

## Responding to Mental Illness and Body Worn Cameras

### INCIDENT DETAILS

On June 26 at 0130 hours the central dispatch center was contacted by an alarm-monitoring company regarding a local convenience store, where the burglar alarm was activated and contact could not be established. Per protocol, two uniformed officers were dispatched to the scene.

Officer A was first to arrive on scene at 0133 hours; he observed the front door to be broken with the alarm sounding, at which point he relayed the information back to dispatch and requested a supervisor to be dispatched. Officer A activated his body worn camera (BWC), announced himself, and gave the verbal command that anyone inside the building "To show themselves." After no response, Officer A entered the store with his firearm in the low ready position. Upon searching the store, he noticed the subject crawling around on his hands and knees muttering gibberish. The suspect did not respond to the officer's commands, nor did he appear to be aggressive.

At 0136 hours, Officer B arrived on scene, activated his BWC and entered the store. Initial images from Officer B's BWC showed Officer A on top of the subject who was lying on his stomach with his arms outstretched. Officer A stood up and grabbed the subject's legs.

At 0139 hours, the supervisor, a sergeant, arrived on scene and observed the following:

- Officers A and B exiting the store with the subject in handcuffs.
- The subject was still muttering gibberish.
- The subject had blood flowing from the side of his head and nose.
- The subject's shirt was tattered and large red marks on his ribs and back were visible.

The sergeant called for EMS, then began questioning Officers A and B as to what had transpired in the store. EMS arrived at 0147 hours, administered medical care, and transported the subject to the local hospital where he was treated. The hospital identified the subject and contacted his family. The family advised hospital staff and the officers on scene that the subject was currently under the care of a physician for paranoid schizophrenia and recently began taking a new medication regiment. The family stated that the subject had no previous history of violent behavior and often will seek out places to hide whenever he experienced a paranoid episode. The family cooperated and authorized the release of the medical reports which corroborated with the family's statement.

### POLICE DEPARTMENT INVESTIGATION:

As part of the investigation, the sergeant requested to review both Officers A and B's BWC footage. In doing so, the sergeant discovered that neither of the officers' BWC's had captured the entire incident. Officer A's BWC failed to capture any further recordings beyond the initial contact with the subject. Additionally, Officer B's BWC footage had stopped after capturing Officer A standing up and grabbing the subject's legs.

When the sergeant questioned the officers about the failed BWC footage, the officers replied that their buttons may have been pushed during the struggle with the subject.

Officers A and B documented in their respective reports that the subject became violent and was non-compliant with their verbal commands. The sergeant was skeptical of how the events unfolded and immediately referred the case to their internal Department of Professional Standards.

The department's internal investigators obtained and reviewed surveillance video from inside the convenience store containing footage one hour prior and one hour post incident. The surveillance video showed the following:

- Officer A arriving on scene and entering the facility with his firearm in the low ready position.
- Officer A encountering the subject who is on his stomach and securing his firearm.
- Officer A issuing verbal commands and the subject placing his hands to his sides.
- Officer A approaching the subject, then kneeling and kicking the subject.
- The subject trying to get to his knees while Officer A grabs his ankles.
- Officer B arriving, encountering Officer A and the subject while touching his chest in the area of the BWC, then kicking the subject on the side of the head.

- Continued next page



- The subject collapsing to the ground from his knees and stops moving.
- Officers A and B standing over the subject, placing handcuffs on the subject.
- Both Officers A and B assisting the subject to his feet and exiting the store.

Additionally, during interviews with Officers A and B, Officer A stated that the subject kept repeating that people were following him. Officer A further stated that the subject was not listening to his commands and that he thought the subject was acting “crazy.” When Officer A was questioned why his BWC did not work, Officer A stated that he thought he was dealing with an emotionally disturbed person and did not want to capture the incident on camera. Officer B’s statement was very similar to Officer A’s.

The department’s internal investigators found that there was significant discrepancy between the officers’ statements and the events captured on the convenience store’s surveillance video.

- It was determined by that Officer A and B did not adhere to the department’s BWC policy when he turned off their BWC’s during the incident. Department policy clearly stated that once the BWC was activated it should remain activated unless meeting one of the several situations outlined in Section E of the State of Connecticut Model Policy on BWC’s.
- Although Officers A and B had signed off on the policy, there was records of departmental training during the past two recertification periods.
- Both officers stated they were not formally trained on the policy and were unaware of the policy and procedures.
- The subject sustained a concussion, broken nose, laceration to the left temporal area requiring seven stitches, bruised ribs and back. He was hospitalized for three days and released.
- The subject was charged with breaking and entering, resisting arrest, and interfering with a police officer. With the exception of breaking and entering, all charges were ultimately dropped.
- The subject was granted Accelerated Rehabilitation (AR) and was ordered to make restitution for the broken front door.

## OUTCOME

The subject’s family filed suit against the department alleging excessive force and failure to train. A demand was issued for \$250,000. CIRMA ultimately settled the claim for \$85,000, which included attorney’s fees and medical payments, based on the following:

- Inconsistencies with officers’ statements in comparison to the surveillance video.
- Lack of departmental training records regarding body-worn camera policy and procedures.
- Insufficient training regarding dealing with emotionally disturbed individuals.

## CIRMA RECOMMENDATIONS:

- Review the department’s policy regarding Body Worn Cameras and determine if it meets or exceeds the current State of Connecticut model policy, then provide training.
- Provide officer training on dealing with situations involving the use of force.
- Provide officer training and education on identifying signs of mental impairments and procedures for handling subjects with these conditions.

**Questions? Ask your Supervisor or contact your CIRMA Risk Management Consultant at (203) 946-3700.**