

IRONDEQUOIT POLICE DEPARTMENT

Other Policies and Trainings  
 January 1, 2012 - May 31, 2015

| <b>TRAINING NAME</b>                             | <b># TRAINING PROGRAMS ON TOPIC</b> | <b>GEARED TOWARDS</b> | <b># ATTENDED</b> |
|--|-------------------------------------|-----------------------|-------------------|
| NYS Office PWDD Reporting                        | 1                                   | Officers in Service   | 49                |
| Emotionally Disturbed Persons Response Team      | 2                                   | Officers in Service   | 3                 |
| Impact of High Stress Events                     | 1                                   | Officers in Service   | 23                |
| MHA De-Escalation                                | 1                                   | Officers in Service   | 2                 |
| Understanding Human Aggression & Violence        | 1                                   | Officers in Service   | 2                 |
| Abuse in Later Life                              | 1                                   | Officers in Service   | 1                 |
| Approaching Alzheimers for First Responders      | 1                                   | Officers in Service   | 47                |
| Critical Decision Making During Crisis           | 1                                   | Officers in Service   | 1                 |
| Elder Abuse Training for Law Enforcement         | 1                                   | Officers in Service   | 9                 |
| Public Safety De-Escalation Tactics for Veterans | 1                                   | Officers in Service   | 2                 |
| Emotional Survival for Law Enforcement           | 1                                   | Officers in Service   | 4                 |
| In-Service                                       | 10                                  | Officers in Service   | 50                |

## 2014 MONROE COUNTY ENHANCED IN-SERVICE TRAINING INFORMATION SHEET

|                             |  |
|-----------------------------|--|
| <b>Training Date Start:</b> | Monday, March 31, 2014   |
| <b>Training End Date:</b>   | Friday, May 16, 2014   |
| <b># of Training Days:</b>  | 35   |
| <b>Hours of Training:</b>   | 0830-1630  |
| <b>Classroom:</b>           | 117A   |
| <b>Uniform of the Day:</b>  | BDUs or similar to allow for defensive tactics training.   |
| <b>IMPORTANT:</b>           | Don't forget to have officers, who reside outside of Monroe County, submit their <b>CERTIFICATE OF RESIDENCY FORMS</b> . |

*Train-the-Trainer: Presenters and DT instructors - Friday, March 21, 2014 – 0830-1630, 117A and Old Academy Gym – I will need Department's DT instructors each day from 14:30-16:30 hours*

| TIME               | TOPIC  | LEAD INSTRUCTOR                         |
|--------------------|--|---|
| <b>08:30-08:35</b> | Introduction and Registration                      | Pete Brunett (PSTF)                     |
| <b>08:35-09:35</b> | How to Survive a High Risk Encounter               | Offs Tony DiPonzio/Paul Dondorfer (RPD) |
| <b>09:35-11:35</b> | Mental Health Issues and Mental Hygiene Arrests    | Doc Kamin                               |
| <b>11:35-12:35</b> | <b>Lunch</b>                                       |   |
| <b>12:35-13:35</b> | Greece Police Presentation on Triple Homicide Case | Greece Police Officers                  |
| <b>13:35-14:35</b> | Current Drug Trends                                | Sgt Mark Phillipy (Ret)                 |
| <b>14:35-16:30</b> | DT holding a sidearm and SPEAR review              | MCSO and Town DT Instructors            |

## 2014 Enhanced In-Service Training

### **Communication & De-Escalation**

Don Kamin, Ph.D.  
Chief, Clinical & Forensic Services  
Monroe County Office of Mental Health

Empathy is an accurate statement of another person's experience. It conveys understanding. Others feel understood and supported when empathy is expressed. It encourages others to share more. It creates a connection with the person; rapport is established. Once that connection / rapport is established, then (and only then!) you can engage in problem-solving and advice giving to resolve the situation.

Until somebody who is upset knows that you understand their situation/perspective, they will not be open to engaging in problem-solving. The phrase that is useful to remember is "connect, then direct." That is, wait until you have some connection with the person before you try to direct them to do something. Expressing empathy is the way to ensure that you make that connection.

#### How to be empathic:

1. *Careful Listening*: Pay attention, encourage the talker to continue. *Try not to interrupt for at least a minute or two.* Focus on the other person's experience. Initially try to listen at least twice as much as you talk.
2. *Decide on Accurate 'Feeling Words'*: Try to figure out what the person is feeling by listening carefully to the 'feeling words' they used. Did they say "depressed," "angry," "made", etc.? People can feel two ways.
3. *Communicate your Understanding*: Simple, short phrases with an interested tone. You can use empathic stems.

#### Empathic Stems

"Maybe you feel..."  
"Sounds like a \_\_\_\_ day"  
"What a day you've had"  
"That's a lot to deal with"  
"That is the last thing you wanted to happen"  
"That's confusing when that happens"  
"It's hard to know what to do right now"  
"Right now it feels that there is no hope..."

The goal in being empathic is to create some sort of 'connection' or 'rapport' with the subject. After that is accomplished you will have more influence in directing the person to do what you need them to do. The phrase to remember is Connect, then Direct.

#### Try NOT to:

Criticize  
Give advice prematurely  
Analyze the situation  
Align yourself with "the other side"

This information was presented in the context of dealing with individuals who are emotionally disturbed. Please note, however, that this sort of approach is very helpful with your colleagues, family members, and those who are complaining to you in your supervisory role.

**NYS Mental Hygiene Law Review**

Don Kamin, Ph.D.  
Chief, Clinical & Forensic Services  
Monroe County Office of Mental Health

**MHL §9.41:**

An individual must meet two criteria in order for law enforcement to bring the person to the hospital against their will:

1. The person must appear to be mentally ill, and
2. The person must present in a manner that is likely to result in serious harm to the person or others. This standard includes specific threats to self, others, or *other conduct that demonstrates that the individual is unable to care for their basic needs for food, shelter, clothing or healthcare.*

**MHL § 9.45:**

Director of community services designees have "the power to direct the removal of any person, within their jurisdiction, to a 9.39 hospital" if certain 'authorized individuals' report to him or her that such person 1) has a mental illness for which immediate care and treatment in a hospital is appropriate, and 2) which is likely to result in serious harm to himself or herself or others.

**MHL §22.09:**

Individuals who are judged to be incapacitated due to intoxication or other substances to the degree that there is a likelihood of serious harm to the person or others, can be brought to a hospital on an involuntary basis. The standard of "likelihood of serious harm" is the same as previously articulated in §9.41 above. However, it is important to note that there is no assumption of the presence of mental illness within §22.09. That is, there only needs to be evidence of intoxication/incapacitation and dangerousness.

**St. Mary's** accepts intoxicated individuals and those that need medical attention. Individuals who may have overdosed, need advanced life support due to breathing problems, or other life-threatening conditions should NOT be taken to St. Mary's.

**MHL §9.60:**

Assisted Outpatient Treatment (AOT, or Kendra's Law) applies to individuals who, in the context of noncompliance with treatment, have had at least 2 hospitalizations in 3 years, or one act (or threat) of violence within 4 years, and are judged to be potentially dangerous – when noncompliant with treatment. Police are required to transport individuals (via a "9.60 pick-up order") who have been noncompliant with their court-ordered treatment plan and may need hospitalization. Family members or others can contact Kimberly Butler (753-6335;kbutler@monroecounty.gov) to see if an individual qualifies for court-ordered outpatient treatment.

**45 CFR 165.512 (HIPAA):**

Healthcare providers can't release information without a signed release by the patient. However, there are some law enforcement related exclusions to HIPAA detailed in section 165.512. Health & mental health providers are permitted to release limited information to law enforcement if they are seeking information that relates to locating a missing person, a suspect, or a witness or victim of a crime. Please note that providers are not compelled to release that information.

The law enforcement-related exclusions to HIPAA do not apply to drug and alcohol treatment providers. Without a release, those providers need a subpoena and court-order to release information.