



06-13 Mobile Crisis Intervention Team (MCIT)

Status: New

Issued: 2021.12.07

Rationale

The Toronto Police Service (Service) is committed to preserving the lives and well-being of people who may be experiencing mental health and/or substance use issues, while working towards the goal of zero deaths and ensuring the well-being, safety, rights, and dignity of individuals and communities. While it is not the role of police officers to diagnose mental health or substance use issues, it is their role to respond appropriately to the behaviours and circumstances they observe. In every encounter, the Service is committed to taking all reasonable steps to assess, de-escalate and safely resolve the situation.

The attendance of a Mobile Crisis Intervention Team (MCIT) at incidents involving a person experiencing a mental, emotional and/or substance use crisis, provides a skilled and compassionate response that may assist in diffusing and concluding the incident safely. The MCIT can assist frontline officers by providing a prompt assessment, supportive counselling, as well as connect the person to the appropriate follow-up services.

Supervision

- Supervisory Officer attendance mandatory for calls for service when there is information that a person in crisis is armed or may be armed with a weapon
- Supervisory Officer notification mandatory if detained at a psychiatric facility for more than 1 hour

Procedure

The MCIT program is a collaborative partnership between participating hospitals and the Service bound through a Memorandum of Understanding. The MCIT program partners a mental health nurse with a police officer with additional training in working with persons in crisis that will respond, or assist in the response to calls for service involving individuals experiencing a mental, emotional or substance use crisis.

The MCIT response will assist with:

- assessing the situation
- attempting to stabilize and diffuse the crisis
- providing supportive counselling as needed
- connecting the individual to appropriate community services

The MCIT program currently operates 7 days a week (0900hrs – 2300hrs) and is partnered with area hospitals having catchment areas within in the following divisions:

- D11/14/22 – Unity Health Toronto - St Joseph's Health Centre
- D12/13/23/31 – Humber River Hospital
- D32/33 – North York General Hospital
- D41/42/43 – Scarborough Health Network
- D51/52 – Unity Health Toronto - St. Michael's Hospital
- D53/54/55 – Michael Garron Hospital

➔ *Note: The MCIT shall remain within their respective divisions/catchment areas when responding to calls for service as specified in the hospitals' legal agreements with the Toronto Police Services Board.*

MCITs may act as a first or co-responder in certain circumstances, including but not limited to the following calls for service involving:

- a person experiencing a mental, emotional, or substance use crisis
- a person attempting/threatening suicide
- a barricaded person, or other circumstances where it is known or thought to be caused by a mental, emotional or substance use crisis, in order to assess the person.

➔ *Note: The MCIT officer shall conduct a threat assessment prior to attending the call; where a person in crisis is found to pose a risk or threat to the attending MCIT nurse, the MCIT officer shall direct the nurse not to actively engage in the incident until it is determined to be safe by the attending MCIT officer.*

A threat assessment of the incident (based on available information) and overall safety of the MCIT shall determine the involvement and level of the MCIT response. The Specialized Emergency Response – Emergency Task Force (ETF) shall be notified when there is information that a person in crisis is armed or may be armed with a weapon; background checks indicate that the person in crisis has a history of violence or use of weapons; the incident involves a barricaded person; and/or the incident involves a person who by their position has placed themselves or others in immediate jeopardy (i.e. person located at height on a balcony, bridge, etc.)

MCITs may also provide assistance and support:

- to family members or support persons of an individual in crisis
- to assess a person who has been exposed to critical incident stress (e.g. witness death by suicide, witness)
- to attending police officers where MCIT expertise may be utilized
- to consult on missing persons with vulnerable attributes prior to being located
- to attend safety or wellness checks directly related to a person experiencing a mental, emotional and/or substance use crisis from non-dispatch sources, including but not limited to the Divisional Mental Health Liaison Officer (DMHLO), hospitals, and MCIT Case managers
- as directed by a supervisory officer

MCITs shall **not** generally be utilized for the following:

- incidents not involving a person in crisis
- clinical assessments where criminal charges will be laid
- to transport a person apprehended by the PRU, or to relieve a PRU officer at the hospital who has apprehended an individual

- *Note: The MCIT may call ahead to a hospital to assist for a smooth transition of care.*

MCIT Management

Although MCITs remain assigned to the Community Response Unit (CRU), they function as first or co-responders to calls for service with the Primary Response Unit (PRU). As a result, the on-duty PRU management team will be responsible to manage MCIT deployment to mental health related calls for service and be available to provide support and guidance when required. The nature of the PRU supervisor's role profile places them in an ideal position to further ensure the MCIT mandate is carried out. PRU supervisors will be responsible for direct supervision of MCITs while they are on patrol, monitoring calls for service and attending where required.

Police Officer

1. As this Procedure is an extension of Procedure 06-04, members shall first comply with the direction contained therein and then follow the additional incident-specific direction contained in this Procedure.
2. When responding to a complaint of a person in crisis shall
 - request notification and attendance of the MCIT, if available
 - comply with Procedure 06-04
3. When attending an incident where the MCIT is on scene, shall provide support and assistance as required.

MCIT Officer

4. When responding to an incident involving a person in crisis, shall
 - prior to attending, conduct a threat assessment of the incident (based on available information) and overall safety of the MCIT to determine the involvement and level of the response
 - request to obtain sufficient backup officers
 - request the attendance of a supervisory officer when there is information that a person in crisis is armed or may be armed with a weapon
 - request notification of the Specialized Emergency Response – Emergency Task Force (ETF), in accordance with Procedure 10–05, when:
 - there is information that a person in crisis is armed or may be armed with a weapon
 - background checks indicate that the person in crisis has a history of violence or use of weapons
 - the incident involves a barricaded person
 - the incident involves a person who by their position has placed themselves or others in immediate jeopardy (i.e. person located at height on a balcony, bridge, etc.)

→ *Note: It will be at the discretion of the Supervisory Officer – ETF as to whether they will attend.*

 - comply with Procedure 06-04

Supervisory Officer

5. When supervising a division with an assigned MCIT on duty shall
 - coordinate with supervisory officers from other divisions within the MCIT catchment area to manage resources and maximize MCIT availability for mental health related calls for service
 - ensure the MCIT attend mental health related calls for service promptly, when available
 - ensure the MCIT are utilized in all circumstances where their expertise can assist in facilitating a peaceful resolution
6. Upon becoming aware that the MCIT is attending a call for service shall
 - monitor the situation and attend when the risk for potential violence is or appears to be heightened
 - ensure sufficient backup officers are attending
 - ensure the ETF has been notified in accordance with Item 4 criteria, if applicable
7. When attending a call for service with a MCIT response shall
 - ensure compliance with Procedure 06-04
 - ensure compliance with Procedure 08-04, if the call for service involves a traumatic critical incident

Officer in Charge

8. When managing a division with an assigned MCIT on duty shall monitor and coordinate with other divisions within the MCIT catchment area to ensure resources are managed to maximize MCIT availability for mental health related calls.
9. Upon becoming aware that a call for service is being attended to by the MCIT shall
 - monitor situation and ensure supervisory officer attendance, if required
 - ensure compliance with Procedure 06-04

Staff Sergeant – Community Response Unit

10. When managing the home units of an assigned MCIT, shall oversee the coordination and supervision of MCIT related activities and initiatives including attendance at meetings when required.
11. Shall coordinate with all PRU supervisors when completing the officer's annual evaluation.

Unit Commander

12. When in charge of a division that supports a MCIT shall ensure adherence with the terms set out in the Memorandum of Understanding with partnered hospital.

Divisional Mental Health Liaison Officer (DMHLO)

13. In addition to their duties set out in Procedure 06-04, the DMHLO shall coordinate, collaborate and work with MCIT for an overall effective response to persons with mental health issues.

MCIT Program Co-ordinator – Community Partnerships & Engagement Unit

14. The role of the MCIT Program Co-ordinator shall include but is not limited to the following duties:

- support planning and coordination of the MCIT program and its activities
- monitor the implementation of policies and practices
- help build positive relations within the teams and program partners
- coordinate annual mandatory training
- coordinate with MCIT nurse managers from partner hospitals
- coordinate with MCIT hospitals project manager

Supplementary Information

Governing Authorities

Provincial: Mental Health Act; Police Services Act, O. Reg 3/99,

Associated Governance

TPSB Policies: TPSB LE-013 Police Response to Persons In Crisis

TPS Procedures:

- 06-04 Persons In Crisis
- 08-04_Members Involved in a Critical Incident
- 10-05 Incidents Requiring the Emergency Task Force

Other: Mental Health Statement of Commitment; Toronto Police Service Skills Development and Learning Plan; Toronto Police Service Mental Health and Addictions Strategy, _Iacobucci Report - Police Encounters With People In Crisis, _TPS Mental Health Referrals Guide.

Definitions

For the purposes of this Procedure, the following definitions will apply:

Divisional Mental Health Liaison Officer means the police officer responsible for coordinating all *Mental Health Act* needs and/or concerns within the division; usually the Community Relations Officer or the FOCUS liaison officer.

Person in Crisis means a member of the public whose behavior brings them into contact with emergency services, either because of an apparent need for urgent care within the mental health system, or because they are otherwise experiencing a mental, emotional or substance use crisis involving behavior that is sufficiently erratic, threatening or dangerous that emergency services are called in order to protect the person or those around them. This includes persons who may require assessment under the *Mental Health Act*.

Traumatic Critical Incident means any incident during which a member experiences, witnesses, or is confronted with serious injury, death, or mass casualties; any incident in which the member's life has been imperilled or threatened; or any situation which is recognized at the time to have the potential to

significantly interfere immediately or at a later time with a member's ability to function professionally or personally.

Vulnerable Person means a person who by nature of an emotional, medical, psychological or other physical condition may exhibit patterns of behaviour that pose an increased risk of danger to themselves or others, who may require assistance from emergency services.

We are dedicated to delivering police services, in partnership with our communities, to keep Toronto the best and safest place to be.

Learn more about our **Service Core Values and Competencies** [here](#)

