



2019

Annual Report

HOUSTON POLICE DEPARTMENT
MENTAL HEALTH DIVISION



*Success
through
collaboration*

houstoncit.org



Welcome to the Mental Health Division



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Message from the Chiefs



“Mental illness impacts all communities. It does not discriminate. There is an intersection of mental illness and addiction that people do not choose. The work done by the Houston Police Department through the Mental Health Division, limits the probability for bad outcomes for people that society has given up on to a great extent. With the intervention of law enforcement and mental health care professionals, every call handled by the Mental Health Division is a potential tragedy avoided.”

Art Acevedo

Chief of Police



“The Mental Health Division’s goal, in all emergencies stemming from mental crisis, is to utilize the least coercive measures to secure the welfare of all those concerned, unite consumers with needed services, and divert them from the criminal justice system whenever possible.”

Troy Finner

Executive Assistant Chief
Field & Support Operations



“Our mission continues to grow. We are connecting more citizens that have previously reached out to law enforcement for mental health care resources to vital case management with our mental health authority. We are grateful for the collaborative efforts of our mental healthcare professional partners and look forward to continuing our efforts to protect all Houston citizens.”

Wendy Baimbridge

Assistant Chief
Patrol Region 3 Command



Message from the Commander

Bryan Bennett

Taking over the role previously held by Bill Staney, Bennett joined the division as commander in 2019

About Commander Bennett

Commander Bennett has been with the department since November of 1997. Prior to joining the Mental Health Division, he served as commander in the Auto Theft Division. Throughout his career with the Houston Police Department, Commander Bennett has had many assignments, including Central Division, Clear Lake Division, Emergency Communications Division, Special Operations Division, Kingwood Division, and the Training Division, though the majority of his career was spent within the Special Operations Division.

In May of 2019, Commander Bennett was transferred to the Mental Health Division, and he quickly embraced the collaborative environment that works toward improving the lives of those who are often the most vulnerable within our communities. He readily became involved in the many leadership roles with various committees, boards and partnerships, many of which help to drive policy around policing and mental health, and he has effortlessly built strong relationships with community.

Our Approach

Today's modern policing requires the ability to respond to individuals in serious mental health crises. The Houston Police Department strives to reach out as professionally, safely, and humanely as possible.

Outlook for the future

As a leader and one of the national models, we strive to work with our community partners, improving our response to persons with mental illness, substance abuse, and the homeless. We continually work at developing new strategies and techniques that will keep the Houston Police Department the premiere law enforcement agency regarding specialized police responses to the mentally ill.

Bryan Bennett

Houston Police Department





Introduction

About our Division

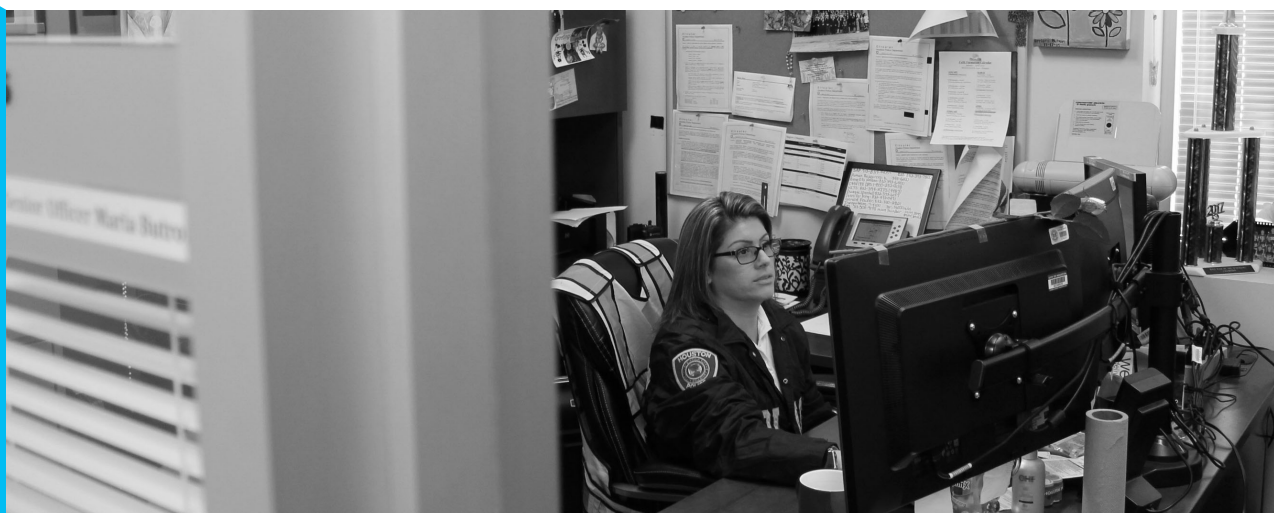
The Mental Health Division provides support to the community with success through collaboration

The Mental Health Division (MHD) was formed to provide a more professional and humane response to people in serious mental health crisis.

The primary purpose of MHD is to oversee the department's CIT program and to provide instruction and guidance in the area of policy and procedures in dealing with persons in a mental health crisis. To accomplish this goal, the Mental Health Division works closely and in collaboration with the mental health community at large.

In 2019, the Mental Health Division was assigned to Field and Support Operations, and consisted of 40 full-time personnel. Full-time personnel assigned to

the Mental Health Division included one commander, one lieutenant, six sergeants, three officers assigned as CIT instructors, three officers assigned to the Investigation Unit, two officers assigned to Boarding Homes Enforcement Unit (BHEU), one officer assigned to the Chronic Consumer Stabilization Initiative (CCSI), twelve Crisis Intervention Trained (CIT) officers assigned to the Crisis Intervention Response Team (CIRT), six officers assigned to the Homeless Outreach Team (HOT), one officer assigned administrative duties (budget, technology, vehicle coordination, etc.), one officer assigned to Special Projects, one senior office assistant, one Public Service Officer (civilian), and one data analyst.





Houston Police Department Mental Health Division

The training unit taught **84** classes to **6,102** personnel for a total of **1,317** hours.

Crisis Call Diversion (CCD) processed 4566 calls.

40884 total CIT calls for service department-wide

2019 highlights

There was a 65% increase in jail diversion across the department

There was a 63% increase in the number of permitted operational boarding homes.

The Homeless Outreach Team (HOT) was able to place **295 people** into a form of housing or shelter

The Crisis Intervention Response Team (CIRT) Unit responded to 5536 total CIT calls for service



MHD Programs

Eight programs make up the Mental Health Division, working together to address different needs of the Houston community

Boarding Home Enforcement Unit (BHEU)

BHEU's main goal is to ensure that residents with mental and physical disabilities are living in a healthy and safe environment by providing educational outreach, regular inspections, and enforcing city ordinances.

Chronic Consumer Stabilization Initiative (CCSI)

CCSI is a collaborative effort designed to identify, engage, and provide services to individuals that have repeat contact with police because of a serious mental illness.

Crisis Call Diversion Program (CCD)

CCD diverts non-emergency mental health related calls received through dispatch away from emergency response to appropriate mental health services.

Crisis Intervention Response Team (CIRT)

CIRT units consist of an HPD Officer and a master level clinician from the Harris Center. These teams are deployed citywide to address the most severe calls dealing with mental illness.

Crisis Intervention Training Unit (CIT)

This unit trains more than 5,600 law enforcement personnel annually. As one of ten CIT Council of State Governments Learning Sites, the CIT Unit also provides site visits to outside agencies who want to learn about the division.

Homeless Outreach Team (HOT)

HOT seeks to improve the quality of lives for Houston's homeless by providing a sense of worth and identity.

Senior Justice Assessment Center (SJAC)

SJAC works through a collaboration of partners to evaluate and intervene in crimes committed against senior adults.

Threat Mitigation & Investigations

This unit analyzes police reports pertaining to mental illness and inputs incidents into a database used to assess potential risks to consumers and the public.



A Division of Collaboration

(pictured above)

Staff members of the Mental Health Division represent the Houston Police Department, Harris County Sheriff's Office, and the Harris Center for Mental Health & IDD. Each year the division continues to expand and grow, bringing new program concepts and improved response strategies.



A team approach to its work.
Treat all people with respect and dignity.
Approach all work with integrity.
Respect individual differences.
Provide transparency to all stakeholders.
Learn. Collaborate. Educate. Innovate. Serve.



Our Leadership Team

(pictured on the left)

Sergeant Julio Silva, Sergeant Olga Gonzalez, Lieutenant Patrick Plourde, Sergeant Norris Groves, Commander Bryan Bennett, Sergeant Robin Nassif, Sergeant Roger Espinoza, Sergeant Joseph Ramirez



Meet the Mental Health Division Team

Our staff of forty officers and civilians work together to help serve the Houston community

MHD Administration

Commander Bryan Bennett
Lieutenant Patrick Plourde
Senior Officer Maria Butron
Officer Timothy Fay
SOA Cherry Jamison

Boarding Home Enforcement Unit (BHEU)

Officer Jason Llorente
Officer Trammell McKnight

Chronic Consumer Stabilization Initiative (CCSI)

Senior Officer Leon Moulton

Crisis Call Diversion Program (CCD) & Senior Justice Assessment Center (SJAC)

Officer Ashley Romo

Crisis Intervention Response Team (CIRT)

Sergeant Norris Groves
Sergeant Joseph Ramirez
Sergeant Julio Silva
Officer Stephen Augustine
Senior Officer Nick Baines
Officer Kyndall Griffin
Officer Robert Hatfield
Officer Richard Pietruszynski

Officer Michael Pulido
Officer Diana Riojas
Officer Tremayne Rowe
Officer William Rutherford
Officer Reginald Senegal
Officer Jason Smith
Senior Officer Mark Stevens

Crisis Intervention Training Unit (CIT)

Sergeant Robin Nassif
Officer Travis Cogbill
Officer Alfred Rivera
Senior Officer Rebecca Skillern

Homeless Outreach Team (HOT)

Sergeant Roger Espinoza
Senior Officer Colin Mansfield
Officer Sheldon Theragood
Officer Karan Dhooper
Officer John Vogelsang
Senior Officer Gerardo Alaniz
Officer Marcus Cooper
Senior PSO Daryl Bradford

Threat Mitigation & Investigations

Sergeant Olga Gonzalez
Officer Elizabeth Scheibe
Officer Kathryn Vogelsang
Officer Jonathan Woodall



Staff Spotlight

New to the Division

Sergeant Olga Gonzalez joined the division in 2019 to lead the Threat Mitigation & Investigation program

Sgt. Olga Gonzalez has been with the Houston Police Department for 18 years. She spent 13 years assigned to patrol before transferring to Northeast Division's Crime Analysis in January of 2015, where she spent the following two years.

After promoting, Sgt. Gonzalez was assigned to the Jail Division where she had the opportunity to assist with the closing of the City Jail as HPD merged with Harris County to the new Harris County Joint Processing Center.

During her time in patrol, Sgt. Gonzalez gained first-hand knowledge of the prevalence of mental health related calls, as well as the challenges in dealing with those calls. Through her myriad of experiences, Sgt. Gonzalez developed an admiration of and respect for the challenging, yet rewarding work done within the Houston Police Department's Mental Health Division. The opportunity to join the Mental Health Division was one that Sgt. Gonzalez quickly accepted.

After joining the Mental Health Division in April of 2019, Sgt. Gonzalez has quickly acclimated to the division's mission of helping Houston's most vulnerable populations. She is now able to realize her aspirations of working with the diverse populations



of people in need, assist in maintaining strong collaborative relationships with providers within the Houston community, as well as have a much more profound impact in helping to improve police responses to those affected by mental illness.



Staff Spotlight

New to the Division

In addition to a new commander and sergeant, five officers and one SOA joined the division in 2019



Timothy Fay

Data Analyst

Officer Fay has been with the department since March of 2011. Prior to joining the division, he spent three and a half years in the Homicide Division, and before that he patrolled the northeast area of Houston. Officer Fay appreciates being a part of a division that, through providing enhanced education and training on how to better interact with people suffering from mental illness and/or chronic homelessness, strives for positive interactions with the people we serve. As the divisional data analyst, Officer Fay is able to assist every part of the division in realizing the great work done by those whose passion is improving the lives of Houston's community.

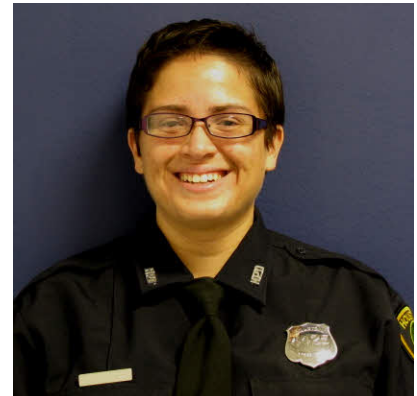


Tremayne Rowe

CIRT Officer

Officer Rowe has been with the department since October of 2014. Prior to joining the Mental Health Division, he patrolled central Houston and developed a passion motivated by helping people who truly need help during a detrimental time in their lives.

Since joining the Mental Health Division as a CIRT officer, he has developed a much greater knowledge of mental health and the practice of assessing individuals who may be experiencing a mental health crisis.

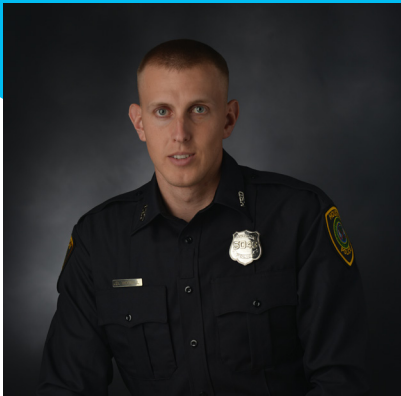


Diana Riojas

CIRT Officer

Officer Riojas has been with the department since August of 2008. Before coming to the Mental Health Division, she patrolled southwest Houston. She had a desire to learn more about psychology, how the mind works, and how to get people the help they need. For these reasons, she transferred to the Mental Health Division to work as a CIRT officer.

Riojas said she enjoys being a city-wide unit, increasing her knowledge about medications and medical terminology, and holding onto the hope that some of the people she encounters will take advantage of the services offered to help them build better, more stable lives.



Jonathan Woodall

Investigator

Officer Woodall has been with the department since October of 2014. He worked as a patrol field training evaluator in central Houston before to coming to the Mental Health Division as a CIRT officer. After a short time in CIRT, he transferred to the Mental Health Division’s investigative unit and finds it to be a rewarding experience.

He says that simply being an officer that is willing to listen to someone and provide resources can certainly make the difference in a person’s life when they are experiencing mental health problems or going through difficult times.

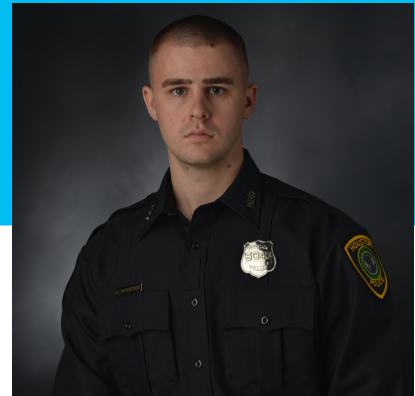


Cherry Jamison

Senior Office Assistant

SOA Jamison has been with the department since April of 1994. Prior to joining the Mental Health Division, SOA Jamison worked in Auto Theft for 10 years, before which she worked at the Eastside Division for three years, Traffic Enforcement for four years, Northwest Division for six years, and Employment Services for two years).

SOA Jamison began working with Commander Bennett when he transferred into the Auto Theft Division and chose to follow him when he transferred into the Mental Health Division in May of 2019. The areas of her job she most enjoys meeting new people, learning new skills, and acquiring knowledge.



Richard Pietruszynski

CIRT Officer

Officer Pietruszynski has been with the department since October of 2014 and joined the Mental Health Division because of his de-escalation, communication, and leadership skills. Prior to joining the division, he enjoyed patrolling the west side of Houston and responding to mental health related calls.

Officer Pietruszynski finds the psychological part of his work fascinating and enjoys feeling like he is actually making a difference by helping people who are usually disregarded.



About the Program

Boarding Homes Enforcement Unit

BHEU helps ensure safety of boarding home residents in the city



In 2013, Houston City Council passed the Boarding Homes Ordinance, which authorized the Houston Police Department to conduct enforcement and share regulatory oversight of boarding home facilities with Department of Public Works.

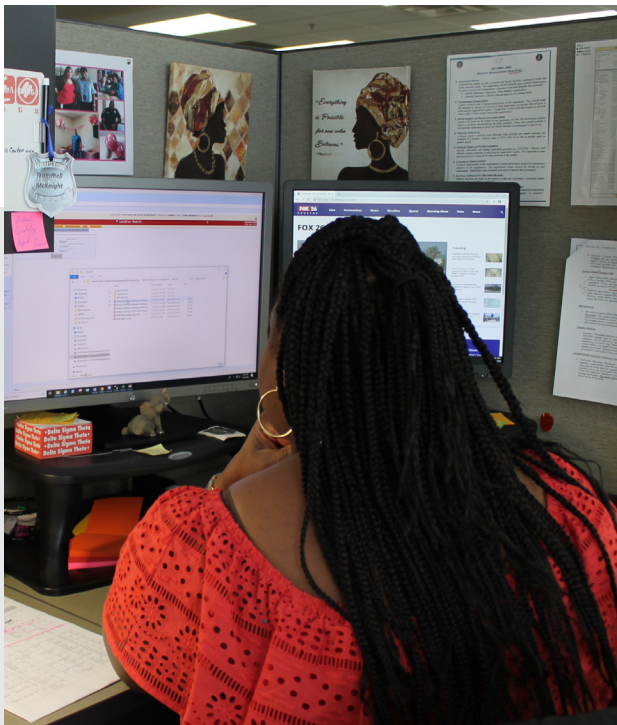
BHEU is tasked with enforcing the health and safety components of the ordinance in order to ensure

consumers are living in a safe and comfortable environment. The unit's responsibilities include general boarding home investigations, random site visits, inspections. BHEU also provides specialized training to the public and other government agencies. These efforts resulted in an increase in boarding home operators complying with the boarding home ordinance and permitting with the City of Houston.



2019

BHEU Statistics



As of 2019, approximately 250 boarding homes were known to exist inside the city limits of Houston. Through enforcement efforts and public training seminars, there are currently 39 locations lawfully permitted and approximately 124 boarding homes in the process of becoming permitted pending approval for certificate of occupancy, a recent addendum to the current Boarding Homes Ordinance.

406 Boarding Home Investigations

Police officers generate various offense reports that may involve a potential boarding home facility or established boarding home where violations or offenses have occurred.

Boarding Home Site Visits 402

Visiting boarding homes is one of the primary duties of BHEU. By visiting homes, they learn the conditions of the home and determine if any violations exist.

227 Home Inspections Conducted

During inspections, information is gathered such as the number of residents in the home, if any of the residents have mental illness, if the home is certified by the state, if the home has a written fire and evacuation plan, if the home provides access to their books, etc.

Code Violation Warnings 1090

Warnings are issued before citations when a home is in violation, a warning will be issued.

538 Code Violation Citations

Citations are the primary tool for ensuring boarding homes comply with Houston's city ordinance and for addressing health and safety concerns.



About the Program

Chronic Consumer Stabilization Initiative

CCSI connects individuals to needed mental health services and programs



The Chronic Consumer Stabilization Initiative (CCSI) is a collaborative effort between the Houston Police Department and the Harris Center for Mental Health and IDD. The program is designed to identify, engage, and provide mental health and social services to individuals that have been diagnosed with a serious and persistent mental illness and have frequent encounters with the Houston Police Department.

The Harris Center for Mental Health and IDD Care Coordinators proactively engage with affected individuals in hopes of interrupting the cycle of repeated law enforcement encounters and/or psychiatric hospitalizations. In past years, the CCSI Unit has received national recognition for excellence in Public/Private Cooperation from the International Association of Chiefs of Police (IACP), and the unit continues to show commitment to public and private collaborating.

In addition to decreasing the time and costs associated

with CIT calls and hospitalizations, the work of CCSI helps minimize the potential for injuries to the consumer and police officers, and allows for patrol resources to be directed to address crime-related issues. Based on current case load, one year before program and one year during there was a:

- 61% reduction in admissions to psychiatric facilities
- 66% reduction in Harris County Psychiatric Center in-patient days
- 66% decrease in overall encounters with law enforcement while on the CCSI program.

CCSI currently serves 45 individuals diagnosed with serious and persistent mental illness. With the upgrade of one Care Coordinator position to a Licensed Clinician, at no cost to the city, CCSI continues to proactively engage and manage individuals who experience chronic mental illness that frequently encounter HPD patrol officers and CIRT.



2019

CCSI Statistics

3712

Client Initiated Contacts

Clients in the program are encouraged to contact their care coordinators whenever there is a need for assistance, services, or to reach out for support. Without their care coordinators, clients are likely to resort to calling the police or other 911 services for mental health issues.

eighty-one clients served

Total number of clients who were opened for services at any given period of time during the calendar year.

9616

Care Coordinator Contacts

Care coordinators routinely keep in communication with their clients multiple times throughout the week. This proactive approach helps to keep individuals engaged with the program.

245 client contacts with police

The goal of CCSI is to reduce consumer encounters with police. However, clients will still be involved with law enforcement while on the program when a crisis situation occurs.

CCSI Goals

- Reduce interactions between the individual diagnosed with serious and persistent mental illness and HPD.
- Identify unmet needs and barriers in the community that contribute to an individual's inability to engage and remain in mental health treatment.
- Link and coordinate individuals with mental health treatment.
- Provide support and education to individuals and family members, to minimize contact with law enforcement resulting from non-compliance with mental health treatment.
- Facilitate compliance with recommended mental health treatment to reduce the number of involuntary commitments to the Neuropsychiatric Center, decrease homelessness, reduce victimization, decrease substance abuse, and minimize interactions with law enforcement, while improving their quality of life.

Services Available

- Outreach and Engagement
- Intensive Case Management
- Mental Health First Aid for client, family, & other support systems
- Linkage to secure, stable housing
- Linkage to primary healthcare
- Linkage to outpatient psychiatric care and supportive service
- Linkage with substance abuse treatment
- Empowering client to assume responsibility for mental health compliance
- Crisis Intervention

Eligibility

Eligible individuals have an extensive history of interactions and contacts with HPD. These encounters generally result in admission to mental health crisis services or psychiatric hospitalization. Many of these individuals have also committed crimes due to their illness and HPD officers are able to divert them to appropriate mental health services as an alternative to automatic incarceration.



About the Program

Crisis Call Diversion

Through the collaboration of the Mental Health Division, the Harris Center for Mental Health, CCD reduces non-emergent mental health calls for service to appropriate services and resources



CCD statistics from 2019

- **2984 citizens assisted (non-diversion)** When consumers are provided clinical assessments and de-escalation of crisis, but still require a police response, time is still saved for emergency service. While an average of 123 minutes are spent by officers on a CIT call, the average time spent on a scene by a patrol unit that has already been processed by CCD is only 36 minutes, a 71% time savings (or 87 minutes saved per call). [These savings are equivalent to \\$530,465.68, enough to pay 4 full-time employees.](#)
- **606 consumers de-escalated through phone conversations** CCD counselors make every effort to help consumers experiencing a mental health crisis during the call for service.
- **4566 Calls Answered** Tele-counselors receive CIT calls from the call takers and also proactively handle calls with a mental health component. There are only two tele-counselors on duty to process all of the mental health related calls received each shift.
- **1252 Service Provider Referrals** Tele-counselors assist consumers with offering them referrals to community mental health and social service providers in addition to completing clinical assessments.

2334

Crisis Calls Diverted

Non-emergent CIT calls are transferred to a tele-counselor where they may be able to address a consumer's needs directly and, in most cases, successfully divert them away from emergency services.



Background

Nationally, law enforcement response to persons in serious mental health crises continues to increase. This trend under the umbrella of the Houston Police Department (HPD) and the citizens it serves is no different.

Citizens in serious mental health crises often rely on emergency services. These types of calls for service can be time-consuming, complex, and drain first responder resources; however, by providing resources appropriate for these calls, all parties involved benefit.

The Program

The first of its kind in the nation, the Crisis Call Diversion (CCD) program is designed to identify and redirect non-emergent, non-life-threatening calls for service that are mental health crisis related (CIT) away from first responder resources and toward Harris Center for Mental Health & IDD mental health professional tele-counselors located at the 911 call center. This program is a collaborative effort of the Houston Police Department (HPD), Houston Fire Department (HFD), Houston Emergency Center (HEC), and the Harris Center for Mental Health & IDD. The program is staffed and funded by the City of Houston and the Harris Center.

This program has proven to be a valuable service to the City of Houston as it has essentially diverted emergency responders to calls that are most high in priority. In 2019 CCD fielded 4,566 calls and diverted 2,334 mental health calls away from emergency responders. The call diversions offer an estimated \$1,524,891.88 cost savings to the first responder community after program costs.

Through the work of one police officer from the Mental Health Division and six Harris

Center crisis call counselors, the volume of non-emergency mental health-related calls for service for both HPD patrol and HFD emergency medical services (EMS) is reduced, and more resources are available to provide for emergency responses. The program has not only proven to save first responder resources, money and time, it helps connect citizens of Houston with mental health services.

Cost Comparison

CCD counselors have helped first responders and the Houston community by diverting 2334 from emergency services. The breakdown below demonstrates the effectiveness of the CCD program.

Operational cost savings to first responder agencies (HPD & HFD):
\$1,984,891.88

Crisis Call Diversion Budget

\$460,000 annually

HPD: \$929,083.88 saved by CCD

- CCD diverted 1,581 CIT Calls for service in 2019 saving \$398,618.20
 - The savings is equivalent to 3 full time employees
- CCD assisted 2,984 citizens in 2019 saving \$530,465.68 (non-diversion)
 - The savings is equivalent to 4 full time employees

HFD: \$1,055,808.00 saved by CCD

- CCD Diverted 752 “psych” calls for service in 2019
 - \$1404 cost incurred per response involving ambulance and fire truck
 - \$1,055,808.00 savings

Estimated cost savings to the first responder community after the CCD program costs is \$1,524,891.88 per year.

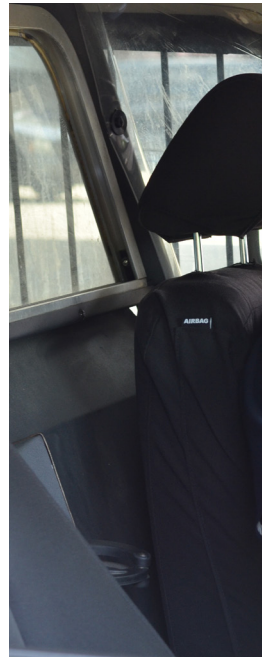




About the Program

Crisis Intervention Response Team

CIRT Units are dispatched to handle the most serious mental health calls for service throughout the city



Mental illness is something that police officers deal with on a daily basis. With training, Houston Police Officers can handle the majority of these calls on their own. However, sometimes patrol officers are a little out of their depth in certain severe cases. In order to effectively handle these cases safely, specialized mental-health units are necessary. These teams are called Crisis Intervention Response Team (CIRT) units.

Twelve Crisis Intervention Response Teams (CIRT) are deployed citywide in the call for service loop. Each team is comprised of an HPD Officer and a master level clinician from the Harris Center of Mental Health and Intellectual and Development Disabilities (formally MHMRA). The clinicians are an invaluable resource and a primary reason for the success of the CIRT Program.

In addition to their knowledge of mental illness and counseling experience, the clinicians have direct access to consumer's medical data in the Harris Center and Harris County Hospital District systems. This information is extremely beneficial when responding to consumers in crisis as they have knowledge of the consumer's diagnoses, mental health history, medications, and hospitalizations.

CIRT handled 19% of the 11,198 EDOs that HPD officers utilize to commit individuals in crisis. Of the 40,884 calls for service, CIRT units handled 13.5% of the calls. This unit also helps divert individuals from jail that need mental health treatment, which was 182 diversions handled by CIRT units.



The CIRT staff includes 12 Houston Police Department Officers, 20 Harris Center clinicians, and 9 Harris County Sheriff’s Deputies



2019

CIRT Statistics

2167

Emergency Detentions

If a peace officer believes the person is mentally ill and poses a significant risk of serious harm to self or others, they have the sole authority to take a person for a psychiatric evaluation, involuntarily.

5519

Calls for Service

CIRT units answer the most serious CIT calls involving individuals that are in serious mental health crises. They also assist patrol officers with difficult and/or dangerous situations.

one hundred eighty-two Jail Diversions

When prisoners in HPD jails exhibit mental health problems, a CIRT unit will be requested to assess the prisoner. If it is determined the prisoner is in a serious mental health crisis, the prisoner will be transferred to the Harris County Jail. Harris County has a forensic psychiatric unit inside the jail and can address the prisoner’s mental health problem.

180

Referral Investigations

In cases of non-emergent mental health needs, referrals are made for CIRT officers to investigate for the benefit of the consumer.

193

On-View Investigations

In these investigations, CIRT officers observe someone while on the job that is in need of mental health care without a call for service.



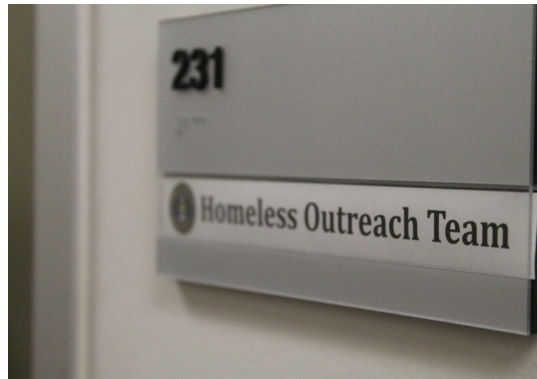
About the Program

Homeless Outreach Team

HOT works to connect individuals in the homeless community of Houston to needed resources with the goal of helping them find permanent housing

The Homeless Outreach Team (HOT) is a team of specialized officers that collaborate with mental health care coordinators to engage in outreach to the homeless community by offering shelter, aid, and assistance.

Officers on the team seek out the homeless population for outreach, be it the streets, sidewalks, underpasses, wooded areas, or shelters. A psychosocial assessment of each individual is conducted to determine the root cause for an individual's homelessness. This assessment consists of identifying and targeting needs such as medical issues and treatment, mental health treatment, acquisition of medication, identification acquisition, poly-substance abuse treatment, housing needs, need of immediate sheltering, need of social services including Social Security benefits, Medicare & Medicaid, SSI acquisition, WIC program and/or SNAP benefits, and re-engagement with family and relatives.



Following engagement and assessment, HOT officers and care coordinators work with each individual to link them to appropriate programs and agencies based on their specific needs. The goal in linking homeless individuals with appropriate services is to address and eliminate the root causes that have kept a person living on the streets.

With the addition of two care-coordinators and two officers since 2017, the average number of individuals permanently housed by HOT has increased by 48.16%. According to the U.S. Department of Homeless & Urban Development research, homeless individuals cost

communities an average of \$40,000 per year in various social services, whereas housed individuals cost an average of \$12,000. Based on these averages, the placement of 295 homeless individuals in housing by HOT saved the community a potential \$8.26 million.

The innovative method of policing with relational solutions executed by HOT continues to be a model, not only for Texas, but also for the nation.

2019 HOT Statistics

8550 Services Offered

The homeless are provided information about services available to them, such as detoxing, rehab, shelter, and transitional housing providers.

2686 Services Accepted

31% of the services offered were accepted by homeless individuals. Persistence, rapport building, and trust between the police is a necessary part of improving these rates.



Officers of HOT connect homeless individuals with needed services and save the community an estimated \$8.26 million.



2130
HOT Identifications Issued

Many homeless lack documentation, by theft or loss. Because it is difficult to receive services without identification, HOTA made a program to provide IDs.

295
Homeless individuals Housed

One of the primary goals of HOTA is to house the chronic homeless. HOTA collaborates with several organizations to obtain housing for the homeless.

6239
Consumer Contacts

Interactions are made in attempt to offer assistance with medical care, mental health treatment, identification letters, housing, social security benefits,



Staff Spotlight

Daryl Bradford

Bradford works with Officer Nick Vogelsang to improve processes to help Homeless Outreach Team provide IDs to consumers



“When I transferred to the Mental Health Division about three years ago, I really did not know what to expect. I had some knowledge of the Homeless Outreach Team, but I did not know everything about it. I quickly learned that some days the job could be hard, dirty, frustrating, but quite rewarding.

“When I first started making the ID letters, it was very difficult just getting a single one made. Many times, I was given limited information on a client. I had to verify the identity, and then I would have to chase down Sergeant Wick to sign them and find someone to notarize them. This process sometimes took days. I, along with Officer Nick Vogelsang, was able to modify the template we use to make the ID process more efficient. I now can complete up to 25-30 ID letters a day, sometimes more when there are housing events. When I first started in the division, each officer had ID letters saved on their individual computers. We never

knew if we were making duplicate copies of IDs or how many times a client requested one. I got with my Sergeant and asked if it would be ok if we stored all the ID letters in the Q-drive so all the files had a central location and each HOT Officer could access all of them. By doing this, we eliminated duplicate ID letters, and we now have a database where we can update and easily re-print them.

“One of my responsibilities is to assist homeless individuals who come to the front door of the Sobriety Center looking for the Homeless Outreach Team. This duty has brought me face-to-face with all types of people that are experiencing homelessness in Houston. I have had to use my CIT training on numerous occasions to de-escalate situations. After three years in this division, I am still learning every day, and definitely have a different view of mental health, and Houston’s homeless problem.”



Providing IDs removes a barrier for the homeless community to access needed services

Soon after the Houston Police Department's Homeless Outreach Team (HOT) was formed in 2011, a major obstacle that prevented homeless individuals from accessing available and supportive services was discovered. That obstacle was the lack of identification documents by an individual seeking such services.

Social service providers do not accept homeless people into their organization when they cannot prove their identity. When individuals seeking services do not possess an acceptable form of identification, many services cannot be accessed.

The homeless IDs are the gateway to provision of supportive services and the start for homeless individuals to transition away from a life on the streets. HOT IDs are now accepted by all social service providers and have become an acceptable form of identification at all Texas Department of Public Safety locations. Without a HOT ID, a person would remain on the streets indefinitely. The Mental Health Division's Police Service Officer Daryl Bradford has made the process more efficient and has contributed greatly to getting more homeless individuals off the streets in shorter time.

“After three years in this division, I am still learning every day, and I definitely have a different view of mental health.”





About the Program

Threat Mitigation & Investigations

TMU seeks to prevent crises across the department through investigations



The Threat Mitigation Unit (TMU) & Investigations is comprised of three investigators, tasked with reviewing every incident report routed to the Mental Health Division that involves a person with actual or suspected mental illness. Incidents that meet the criteria of a mental health nexus are entered into a secured CIT database.

Through case review, referrals from other investigative divisions and outside agencies, cases are identified for follow-up investigation. At this point, the objective is to identify individuals whose specific behavior or actions cause serious concern for others, and have the potential to escalate into violence. This is followed by threat assessment and identifying the risks, the individual under suspicion poses to any particular target. During this stage of investigation, the goal is to gather as much information on the individual as

possible to learn about their state of mind, behavioral patterns, and interests regarding the target. This requires consultation from multiple sources and may require face-to-face interviews with the individual.

The last component of threat mitigation involves developing a strategy to manage the individual and minimize harm against the targeted individual. The management plan involves a collaborative effort between multi-disciplinary groups and organizations. The investigator determines what resources are available to improve quality of life, and makes referrals to the appropriate agencies or MHD unit to provide the services and assistance needed.

Threat Mitigation & Investigations is also responsible for the disposition of firearms seized from individuals experiencing a mental health crisis and taken on an emergency detention.



The TMU was developed in response to the increasing number of mass violence incidents occurring at schools and workplaces across the country. Studies have shown mental illness plays a significant role in individuals involved in mass violence.

175 investigations were conducted in 2019

72 cases involving firearms



21,376

Mental health related reports reviewed by the Threat Mitigation and Investigations Unit to determine if any additional services or referrals are needed to help consumers with unresolved crisis issues.

Investigations are conducted with the hope of preventing future crisis and, if possible and appropriate, to defer prosecution

Investigators also complete premise histories, which is a safety awareness advisory that is entered in the CAD system for patrol officers to read before arriving on location.

239 MCOT referrals

The Mobile Crisis Outreach Team (MCOT) is a team of Psychiatrists, Registered Nurses, Licensed Master's and Bachelor Level Clinicians, and Psychiatric Technicians specializing in crisis intervention.

39% of offense reports reviewed required follow-up by a mental health investigator

Mental Health Investigators follow-up on cases involving possible criminal activity, where the consumer was victim of a crime or listed as a suspect. Investigators work closely with other department investigative divisions.



About the Program

Senior Justice Assessment Center

SJAC provides services of assessment and intervention to support senior adult victims of crime through a collaborative team of multidisciplinary field experts and organizations

The Harris County Senior Justice Assessment Center brings together a multidisciplinary team to serve the unique needs of senior adults that fall victim of neglect, abuse, and/or exploitation. The team includes the Houston Police Department, the Harris County Sheriff's Office, Harris County Protective Services, the district attorney's office, the Area Agency on Aging, Harris County Health Services and the University of Texas Health services, and others.

The Senior Justice Assessment Center establishes standardized roles, processes, and procedures to allow seniors to have comprehensive care. Using this methodology, agencies experience less overlap when working on cases simultaneously, allowing better use of resources. Through this collaboration, the team creates and implements plans tailored to each client's needs. Some of the services provided to seniors through SJAC include determining if a crime has been committed, assessing the client's mental capacity, and ensuring physical safety.





SJAC Goals

As crime rates against elders rise, SJAC works to increasing awareness, education, and prosecution of elder abuse.



SJAC Services

SJAC provides assessments, multidisciplinary team meetings, case coordination, treatment referrals, education, and research.



SJAC Team

Experts in geriatric medicine, social services, protective services, law enforcement, and civil and criminal prosecution collaborate with SJAC.

Senior Justice Assessment Center (SJAC) statistics from 2019

SJAC works to address issues with quality of evidence involving clients with dementia, decrease overall investigative costs and duplication of agency investigation, extend the network to area community centers, and successfully secure continuous funding opportunities through community partners and grant applications.

+20% from last year

193 cases opened

A multi-disciplinary team of medical, legal, law enforcement, and social service professionals convene weekly to review the merits of a case and to determine if eligible criteria have been met for specialized investigation.

+5% from last year

56 APS Referrals



A large percentage of cases referred to the SJAC originate from the Adult Protective Services due to complaints received by third party reports.

14 felony charges filed

Charges accepted by the district attorney's office assigned to SJAC after an in-depth investigation has been completed.

+53% from last year

100

Physical Abuse Cases

Most cases involve elderly complainants who are victims of abuse while being cared for by their caregiver or in a nursing home.

-18% from last year

74

Financial Exploitation Cases

Elderly victims with impaired cognitive disabilities are often taken advantage of those looking to exploit their life savings.

37 cases referred by HPD

Any investigative division may refer cases to SJAC that involves an individual 65 years of age or older.



About the Program

Crisis Intervention Training Unit

The training unit teaches about mental health to law enforcement personnel within the department, including officers and cadets, as well as visitors from departments across the nation



The Houston Police Department's Mental Health Division continues to lead by example in training law enforcement and mental health personnel across the region, state, and nation. In 2019, the CIT Training Unit provided over 1,300 hours of training to more than 5,600 law enforcement personnel, in addition to hosting site visits with seven outside agencies. The Training Unit also presented at both the Texas CIT Association Conference and the CIT International Conference, and co-presented with the Council of State Governments at the 2019 International Association of Chiefs of Police Conference in Chicago. Additionally, the CIT Training Unit engaged various community organizations through presentations and workshops.

The primary responsibility of HPD's three-person training team is providing Crisis Intervention Training to all Houston Police Department classified personnel, as well as many of HPD's civilian personnel.

All of the Houston Police Department's multi-faceted strategies for responding to the mentally ill begin with training and fostering collaboration. HPD's Mental Health Division partners with mental health professionals and advocacy groups in Houston and Harris County in its specialized police responses. In addition to the aforementioned, the CIT Training Unit is also called upon to respond to information requests and depositions related to mental health consumers. The CIT Training Unit also offers technical assistance to outside agencies, which is available via training videos, off-site training, sharing of curricula, program information, and consultations.

Our subject matter experts have taught throughout Texas, as well as throughout the United States. All instructors are TCOLE certified instructors and Mental Health Officers, with vast hands-on experience handling mental health related crises and de-escalation.



Crisis Intervention Training Unit Class Statistics from 2019

Class	# Classes Taught	Total Hours Taught	# of Personnel Trained
Advanced CIT (8 hour class)	36	288	3671
CIT Update (8 hour class) <i>TCOLE Intermediate 3843</i>	3	24	188
Crisis Intervention Training (40 hour class) <i>TCOLE Intermediate 1850</i> Cadet Trainings	6	270	379
Crisis Intervention Training (40 hour class) <i>TCOLE Intermediate 1850</i>	14	560	759
De-escalation (8 hour class) <i>TCOLE 1849</i>	12	144	588
Mental Health Officer Training (40 hour class) <i>TCOLE 4001</i>	2	80	58
Trauma Affected Veterans (24 hour class) <i>TCOLE 4067</i>	3	72	62
Outside Agencies Trainings/Presentations	8	11	435



About the Training

CIT Unit Classes

The courses provided by the training unit are updated annually to reflect the most up-to-date information and are offered to officers within the department as well as outside agencies seeking mental health training pertaining to law enforcement



Courses taught in 2019 by the Crisis Intervention Training Unit

Advanced CIT

The goal of this annual course is to provide officers with refreshed curriculum and training about trending topics in popular culture as it pertains to mental health as well as to improve officer handling of CIT calls for service. The 2019 curriculum included information on the Senior Justice Assessment Center (SJAC), updates on the Mental Health Diversion Center, Juvenile Diversion Programs, and Mental Health Warrants. Additionally, the class will cover recognizing and articulating “deterioration” as it pertains to the criteria for Emergency Detentions, and handling emergencies involving Delirium Tremens and Excited Delirium.



Crisis Intervention Training

With increasing frequency, law enforcement is being called upon to respond to individuals in serious mental health crises. It is necessary for law enforcement personnel to understand mental illness, and the tactics and techniques that have been proven to work most effectively when responding to individuals in these situations. These tactics and techniques are different than those routinely taught to officers to manage conflict. Generally, the underlying elements behind mental illness-related behavior is usually not criminal or malicious. Utilizing the information from this course, and implementing effective strategies can help keep the officer safe, keep the public safe, and greatly reduce civil liability.

CIT Update

This Crisis Intervention Refresher training provides a review of the key concepts, safety techniques, and communication skills initially taught in crisis intervention training portion of the Texas Commission on Law Enforcement (TCOLE) Basic Peace Officer Curriculum. This course will also allow time for discussion, questions, and concerns of technique utilization that participants have experienced since their initial basic training. Brainstorming with fellow attendees will assist in the discussion of “best practices” and the sharing of personal situational experiences.

De-Escalation

The purpose of the De-Escalation training is to improve the response of officers to incidents that involve persons in crisis, who are behaving erratically, emphasizing that public and officer safety are at the heart of this process. De-escalation utilizes

techniques to reduce the intensity of an encounter with a suspect and enable an officer to have additional options to gain voluntary compliance or mitigate the need to use a higher level of force while maintaining control of the situation.

The critical decision-making model provides officers with an organized way of making decisions about how they will act in any situation, including situations that may involve uses of force. Principals of the critical decision-making model include police ethics, values of the Houston Police Department, proportionality, and most importantly, the sanctity of human life.

Mental Health Officer Training

The purpose of the Mental Health Officer course is to further inform and educate the officer in the area of mental health and issues pertaining to serving as a mental health officer, to include advanced crisis intervention training.

Trauma Affected Veterans

The Trauma Affected Veterans course aims to provide a framework for Law Enforcement Officers to have a basic understanding about US Military culture, traumas, triggers and stressors, and de-escalation techniques when encountering veterans in crisis. The course is structured around 16 hours of lecture, videos, and class dialogue and 8 hours of role playing and hands-on practice to build student confidence when encountering a US veteran in crisis. The Trauma Affected Veteran course builds upon the techniques taught in Crisis Intervention Training (TCOLE 1850) and meets guidelines set by House Bill 1338.



Volunteer Spotlight

Karlie Hinkle

University of Houston- Clear Lake graduate student partnered with the Crisis Intervention Training Unit to teach officers about safely engaging with individuals affected by autism



“My endeavor started when I came across a story about the interaction between an adolescent with autism and a law enforcement officer. Within 30 seconds of the interaction, the officer attempted to handcuff the adolescent because the adolescent engaged in repetitive behaviors, did not answer questions sufficiently, and turned to walk away from the officer. The situation quickly escalated, and the adolescent was injured, and the adolescent’s caregiver sued the law enforcement agency.

“After I learned about this story, I discovered that individuals with autism might be more likely to encounter law enforcement because behaviors associated with autism may appear suspicious. With the previous information, I set out to train law enforcement not only about autism and the behaviors associated

with autism but also about methods for gaining compliance with individuals who may have limited communication skills.

“I am grateful that the Houston Police Department and the Mental Health Division partnered with me on this training. I am also appreciative of the trainers in the Crisis Intervention Training team who assisted and guided me throughout my time at the police academy. The experience I gained is irreplaceable and will help me with all my future endeavors.”





Autism training Story of Success

Officers applied the training from Karlie Hinkle to appropriately engage with a consumer affected by autism

Karlie's autism training with the Department paid off when two Houston Police officers were dispatched to a family disturbance. HPD officers recognized that the young man was on the Autism spectrum as a direct result of Karlie's training. Without this training, the outcome could have been very different.

Officers arrived to see a young man in the front yard of the residence swinging a large stick angrily at surrounding individuals. The young man noticed the police arrive, focused his aggression towards them, and began to run at the officers as they stepped out of their vehicle.

Both officers started shouting commands at the stick-wielding man to stop, but he refused. They later stated that he was unresponsive to their commands and appeared extremely agitated.

He continued to approach them aggressively. In response, both officers drew their firearms. As they were about to raise their guns toward the approaching man, one officer shouted to his partner, "Woah woah. Don't shoot. He's autistic."

The officers immediately holstered their weapons. The young man dropped the stick,

ran up to them, and hugged the closest officer to him. The young man needed help and was scared. He saw the arriving officers as there to help him.

The two officers then transported the young



man and his mother to the hospital for evaluation. No one was hurt in the incident.

Both officers disclosed that they had attended the autism training only a week prior to the incident. They noted the young man was acting the same way someone on the spectrum would act if they were having an episode. Other clues they noted identifying individuals with autism they attributed directly to Karlie's training.



Growing through collaboration

State & National Conferences

Mental Health Division representatives attend CIT conferences annually

The mental health field, as it relates to policing, is always growing and evolving. It is imperative for the division to continue to incorporate the latest information and strategies.

Every year, the Mental Health Division takes part in the state and national CIT conferences to present and gather knowledge in effort remain current within the field. Conferences are also an excellent opportunity to share information, ideas, and methods with other agencies so that CIT successes can become more widespread. As mental health-related calls for service increase nationwide, police departments are looking for better, safer ways to serve the community and are making efforts to attend these conferences in order to improve their department.

In 2019, the International CIT conference took place in Seattle, Washington where teams from both HPD and Harris County attended not only to network and glean information from the international community of mental health experts but also to contribute. Lead Trainer and Senior Officer Rebecca Skillern collaborated with the Texas CIT Organization to present about the importance of a local CIT organization. The presentation taught attendees the value of forming, founding, and funding a State CIT organization to assist local mental health initiatives.

The information shared by Texas CIT team furthered CIT International's goal to promote and support collaborative efforts to create and sustain more effective interactions among law enforcement, mental health care providers, individuals with mental illnesses, their families,



and communities and to reduce the stigma of mental illness.

At the 2019 Texas CIT conference in South Padre Island, Senior Officer Rebecca Skillern and Officer Alfred Rivera had the opportunity to present to Texas members, the Emergency Medical Treatment and Labor Act (EMTALA), a federal law, as it pertains to mental health patients' rights at hospitals and the part police officers play in this process.



State & National CIT Organizations



CIT International

CIT International, Inc., a non-profit membership organization, holds an Annual CIT International Conference with local CIT partners to provide education and networking to help develop, maintain and sustain CIT programs. By raising public and stakeholder awareness through education and outreach, CIT International’s goal is to facilitate understanding, development, and implementation of Crisis Intervention Team (CIT) programs worldwide. The organization helps by establishing and disseminating recommended standards for developing, implementing and sustaining CIT programs while providing technical assistance to communities interested in developing CIT programs.



Texas CIT Association

The Texas CIT Association is a non-profit organization dedicated to bringing together members of law enforcement, corrections, advocacy groups, and the mental health community by hosting social and charity events along with an annual conference at different locations throughout Texas. Members enjoy exclusive access to highly trained professionals in law enforcement, corrections, and advocacy groups as well as an opportunity to network with many others in the mental health community.

Recognizing outstanding work in the field Texas CIT Conference Awards



Rebecca Skillern

*Mental Health
Professional of the Year*

Awarded to the mental health professional who is working with law enforcement to make the most significant improvement to mental health responses within the community.



Wendy Baimbridge

Award of Excellence

Awarded to the individual whose support, dedication, work, ideas, and/or strides toward improving community knowledge and education has significantly impacted the field of Crisis Intervention.



Collaboration extends through **Learning Site Visits**

Outside agencies travel to Houston to visit sites and learn about Houston's Mental Health Division

For many years HPD has been one of the nation's front-runners in Crisis Intervention and De-escalation training because of the strong collaboration between HPD and Houston's local mental health authority. In 2010, the Houston Police Department's Mental Health Division was chosen as one of the original six Council of State Government's Learning Sites, a program focusing on specialized police responses involving both law enforcement and mental health providers co-responding to crisis related calls. This resulted in a significant increase in agencies coming to MHD to learn more about programs and strategies in place.

MHD welcomes the opportunity to assist other agencies in beginning similar programs within their jurisdictions. Because of this, MHD hosts site visits for agencies to learn about all of the co-responder programs, meet with collaborative partners, tour program sites, participate in ride-a-longs with co-response units, and experience Houston. Additionally, the MHD offers technical assistance to other agencies via phone conferences and/or email.

To arrange a site visit or technical assistance call, agency representatives can visit our website to submit a request houstoncit.org/sitevisits





Seven Agencies Visited

- Boston Police Department
- Charlotte-Mecklenburg Police Department

42 Personnel Hosted

- El Paso County Sheriff's Office
- FBI Dallas
- Lubbock County Sheriff's Office

11 Days

- Prince William County Sheriff's Office
- Tucson Police Department





Recognizing **CIT Officers of the Quarter**

Officers are awarded through collaboration from the Mental Health Division and the National Alliance for Mental Illness (NAMI)

Three quarters of the year, officers are recognized for outstanding work utilizing crisis intervention strategies. These officers are recognized after histories of successful intervention and a report that illustrates their skills being employed on a specific scene.

Throughout the year, the Mental Health Division nominates officers within the department to NAMI for award consideration. NAMI leadership and the Mental Health Division recognize the officers at a leadership meeting where the awards are presented.



David Walker

On Dec. 12, 2018, Senior Police Officer David Walker responded to a scene involving a male who was suicidal and threatening to jump from the seventh floor of a parking garage, located at 7620 Katy Freeway.

Prior to SPO Walker's arrival, other officers on scene had secured the area and were trying to talk with the consumer, though the individual was uncooperative. After arriving and gaining an understanding of the scene, SPO Walker began speaking with the individual. After just under an hour, SPO Walker was able to convince the individual to come off the ledge so he could be transported to a hospital for mental health assessment and care. SPO Walker showed exemplary use of empathy and understanding, care and concern, while utilizing the crisis intervention and de-escalation techniques consistently taught in the Houston Police Department's Crisis Intervention Training classes.

Walker is known by his peers as being highly skilled at crisis intervention and de-escalation, which is also evidenced by his history of having talked another individual off of that same garage a couple years prior to this incident.

Based upon this incident, as well as an exemplary history in this area of policing, Senior Police Officer Walker was awarded the March 2019 NAMI CIT Officer of the Quarter.



Christopher Arlotta, Frank Jr Sierra & Jason Anderson *(not pictured)*

On February 24, 2019, Officers Arlotta and Sierra were dispatched concerning a missing person. Upon arrival, the officers met with the reportee, who was the brother of the consumer. According to the reportee, the consumer had prior history with mental illness and was suicidal in the past. Officers were advised that the consumer had packed his belongings, closed his bank accounts, and sent all his money to his wife and left to go to an unknown hotel with intentions to commit suicide by consuming a bottle of lithium carbonate.

Officers contacted the Real Time Crime Center, which advised that he had been known to use Uber for transportation. Officer Arlotta contacted the Uber Law Enforcement Portal, and within five minutes, received information of about where the consumer was recently taken by Uber. Officers arrived at the hotel and began speaking with the consumer to ensure him that they were there to help. The consumer confirmed that he intended to kill himself and was taken to the hospital and placed under the protection of an emergency detention order.

Officer Arlotta's idea to contact Uber was key to locating this suicidal individual. Other officers within the department have since been instructed on the use of the Uber Law Enforcement Portal because of this case. Officers Arlotta and Sierra were awarded for their efforts that resulted in a life being saved.



Marcus Anderson & Joell Mathews

On Oct. 18, 2019, Officer Anderson was working an extra-job when a citizen informed him there was distraught female threatening to commit suicide while standing over the downtown Houston Library Garage. Officer Anderson called for an on-duty patrol officer to assist him.

Officer Mathews arrived and stood at distance to keep the suicidal female from panicking. Officer Anderson spoke with the female for several minutes to build a rapport with her. She was intoxicated and very upset that she was dying from stage IV cancer, and repeatedly told him, "this is my suicide, not yours." Officer Anderson continued to distract her to keep her from climbing over the ledge, as he feared she would either fall or intentionally jump. Officer Anderson maintained a calm demeanor while reassuring her that he was there to help, even as the woman cursed at him, drank alcohol, and threatened to jump off or kill officers if they approached.

Officer Anderson kept her attention long enough for Officer Mathews to approach without being detected so that he could pull the female safely from the ledge. After the woman was secured, Officer Anderson remained calm and professional and assured her that her life was important and that the officers were there to help. Officers Anderson and Mathews demonstrated patience and calmness, and utilized de-escalation training to ultimately save the life of the consumer.



Recognizing Outstanding Officers

CIT Officer of the Year

At the award ceremony held during National Police Week, the Houston Police Department recognized Officer Robert Hatfield for work that went above and beyond his scope of duty during CIT-related calls for service





On Dec. 11, 2018, CIRT Officer Robert Hatfield and his civilian partner, Clinician Andrea Battle, responded to a call for service at 1919 W. Main St. #42 involving a consumer, who had been reported missing, and was possibly in a mental health crisis. The consumer had a history of Bipolar Disorder and not being compliant with her medications.

Upon interviewing the reportee, Officer Hatfield learned that the consumer was indeed displaying signs of being in mental health crisis. She had expressed suicidal ideations, was writing on the walls, and giving away her possessions. She was also making long, rambling posts on Facebook, with threats of killing her family members.

Though the consumer was not located at first, a follow-up investigation performed by Officer Hatfield enabled him to make contact and assess her condition. The consumer was found to be in a psychotic and highly agitated state. She resisted the initial contact, and attempted to run away before Hatfield was able to contain and secure her in the police vehicle. The consumer continued to be combative and

argumentative, kicking the windows and doors, while being transported to the NPC. Hatfield was able to safely complete the transport and admit the consumer on an Emergency Detention Order (EDO), without injury.

It was Officer Hatfield's diligence that led, not only to the location of a missing person, but also to the provision of necessary care to a consumer in a mental health crisis, who was clearly a danger to herself and



others. This type of performance is not only typical of Hatfield's work ethic, but one in which he does not merely settle for the minimum. It represents the manner in which he consistently goes above and beyond that which is called for, to do that which is extraordinary. This type service has led to superior results, which serves the CIRT. mission well. Hatfield's performance is indeed commendable, and well-deserving of the honor of being chosen as the Crisis Intervention Team Officer of the Year.



Safety Through Preparation

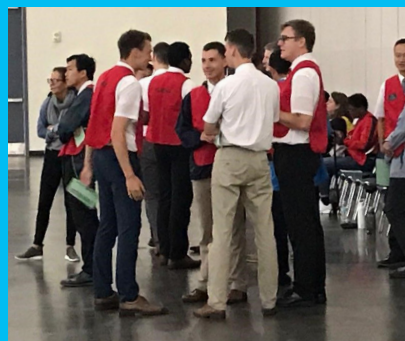
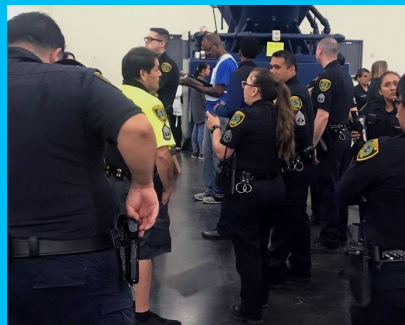
Annual Evacuation Hub Exercise

Evacuation Hub Exercise® 2019 in GRB Houston, TX® is a recurrent, one-day exercise to practice pre-landfall evacuation activities in the event of a hurricane resulting in an evacuation order.

The City of Houston's Office of Emergency Management hosts the exercise and strives to have the most realistic environment to practice and test centralized evacuation procedures. The City of Houston uses local volunteers to role-play and bring varied life circumstances, language diversity, and real-life access or functional needs to the exercise. In the scenario, residents are brought to the George R. Brown Convention Center, processed, and placed on buses to

shelters in other parts of the state so they are safe from harm.

Based on the critical role that the Mental Health Division plays in mitigating crises during trauma-related events, the entire Mental Health Division participated in the exercise to help ensure that smooth and efficient evacuation procedures could be carried out in the event of a hurricane. In a real world evacuation, the Mental Health Division's partnership with the local mental health authority (the Harris Center) provides an invaluable resource of clinical assistance and expertise to address serious mental health issues amongst individuals experiencing a crisis.





Supporting the mental health awareness movement

Houston NAMI Walk 2019



NAMIWalks events bring together people of all ages and fitness levels to combat stigma, raise funds and promote awareness of mental illness. Each NAMIWalks 5K event is a celebration of recovery—a time when we come together to let the world know that #NAMICares.



Mental illness impacts the lives of at least one in five adults and one in ten children across the United States every year, regardless of race, age, religion or economic status. That comes out to nearly 60 million Americans.

Every year, the National Alliance on Mental Illness (NAMI) hosts 33 walks nationwide where thousands of participants raise funds and awareness to fight the stigma associated with mental illness and encourage understanding.

NAMI Walks are the face and voice of the NAMI movement—families, individuals, co-workers and businesses who come together to celebrate mental illness recovery, to honor those who have lost their lives to mental illness and to help raise funds, combat stigma, and promote awareness.

The Houston Police Department's Mental Health Division participates in the NAMI movement by assisting NAMI Walkers during the walk held in Houston each year. In 2019, the NAMI Walk took place at Sam Houston Park on May 4. Officers from the division helped show support by blocking traffic for walkers and support staff. Officers ensured safe passage for participants through the streets of Houston as well as providing service to those in need of assistance.



A Guide to

Assist Someone in Crisis

This guide is a brief explanation of the ways the Mental Health Division instructs law enforcement personnel to help consumers in crisis



Behavioral Observations

Consumers may exhibit signs of varying degree depending on the extent of the illness such as those listed below. When possible, talk with family members and others who may know about the person's illness/history.

Psychotic signs:

- Hearing voices or seeing things
- May have strong, false beliefs
- Tend to have confused, disoriented thinking
- Can possess beliefs of paranoia and persecution

Non-Psychotic signs:

- Suicidal thoughts or actions
- Can be easily agitated or irritable

- Mood extremes (highs and lows) - can be high irritability or extreme raging
- Excessive fears and anxieties
- Social withdrawal
- Displays of anger
- Growing inability to cope
- Denial of obvious problems
- Variety of unexplained physical ailments



De-Escalation Reminders

Establish trust

- Use a calm voice and disposition. Offer your name and ask for theirs.
- Be patient, let them adjust to your presence.
- Reduce noise and distractions, if possible.
- Do not interfere with non-threatening, repetitive behaviors
- Never sacrifice your security to establish rapport or trust with the consumer.

Remember that you are giving off non-verbal cues

- Maintain non-threatening body language.
- Respect personal space. Stand 4-6 feet away at first.
- Keep your hands in view, and if you must touch, ask first.

Be patient

- Allow consumer ventilation to release energy.
- They are usually disoriented and confused.
- Acknowledge their stress.
- Let them talk freely.

Be empathetic

- Engage in their reality. Don't deny it, but don't participate in their delusions or hallucinations.
- Be direct. Ask questions about what the individual is seeing or hearing. Be honest, but not argumentative regarding what they see or hear.

Assessment Questions

Be direct, ask questions about their treatment:

- Do you have a doctor or a therapist you see?
- If so, who is your doctor?
- Have you been hospitalized lately?
- If so; for what?
- Have you ever attempted suicide, and do you feel like killing yourself right now?

What medication(s) might they have been taking:

- Are you currently taking any medications?
- Are you supposed to be taking any medications?
- If so, what type?
- When was your last dosage?

Is the person psychotic:

- Are you, or have you been, hearing voices?
- What are they saying?
- Are you seeing things?
What are you seeing?

Establish trust.
Be patient. Be
empathetic.



mental health division



Houston Police Department
Mental Health Division

150 North Chenevert Street Suite 200
Houston, TX 77002
832.394.4200 | www.HoustonCIT.org





Mental Health Resources

In case of an EMERGENCY, call 9-1-1

Call 9-1-1 if someone, due to their mental state, is an immediate danger to themselves or others, including threats of suicide or homicide.

Houston Police Department (HPD) 713-884-3131

Call the Houston Police Department directly if someone is acting out due to their mental state, but is NOT an immediate threat or danger to themselves or someone else.

HPD Mental Health Division
832-394-4200

Ben Taub Psychiatric Unit
713-873-2631

Neuropsychiatric Center (NPC)
1502 Taub Loop (next to Ben Taub Hospital)
713-970-4640

Michael E. DeBakey VA Medical Center
2002 Holcombe Blvd
713-791-1414

Harris County Psychiatric Center (HCPC)
2800 S. MacGregor Way
713-741-5000

Precinct 1 Constables Office at HCPC
713-741-6012
Mental Health Warrants, Monday through Friday, arrive at HCPC in morning

Mobile Crisis Outreach Team (MCOT)
713-970-7550
MCOT is an outreach service that provides treatment and linkage for Harris County residents with mental illness who are unable or unwilling to access routine outpatient clinical services. MCOT services are voluntary.

Bristow/PATH Homeless Unit
2627 Caroline St
713-970-7413
Provides voluntary clinical and non-clinical services to Harris County residents who are both homeless and have mental illness.

Harris Center Helpline and Crisis Line
713-970-7000

Crisis Intervention Houston
832-416-1177

Teen Crisis Hotline
713-529-8336 (Call)
281-201-4430 (Text)

Suicide Hotline (1-800-SUICIDE)
800-784-2433

Rape Crisis Hotline (LAASA)
844-303-7233

Council on Recovery Houston
713-942-4100

Montrose Counseling Center
713-529-0037

Harris County Social Services
713-696-7900

Adult Protective Services
713-767-2700

Harris County Guardianship
713-363-2300

Mental Health America of Greater Houston
713-523-8963

Alzheimer's Assoc. of Houston & SE Texas
800-272-3900

Arc Greater Houston (IDD and Disabilities)
713-957-1600

Mayor's Citizen's Assistance Office
832-393-0955

Star of Hope
2575 Reed Rd. (*New Women's & Family Shelter*)
713-748-0700

Salvation Army
713-752-0677

Houston Service Helpline
3-1-1

Houston Recovery Center (Sobering Ctr)
713-236-7800

Isensee Foundation For Safe Police Response
832-541-0877

Autism Society of America
800-328-8476

Online Resources

Alzheimer's Association-Houston
www.alz.org/texas

Autism Speaks
www.autismspeaks.org

The Autism Society of America
www.autism-society.org

The Harris Center (MHMRA)
www.theharriscenter.org

HPD Mental Health Division
www.houstoncit.org

Isensee Foundation For Safe Police Response
www.safepoliceresponse.org

Mental Health America-Houston
www.mhahouston.org

National Alliance on Mental Illness
www.nami.org

Success through collaboration

