

## **5-06/110.60 - Mental Health Alert Team (MHAT)**

The Department, in conjunction with the Department of Health Services, has instituted a Mental Health Alert program which provides skilled psychiatric evaluation "roll-out" teams to assist in handling field situations involving suspects who evidence symptoms of being emotionally disturbed.

These teams may be called out in the same manner as Special Weapons Teams through the Special Enforcement Bureau desk. Any Deputy who encounters a situation wherein it appears beneficial to call out a Mental Health Alert Team may initiate a request.

Special Enforcement Bureau desk personnel receiving a request will contact the Crisis Negotiations Coordinator who has the responsibility for determining the need for a Mental Health Alert Team. Stations/Units shall not attempt to call the Mental Health dispatcher directly.

Examples of situations which merit calling out a Mental Health Alert Team include:

- Where a suspected emotionally disturbed person presents a danger to himself or others, or exhibits highly unusual or bizarre behavior which could become violent, but circumstances are such that Deputies are unable to exert control over him without resorting to extreme force;
- Barricaded suspects who are believed to be emotionally disturbed; and
- Certain threatened suicides ("jumper" syndrome) or situations wherein no crime has occurred and Deputies feel that it is unwise to leave the scene without providing some assistance.

Upon arrival at the scene, Team personnel will report to the Incident Commander for consultation. They will evaluate the situation and attempt to provide the Incident Commander with insight into the individual's actions and motivations, including possible ways of calming the suspect/subject and defusing the situation.

The role of MHAT personnel is strictly advisory. They are trained to assess and deal with mental disorders, but it is not within the scope of their duties to make decisions regarding hostages, deployment, or operational tactics. Such decisions remain the responsibility of the Incident Commander.

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