

I. Introduction and welcome

Recommendation

One way to open this Module is to engage the class in a brief, facilitated discussion on the big-picture issues confronting policing today. This can break the ice and get people talking about the difficult issues facing police today. Here is a possible example.

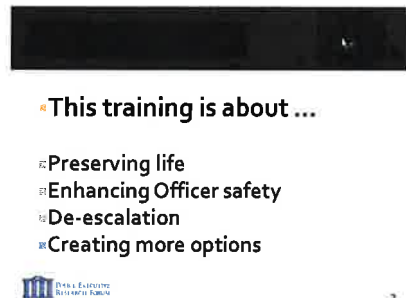
- A. Welcome students – lead a facilitated discussion
 1. What is the biggest issue facing law enforcement today? What are we getting the most criticism about?
 - a. Use of force
 - b. Breakdown of police-community trust
 2. Is that criticism fair?
 - a. In some cases, yes. But in others, probably not.
 - b. There is a “new normal” – a controversial incident in one jurisdiction can affect all of law enforcement
 3. As a profession, can we do some things differently? Should we strive to do better?
 4. That’s the backdrop for this training
 - a. Confronting difficult issues facing law enforcement
 - b. Exploring options on how to make your job safer and more effective
- B. Go over ground-rules
 1. Discussion and participation ... this is “hands-on” training – in the classroom and in scenarios
 2. Be open-minded to new concepts
 3. Be respectful of one another and others’ ideas

Slides & Notes

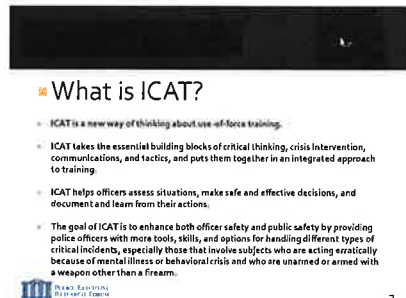
SLIDE #1



SLIDE #2



SLIDE #3



II. Why this training?

- A. First, it's important to put these issues in some context
 - 1. APD responds to an average of twelve-hundred 5150 calls per year.
 - 2. 220 of the calls involve knives or edged weapons.
 - 3. 184 involve street drugs or prescription medications.
 - 4. 54 of the calls involve firearms.

III. Zero shootings

In the past ten years we have had zero shootings involving persons in-crisis armed with a weapon other than a firearm. Let the officers know they are doing a great job.

IV. What the training covers

- A. Skills you already use on a daily basis:
 - 1. Threat assessment
 - 2. Decision making
 - 3. Crisis recognition
 - 4. Communications
 - 5. Physical tactics
- B. Integrates those skills ... emphasizes the importance of using them in tandem
- C. Also, the importance of teamwork, responding and working as a team
- D. Focuses on situations involving persons with mental illness or in behavioral crisis ... plus, "suicide-by-cop"

Instructor Notes

SLIDE #4

Why ICAT?

Twelve-Hundred 5150 calls per year

(Average of 100 per month)

- 220 - knives or edged weapons (18 per month)
- 184 - drugs or prescriptions (15 per month)
- 54 - firearms (5 per month)



3

SLIDE #5

From 2007 to current ...

APD has had **ZERO** Officer Involved Shootings involving persons in-crisis armed with a weapon other than a firearm.



4

SLIDE #6

What this training covers ...

- Skills you already use on a daily basis
- Pulls those skills together – applies them to non-firearm related critical incidents
- Focus on persons in crisis, "suicide-by-cop" situations
- Emphasis on teamwork



5

V. Training focuses on four key areas:

1. Patrol officer response (typically first on scene)
 - a. First few minutes of the encounter are often crucial to a safe resolution
 - b. Goal may be to stabilize the situation
 - c. Often means “buying time”, so supervisors, additional resources, special units can respond
2. Incidents that do not involve firearms
 - a. Focus of this training is on the cases where the subject is unarmed or armed with a weapon other than a firearm (knife, bat, rocks, etc.)
 - b. Many of these encounters are dangerous – not minimizing that
 - c. But some can be safely resolved without the use of deadly force – that’s the focus of this training
3. Integration of skills – crisis recognition/response, communications/negotiations, and tactics
 - a. Taking key skills from each discipline – then putting them together as part of an overall response
 - b. Goal: Influence behavioral change to gain compliance – officers need a wide range of skills to confront and stabilize often chaotic scenes
 - c. Training provides alternatives to drawing service weapon and repeatedly shouting “drop the knife”
4. Officer safety and wellness
 - a. Keeping officers out of harm’s way by providing more options to rushing in on every call
 - b. Also, protecting officers from the emotional trauma, media scrutiny, and legal troubles that often accompany an officer-involved shooting

Instructor Notes

SLIDE #7



Four key areas:

- Patrol officer response
- Non-firearm incidents
- Integration of crisis intervention, communications & tactics
- Officer safety - physical, emotional, legal



VI. What the training is not

1. **Not** telling officers to walk away from danger
2. **Not** telling officers you can't use force, including lethal force, when appropriate
3. **Not** taking away or limiting options for officers ... rather, trying to *increase options*, which enhances safety

VII. Policy Review

APD Policy 414 – Crisis Intervention Incidents

Provide everybody with a copy of the policy and allow them time to individually read the policy.

Instructor Notes

SLIDE #8

- **What the training is not...**
 - **Not** telling officers to walk away or ignore dangerous situations
 - **Not** telling officers they can't use force – including lethal force – when appropriate
 - **Not** about limiting options for officers ... rather, it's about *increasing options*



7

SLIDE #9

• **Policy Review**

APD Policy 414

Crisis Intervention Incidents



9

Recommendation

Two reminders prior to showing this and other videos:

- Set up the video; provide some background information and context.
- Remind students that the videos are not meant to be “good” and “bad” examples; the purpose is not to judge or second-guess the officers’ actions or render a grade. Rather the videos illustrate the real-world challenges officers face. The purpose is to generate discussion on how these challenges might be handled as safely and effectively as possible.

In every video, there will be elements or actions that students will have problems with. That’s fine; none of the videos is “perfect.” Ask students to focus on the “teaching moments” or “lessons learned” based on the Training Guide.

A. Columbia, SC video

1. September 10, 2016 – 0345 hours
2. Officers and EMS workers respond to a man sitting on a bridge guardrail, feet dangling over the highway
3. Show video
4. Lead a brief discussion: possible questions
 - a. Do we see enough videos like this on the news?
 - b. Caring ... compassionate ... protecting life
 - c. Solid communications skills, tactics, teamwork (we’ll touch on those throughout this training)
 - d. That’s what much of policing in the U.S. is all about – important to remember that

Instructor Notes

SLIDE #10



Suicidal man in Columbia, SC



10

Video also available at

<https://www.youtube.com/watch?v=58FfkuJZRJE>

Additional background:

<http://www.thestate.com/news/local/article102000562.html>

SLIDE #11



• Recent APD Responses



11

Recommendation

Again, remember to ...

- Set up the video; provide some background information and context.
- Remind students that the videos are not meant to be “good” and “bad” examples; the purpose is not to judge or second-guess the officers’ actions or render a grade. Rather the videos illustrate the real-world challenges officers face. The purpose is to generate discussion on how these challenges might be handled as safely and effectively as possible.

1. Background on the call
 - a. Happened in St. Louis, 10 days after Ferguson
 - b. Two calls to 9-1-1 reporting a male had taken drinks from a convenience store and was pacing in front of the store with a knife
2. The incident was captured on cell phone video
 - a. Play video
 - b. [NOTE: this video stops right before officers shoot]

E. What were these responding officers faced with?

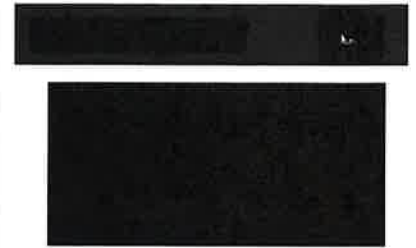
Lead a brief facilitated discussion (Slide #8)

Then, summarize - (Slide #9)

1. A complex, dynamic event
2. Did officers get enough information from Dispatch?
3. Person with a knife – potential danger to officers and public
4. Person behaving erratically
 - a. What does his behavior tell us?
 - b. Was this person in behavioral crisis?
 - c. (Turns out subject had history of mental illness)
5. Person was non-compliant
 - a. Disregarded orders to “drop the knife?”
 - b. When that fails, what else can we say?
6. Officer and public safety

Instructor Notes

SLIDE #12



Patrol Officer Response – St. Louis Incident



12

Video also available at

<https://www.youtube.com/watch?v=FslILKQya3c>

SLIDE #13



• What challenges did these officers face?

- Person with a knife ... a potentially dangerous encounter
- Behaving erratically
- Non-compliant ... disregarded orders to drop the knife
- Officer and public safety
- Suicide by cop ... shouting “shoot me”



13

SLIDE #14



Possible Options and Contingencies

- Slow down the situation and collect more information
- Keep subject under observation
- Request Supervisor Response
- Stage AMR
- Continue communicating with subject
- Tactically reposition and maintain a secure area
- Remove distractions

- a. Did officers create and maintain a safe distance?
- b. Adequate cover?
- c. What about the safety of bystanders?
7. "Suicide by cop"
 - a. Man shouted "shoot me"
 - b. What does that tell us? And what do we do?
- F. Let's see how this incident ended
 1. Play video – then lead a brief discussion
 2. What else might these officers have done?
 3. What additional information/resources would you have wanted?
 4. How might you have approached this differently?
 5. What outcome would you have wanted?
- G. **These types of encounters are not easy**
 1. Traditional police training has taught officers to do essentially what those two officers did – respond immediately, give commands, take charge of the situation, hold your ground
 2. That approach often worked in the past
 3. But today, we are dealing with ...
 - a. A more defiant, non-compliant, even disrespectful public
 - b. Also, a sizeable number of people who are suffering from mental illness or behavioral crisis – people who don't respond to police commands
 - c. Bystanders videotaping what we do – adds another "wild card"
 4. This training challenges some traditional thinking about our response to these types of encounters – and it proposes some new ideas and different approaches

Instructor Notes

SLIDE #15



St. Louis Incident – Conclusion

14

Video also available at

<https://www.youtube.com/watch?v=2ImIYme93Po>

SLIDE #16



**These encounters are
not easy ...**

**Can we handle them more
effectively and more safely ...
for everyone?**



16

5. It asks the question ...
 - a. Can we do things differently, more effectively and more safely for everyone – officers, the public and the subject?
 - b. Can we take skills you already have – decision-making, crisis intervention, communications, and sound tactics – **and combine them into a more coordinated, effective, team response?**
6. In short, the training is about creating more options
 - a. Slowing down situations like this one in St. Louis, whenever possible
 - b. Giving you more tools and skills to resolve them without having to resort to lethal force, if possible

Instructor Notes

Overview: Incidents involving persons in behavioral crisis present a unique and difficult challenge for the police, and these types of calls appear to be growing. How these cases are handled can have significant short- and long-term consequences not only on the individuals and their loved ones, but also on officers, their agencies, and their relationship with the community. In recent years, through programs such as Crisis Intervention Team (CIT) training, police agencies have recognized the importance of these situations and have provided specialized training to many police officers.

This module is not intended to replace the specialized instruction provided through CIT or other programs. Rather, this module is intended as a general overview of crisis recognition and response, which can be augmented by more specialized training such as CIT. This module is specifically designed to help the initial patrol officers arriving on a scene involving a person in behavioral crisis to slow down and attempt to stabilize and defuse the situation (whenever possible), with the goal of moving it toward a safe and peaceful resolution through voluntary compliance. Often this is achieved with the assistance of CIT-trained officers, other specialized police personnel, and even other agencies, once they arrive on scene. Still, the initial responding officers require the tools and skills needed to stabilize and manage the situation until those additional resources arrive.

While this module is not "CIT training," it does touch on a number of issues related to mental illness. *To the extent possible, agencies should try to include specially trained subject matter experts, from within or outside the department, in the customization and delivery of this training.*

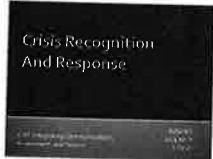
I. Recognizing Someone in Crisis

When someone is in crisis there is often a precipitating event, and the individual is unable to resolve the crisis using normal coping methods. When an individual is in crisis, he or she often experiences heightened emotionality and lowered rational thinking. The person in crisis will begin to experience psycho-physical arousal which in turn may bring about physiological changes. This crisis may be a result of mental illness, as well as people suffering from substance abuse or personal crises, or a combination of factors.

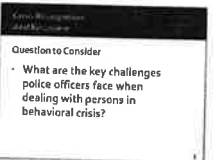
Recognizing the signs of a person in crisis is a necessary first step to effectively responding to that person. Patrol officers are not expected to be able to clinically diagnose a person in crisis. However, officers are more effective during critical incidents, and can achieve safer outcomes, when they can recognize and identify the common signs that a person they encounter may be in crisis.

Instructor Notes

SLIDE #1



SLIDE #2



Question to Consider

- What are the key challenges police officers face when dealing with persons in behavioral crisis?

- A. What is a “behavioral crisis?”
1. An episode of mental and/or emotional distress that is creating instability or danger and is considered disruptive by the community, friends, family or the person him/herself
 2. Three key factors:
 - a. It's episodic – a unique event
 - b. Creates instability or danger
 - c. Other people (or even the individual in crisis) consider it disruptive – and sometimes dangerous
 3. That's why people call the police (and not EMS or mental health) when they encounter someone in crisis
 4. The police response to a person in behavioral crisis is different, more complicated
- B. How does a crisis typically occur?
1. Often a precipitating event (death of a loved one, violence, divorce, job loss, mental illness, reaction to/stopping medication)
 2. The person's perception of the event – which can be accurate, erroneous, or somewhere in between
 3. Normal methods of coping/solving problems fail
 4. Resulting in ...
 - a. A breakdown in control
 - b. Inability to respond appropriately
 - c. Often feeling “overwhelmed”
- C. Why should I care?
1. Because people in crisis need help
 2. Because crises can impact public and officer safety
 3. Because it's our job – to serve and protect everyone
 4. Gets back to the core of the Critical Decision-Making

Instructor Notes

SLIDE #5

- Why Should I Care?
 - People in crisis need help
 - Impacts public and officer safety
 - It's our job – to serve and protect
 - Reflects mission, values & ethics – sanctity of life

SLIDE #6

Instructor Notes



Adapted from the Nassau County, NY Police Department

Some agencies use the term "Emotionally Distressed Person" however, the term "Distressed" is another definition of "crisis"

A real or perceived set of circumstances that makes a person feel that they are unable to appropriately resolve their situation
<https://www.nimh.nih.gov/health/topics/schizophrenia/raise/glossary.shtml>
 (Police Training Institute, Univ. of Ill.)

SLIDE #4

<https://www.naim.org/Learn-More/Mental-Health-Conditions/Posttraumatic-Stress-Disorder>

Each crisis is unique. A situation might occur to numerous people but not be a crisis for everyone.

SLIDE #7

CAUSES AN



Model – our mission, values and ethics

D. “Person in crisis” sometimes referred to as an

EDP (or Emotionally Distressed Person) –

Four types of possible contributing factors ...

1. Mental illness, including ...
 - a. Perception disorder (or hallucinations) – hearing, seeing, touching, smelling or tasting things that are not real
 - b. Thought disorder (or delusions) – false beliefs that have little or no basis in reality
 - c. Mood disorder – emotional extremes, violent swings, flatness
 - d. PTSD – flashbacks, frightening thoughts/dreams, hyper arousal, avoidance, disassociation (out-of-body experiences)
 - i. May try to cope through drinking, drug abuse
 - ii. Can be significant issue in military communities
2. Substance abuse
 - a. Alcohol
 - b. Illegal drugs
 - c. “Synthetic” drugs
 - d. Combination of substances
3. Medical condition
 - a. Including side effects of medication
 - b. No longer taking medication
 - c. Traumatic brain injuries (TBI)
 - i. Injury may be obvious (open head wound) or less obvious (closed head wound)
 - ii. Symptoms include being dazed, confused, disoriented; fatigue; dizziness/loss of balance; confusion; agitation/combativeness; unusual

Instructor Notes

SLIDE #8



TBI is a serious public health problem—an estimated 2.5 million incidents a year. For more information, http://www.cdc.gov/traumaticbraininjury/get_the_facts.html and <http://www.mayoclinic.org/diseases-conditions/traumatic-brain-injury/basics/symptoms/con-20029302>

SLIDE #9



SLIDE #10



For an overview of intellectual and development disabilities, <https://www.nichd.nih.gov/health/topics/idds/Pages/default.aspx>

behavior; difficulty communicating/ processing information

iii. Creating big challenges for police officers

4. Situational stress

- a. Job loss
- b. Financial troubles
- c. Relationships

5. Or it can be a **combination** of these factors – this can especially challenging for the police

E. Important to remember that **not everyone behaving erratically is suffering from emotional distress** – there are other factors that officers need to consider ...

1. Intellectual and developmental disabilities

- a. Disorders usually present in birth that negatively impact a person's physical, intellectual and/or emotional development into adulthood, and require support
- b. Common examples:
 - i. Autism spectrum disorder
 - ii. Cerebral palsy
 - iii. Epilepsy
 - iv. Developmental delay
- c. May result in difficulties in life areas, such as communication, ability to learn, adaptive living skills, self-direction, self-help, and/or mobility
- d. Common police calls (often no crime involved):
 - i. Walking into traffic
 - ii. Entering homes/looking into windows
 - iii. Wandering
 - iv. Rearranging store displays
 - v. Following customers around a store

Instructor Notes

SLIDE #11



For general information on physical disabilities,
<http://hwa.org.sg/news/general-information-on-physical-disabilities/>

- e. May be attracted to shiny objects, overly sensitive to light, sound or touch
- f. May run from the police or display erratic behavior because of fear, not necessarily because they committed a crime

2. Physical disabilities

- a. A disabling condition or other health impairment that requires adaptation
- b. Can be congenital, acquired with age, or the result of an accident
- c. Some common examples:
 - i. Deaf/hard of hearing
 - ii. Blind/low vision
 - iii. Muscular Dystrophy
 - iv. Multiple Sclerosis
 - v. Stroke
 - vi. Alzheimer's
 - vii. Huntington's Disease
 - viii. Traumatic neurological disorders

- d. Physical disability may make it difficult for a person to hear, understand and follow directions
- e. Communications may not work – not because the person is defiant or non-compliant, but because they can't hear or comprehend, and can't respond back to you
- 3. Persons with physical and/or developmental disabilities may exhibit some of the same unusual or erratic behaviors as EDPs
 - a. Don't assume someone behaving erratically suffers from mental illness
 - b. It could be one of many factors – or a combination of factors
- F. **Focus on the subject's behavior**, which can provide important clues. Is he or she ...
 - 1. Responding to dialogue/verbal commands?
 - 2. Coherent? (Or talking in "word salad?")
 - 3. Able to make eye contact?
 - 4. Agitated? (Shouting, pacing, talking to people not there)
 - 5. Talking to themselves?
 - 6. What is the state of their hygiene and clothing
 - 7. Environmental factors (e.g., overflowing trash, aluminum foil on windows, etc.)
- G. One other effective (but often underutilized) approach to recognizing someone in crisis – **Ask!**
 - 1. If the situation lends itself, ask the person questions such as ...
 - a. Are you on medication?
 - b. Do you have a doctor you normally see?
 - c. How can I help with what's bothering you?

Instructor Notes

SLIDE #12

- Persons with disabilities may exhibit **same** behaviors as EDPs
- Don't always assume it's mental illness
- Could be one of many factors – or a combination of several
- Focus on subject's behavior

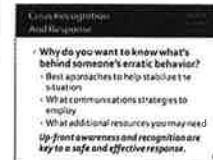
SLIDE #13

- Another Approach – Ask!
- Ask the person ...
 - Are you on medication?
 - Do you normally see a doctor?
- Ask family members or friends if able ...
 - Do you suspect a mental health crisis?
- Ask Dispatch
 - Get more information, ask follow-up questions

2. Ask family members or friends nearby ...
 - a. Does the person have a mental health condition?
 - b. A physical or development disability?
 - c. What might the person respond to positively?
 3. Ask the Dispatcher to get more information from the caller or previous call history
- H. Why do you want to take the time to try and understand what's behind someone's erratic behavior? Because that information can help you figure out ...
1. What approaches might work to help stabilize the situation
 2. What communication strategies to employ
 3. What additional resources you may need to resolve the situation
 4. **Up-front awareness and recognition are key to coming up with a safe and effective response**

Instructor Notes

SLIDE #14



Crisis recognition is part of Step #1 in the Critical Decision-Making Model: Collect Information.

*As with CIT training, officers are not expected to become expert clinicians. **Rather, we are trying to understand mental health issues and indicators for the purpose of having an effective response/communication strategy.***

II. Responding to Someone in Crisis

For the first responding officer on the scene, the mission is not to diagnose the person in crisis or try to counsel him or her to an immediate resolution. Rather, it is to assess the situation and make it safe; attempt to defuse the crisis as much as possible; buy time for specialized resources to arrive; and try to get the subject to a state where he or she can make more rational decisions, resulting in a safe and peaceful resolution through voluntary compliance. Specific communication and tactical skills are covered in future modules. This unit focuses on how to approach the initial response.

A. What the encounter looks like from the other perspective

1. Set up video

- Paton Blough suffers from Type 1 Bipolar disorder, which he didn't discover until age 26
- For years, he experienced manic episodes that led to various encounters with the police (6 arrests)
- Now in recovery, he speaks about those incidents
- This is a 2016 video essay he did for PBS

2. Play Paton Blough video

3. Discuss briefly – possible comments to explore:

- "Rules of society don't apply to me when I'm having one of my episodes."
- "You can imagine the kind of reaction someone like me might have when delusions trigger an incident in which a police officer wants to engage with me or, worse, arrest me."
- "The other three (arrests) were extremely violent, because, in my head, I was fighting for my life."
- "One time, I was arrested by an officer who I believed naturally possessed many of the things we train. He slowed down and didn't force the issue."
- "Make the person feel they're in control – slow down and stay calm."

Instructor Notes

SLIDE #15



SLIDE #16



For video, transcript and comments, go to:

<http://www.pbs.org/newshour/bb/t-his-is-what-its-like-to-be-arrested-while-suffering-mental-illness/>

For background on Paton Blough and Rehinge, <http://rehinge.com/>

B. Some facts about people with mental illness

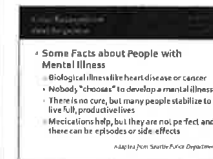
1. Mental illness is a biological illness just like heart disease, cancer or diabetes
2. Nobody “chooses” to develop a mental illness – **one in four** families is affected
3. There is no cure, but many people stabilize to live full, productive lives
4. Medication plus therapy can be effective, but side effects of medication can potentially cause crises and erratic behavior

C. Mental illness and the criminal justice system

1. People with serious mental illness (SMI) can be violent, especially when experiencing a psychotic episode
 - a. One study: people with SMI are up to three times more likely to be violent than general population
 - b. When SMI is associated with substance abuse, the risk may increase much further
2. But most people with mental illness are not violent and never will be
 - a. About 3-5% of violent acts can be attributed to someone with a serious mental illness
 - b. People with mental illness are 10 times more likely to be victims of violent crime than the general population
3. Jail is generally not a helpful place for someone to get stabilized
 - a. Only a small percentage of people with mental illness have committed a crime or qualify for an involuntary evaluation

Instructor Notes

SLIDE #17



SLIDE #18



Source:

<https://www.nimh.nih.gov/about/director/2011/understanding-severe-mental-illness.shtml>

Source:

<https://www.mentalhealth.gov/basics/myths-facts/>

Police officers are likely to see people when they're at their worst – in the most serious of crises. Officers are not necessarily seeing a true cross-section of people with mental illness. Encounters with people with serious mental illness can be dangerous. But that doesn't mean every person with mental illness is violent and dangerous.

- b. Don't approach an encounter thinking it will be "solved" if you can get the subject in custody as quickly as possible – a temporary band-aid at best
- c. Person will likely be back in the community and you will likely have to respond again

D. What is "Crisis Intervention?"

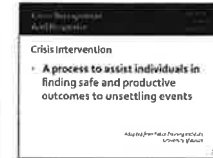
- 1. A process to assist individuals in finding safe and productive outcomes to unsettling events
- 2. As first responding officer, you're one (very important) part of the crisis intervention process
 - a. **The subject's first interaction with police is critical**
 - b. You set the tone and help chart the course toward a resolution
- 3. But you (by yourself) are not the entire process
 - a. Your role is not to "solve" the underlying crisis
 - b. It is to stabilize the situation, make it safe, help get the person in a frame of mind to find solutions
 - c. Then, hopefully hand it over to others to provide longer-term care and solutions

E. Two guiding principles to keep in mind:

- 1. Your mission is not to diagnose the subject or treat/solve the underlying issues
 - a. Don't assume you have correctly diagnosed the person
 - b. Don't assume you know what to do based on your "diagnosis"
- 2. Top priority (when feasible) is to verbally defuse and stabilize the situation as much as possible
 - a. Try to get the person to a state where he or she can function and reason a bit better
 - b. Where voluntary compliance can be achieved

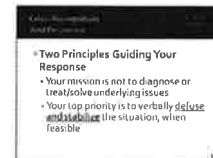
Instructor Notes

SLIDE #19



Verbal de-escalation: use of words and actions to reduce a heightened emotional and physical state, in order to facilitate calm, rational interaction (Seattle Police Department)

SLIDE #20



F. Emotional – Rational Thinking Scale

1. Decision-making gets clouded by emotions – people can't make good, rational decisions when they are overly emotional
2. As emotionality goes down, rationality goes up – this results in better, more logical decision-making
3. As the first responding officer, you should focus on:
 - a. Trying to recognize where the person may be on this scale
 - b. If out of balance, then working to lower emotions, raise rational thinking

G. Three-phase response process when faced with a person in crisis

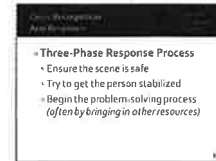
1. Safety – of the public, the subject, the police
2. Stability – try to get the person stabilized through verbal and non-verbal de-escalation techniques
3. Problem solving (eventually)
 - a. As much as possible, try to get the person to a state of rational thinking/decision-making
 - b. Increases the likelihood of voluntary compliance and incident resolution
 - c. Again, this may require additional specialized resources – within and outside your agency.

H. Trying to defuse a critical situation does not ...

1. Take away or restrict your discretion to make an arrest, where probable cause exists
2. Take away or restrict your ability to use reasonable and proportional force when faced with an imminent threat
3. But these should generally be considered last resorts – when other approaches have been tried and failed

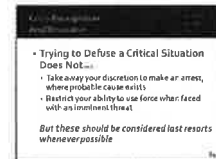
Instructor Notes

SLIDE #21



This process corresponds with CDM steps 2 and 4 (assessing threats/risks, determining best course of action).

SLIDE #22

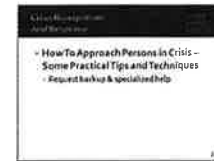


I. How to approach persons in crisis – some practical tips and techniques:

1. Request backup and specialized help
 - a. CIT-trained officers
 - b. Local mental health partners
2. **Don't rush into situations** (unless immediate action is required)
 - a. Move slowly
 - b. Focus on calming the situation
 - c. Minimize the stress level
3. Continually assess – and re-assess
 - a. As the subject's demeanor and actions change, be prepared to adjust your approach
 - b. "Spin the CDM model"
4. **Communicate, communicate, communicate**
 - a. Put yourself in a position to have a conversation, not a situation where all you can do is bark commands
 - i. Start by saying "hello" and introducing yourself
 - ii. Then ask how you can help
 - b. Clear and simple statements
 - i. Shouting commands is often counterproductive to someone in crisis
 - ii. No more than one command/question at a time – and allow the person time to answer
 - iii. Don't make threats
 - c. Ask open-ended questions to initiate dialogue
 - i. But avoid leading questions
 - ii. When needed, yes/no questions can elicit specific information (e.g., "Are you taking any medications?")

Instructor Notes

SLIDES #23-26



NOTE: These are "build" slides. Each mouse click displays the next bullet.



Many of the communication skills touched on here are covered in much more detail in Module #4 (Tactical Communications).

Tactical tip: It's also important to make sure you are communicating with your partners and other personnel on the scene.

- d. Active listening
 - i. Show the individual you hear what *they* are saying – reflect back their thoughts & feelings
 - ii. Don't take it personally if the subject doesn't respond/obey
 - iii. He/she may not hear or understand you

5. Watch your body language

- a. People in crisis may not understand your words, but they can often read your tone and body language – sense whether you care about them
- b. Be sincere and compassionate – display empathy
- c. Respect the person's "personal space"
- d. Recognize your presence may cause agitation – don't take it personally; leave ego in your locker

6. Be aware of ...

- a. **"Hot buttons" (or "Triggers"):** topics that may further agitate the subject – avoid them
- b. **"Hooks":** topics that may help to calm the subject – leverage them to your advantage

7. If person in crisis is displaying one behavior type, consider doing the opposite

- a. If they are yelling, be calm
- b. If they are "flat-lining," be more assertive

8. Always be respectful, never dismissive

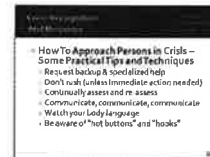
- a. Don't say things like "calm down" or "just take your medications"
- b. Display ethical leadership
 - i. You're in control of the situation
 - ii. Exercise that control with empathy and respect

Instructor Notes

Again, the specific techniques of active listening are covered extensively in Module #4.

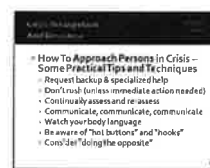


Additional information on non-verbal communication is contained in Module 4.



"Hot buttons" and "hooks" are featured prominently in the scenario-based training exercises.

The term "hot buttons" is adapted from FBI and NYPD training.

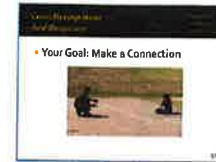


Remember what Paton Blough said: pretend the person you are dealing with is a relative or close friend.

- J. **Goal:** Make a connection with the subject ... so as to work toward voluntary compliance
1. Even in the middle of a crisis, most people respond positively to kindness, patience and respect
 2. "Tactical empathy" (not the same as "sympathy")
 - a. Never compromise your tactical position
 - b. But put yourself in a safe position to make that connection
 3. Not only can defuse a situation – can also help prevent unnecessary escalation
- K. When officers connect, **you can influence behavior**
1. **Behavioral Change Staircase**
 - a. FBI training tool for negotiators
 - b. Can be used effectively by patrol officers as well – a fancy name for something many of you practice every day
 - c. Five steps toward voluntary compliance
 - i. Introduction
 - ii. Empathy
 - iii. Rapport
 - iv. Influence
 - v. Behavioral change
 - d. First three steps are about connecting with the subject
 - e. Last two steps are about problem-solving
 - f. Active listening is critical throughout the process

Instructor Notes

SLIDE #24



This photo is from a scenario at the Camden County (NJ) Police Department, which was one of the ICAT pilot training sites.

Students may want to discuss the officer's position (crouched) and distance.

SLIDE #25



Adapted from the FBI Behavioral Change Stairway Model. For more background, see <https://viaconflict.wordpress.com/2014/10/26/the-behavioral-change-stairway-model/> and <http://www.mediate.com/articles/TompsonJbl20131304.cfm>

Another (somewhat simpler) approach used by the NYPD is the Law Enforcement Negotiation Stairway Model (LENS)

Law Enforcement Negotiation Stairway Model



L. Some things not to do

1. **Don't join in the subject's behavior**
 - a. If they're agitated, you need to remain calm
2. **Don't confuse the subject**
 - a. By issuing multiple commands or complex choices
 - b. Keep your communication simple
 - c. Allow time for answers
3. **Don't diminish the subject**
 - a. By whispering, joking or laughing
 - i. Can make the person suspicious or scared
 - ii. Can feed into their anxiety/fear/paranoia – this can escalate their behavior
 - b. Subject may feel he or she is not being taken seriously
4. **Don't lie or deceive**
 - a. If you're caught in a lie, you might never recover
 - b. Won't be able to move up the Behavioral Change Staircase
5. **Don't automatically view non-compliance as a threat**
 - a. There are many reasons subject may not be following your directions (can't hear, comprehend, process information)
 - b. Stay focused on the subject's behavior and communication back to you
6. **Remember ... everything you do impacts all future contacts the individual in crisis (and maybe family and friends) have with the police**
 - a. Don't make it harder for the next officer by taking shortcuts or treating someone poorly

Instructor Notes

SLIDE #26



NOTE: This is a "build" slide. Each mouse click displays the next bullet.

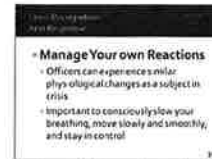


M. Finally ... manage your own reactions

1. When faced with a subject in crisis, officers can experience some of the same physiological changes the subject is going through
 - a. Rapid heart rate – adrenaline rush
 - b. Increased breathing rate – shallower breaths
 - c. Increased muscle tension
 - d. Rapid eye movement and “tunnel vision”
 - e. Auditory exclusion
 - f. Amygdala Hijack (emotional redlining)
2. Important for officers to consciously:
 - a. Slow breathing (inhale-hold-exhale on 4 count)
 - b. Stay as calm as possible
 - c. Keep good posture
 - d. Use eye contact
 - e. Move slowly and smoothly
 - f. Stay in control
3. You can say all of the “right” things ... but if you appear afraid, irritated, or angry, verbal communications will have little effect on defusing the situation
4. Your words need to match your body language and demeanor

Instructor Notes

SLIDE #27



III. Learning Activity–2 (Video Case Study)

Note

This exercise is to illustrate how one officer used some of the tips and techniques that are covered in this module to respond to a person in crisis. The video also illustrates some of the important elements of the Critical Decision-Making Model.

A few reminders:

- Set up the video ahead of time; provide background and context.
- Remind students that the video is not “perfect;” the purpose is not to judge or second-guess the officer’s actions or render a grade. Rather the video illustrates the real-world challenges officers face. The purpose is to generate discussion on how these challenges can be handled as safely and effectively as possible. We are not suggesting this was the only possible course of action in this case.
- Although the video plays for 9:43, it can be stopped at about 5:02. The main learning points are covered by then.

A. Set up the video

1. Appleton, WI
2. June 2009
3. Mother calls 9-1-1 to report her son (inside their house) is acting erratically, not making sense, is naked
4. First part of the video covers the communications traffic

B. Start the video

1. Stop at 2:50
 - a. **What information does he have? (CDM Step #1)**
 - Dispatch gathered and relayed critical information
 - Field units asked for clarification
 - Frequent updates, notifications, asking for resources

Instructor Notes

SLIDE #28



Video available at

<https://www.youtube.com/watch?v=jizOcTUIfV4>

We will have other videos later in the training where this level of information was not collected, asked for, or relayed to responding officers.

- b. **Supervisory response?**
 - Supervisor came on air and broadcast the “game plan”
 - Ensured specialized resources were in place
- 2. **Restart the video – Stop at 5:02**
 - a. **Initial approach – first impression?**
 - Started low – didn’t rush the action (appropriate based on the information he had)
 - Asked questions – gathered more information
 - Then, waited for other resources to get in place before going hands-on and securing Tim
 - b. **How was his communication?**
 - Reassuring messages right away (“It’s OK,” “I understand,” “You’re OK”)
 - Clear, simple directions (“Tim, we need to go to the hospital.”)
 - Calm, even tone of voice
 - Continued to offer reassurances throughout (“We’re not going to hurt you,” “We’re going to the hospital,” “It will be OK”)
 - c. **Body language?**
 - Open-handed gestures
 - Good presence – but still had the door available for cover initially
 - d. **Rapport building?**
 - Asked for and used the subject’s name
 - Acknowledged, was empathetic to the mother
 - Followed the subject’s lead – when Tim said he was going to lay down, the officer asked if he would lay down ... Tim complied
 - e. **Anything else?**

Instructor Notes

This is an example of a “tactical pause”—a concept discussed later in the training. See Module 5, p. 7.

Many of these points will be covered in greater detail in Module 4, Tactical Communications. However, it is probably good to introduce them and touch on them briefly here. You can refer back to his video in that Module.

Some students may wonder why the officer did not separate Tim and his mother. That is a reasonable topic for discussion, but not a major focus of this exercise.

V. Recap and Discussion

A. Quick recap

1. Many reasons for a person to be in crisis (or a combination of reasons)
 - a. Mental illness is one of them (but not the only one)
 - b. Officers need to be on the lookout for a number of reasons a person may be behaving erratically
2. Your priority is not to diagnose the person and try to resolve the situation immediately
 - a. Priority is to defuse, stabilize and get additional resources who can help you to the scene
3. Emotional-rational thinking scale
 - a. As emotions rise, rational thinking declines
 - b. Lowering someone's emotions can help them think more rationally and make better decisions
 - c. Won't always be possible, but almost always worth a try
4. How?
 - a. Through empathy, communication, showing respect, slowing things down, trying to make a connection
 - b. All about trying to get voluntary compliance, so the use of force becomes less likely or unnecessary

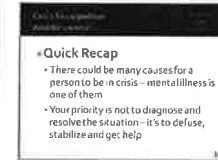
B. Any thoughts, questions, observations?

1. Review any agency-specific policy considerations not previously discussed (as appropriate)

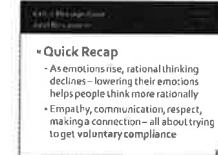
C. Distribute class evaluations of the module (if appropriate)

Instructor Notes

SLIDE #29



SLIDE #30



Overview: Today's police officers have more and better equipment and technology than ever before. Yet, almost every encounter between police and the public starts and ends with words. Most encounters require a more nuanced approach than the traditional "ask-tell-make" method of communications. Officers are more effective and safer when they can use words and other communications skills to their tactical advantage – to gain voluntary compliance, and thus minimize the need for force. Tactical communications skills are especially important when dealing with persons in mental health or other crises. Many of these skills are adapted from crisis and hostage negotiations training and are backed by science. Although negotiators may have to use these skills only occasionally, patrol officers can apply them every day.

NOTE: The previous module touched on communications skills in dealing with persons in crisis. This module provides more details and context.

I. Learning Activity – 1 (Assessment)

Activity: Assessment Group Project

Activity Time: 20 minutes

Activity Learning Objective: An assessment exercise that serves as an introduction to the Tactical Communications module

Required Equipment: Easel pads, markers

Facilitator Instruction: Break the class into small groups. Provide each group with markers and easel pads. Each group will have 10 minutes to brainstorm and record the attributes of a police officer they know who is an effective communicator. Each group will delegate a spokesperson who will present the findings to the class.

Wrap up with a discussion of the points on **Slide #3 – Five Universal Truths of Human Interaction**. You can ask the class if they agree/disagree with the list, and why or why not.

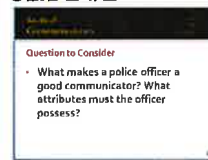
1. People feel the need to be respected
2. People would rather be asked than be told

Instructor Notes

SLIDE #1



SLIDE #2



SLIDE #3



Source: Dr. George Thompson, Verbal Judo Institute; see <https://www.policeone.com/communications/tips/2718138-The-5-universal-truths-of-human-interaction/>

3. People have a desire to know why
4. People prefer to have options over threats
5. People want to have a second chance

Encourage the class to keep these ideas in the back of their minds throughout this module.

II. Active Listening Skills

Many people don't actually listen; they are simply waiting to talk. That is why it is so critical not to interrupt and to pay close attention to what others are saying (and, sometimes, what they're not saying). It takes effort to listen – and it takes skill to listen to understand, not simply to respond.

A. Common misconception:

1. Communication is about being a good talker
2. In reality, it's about being a superb listener
3. Hearing is easy – listening is hard
4. What are some of things you can do to be a good and active listener?

B. Follow the “80-20 rule”

1. Ask the class if they know what the “80-20 rule” is
 - a. Invest 80% of communication time in listening
 - b. Devote just 20% to talking
2. Why this emphasis on listening? Because listening = intel gathering – about the subject's ...
 - a. Intentions and capabilities
 - b. Mental health history and medications
 - c. Criminal history / past violence
 - d. Emotional and behavioral triggers – “hot buttons” that might escalate the situation further
 - e. “Hooks” (things that might calm the subject) which you can leverage to de-escalate
3. Two practical benefits of active listening ... of keeping the subject talking:

Instructor Notes

SLIDE #4



Emphasize that these are NOT “soft skills.” These skills, combined with sound physical tactics, are what keep officers safe day in, day out.

For more active listening tips, see <https://www.mindtools.com/CommSkll/ActiveListening.htm>

Another video: “Talk to Me: Active Listening Skills from NYPD Hostage Negotiators”: <http://www.crisisnegotiatorblog.com/2016/10/active-listening-skills-from-nypd.html>

SLIDE #5



The Louisiana State Police helped to pioneer this concept, which is now used in many police training programs

A big component of active listening is asking “open-ended” questions that are designed to get the subject talking. That is covered on p. 12, below.

Active listening is a key element of CDM Step 2: Assess Situation, Threat and Risks,

ICAT Module #4: Tactical Communications

- a. That's time he/she is not doing something to threaten you or others
- b. More time to get additional resources to the scene

C. Listen to understand and learn – not to respond

1. Often, people hear a few words from someone else and immediately begin thinking about their response
 - a. It's impossible to be a good "active listener" if you do that
2. Take your time when you're listening
 - a. Be patient, let the person finish their thought, and listen carefully
 - b. Try to understand their perspective
 - c. Demonstrate empathy
 - d. All this can lead to voluntary compliance
3. One officer ("contact") may be doing the talking ... but **all officers on scene should be listening**
 - a. Again, to pick up intel and understand the subject's perspective
4. Also, pay attention to body language and non-verbal cues – not just the person's words
 - c. Important for everyone's safety

D. Reduce distractions

1. Stay focused on the subject, and ask the subject to focus on you
2. Environmental distractions (e.g., alarms, vehicles, etc.)
3. Public distractions (e.g., people who videotaping or questioning you and your actions)
4. Fellow officers (e.g., backup, mutual aid, etc.)
5. If feasible, consider turning down your radio – it can distract you and upset the subject
6. ***If you're the contact officer, rely on others to provide cover, crowd management, etc., so you can focus on listening and communicating***

Instructor Notes

SLIDE #6

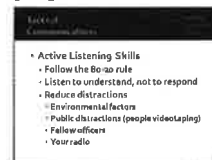


There are three levels of listening: (1) your agenda, (2) the subject's story, (3) the subject's values and beliefs. An effective "active listener" moves beyond (1) to fully understand (2) and (3). (Source: Police Scotland)

To change another person's actions (i.e., gain voluntary compliance), you need to first understand their perspective. That's why listening is so important.

*Active listening is a critical part of the **Behavioral Change Staircase** (see Module #3, p. 17)*

SLIDE #7



Emphasize that this requires coordination and teamwork on the part of responding officers—establishing roles and sticking with them.

E. Demonstrate you are listening

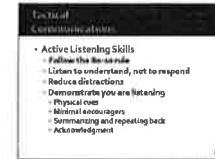
1. Send the message that you care – are empathetic
2. Physical cues to show you are listening
 - a. Eye contact
 - b. Facial expressions
 - c. Posture
 - d. Calm, open-handed gestures
3. “Minimal encouragers”
 - a. Nod your head
 - b. Say, “uh-huh,” “I hear what you are saying,” etc.
4. Reflect, paraphrase and summarize
 - a. Repeat last few words the subject said
 - b. “So, what you are saying is that you are upset with your boss”
5. Acknowledgment
 - a. Acknowledge that the subjects’ problems are a big deal to them
 - b. Acknowledge the emotions associated with the crisis (e.g., fear, anger, anxiety, etc.)
 - c. Never belittle or dismiss their problems
 - d. Be respectful, fair, non-opinionated

F. Use silence to your advantage (“effective pauses”)

1. Don’t interrupt or feel the need to respond (verbally) right away to everything the subject says
2. Allow the subject time to finish – people in behavioral crisis may have trouble putting words/thoughts together – be patient
3. If there is no threat and the subject is comfortable with silence, don’t be in a hurry to talk
4. Silence may prompt the subject to talk more – to reveal more information and intelligence you can use

Instructor Notes

SLIDE #8



Non-verbal communication is covered in detail in the next unit.

In general, avoid saying “I understand.” That can be a trigger for some people in behavioral crisis.

Some agencies and organizations use the acronym LEAPS:

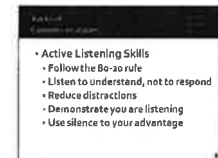
Listen
Empathize
Ask questions
Paraphrase
Summarize

For background, see

<http://www.managetowin.com/blog/2014/5/14/leaps-forward.html>

Don’t agree with or fight against hallucinations or delusions, but do react to their feelings. If the subject says, “I’m Jesus and I’m all powerful. You need to leave me alone!” you can say “I hear that you want to be left alone. I can’t leave because..., but I can take a step back to give you more space.”

SLIDE #9



Remember: the dialogue is supposed to be all about the subject, not about you. Don’t let periods of silence be awkward for you and, therefore, prompt you to start talking. You want to encourage the subject to talk.

5. Silence can be an effective way to enforce boundaries, redirect someone who is yelling at you
 - a. You can't argue with someone who won't argue back
 - b. Puts pressure on subject to end the silence, start communicating (not yelling) again

III. Non-Verbal Communication Skills

Studies show that much of communication is non-verbal. Only part of any message is conveyed through words; the rest is projected through (1) physical cues such as facial expressions and gestures, and (2) vocal elements such as tone. Research also tells us that when words and non-verbal elements don't align or contradict each other, people tend to believe the non-verbal. Perception always trumps intention. Understanding and paying attention to the non-verbal and tonal aspects of their communications can give officers a tactical advantage, which in turn can help to defuse volatile situations.

Optional: If you want to add some humor to the presentation, the video, "Big Bang Theory of Body Language," may be appropriate. The video is brief: 2:37.

A. Project the right body language

1. Posture
 - a. Interview stance (for safety and communications)
 - b. No cross-armed stances
 - c. Don't send signal you're here to resolve the situation as quickly as possible
2. Appearance
 - a. Look sharp, act sharp, be sharp
3. All part of the first impression
 - a. A subject in behavioral crisis will likely react to how you look before reacting to what you say
 - b. Project a sense that you care

Instructor Notes

Option: if you know of a good, quick Active Listening exercise, insert it here. At a minimum, encourage students to think about and practice active listening skills during the scenarios, as well as on breaks, etc.

SLIDE #10



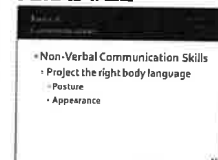
The end of this module discusses the concept of "emotional contagion" – that your words and actions are contagious. If you're calm and under control, there's a greater chance the subject will be as well. You can introduce the "emotional contagion" concept here and ask students to keep it in mind throughout the module.

SLIDE #11



Available at
<https://www.youtube.com/watch?v=ApvEhdSjP2g>

SLIDE #12



Remember: your appearance needs to match the words you're using.

B. Make eye contact

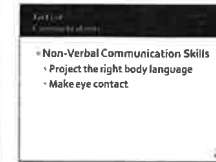
1. Powerful non-verbal de-escalation technique
 - a. Presents you in strong, stable manner
 - b. Provides subject with a calming focal point – especially important for people in crisis
 - c. Allows you to observe the subject for signs of extreme or inappropriate responses (officer safety)
2. Officers should ...
 - a. Look directly at the subject, focusing on the face (still scanning body and hands, for officer safety)
 - b. Maintain eye contact, even if the subject doesn't
 - c. In some cultures, constant, direct eye contact is avoided – adjust accordingly
 - d. With some escalated persons, prolonged eye contact may be perceived as a challenge and won't help in de-escalation attempts – again, adjust accordingly

C. Use open-handed gestures

1. Open hands communicate honesty and caring
2. Versus ...
 - a. No hand gestures (indifferent)
 - b. Hands hidden (untrustworthy – plus subject may think you're hiding something)
 - c. Hands clasped (nervous or tentative)
 - d. Arms folded (indifferent, aggressive)
3. Open hands in front of the body
 - a. A defensive (not offensive) posture
 - b. But provides for quick tactical response if needed
4. Complement hand gesture with head gestures too
 - a. Occasional nodding sends signal that you are listening and understand

Instructor Notes

SLIDE #13



In Police Scotland, officers are trained to sometimes remove their hats so a subject can see the officers' eyes more clearly.

For more cultural considerations, see <http://www.brighthubeducation.com/social-studies-help/9626-learning-about-eye-contact-in-other-cultures/>

SLIDE #14



Demonstrate to the class what you mean by an open-handed gesture.

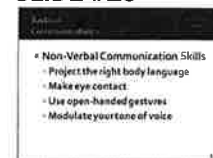
For more on hand gesture considerations, see <https://www.psychologytoday.com/blog/brain-wise/201209/your-hand-gestures-are-speaking-you>

D. Modulate your tone of voice

1. Using the exact same words but with different tones can create a sense of either comfort or aggravation
2. Match your tone to the needs of the situation – be calm and moderate, whenever possible
3. Recognize that some people can't hear / clearly understand what you are saying (e.g., deaf/hard of hearing, some people suffering from mental illness)
4. You can be both positive and assertive ("strong command voice") without being aggressive
5. Don't answer a raised voice by raising your own voice
 - a. Try to bring the subject down to your tone
 - b. Yelling/shouting sends signal that you're out of control
6. Sometimes you may need to raise your voice to get a subject's attention and gain compliance
 - a. If that doesn't work, bring the tone down and try something else
 - b. Be flexible
 - c. No profanity

Instructor Notes

SLIDE #15



IV. Verbal Communication Skills

What you say is still important. This includes both the words you choose and the way in which you use them. Precise and professional verbal communication is especially important today. Many police interactions are video- and audio-taped by members of the public and posted online. Other interactions are captured on police body-worn cameras, with some eventually released to the public as well.

A. Use the team concept to communications

1. Develop a plan – decide roles ahead of time (whenever possible)
2. Only one officer speaks (“contact officer”)
 - a. Other officers provide cover, secure perimeter, other functions
 - b. If contact officer is having success, then stick with that
 - c. If communication is breaking down, then switch roles – be flexible
 - d. If subject tries to talk with other officers, redirect him/her back to contact officer
 - e. Avoid having multiple officers talking, providing direction at the same time – this is confusing (especially for people with mental illness) and can be dangerous
3. Even with one contact officer, all officers need to be listening – gathering more information/intel

B. Use words to establish rapport, show empathy

1. You get only one chance at a first impression – it can set the tone/trajectory for the entire incident
2. Introduce yourself – get (and use) the subject’s name
3. Use vernacular of the subject – speak on his/her terms

Instructor Notes

SLIDE #16



Many of these techniques are basic Negotiations 101. Hostage negotiators use them all the time. They can be easily and effectively applied to patrol officer encounters as well.

SLIDE #17



Teamwork – especially contact and cover roles – is covered in greater detail in Module #5 – Operational Safety Tactics.

For example, you don't want to have one officer saying, "Put your hands up," with another officer saying "Get on the ground." Confuses both the subject and officers.

SLIDE #18



Think how you would introduce yourself at a social gathering.

4. Be patient and tolerant – let people work through their range of emotions
5. Always be truthful
 - a. Never get caught in a lie – you might not recover
 - b. It's better to say "I'm not sure" and go to something positive – "What I do know is I am here to help you"
6. Don't make promises you can't keep
7. Show empathy (not the same as sympathy or agreement)
 - a. Imagine it were a loved one in the subject's shoes
 - b. Try to find out more about the person – interests, "hooks"

C. Ask open-ended questions

1. A key element of active listening is asking the right questions
2. Especially "what" ... "how" ... and "why" questions
3. These questions generate discussion – provide you with more information
 - a. What happened? Can you tell me?
 - b. How are you feeling? (Not, "How are you doing?")
 - c. How can I help you? (Not "Calm down, relax!")
 - d. Why are you holding a knife?
4. Minimize the use of "closed" (yes-no) questions – they're not as effective as open-ended questions in getting someone to talk
5. Exception: you're trying to elicit a specific piece of information
 - a. What is your name?
 - b. Are you supposed to be taking medication?
 - c. Are you currently taking your medication?

Instructor Notes

Sympathy is a feeling of care and concern for someone, accompanied by a wish to see him or her better off.

Empathy is the ability to recognize and share the emotions of another person—to see someone else's situation from his or her perspective and share those emotions. For a short video explaining the differences, see <https://www.youtube.com/watch?v=1Evwgu369Jw>.

Another way to look at this process is "**Connect ... then Direct.**" As in, establish a connection, then direct the person toward stability and voluntary compliance.

SLIDE #19



The New York City Police Department emphasizes active listening through an approach called **PRIME SOS**:

Paraphrase
Reflect/mirror
"I" message
Minimal encourager
Emotional labeling

Summarize
Open-ended questions
Silence

6. Encourage conversation, without dominating/steering it
 - a. Remember the 80-20 rule
 - b. Follow up questions with acknowledgments, encouragers, clarifications, empathetic responses
7. If you don't understand the subject's response, ask more questions to clarify
 - a. "I hear you saying _____. Is that correct?"

D. Provide clear, single questions or commands

1. Keep it simple – a person in crisis may not be able to handle multiple questions or complex requests
2. If you give multiple commands, subject may hear and respond to only the last one
 - a. "Take your hands out of your pockets ... and move away from the vehicle"
 - b. Subject may do only the latter, creating a safety risk
3. Expect to have to repeat questions or commands
4. Explain your actions whenever possible – the "why"
 - a. "I'm opening the door so I can make sure you're safe"
 - b. "I'm handcuffing you because I want to make sure everyone is safe"

5. Provide options

1. Don't talk yourself into a corner or give ultimatums
 - a. "Drop the knife or I'll shoot"
 - b. Ultimatums can be particularly counterproductive in "suicide-by-cop" situations
2. Don't turn a dialogue into a debate
 - a. Especially if someone is delusional, don't argue with or debate their reality

Instructor Notes

The Seattle Police Department uses a similar approach called **MorePies**:

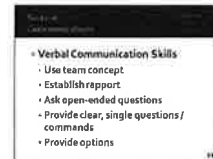
Minimal encouragers
Open-ended questions
Reflecting/mirroring
Emotional labeling
Paraphrasing
"I" Statements
Effective pauses
Summarizing

SLIDE #20



Whenever possible, explain both "what" you're doing and "why" you're doing it. (Dr. George Thomson: People have a desire to know why)

SLIDE #21



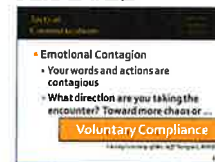
3. Offer reassurance
 - a. "No one is going to hurt you"
4. Make it personal
 - a. "I'm going to make sure you're safe"
5. Allow the subject to save face
 - a. Give them options to resolve a situation
 - b. If possible, make it seem as if the resolution was their idea
 - b. "If you leave the store now, we won't arrest you"

6. Emotional contagion

1. Your words and actions are contagious
2. What direction are you taking the encounter? –
Toward more chaos? Or toward voluntary compliance
and a peaceful resolution?
3. If you're displaying fear, anger, frustration, or aggression – through your words, voice tone and body language ... those emotions will "leak out" and become contagious
4. If you're displaying calm, control, empathy, and patience ... those emotions will become contagious to everyone, including the subject
5. Remember: you are the person in control here – exercise that control with your actions and words

Instructor Notes

SLIDE #22



Courtesy of Detective Jeff Thompson, NYPD

Respect breeds respect. Anger and aggression breed anger and aggression.

V. Learning Activity–2 (Communications Exercise)

Activity: Group Exercise

Activity Time: 15 minutes

Activity Learning Objective: To identify and use alternative and more productive ways of saying some common phrases police may be inclined to use during a critical incident.

Required Equipment: Easel pads, markers

Facilitator Instruction: As a class, go through the following phrases (or other phrases you may have) and come up with alternatives that are more effective in trying to establish a dialogue, create stability, and gain voluntary compliance from a subject in crisis. Instructor should write each phrase at the top of a sheet of easel paper. Ask students to write down alternatives on a sheet of paper at their places. Ask for volunteers to state what's wrong with the original phrase and to offer an alternative. Write the students' suggestions on the easel pad. Some alternatives are suggested here.

This exercise should be done at a fairly rapid pace: spend no more than a few minutes on each phrase. Get students engaged.

Facilitators should be demonstrative in stating each initial phrase and calmer in repeating back the alternatives. In addition to the words themselves, voice modulation is an important part of this exercise.

Phrase: "Come here!" (*threatening*)

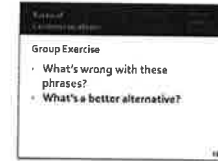
Alternatives: "Let's talk." "Can we talk about it?" "I want to know what's going on?"

Phrase: "Calm down!" (*critical of others' behavior*)

Alternatives: "Talk to me." "It will be all right." "I can hear how angry / upset you are." "Let me know when you are done; then we can talk."

Instructor Notes

SLIDE #23



This exercise is based on "anti-peace phrases" developed by Dr. George Thompson and the Verbal Judo Institute.

Phrase: "What's your problem?" (*adversarial*)

Alternatives: "How can I help?" "What can I do for you?"

Phrase: "You should / should not do" (*judgmental*)

Alternatives: "What do you want to do?" "What options have you considered?"

Phrase: "What do you want me to do about it?" (*evasion of responsibility*)

Alternatives: "I may not be able to solve that, but here are some options for you."

Phrase: "I'm not going to say this again." (*condescending*)

Alternatives: "I will say it again – please listen carefully."

Phrase: "Drop the knife! Drop the knife! Drop the f***ing knife!"

(Verbalizing the presence of a knife is important to alert other officers/witnesses to the possible threat, but if this command doesn't work after 3 or 4 times, you probably need to pivot)

Alternatives: "Why don't you put down the knife and we can talk."

"Why are you holding that knife?"

"Are you planning to hurt someone with that knife?"

"I'm concerned when you carry that knife – you might hurt yourself or someone else."

("I-when-because" phrases)

"What can I do for you? I'm here to help you."

Instructor Notes

SLIDE #23 (cont.)

Group Exercise

- What's wrong with these phrases?
- What's a better alternative?

VI. Learning Activity-3 (Video Case Study)

Note

This exercise is to illustrate how a team of officers used some of the tips and techniques that are covered in this module to respond to a person in crisis.

A few reminders:

- Set up the video ahead of time; provide background and context.
- Remind students that the video is not “perfect;” the purpose is not to judge or second-guess the officers’ actions or render a grade. Rather the video illustrates the real-world challenges officers face. The purpose is to generate discussion on how these challenges can be handled as safely and effectively as possible. We are not suggesting this was the only possible course of action in this case.
- Start and stop the video at the indicated times, then discuss with the students. Ask them open-ended questions about what they are seeing. If needed, the Training Guide provides some suggested discussion points. Try to tie the discussion back to the learning points in this Module.

A. Set up the video

1. Daytona Beach, FL
2. May 2016
3. Report of a suspicious woman pacing outside a mental health facility holding a knife
4. Multiple officers respond

B. Start the video

1. Stop at 2:35 and discuss
 - a. Initiated communications from a distance – that didn’t work so they moved closer
 - b. Coordinated/communicated with other civilians, officers
 - c. Assessed threat and approached slowly
 - d. When he got close, what is the first thing he did? ...
Called her by her name and introduced himself (as “Ricky,” not as “Officer”)

Instructor Notes

SLIDE #24



Video available at
<https://www.youtube.com/watch?v=MzbVm9UdSFg>

2. Restart ... Stop at 8:10 and discuss
 - a. Officers asked (mostly open-ended) questions ...
 - To initiative conversation ("Want to talk to us?")*
 - To elicit information ("Thinking about hurting yourself?" "What's your diagnosis?" "And medications?")*
 - b. Provided options
 - "Put down the knife, and we can talk – get you help"*
 - "I can make these other guys go away. We can have a conversation and make you feel better."*
 - c. Offered reassurance and respect
 - "We're here to help you"*
 - "Please"*
 - d. Officer went on radio to try to get more information about the subject
 - Got correct spelling of her name*
 - Directed other resources*
 - e. Two officers were talking
 - A problem here?*
 - Better to have just one officer talking?*
 - f. Sergeant moved to railing
 - Trying to make a connection*
 - Easier to hear her*
3. Restart ... Stop at 12:45 and discuss
 - a. More open-ended questions
 - "Where are you from?"*
 - What's your intention with the knife? Want to hurt anyone else?*
 - Have you felt this way before? Any issues you're dealing with?*

Instructor Notes

- b. Identified and tried to use “hooks”
New York Yankee tattoo – asked about the team
Cigarettes – attempted to make a trade
- c. Not forcing the action
“Take your time to work up to it”
Comfortable with silence
Not sending any signals that you need to wrap this up quickly
- 4. Restart ... Stop at 13:05 and discuss
 - a. **Even when you do everything pretty well, you can't always get voluntary compliance**
She moved toward building – cover officer used less-lethal (Electronic Control Weapon)
Sustained serious injury – went into seizure
Officers rendered first aid and revived her
- 5. Any final thoughts or comments?
 - a. Anything you might have tried to get Karen to comply voluntarily?
 - b. How was officers' “emotional contagion?”
They stayed cool – so did the subject

VII. Learning Activity–4 (Scenario #1) – Optional

If the timing and sequencing of your class allow, consider running Scenario #1 at this time. Detailed instructions are in Module 6, pp. 10-13. Otherwise, the scenario can be run later.

Activity: Tactical Communications Scenario-Based Exercise

Activity Time: 60-120 minutes (depending on number of students)

Activity Learning Objective: Utilize and apply the active listening, non-verbal and verbal communications skills covered in Module 4, plus the concepts and skills from earlier modules.

Instructor Notes

As you will see, the subject begins to move and a cover officer uses his TASER. The subject falls backward on the concrete, cutting her head open.

The last 90 seconds of the video show officers securing the subject and rendering first aid. It is optional if you want to show that part.

VIII. Recap and Discussion

- A. Quick Recap
 1. Active listening – listening to understand, not just respond (80-20 rule)
 2. Non-verbal communications may take precedence over your words – watch your posture, hands, tone of voice
 3. Try to have a dialogue, not a debate
 4. How? By asking open-ended questions, providing options, active listening
 5. “Emotional contagion” – you should be the person in control – try to make your actions and words contagious
- B. Any final lessons learned from the module? (can record on easel pad)
 1. Ask each student to identify one new thing he or she learned
 2. Or, one skill set he or she plans to focus on in the future
- C. Review any specific agency policy considerations not previously discussed (as appropriate)
- D. Distribute class evaluations of the module (if appropriate)

Instructor Notes

SLIDE #25



SLIDE #26



One option is to go back to the information collected in Learning Activity-1 and ask the class if they have any different thoughts on what a good police communicator looks like.

Overview: Responding to and successfully resolving critical incidents require not only strong crisis recognition/response and communications skills, but also sound tactics and teamwork. All three must work in unison. Good crisis intervention and communications skills coupled with flawed tactics, or sound tactics paired with poor crisis intervention/communications, are unlikely to produce the desired result of a safe resolution through voluntary compliance.

Particularly in situations involving persons in crisis, tactics must support, complement, and enable the crisis intervention and communications approaches to take hold and succeed. It is also critical that officers work as a team in these situations. Team members must be willing to take on specific roles and ensure they are supporting (and not interfering with) the roles of other team members.

Because every incident is different, teaching specific tactics for situations that are so unique and context-dependent is impossible. There is no detailed, one-size-fits-all approach. This module focuses on a number of *sound tactical considerations that can be applied to most incidents that do not involve an immediate firearm threat*. While the nature of the threat may require immediate action in some circumstances, defusing the situation and gaining voluntary compliance should be the goals in all other situations.

Instructor Notes

SLIDE #1



SLIDE #2



I. Pre-Response Considerations

Information is the life's blood of any tactical response. As detailed in Step 1 of the Critical Decision-Making Model (see Module 2), it is essential that responding officers collect as much information as possible (from Dispatch and others) while en route to a critical incident. It's also important for responding officers and supervisors to share information among themselves, establish a team mindset, and develop a game plan ahead of time, whenever possible. Of course, circumstances will always dictate tactics, and officers must be prepared to act immediately if needed. But if they have the chance to "slow the situation down," officers should use that time to their tactical advantage.

Note

This primary purpose of the following two videos is to illustrate how the information collected and transmitted during the pre-response phase—before officers arrive on scene—can impact how officers respond.

Remind students that these videos are not meant to judge or second-guess the officers' actions or render a grade. Rather the videos illustrate the real-world challenges that officers face. The videos are intended to generate discussion on how these challenges can be handled as safely and effectively as possible.

There will be tactical elements in both videos that students will likely have issues with. Allow students to air their concerns, but try to keep the discussion focused on how information affects the initial response.

- A. Following are video clips of two incidents that illustrate the importance of information collection during the pre-response phase
 1. Play audio from Cleveland (Tamir Rice incident: 9-1-1 call and radio traffic to responding units – 11/22/14)
 2. Show video of responding officers

Instructor Notes

SLIDE #3



- Pre-Response Considerations—
what to think about and do
before you arrive on scene



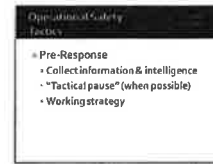
60

3. Play audio from Parma (OH) incident (2 juveniles with possibly fake guns in the park): 9-1-1 call and radio traffic to responding units (2/21/16)
4. Show video of responding officer
5. Discuss the videos: *What happened differently? Why?*
 - a. Information from Dispatch
 - i. In Cleveland, dispatchers never relayed information that gun might be fake
 - ii. In Parma, information that gun might be fake was collected/relayed to responding officer
 - iii. Officers should treat all realistic looking weapons as if they were real
 - iv. But knowing that a weapon may be a replica is important information to have when approaching a scene
 - b. Approach (*based in part on information officers had*)
 - i. Cleveland: officers pulled right up on subject and engaged immediately
 - ii. Parma: created distance and cover, initiated communications – juveniles complied
 - c. Speed
 - i. Cleveland: rushed in
 - ii. Parma: slowed things down – created options

B. First pre-response consideration: Collect information

1. Step 1 of the Critical Decision-Making Model
 - a. Information from Dispatch
 - b. From fellow officers/supervisors
 - c. From your own training and experience

SLIDE #4



C. First pre-response consideration: Collect information

1. Step 1 of the Critical Decision-Making Model
 - d. Information from Dispatch
 - e. From fellow officers/supervisors
 - f. From your own training and experience
 - g. Trying to separate facts from assumptions
2. Begin to think through your response before entering the scene
 - a. Reinforces readiness – guards against complacency (officer safety issue)
 - b. Helps officers “transition in their mindset”
 - c. Begins to place you in a winning situation
3. Ensure your equipment is ready–lethal and less-lethal

D. Take a “tactical pause” (when possible)

1. In general, time is on the side of first responders
 - a. Some incidents will require immediate response
 - b. Nothing prevents you from doing that
2. When immediate response is not needed ... “tactical pause” allows responding officers to huddle up (in person or over the radio), share information and begin developing a strategy (including team roles)
 - a. If supervisor is available, even better
 - b. Create the team mindset before you get on scene
 - c. Begin to establish team roles – contact and cover, “eyes on,” etc.
3. Allows you to think more clearly and objectively
4. Approach the situation more methodically

E. Begin developing a working strategy

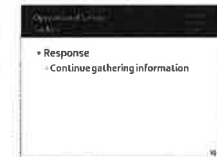
1. Step 2 in the CDM
2. Playing out “what if?” scenarios

Instructor Notes

SLIDE #12



SLIDE #13



Remember, active listening and open-ended questions.

SLIDE #14



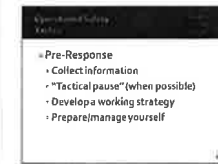
3. Three possible outcomes on any encounter that you need to be prepared for:
 - a. Fight
 - b. Flight
 - c. Voluntary compliance through communication – this should be your goal whenever possible
4. Think about how to minimize risks, maximize safety

E. Prepare/manage yourself

1. Need to manage yourself before you can manage others
 - a. By successfully controlling your own thoughts and behaviors, you can positively affect the outcome of many situations
 - b. Understand that your emotions/reactions can cause some situations to escalate – check your ego
 - c. Separate your reactions from those of others
 - d. When you become angry or escalate unnecessarily, you lose credibility and control
 - e. Maintaining control of yourself = maintaining control of the situation
2. Understand how your body will react in a stressful situation (subject may be experiencing same reactions)
 - a. Helps you prepare
 - b. Helps you de-escalate
 - c. Can help save your life and the lives of others
3. State of awareness
 - a. **A physical and mental process**
 - b. Combines tactical awareness (mechanical) + state of mind (mental)

Instructor Notes

SLIDE #11



See also, Module 3, p. 19 for additional information on this topic.

Some observable effects of fear-induced psychophysical arousal:

- Increased muscle tension, especially in neck and shoulders
- Increased breathing rate; shallower breaths
- Rapid eye movements; eyes are opened wide and have a flattened appearance – “tunnel vision”
- Auditory exclusion
- Perspiration; skin flushed, especially in the face
- Tremors (shaking); loss of fine-motor skills
- Rapid, pressured speech; yelling or frequently interrupting
- Teeth clenched, jaw set
- Dry mouth, repeatedly licking lips
- Amygdala Hijack (emotional redlining)

Some agencies use the Zen concept of **Mushin** (“mindless” or “mind like water”) in their training. For background, see

<http://www.mineralogicalrecord.com/wilson/pdfs/Concepts-Mushin%20and%20Zanshin.pdf> or <https://aikidonosekai.wordpress.com/2014/03/23/aikido-mushin-no-mind/>

The New Orleans Police Department has a model peer intervention program called EPIC: Ethical Policing Is Courageous. Agencies may consider incorporating EPIC as an additional module in ICAT. For information, contact the New Orleans Police Department.

- c. As your focus on the threat intensifies, your awareness tends to decline
- d. Mental conditioning to maintain awareness

4. Watch out for your partners too

- a. Be aware of their reactions to stressful situations
- b. Be prepared to intervene if necessary

Instructor Notes

II. Effective Response Tactics

Circumstances always dictate tactics. That's why it's important to take the time to accurately analyze and understand the circumstances you face. A person with a knife or blunt object attacking someone will trigger one set of tactics designed to quickly neutralize the threat. The same person with the same knife or blunt object pacing up and down and not actively threatening anyone presents a different set of circumstances, which will require a different response. Information gathering, teamwork and flexibility in considering different options are key to identifying and executing the most effective and safest tactical response.

A. Continue gathering information

1. From ...
 - a. Victims and witnesses
 - b. Your own observations
 - c. The subject (often the best source of information about what is going on)
2. Information collection is an ongoing process that helps you refine your threat assessment
 - a. Analyze subject's means, ability, opportunity, intent
 - b. When all four elements are present with an immediate danger and no escape = jeopardy.
 - c. Negating one or more those elements of the threat should be the goal

B. First impressions

1. How do you want to start the interaction?
2. Circumstances and the nature of the threat will dictate your initial response
3. If possible and appropriate, start "low"
 - a. Easier to "move up" if necessary
 - b. More difficult to de-escalate if you start "high"

Instructor Notes

SLIDE #12

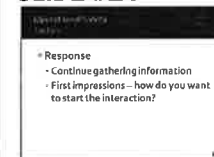


SLIDE #13



Remember, active listening and open-ended questions.

SLIDE #14



C. Respond as a team

1. Everyone has a role – everyone plays that role
2. If only two officers
 - a. Establish contact and cover roles
 - b. Identify these roles ahead of time, when possible
 - c. Stay in your lane
 - i. One officer speaks
 - ii. Otherwise, confusing for the subject and the team
 - d. Be flexible – situations are dynamic, so be prepared to switch roles
3. If additional officers, then additional roles:
 - a. Less-lethal cover
 - b. Inner/outer perimeter
 - c. Scene management/containment
 - d. Internal communications, coordination
 - e. Scribe
4. If no supervisor, then senior officer needs to step up
5. **San Francisco: Mario Woods incident**
 - a. Set up video
 - i. December 2, 2015
 - ii. Mario Woods, age 26, suspected in stabbing earlier in the day
 - iii. Ignored commands to drop knife
 - iv. Shot several times with a bean bag shotgun (SFPD doesn't authorize electronic control weapons) and OC spray
 - b. Show video

Instructor Notes

SLIDE #15



SLIDE #16



Also available at
<https://www.youtube.com/watch?v=v0ju6RQkNs8>

- c. Discuss tactical issues
 - i. Lack of supervision – who's in charge?
 - ii. Lack of a game plan – instead, firing squad approach
 - iii. Threat assessment – what was he doing with the knife? Who was he threatening?
 - iv. Communications – who was the contact officer?
 - v. Internal communications among officers
 - vi. Did “crowding” the subject cause him to start walking?
 - vii. Scene/crowd management

D. Distance + Cover = Time

- 1. Key benefits
 - a. Officer safety – distance and cover offer you protection
 - b. Create time to consider options
 - i. In close quarters, you have very few options (Tamir Rice shooting in Cleveland)
 - ii. When pressed for time, you have fewer options
 - iii. But when you have distance, cover and time, you have more options available, plus more time to evaluate and execute them
- 2. “Dynamic inactivity” – pushing the “pause” button
 - a. When there is no reason to rush in and take action
 - b. Use that time to communicate, strategize, get more resources
- 3. How long will we let this situation go? As long as it takes barring an immediate threat that must be addressed

Instructor Notes

Ask participants why do they believe every officer had their gun drawn and pointed at the suspect? Do these incidents demand better communication, establishment of roles, someone taking charge?

Some of the video was shot by middle school children riding a public bus.

SLIDE #17



Spend some time emphasizing the importance of D+C=T. Many of the most questionable shootings involve officers who closed the distance, didn't use cover, and didn't take advantage of time.

Concern of many patrol officers: we don't have “all day.” Agencies need to adjust policies and priorities to give officers time to manage these situations and attain a safe and successful outcome. At a minimum, patrol officers should be encouraged to “buy” enough time to allow for other, specialized resources to arrive on scene.

E. Tactical positioning/repositioning

1. Individual officer
 - a. Presence/stance/posture
 - b. **Don't "draw a line in the sand"** (unless public safety imperatives absolutely demand it)
 - c. Maintaining a position of advantage (using distance and cover) – even if that means repositioning
 - d. "Reaction gap" or "zone of safety"
 - i. **Not an arbitrary number (e.g., no "21-foot rule")** – will always depend on circumstances
 - ii. Regardless of the size of the "reaction gap," maintaining it supports officer safety, gives you more options to resolve the situation
 - iii. May need to increase the gap to provide more reaction time
 - iv. Unnecessarily closing the gap can reduce your options, put you at risk
2. "Ebb and flow" of the team
 - a. As the situation evolves, the team may need to reposition as well (NYPD calls this the **"Tactical Mambo"**)
 - b. Coordination, teamwork and discipline are critical
 - c. Be careful about not back up into a corner – be tactically sound at all times
 - d. Properly "containing" the scene will eliminate the risk of unassociated person(s) making a static scene "dynamic" due to intrusion
 - e. Continue to communicate with the subject even as you reposition

Instructor Notes

SLIDE #18



Get on the balcony so you can observe the dance floor.

For edged weapon offenders, Police Scotland uses an approach called CUTT:

- **Create distance**
- **Use cover**
- **Transmit information (to Dispatch)**
- **Tactically reposition as needed**

You may get pushback from some students about "retreating." Emphasize that we're not talking about running away, but rather getting to a safer position with distance and cover. You're still in charge – just from a safer position.

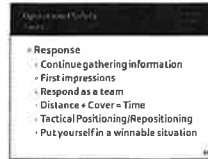
F. Put yourself in a winnable situation

1. Isolate, contain, hold, assess
2. Call out for additional resources
3. Use tactical communications
4. Identify options and develop a plan
5. Intervene only if there is an immediate threat to life/safety
6. Remember: you don't have to succeed on first try – multiple opportunities for success
7. Another way to look at this: **don't put yourself in an unwinnable situation through your actions** (such as closing the distance or rushing the action if you don't have to)

III. A reminder just how deadly knives can be

Instructor Notes

SLIDE #19



The idea of “spinning” the Critical Decision-Making Model is important here. If the initial plan doesn't work, then that information becomes part of your decision-making during the next spin of the model. See Module 2, p. 12, for more on “spinning the model.”



Knives are deadly



Police Executive Research Forum

64



Quick Recap

- Collect information, strategize before you arrive on scene (“tactical pause”)
- Once on scene ... think teamwork, distance + cover = time, tactical repositioning, “winnable situations”
- After actions are all about improving future performance

Police Executive Research Forum

65

Overview: In many respects, critical incidents involving subjects armed with knives, baseball bats or other weapons besides a firearm are among the most challenging encounters that patrol officers face. These situations can pose serious threats and danger to officers and the public; just because a subject doesn't have a firearm doesn't mean the encounter is, by default, "safe." In addition, these situations present a range of possible response options that require a diverse and complementary set of skills. These encounters become even more challenging when they involve individuals who are experiencing a mental health, substance abuse or other crisis.

The previous modules in the ICAT Training Guide have presented key information in the areas of critical decision-making, crisis recognition and response, tactical communications, and tactics to promote operational safety. This final module completes the cycle. It gives students the opportunity to practice these skills through rigorous and challenging scenario-based training exercises. The module also provides opportunities for students to explain what they have learned through a facilitated review of the scenarios and a video case study. Significantly, one of the scenarios covers an all-too-common occurrence for police officers: an intentional suicide-by-cop situation.

I. Review of Modules 2-5

A. Critical Decision-Making Model (CDM)

1. Five-step model ... but a familiar, intuitive process
 - a. Provides structure for the type of decision-making you do every day
 - b. Allows for immediate action when that's needed
 - c. Helps you think through situations when immediate action is not needed
 - d. Promotes the safety of everyone – the public, you, and the subject
2. The CDM core is based on ethics and values
3. CDM emphasizes ongoing information collection and threat assessment
 - a. Circular, not linear process
 - b. As new information comes in or threats change ... then "spin the model"

Instructor Notes

SLIDE #1



4. Key benefits of the CDM
 - a. Helps you make better and safer decisions up front
 - b. Helps you explain those decisions – to supervisors (After-Action Reviews), investigators, in court

B. Crisis Recognition and Response

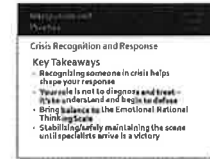
1. Recognizing when someone is in crisis helps you approach the situation more safely and effectively
2. Your role is not to diagnose and treat – it's to try to understand the situation and begin to defuse
3. Bring balance to the Emotional-Rational Thinking Scale
4. Safely maintaining the scene until more resources (specialists) arrive is a victory

C. Tactical Communications

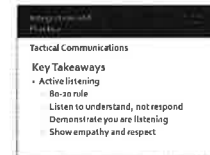
1. Active listening
 - a. 80-20 rule
 - b. Listen to understand, not to respond
 - c. Demonstrate you are listening (minimal encouragers, summarizing, acknowledgments)
 - d. Show empathy and respect
2. Non-verbal communications
 - a. Body language – posture and appearance
 - b. Eye contact – powerful de-escalation technique
 - c. Open-handed gestures – convey honesty and caring
 - d. Tone of voice – bring the subject down to your level
3. Verbal communications
 - a. Team concept – contact and cover
 - b. Clear, simple questions/directions – one at a time
 - c. **Ask open-ended questions** – get the subject talking
 - d. Provide options
 - e. Emotional contagion – use your words/actions to move situations from chaos to compliance

Instructor Notes

SLIDE #2



SLIDE #3



Remember: SWAT teams and hostage negotiators train on and use these skills every day. They are extremely valuable for patrol officers as well.

SLIDE #4



SLIDE #5



Your actions and words are contagious—the influence they subject and others on scene.

D. Operational Safety Tactics

1. Pre-response
 - a. Collect information and intelligence – this is an ongoing process
 - b. Slow down (when possible) – “tactical pause”
 - c. Develop a working strategy
 - d. Prepare and manage yourself – and your partners
2. Response
 - a. First impressions are critical – start “low” whenever possible
 - b. Respond as a team
 - c. Use Distance + Cover = Time to your tactical advantage
 - d. Tactical positioning/repositioning
 - e. Put yourself in a winnable situation
3. Post-response
 - a. After-Action Reviews
 - b. Not “Monday morning quarterbacking” – not grading past success or failure
 - c. Rather, a continuous learning process – improving future performance
 - d. AARs complement the Critical Decision-Making Model – the CDM provides a structure for reviewing and evaluating incident responses

Instructor Notes

SLIDE #6



SLIDE #7



Get in the balcony so you can see the dance floor.

SLIDE #8



II. Learning Activity–1 (Video Case Study)

Activity: Video Case Study—Shenandoah County, VA

Activity Time: 45 minutes

Activity Learning Objective: Review and discuss the decision-making, crisis recognition and response, tactical communications, and tactical response of the officers involved in a man-with-a-knife incident.

Required Equipment:

- Digital presentation (Power Point and/or video); easels and markers

Facilitator Instruction:

Set up the video; provide background and context:

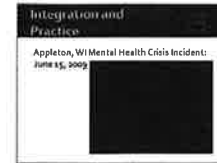
- Shenandoah County, Virginia (100 miles west of Washington, DC)
- December 2015
- Two deputies respond to a domestic disturbance call
- They encounter 38-year-old Corbyn Lee Rush outside

Remind students that the video is not “perfect;” the purpose is not to judge or second-guess the officer’s actions or render a grade. Rather the video illustrates the real-world challenges officers face. The purpose is to generate discussion on how these challenges can be handled as safely and effectively as possible. We are not suggesting this was the only possible course of action in this case.

Play the video all the way through (5:25). At the conclusion, break the class into small groups. Provide each group with easel pads and markers. Ask each group to record their impressions – positive and negative – of the officer’s decision-making, crisis recognition and response, tactical communications, and tactical response to the incident.

Instructor Notes

SLIDE #9



Video available at
<https://www.youtube.com/watch?v=TKOSDh4lvM4>

-Review

Suicide by Cop: Protocol and Training Guide

Recap and Discussion

- A. Video case study review
 - 1. Additional thoughts?
 - 2. How does the Critical Decision-Making Model fit into the video case studies we reviewed (any of them)?
- B. Scenario review
 - 1. Discuss general impressions of the scenarios – challenges, skills used, etc.
 - a. No judgments
 - b. Open discussion
 - c. Everyone should offer feedback
 - 2. In general, avoid specific critiques of individual officers or teams
 - a. That should be done in the debrief during/ immediately following those officers' scenario
- C. Lessons learned from this module and entire ICAT Training Guide (can record on easel pad)
 - 1. Ask each student to identify one new thing he or she learned
 - 2. Or, one skill set he or she plans to focus on in the future
- D. Review any specific agency policy considerations
- E. Distribute class evaluations

Instructor Notes

SLIDE #12

