

Community Wellness and Crisis Response Team

454.1 PURPOSE AND SCOPE

This policy provides guidelines for the structure and operation of the Community Wellness and Crisis Response Team (CWCRT), a law enforcement and mental health partnership between the South San Francisco Police Department, Star Vista, and Behavioral Health and Recovery Services (BHRS) of San Mateo County Health Department. This policy focuses on the intersection between the South San Francisco Police Department staff and the assigned Star Vista Clinician, as they work together to respond to incidents of behavioral crises.

This policy is not intended to address the practices of the Clinician, as those are addressed by the policies of BHRS and Star Vista.

454.2 POLICY

The CWCRT prioritizes the safeguarding of life for all community members. The CWCRT is a collaborative co-response model approach to presently occurring behavioral crisis situations, acknowledging that optimal support for those in crisis results from a partnership between law enforcement and mental health professionals. To accomplish this, a Clinician is assigned to the South San Francisco Police Department to respond to behavioral crisis incidents along with sworn staff.

The CWCRT is not intended to address long-term case management or in-depth care provision; instead, they are intended to assist with in-progress, current incidents.

454.3 DEFINITIONS

Clinician – an employee of Star Vista, certified as a licensed or unlicensed Marriage and Family Therapist (MFT), a licensed or unlicensed Clinical Social Worker (CSW), or a licensed or unlicensed Psychologist, assigned to the CWCRT.

Behavioral Crisis – an event in which an individual is at risk of harming themselves or others. Due to their behavior, they must be treated promptly to avoid injury to themselves or to others.

MOU – the signed Memorandum of Understanding between the County of San Mateo, Star Vista, and the City of South San Francisco.

Protected Health Information (PHI) – information shared between the South San Francisco and the Clinician in accordance with the MOU and the HIPAA Business Associated Agreement signed by both entities.

454.4 CWCRT STRUCTURE

Program Oversight

The Clinician is a Star Vista employee and does not fall under the chain-of-command of the South San Francisco Police Department. For organizational oversight, the CWCRT falls under the

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department's Operations Division. The CWCRT Clinician reports to the Administrative Sergeant for appropriate program coordination, reporting, logistical matter, etc.

The Clinician will work a schedule determined to best meet the needs of the South San Francisco Community. There will not be a Clinician on-duty at all hours; in those times, Officers will have primary responsibility to respond and address behavioral crisis incidents.

The Clinician will have workspace available to them in the police department. When using the police radio, the Clinician will use a standardized radio call sign as determined by the department.

Attire

The Clinician will wear a standardized uniform as determined by the CWCRT program workgroup. This attire will help identify them as a non-law enforcement member of the CWCRT.

454.5 DECISION MAKING AUTHORITY

- (a) During responses, for issues involving questions of safety, South San Francisco Police Officers will have final decision-making authority and responsibility.
- (b) If the incident involves a crime, the primary officer and clinician should strive to reach agreement on the appropriate course of action.
 - (a) If agreement is not reached, the on-duty Patrol Sergeant or Watch Commander should be contacted.
 - (b) Ultimately, in such cases, South San Francisco Police Department members have final decision-making authority and responsibility.
- (c) For issues regarding treatment and incident resolution involving a person in crisis that does not involve a crime, the clinician will have final decision-making authority and responsibility.

454.6 CWCRT PROGRAM COORDINATION

The CWCRT will have program coordination meetings, which will occur at a minimum monthly.

These meetings will include the Administrative Sergeant, the Administrative Lieutenant, Star Vista staff, BHRS staff, the Clinician, and other individuals as appropriate. The CWCRT monthly meetings will assess the program and make recommendations on possible improvements to the following:

- (a) Equipment
- (b) Practices
- (c) Policies
- (d) Training
- (e) Other areas as deemed appropriate

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The CWCRT will prepare quarterly reports and presentations to share with South San Francisco executive staff, the Chief of Police, City of South San Francisco executive management, Star Vista, and others as deemed appropriate.

454.7 CWCRT RESPONSE GUIDELINES

To be successful, the CWCRT requires coordination between South San Francisco Police Department Dispatch, Officers, and the Clinician to achieve optimal outcomes for the community.

Acknowledging that this policy cannot predict all possible scenarios, most CWCRT responses should follow these guidelines:

DISPATCHER RESPONSIBILITIES

South San Francisco Police Department Dispatchers should do the following:

- (a) When receiving a call for service involving an individual experiencing a behavioral crisis, Dispatchers should first dispatch officers as appropriate.
- (b) If the Clinician is on-duty, Dispatch should dispatch them via the radio.
- (a) If possible, a text message with the call details should also be sent to the Clinician via cell phone.
- (c) For calls for service not meeting the definition of a behavioral crisis, where a Dispatcher believes that a CWCRT response would be beneficial, the Dispatcher is encouraged to consult with an on-duty Patrol Sergeant.

OFFICER RESPONSIBILITIES

South San Francisco Police Department Officers will have the following responsibilities during a CWCRT response:

- (a) The safety of the Clinician and the public must be paramount. Officers should ensure the scene is safe prior to the Clinician's arrival. Officers should not leave the scene until they and the Clinician agree that it is safe to do so for all involved.
- (b) If an officer determines that a CWCRT response would be beneficial in the resolution of an incident, they are encouraged to request that the Clinician respond.
- (c) If appropriate, officers should assist the Clinician in engaging the individual in question.
- (d) For incidents involving no criminal violation, the goal is a successful 'pass off', in which the Clinician assumes responsibility for incident resolution.
- (a) In such cases, officers may leave the scene after it is safe to do so.
- (a) If the incident results in a mental health detention per 5150 W&I, even after officers have left the scene, the primary responding officer will be responsible for writing a police report to document the detention. This report will document such things as the reason for the call for service, the initial response, their observations and/or involvement, and the fact that the incident resulted in a 5150 W&I detention. The report should not include information that the officer did not directly observe (other than the incident resolution information).

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- (e) For incidents involving a criminal violation in addition to a behavioral crisis, the primary officer will maintain investigate responsibility for the criminal violation.
- (f) Research the individual in question through law enforcement databases and share appropriate information with the Clinician. This information should include past interactions with law enforcement, gun ownership or prohibitions, or other relevant information as determined by involved staff
- (g) Ensure appropriate documentation is entered in RIMS. This may include safety or hazard notifications, incident or case reports, photographs, etc.

CLINICIAN RESPONSIBILITIES

The Clinician should do the following:

- (a) When starting their shift, they should notify South San Francisco Dispatch that they are on-duty and available for CWCRT response. They will have a police radio available for radio dispatch.
- (a) The Clinician should notify Dispatch when they end their shift and are off duty.
- (b) The Clinician may self-dispatch to incidents, if they believe it involves a behavioral crisis or another matter benefiting them their involvement.
- (a) When self-dispatching, the Clinician should advise South San Francisco Dispatch of their action.
- (b) Before responding to the scene, the Clinician should stage nearby, confirm with on-scene officers that the scene is safe, and request authorization to respond.
- (c) When responding to a call for service, the Clinician should not go directly to the scene until officers notify them that the scene is safe.
- (a) The Clinician should usually stage nearby for a timely arrival once the scene is deemed safe.
- (d) Research an individual's history through mental health information resources and share Protected Health Information with Officers in compliance with HIPPA legal restrictions on privacy and security of protected health information.
- (e) Once on scene, the Clinician should conduct mental health screening and assessment of the individual to determine the appropriate disposition for the needs and safety of the individual and community.
- (f) If the individual in question requires transport to another location, the Clinician will not provide this transportation.
- (a) The Clinician will arrange that through medial transport (i.e., AMR ambulance) or alternative means.
- (g) Ensure the individual in question receives information on available resources as appropriate.

454.8 CWCRT ADDITIONAL GUIDELINES

In addition to behavioral health crisis response, the Clinician will do the following as appropriate:

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- (a) Provide appropriate training to South San Francisco Police Department personnel, in conjunction with the Training Unit, related to behavioral health issues, crisis resolution, de-escalation, or other topics related to the mission of the CWCRT.
- (b) Work with the Downtown Bicycle Patrol Team or other programs regarding outreach, service provision, or other projects as appropriate.
- (c) When available, serve as a resource to other City departments and other agencies for incidents involving subjects experiencing behavioral crisis.
- (d) Collaborate with South San Francisco Police Department staff, other City departments, public agencies, non-profit organization, etc., to provide a link between behavioral health service providers and individuals in need of such service.
- (e) Other duties as assigned.