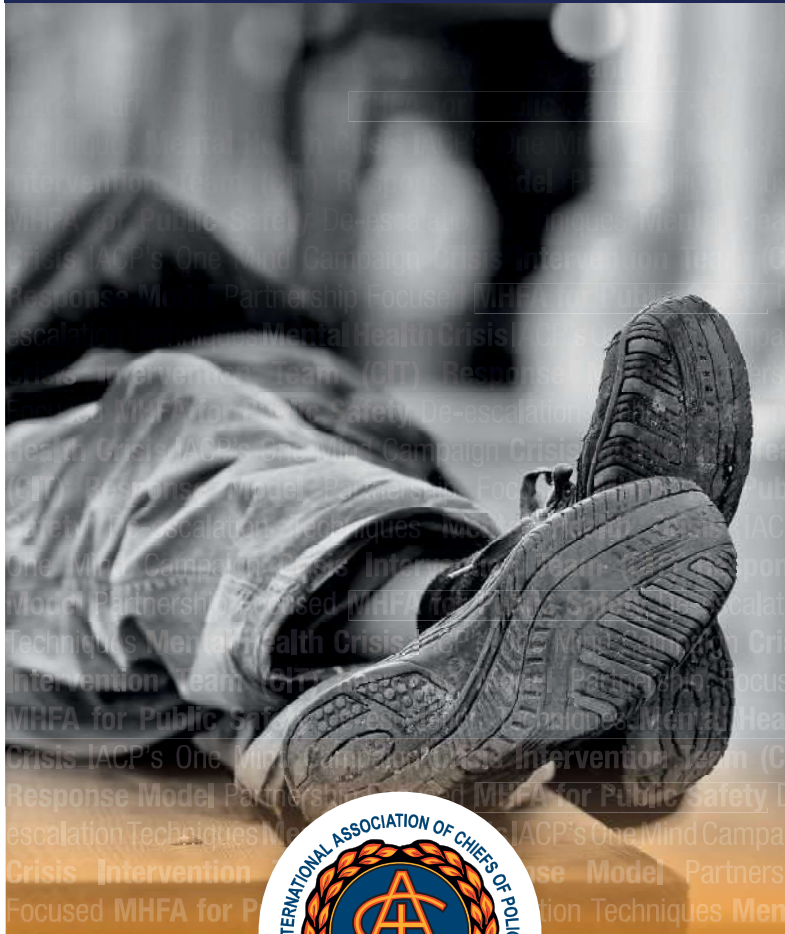
Every effort has been made to ensure that this document incorporates the most current information and contemporary professional judgment on this issue. Readers outside of the United States should note that, while this document promotes procedures reflective of a democratic society, its legal basis follows United States Supreme Court rulings and other federal laws and statutes.

Law enforcement administrators should be cautioned that no “model” policy can meet all the needs of any given law enforcement agency. Each law enforcement agency operates in a unique environment of court rulings, state laws, local ordinances, regulations, judicial and administrative decisions and collective bargaining agreements that must be considered, and should therefore consult its legal advisor before implementing any policy.

This document is not intended to be a national standard.

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**Improving**  
**POLICE RESPONSE**  
*to Persons*  
*Affected by* **MENTAL ILLNESS**



***Report from the***  
***March 2016 IACP Symposium***

# EXTENT OF THE ISSUE

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- The Treatment Advocacy Center (TAC) found that persons with severe mental illnesses are 16 times more likely to be killed by police than other civilians.<sup>2</sup>
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- Studies conducted in both Canada and the United Kingdom suggest that police response to persons affected by mental illness is not a United States–centric issue.

1 Kimberly Kindy et al., “A Year of Reckoning: Police Fatally Shoot Nearly 1,000,” <http://www.washingtonpost.com/sf/investigative/2015/12/26/a-year-of-reckoning-police-fatally-shoot-nearly-1000>.

2 “Mentally Ill Are 16 Times More Likely to Be Killed by Police,” Sott.net (Signs of the Times), <http://www.sott.net/article/308250-Report-Mentally-ill-are-16-times-more-likely-to-be-killed-by-police>.

3 Ibid. The APA discounted other studies reporting even higher percentages.

## Promising Programs and Services

- **The Crisis Intervention Team (CIT)** program is a collaborative initiative between law enforcement officers and mental health experts to provide crisis intervention for persons affected by mental illness and focus on diversion and treatment over arrest and incarceration.
- **Mental Health First Aid (MHFA)** is an eight-hour course focused on mental illnesses and addictions as well as providing law enforcement with effective response options in order to de-escalate incidents without compromising safety.
- **Smart 9-1-1** is a private service that allows citizens to provide personal details in a secure online “Safety Profile” that is accessible to 9-1-1 dispatchers.



# CHANGES AND CHALLENGES

## Recent Changes Affecting Mental Health Services

- Bi-partisan criminal justice reform programs, such as the *Final Report of the President's Task Force on 21st Century Policing*, provide a contemporary framework for discussion about improving law enforcement services.
- The widespread use of social media, and in particular each department's ability to respond effectively through their own social media platforms creates an opportunity for the public to more fully understand each incident in question.
- Synthetic drug distribution and abuse has increased in recent years, to which persons affected by mental illness may be particularly vulnerable.
- Changes in insurance laws provide more access to health insurance, including mental health and substance use disorder treatment, to those who previously did not qualify.

## Challenges to Improving Law Enforcement Response

- The creation and maintenance of strong partnerships with mental health advocacy organizations, hospitals, jails, schools, churches, legislatures, and government.
- The need for wider implementation of a response model that meets the needs of police agencies in their individual communities.
- When state and local laws/policies need to be amended, such changes require action by legislators, administrative bodies, and policy makers.

## Platforms to Address These Challenges

- Effective partnerships are the key platform to facilitating change in the way law enforcement responds to persons affected by mental illness.
- Police training is a critical venue for change. Delivering effective training is a challenge, particularly for smaller agencies that lack the necessary resources or personnel; however, providing consistent training is important.
- Smartphone applications (apps) can be ideal opportunities to provide police officers with easy access to information about local service programs and providers, diversion opportunities, and training tools.
- The IACP's One Mind Campaign is a platform from which to launch enhanced law enforcement services to persons affected by mental illness.

# THE ONE MIND CAMPAIGN

The One Mind Campaign seeks to ensure successful interactions between police officers and persons affected by mental illness. To join the campaign, law enforcement agencies commit to implementing four promising practices over a 12-36 month timeframe. Agencies demonstrating a serious commitment to implementing all four required strategies in a timely fashion will become publicly recognized members of IACP's One Mind Campaign.

## Four Required Practices:

- 1. ESTABLISH** a clearly defined and sustainable relationship with at least one community mental health organization. This partnership will serve to institutionalize effective collaboration between the police agency and the mental health community. Where appropriate, a Memorandum of Understanding can be crafted.
- 2. DEVELOP** and implement a written policy addressing law enforcement response to persons affected by mental illness. A written policy ensures that the department is taking a holistic approach and setting minimum standards for necessary training, officer response, and evaluation of outcomes.
- 3. DEMONSTRATE** that 100 percent of sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in MHFA. Officers who have taken this eight hour course are able to employ a variety of de-escalation and communication techniques to reduce the likelihood of an unfavorable outcome.
- 4. DEMONSTRATE** that a minimum of 20 percent of all sworn officers (and selected non-sworn staff, such as dispatchers) are trained and certified in CIT. This comprehensive course

uses a team approach, which connects officers with mental health professionals during a law enforcement response.

Beyond the four campaign strategies, there are multiple approaches that hold promise as well. These action items are promoted by the campaign as optional, but worthy of serious consideration:

- Provide mental health training in academies and routinely implement updated training in department roll calls.
- Partner with a state association of chiefs or sheriffs to adopt a statewide model.
- Effectively utilize technology to enhance awareness of community mental health services.
- Take a leadership role with City/County/State government in supporting the establishment of a mental health court.
- Implement routine diversity and cultural awareness trainings, focused on where culture or language barriers make effective response more difficult.
- Consider the benefit of enrolling in the Stepping Up Initiative, which was initiated in May 2015 by The Council of State Governments Justice Center, The National Association of Counties, and The American Psychiatric Association Foundation.

## How to Join the One Mind Campaign:

Take the pledge today! Join your colleagues in enhancing your community by reducing injuries, saving lives, and strengthening community-police relations.

Visit <http://www.theIACP.org/onemindcampaign> to take the pledge and for further information.

# RESOURCES

## The One Mind Campaign

[www.theIACP.org/onemindcampaign](http://www.theIACP.org/onemindcampaign)

## IACP Model Policy

Responding to Persons Affected  
by Mental Illness or in Crisis

[www.theIACP.org/MPMentalIllness](http://www.theIACP.org/MPMentalIllness)

## MHFA

Mental Health First Aid

[www.mentalhealthfirstaid.org/cs](http://www.mentalhealthfirstaid.org/cs)

## CIT

Crisis Intervention Team International

[www.citinternational.org](http://www.citinternational.org)



## **International Association of Chiefs of Police**

44 Canal Center Plaza, Suite 200  
Alexandria, VA 22314

703.836.6767 • FAX 703.836.4743 • [www.theIACP.org](http://www.theIACP.org)

## Appendix II



# Model Policy

## Responding to Persons Experiencing a Mental Health Crisis

Updated: August 2018

### I. PURPOSE

It is the purpose of this policy to provide guidance to law enforcement officers when responding to or encountering persons experiencing a mental health crisis. For the purposes of this document, the term person in crisis (PIC) will be used.

### II. POLICY

Responding to situations involving individuals reasonably believed to be PIC necessitates an officer to make difficult judgments about the mental state and intent of the individual and necessitates the use of special skills, techniques, and abilities to effectively and appropriately resolve the situation, while minimizing violence. The goal is to de-escalate the situation safely for all individuals involved when reasonable and consistent with established safety priorities. Applicable law of the jurisdiction shall guide the detention of PIC.

It is the policy of this agency that officers be provided with training to determine whether a person's behavior is indicative of a mental health crisis and with guidance, techniques, response options, and resources so that the situation may be resolved in as constructive, safe, and humane a manner as possible.

### III. DEFINITIONS

*Mental Health Crisis:* An event or experience in which an individual's normal coping mechanisms are overwhelmed, causing them to have an extreme emotional, physical, mental, and/or behavioral response. Symptoms may include emotional reactions such as fear, anger, or excessive giddiness; psychological impairments such as inability to focus, confusion, or nightmares, and potentially even psychosis; physical reactions like vomiting/stomach issues, headaches, dizziness, excessive tiredness, or insomnia; and/or behavioral reactions including the trigger of a "freeze, fight, or flight" response. Any individual can

experience a crisis reaction regardless of previous history of mental illness.

*Mental Illness:* An impairment of an individual's normal cognitive, emotional, or behavioral functioning, caused by physiological or psychosocial factors. A person may be affected by mental illness if they display an inability to think rationally (e.g., delusions or hallucinations); exercise adequate control over behavior or impulses (e.g., aggressive, suicidal, homicidal, sexual); and/or take reasonable care of their welfare with regard to basic provisions for clothing, food, shelter, or safety.

### IV. PROCEDURES

#### A. Recognizing Atypical Behavior

Only a trained mental health professional can diagnose mental illness, and even they may sometimes find it difficult to make a diagnosis. Officers are not expected to diagnose mental or emotional conditions, but rather to recognize behaviors that are potentially indicative of PIC, with special emphasis on those that suggest potential violence and/or danger. The following are generalized signs and symptoms of behavior that may suggest an individual is experiencing a mental health crisis, but each should be evaluated within the context of the entire situation. However, officers should not rule out other potential causes, such as effects of alcohol or psychoactive drugs, temporary emotional disturbances that are situational, or medical conditions.

1. Strong and unrelenting fear of persons, places, or things.
2. Extremely inappropriate behavior for a given context.
3. Frustration in new or unforeseen circumstances; inappropriate or aggressive behavior in dealing with the situation.

4. Memory loss related to such common facts as name or home address, although these may be signs of other physical ailments such as injury, dementia, or Alzheimer's disease.
5. Delusions, defined as the belief in thoughts or ideas that are false, such as delusions of grandeur ("I am Christ") or paranoid delusions ("Everyone is out to get me").
6. Hallucinations of any of the five senses (e.g., hearing voices, feeling one's skin crawl, smelling strange odors, seeing things others cannot see).
7. The belief that one suffers from extraordinary physical ailments that are not possible, such as persons who are convinced that their heart has stopped beating for extended periods of time.
8. Obsession with recurrent and uncontrolled thoughts, ideas, and images.
9. Extreme confusion, fright, paranoia, or depression.
10. Feelings of invincibility.

#### B. Assessing Risk

1. Most PIC are not violent and some may present dangerous behavior only under certain circumstances or conditions. Officers may use several indicators to assess whether a PIC represents potential danger to themselves, the officer, or others. These include the following:
  - a. The availability of any weapons.
  - b. Threats of harm to self or others or statements by the person that suggest that they are prepared to commit a violent or dangerous act. Such comments may range from subtle innuendo to direct threats that, when taken in conjunction with other information, paint a more complete picture of the potential for violence.
  - c. A personal history that reflects prior violence under similar or related circumstances. The person's history may already be known to the officer, or family, friends, or neighbors might provide such information.
  - d. The amount of self-control that the person exhibits, particularly the amount of physical control, over emotions such as rage, anger, fright, or agitation. Signs of a lack of self-control include extreme agitation, inability to sit still or communicate effectively, wide eyes, and rambling thoughts and speech. Clutching oneself or other objects to maintain control, begging to be left alone, or offering frantic assurances that one is all right may also suggest that the individual is close to losing control.

- e. Indications of substance use, as these may alter the individual's self-control and negatively influence an officer's capacity to effectively use de-escalation strategies.
  - f. The volatility of the environment. Agitators that may affect the person or create a particularly combustible environment or incite violence should be taken into account and mitigated. For example, the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon may be seen as a threat to a PIC and has the potential to escalate a situation. Standard law enforcement tactics may need to be modified to accommodate the situation when responding to a PIC.
  - g. Aggressive behaviors such as advancing on or toward an officer, refusal to follow directions or commands combined with physical posturing, and verbal or nonverbal threats.
2. Failure to exhibit violent or dangerous behavior prior to the arrival of the officer does not guarantee that there is no danger.
  3. A PIC may rapidly change their presentation from calm and command-responsive to physically active. This change in behavior may come from an external trigger (such as an officer stating "I have to handcuff you now") or from internal stimuli (delusions or hallucinations). A variation in the person's physical presentation does not necessarily mean they will become violent or threatening, but officers should be prepared at all times for a rapid change in behavior.
  4. Context is crucial in the accurate assessment of behavior. Officers should take into account the totality of circumstances requiring their presence and overall need for intervention.

#### C. Response to PIC

If the officer determines that an individual is experiencing a mental health crisis and is a potential threat to themselves, the officer, or others, law enforcement intervention may be required, as prescribed by statute. All necessary measures should be employed to resolve any conflict safely using the appropriate intervention to resolve the issue. The following responses should be considered:

1. Request a backup officer. Always do so in cases where the individual will be taken into custody.

2. Request assistance from individuals with specialized training in dealing with mental illness or crisis situations (e.g., Crisis Intervention Team (CIT) officers, community crisis mental health personnel, crisis negotiator, or police psychologist).
  3. Contact and exchange information with a treating clinician or mental health resource for assistance, based on law and statute.<sup>1</sup>
  4. Take steps to calm the situation. Where possible, eliminate emergency lights and sirens, disperse crowds, lower radio volume, and assume a quiet nonthreatening manner when approaching or conversing with the individual. Where violence or destructive acts have not occurred, avoid physical contact, and take time to assess the situation. Officers should operate with the understanding that time is an ally and there is no need to rush or force the situation.
  5. Create increased distance, if possible, in order to provide the officer with additional time to assess the need for force options.
  6. Utilize environmental controls, such as cover, concealment, and barriers to help manage the volatility of situations.
  7. Move slowly and do not excite the individual. Provide reassurance that officers are there to help and that the individual will be provided with appropriate care.
  8. Ask the individual's name or by what name they would prefer to be addressed and use that name when talking with the individual.
  9. Communicate with the individual in an attempt to determine what is bothering them. If possible, speak slowly and use a low tone of voice. Relate concern for the individual's feelings and allow the individual to express feelings without judgment.
  10. Where possible, gather information on the individual from acquaintances or family members and/or request professional assistance, if available and appropriate, to assist in communicating with and calming the individual.
  11. Do not threaten the individual with arrest, or make other similar threats or demands, as this may create additional fright, stress, and potential aggression.
  12. Avoid topics that may agitate the individual and guide the conversation toward subjects that help bring the situation to a successful conclusion. It is often helpful for officers to apologize for bringing up a subject or topic that triggers the PIC. This apology can often be a bridge to rapport building.
  13. Attempt to be truthful with the individual. If the individual becomes aware of a deception, they may withdraw from the contact in distrust and may become hypersensitive or retaliate in anger. In the event an individual is experiencing delusions and/or hallucinations and asks the officer to validate these, statements such as "I am not seeing what you are seeing, but I believe that you are seeing (the hallucination, etc.)" are recommended. Validating and/or participating in the individual's delusion and/or hallucination is not advised.
- D. Taking Custody or Making Referrals to Mental Health Professionals
1. Based upon the overall circumstances of the situation, applicable law and statutes, and agency policy, an officer may take one of several courses of action when responding to a PIC.
    - a. Offer mental health referral information to the individual and/or family members.
    - b. Assist in accommodating a voluntary admission for the individual.
    - c. Take the individual into custody and provide transportation to a mental health facility for an involuntary psychiatric evaluation.
    - d. Make an arrest.
  2. When circumstances indicate an individual meets the legal requirements for involuntary psychiatric evaluation and should be taken into custody and transported to a mental health facility, or when circumstances indicate that an arrest is necessary, the officer should, when possible, request the assistance of crisis intervention specialists to assist in the custody and admission process, as well as any interviews or interrogations.
  3. Officers should be aware that the application or use of restraints may aggravate any aggression being displayed by a PIC.
  4. In all situations involving a PIC, officers should
    - a. Continue to use de-escalation techniques and communication skills to avoid escalating the situation.

<sup>1</sup> Officers in the United States can provide the HIPAA exemption reference number (45 CFR 164.512(j)(1)(i)(A)) for the clinician's reference, if necessary. This exemption states that it is allowable for a covered entity to disclose protected health information to law enforcement if it "is necessary to prevent or lessen a serious and imminent threat to the health or safety of a person or the public."

- b. Remove any dangerous weapons from the area.
- c. Where applicable, ensure that the process for petition for involuntary committal has been initiated by the appropriate personnel.

E. Documentation

Officers should

1. Document the incident, regardless of whether or not the individual is taken into custody. Where the individual is taken into custody or referred to other agencies, officers should detail the reasons why.
2. Ensure that the report is as specific and explicit as possible concerning the circumstances of the incident and the type of behavior that was observed. Terms such as “out of control” or “mentally disturbed” should be replaced with descriptions of the specific behaviors, statements, and actions exhibited by the person.
3. In circumstances when an individual is transported to a mental health facility for a psychiatric evaluation, and agency policy permits, provide documentation to the examining clinicians detailing the circumstances and behavior leading to the transport.

Every effort has been made to ensure that this document incorporates the most current information and contemporary professional judgment on this issue. Readers outside of the United States should note that, while this document promotes procedures reflective of a democratic society, its legal basis follows United States Supreme Court rulings and other federal laws and statutes.

Law enforcement administrators should be cautioned that no “model” policy can meet all the needs of any given law enforcement agency. Each law enforcement agency operates in a unique environment of court rulings, state laws, local ordinances, regulations, judicial and administrative decisions and collective bargaining agreements that must be considered, and should therefore consult its legal advisor before implementing any policy.

This document is not intended to be a national standard.

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