CARTERET POLICE DEPARTMENT
STANDARD OPERATING PROCEDURES

SUBJECT: EMOTIONALLY DISTURBED PERSONS	
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PURPOSE The purpose of this standard operating procedure is to provide guidance for department personnel in recognizing and dealing with persons with mental illness or emotional disturbances.

POLICY It is the policy of the Carteret Police Department to treat emotionally disturbed persons and persons with mental illness with dignity and through de-escalation tactics to divert these persons from the criminal justice system where appropriate.

It is further the policy of the Carteret Police Department that the procedures necessary to involuntarily commit emotionally disturbed persons and persons with mental illness conform to N.J.S.A. 30: 4-27-1 et seq., in order to provide for the public good while maintaining the rights and dignity of the persons being committed.

Although behavioral health professionals treat various behavioral disorders differently, for purposes of this SOP behavior disorder includes mental illness, anxiety, personality, mood, developmental, conduct and emotional disorders, where this department's response is somewhat consistent.

PROCEDURES

I. DEFINITIONS

A. Alzheimer's disease is a progressive, degenerative disease of the brain in which brain cells die and are not replaced. It results in impaired memory, thinking and behavior. It is the most common form of dementia illness.

B. Autism/Autism Spectrum Disorder (ASD) is a biologically based disorder that affects the development and functioning of a person's verbal and non-verbal communication skills, social interactions and patterns of behavior. Autism affects people of all races, ethnicities and socio-economic groups and is found throughout the world. Autism is four times more prevalent in boys than girls. Some signs and symptoms associated with ASD include, but are not limited to:

1. No babbling, pointing or meaningful gestures by 1 year of age;
2. No single words by age 16 months;
3. Loss of language or other skills at any age;
4. Little or no eye contact;
5. Lack of pretend, imitative and functional play appropriate to developmental age;
6. Stereotypical and repetitive behavior;
7. Failure to develop peer relationships appropriate to developmental age; and
8. Unusual or inappropriate fears.

C. Dangerous to self means that by reason of mental illness the person has threatened to harm him/herself, or has behaved in such a manner as to indicate that the person is unable to satisfy their need for nourishment, essential medical care or shelter, so that it is probable that substantial bodily injury, serious physical debilitation or death will result within the reasonable foreseeable future; however, no person shall be deemed to be unable to satisfy their need for nourishment, essential medical care or shelter if they are able to satisfy such needs with the supervision and assistance of others who are willing and available. (N.J.S.A. 30:4-27.2h)

D. Dangerous to others or property means that by reason of mental illness there is a substantial likelihood that the person will inflict serious bodily harm upon another person or cause serious property damage within the reasonably foreseeable future. This determination shall take into account a person's history, recent behavior and any recent act or threat. (N.J.S.A. 30:4-27i)

E. Dementia is a generic term used for all memory impairing diseases.

F. Emotionally disturbed person is generic term used to describe a person with an emotional disturbance, behavioral disorder, or mental illness. There is a wide range of specific conditions that differ from one another in their characteristics and treatment including, but not limited to:

1. Mental illness;
2. Anxiety disorders;
3. Autism/Autism Spectrum Disorder;
4. Bipolar disorder (sometimes called manic depression);
5. Conduct disorders (including disorder due to substance abuse, including alcohol);
6. Dementia;
7. Diminished capacity;
8. Excited delirium;
9. Obsessive-compulsive disorder (OCD); and
10. Psychotic disorders.

G. Excited delirium is a medical disorder generally characterized by observable behaviors, including extreme mental and physiological excitement, intense agitation, hyperthermia often resulting in nudity, hostility, exceptional strength, endurance without apparent fatigue, and unusual calmness after restraint accompanied by a risk of sudden death.

H. Incapacitated means, incapable, lack of normal intellectual power. Incapacitated also means the condition of a person:

1. As a result of the use of alcohol or drugs is unconscious or has his/her judgment so impaired that he/she is incapable of realizing and making a rational decision with respect to his/her need for treatment; or
2. In need of substantial medical attention; or
3. Likely to suffer substantial physical harm.

I. In need of involuntary commitment means that an adult who is mentally ill, whose mental illness causes the person to be dangerous to self or dangerous to others or property and who is unwilling to be admitted to a facility voluntarily for care, and who needs care at a short term care facility or special psychiatric hospital because other services are not appropriate or available to meet the person's mental health care needs. (N.J.S.A. 30:4-27.2m)

J. Intoxicated person means a person whose mental or physical functioning is substantially impaired as a result of the use of alcoholic beverages or drugs.

K. Mental illness means a current, substantial disturbance of thought, mood, perception or orientation which significantly impairs judgment, capacity to control behavior or capacity to recognize reality, but does not include simple alcohol intoxication, transitory reaction to drug ingestion, organic brain syndrome, or developmental disability unless it results in the severity of impairment described herein. The term mental illness is not limited to psychosis or active psychosis but, shall include all conditions that result in the severity of impairment described within (N.J.S.A. 30:4-27.2r). Some subcategories of mental illness include, but are not limited to:

1. Schizophrenia: disordered thinking. Positive symptoms: confusion about what is real or imaginary; preoccupations with religion, belief in clairvoyance; paranoia; unrealistic sense of superiority; hallucinations; heightened or dulled perceptions; odd thinking and speaking processes; racing thoughts or slowed-down thoughts. Negative symptoms: passivity; interacting in a mechanical way; flat emotions; decrease in facial expressions; monotone speech.

2. Bipolar disorder: dramatic mood swings. Manic phase: decreased need for sleep; increased risk taking; unrealistic beliefs and abilities; feelings or great pleasure or irritability; aggressive response to frustration; racing, disconnected thoughts. The depressed phase is similar to that of major depression.

3. Major depression: persistent sad, anxious or empty mood; sleep disturbances; hopelessness; thoughts of death; suicide attempts; hypochondria.

L. Positional asphyxia happens when a person can't get enough air to breathe due to the positioning of his/her body. This happens when a person is placed in a position where his/her mouth and nose is blocked or where his/her chest/torso may be unable to fully expand resulting in suffocation.

M. Screening means the process by which it is ascertained that the patient being considered for commitment meets the standards for both mental illness and dangerous to self, others, or property and that all stabilization options have been explored or exhausted.

N. Screening outreach visit means an evaluation provided by a mental health screener, wherever the person may be, when clinically relevant information indicates the person may need involuntary commitment and is unable or unwilling to come to a screening service and the police are unable or unwilling to transport without an evaluation. (N.J.S.A. 30:4-27.2aa)

O. Short-term custody for purposes of this SOP, means except where delinquent conduct is alleged, a law enforcement officer may take any juvenile into short-term custody consistent with the provisions of this SOP, not to exceed six hours, when there are reasonable grounds to believe that the health and safety of the juvenile is seriously in danger and that immediate custody is necessary for the juvenile's protection (N.J.S.A. 2A: 4A-32).

II. GENERAL PROVISIONS

A. Absent criminal behavior or danger to self or others, persons with mental illness permit no special police responses. Mentally ill and emotionally disturbed persons have a right to be left alone as long as they do not violate the law.

B. No person suspected of having mental illness or emotional disturbance is to be taken involuntarily into police custody unless such person has committed an offense that could result in their arrest or has demonstrated by acts observed by a police officer or other reliable persons, that he/she is dangerous to the lives or safety of others or himself/herself.

C. No one is to be treated as being mentally ill or emotionally disturbed unless a compelling necessity exists. Police officers shall exercise extreme care in determining that a person is mentally ill and in conforming to the procedures in this SOP.

D. The Police Training Commission currently requires entry-level training in this topic for new police officers. Entry-level officers shall receive training in the police academy or with this department prior to assuming operational duties.

E. Refresher training in this SOP shall be conducted at least once every three years.

III. RECOGNIZING SIGNS OF MENTAL ILLNESS

A. Officers could encounter a person with an emotional disturbance or mental illness at any time. Common situations in which such individuals may be encountered include but are not limited to, the following:

1. Wandering: individuals with emotional disturbances or mental illness may be found wandering aimlessly or engaged in repetitive or bizarre behaviors in a public place.

2. Seizures: emotionally disturbed or mentally ill persons are more subject to seizures and may be found in medical emergency situations.

3. Disturbances: disturbances may develop when caregivers are unable to maintain control over emotionally disturbed or mentally ill persons engaging in self-destructive behaviors.

4. Strange and bizarre behaviors: repetitive and seemingly nonsensical motions and actions in public places, inappropriate laughing or crying, and personal endangerment.

5. Offensive or suspicious persons: Socially inappropriate or unacceptable acts such as ignorance of personal space, annoyance of others, inappropriate touching of oneself or others, are sometimes associated with emotionally disturbed or mentally ill persons who are not conscious of acceptable social behaviors.

B. Symptoms vary and each person with mental illness is different, but all people with mental illness have some of the thoughts, feelings, or behavioral characteristics listed below. While a single symptom or isolated event is not necessarily a sign of mental illness or an emotional disturbance, multiple or severe symptoms may

indicate a need for a medical evaluation. These symptoms should not be construed as an all-inclusive list.

1. Changes in thinking or perceiving, such as:

    a. Hallucinations;

    b. Delusions;

    c. Excessive fears or suspiciousness;

    d. Inability to concentrate;

    e. Expressing a combination of unrelated or abstract topics;

    f. Expressing thoughts of greatness (e.g. believes they are God);

    g. Expressing ideas of being harassed or threatened (e.g. CIA is monitoring their thoughts through TV set);

    h. Preoccupation with death, germs, guilt, etc.

2. Changes in mood:

    a. Sadness coming out of nowhere; unrelated to events or circumstances;

    b. Extreme excitement or euphoria;

    c. Pessimism, perceiving the world as gray and lifeless;

    d. Expressions of hopelessness;

    e. Loss of interest in once pleasurable activities;

    f. Thinking or talking about suicide.

3. Changes in behavior:

    a. Sitting and doing nothing;

    b. Friendlessness; abnormal self-involvement;

    c. Dropping out of activities; decline in academic or athletic performance;

    d. Hostility, from one formerly pleasant and friendly;

    e. Indifference, even in highly important situations;

    f. Seeing or hearing things that cannot be confirmed;

    g. Confusion about or unawareness of surroundings;

h. Lack of emotional response;

i. Causing injury to self, others or damage to property;

j. Inappropriate emotional reactions.

1) Overreacting to situations in an overly angry or frightening way.

2) Reacting with opposite of expected emotion (e.g. laughing at a vehicle collision).

k. Inability to express joy;

l. Inability to concentrate or cope with minor problems;

m. Irrational statements;

n. Peculiar use of words or language structure;

o. Excessive fears or suspiciousness;

p. Unexplained involvement in vehicle collisions;

q. Drug or alcohol abuse;

r. Forgetfulness and loss of valuable possessions;

s. Attempts to escape through geographic change; frequent moves or hitchhiking trips;

t. Bizarre behavior (skipping, staring, strange posturing);

u. Unusual sensitivity to noises, light, clothing.

4. Physical changes:

a. Hyperactivity or inactivity or alternations of these;

b. Deterioration in hygiene or personal care;

c. Unexplained weight gain or loss;

d. Sleeping too much or being unable to sleep.

5. Physical appearance:

a. Wearing clothing inappropriate to environment (e.g. shorts in winter, heavy clothing in summer);

b. Wearing bizarre clothing or cosmetics (taking into account current trends).

6. Body movements:

a. Strange postures or mannerisms;

b. Lethargic, sluggish movements;

c. Repetitious, ritualistic movements.

7. Unusual speech patterns:

a. Nonsensical speech or chatter;

b. Word repetition (frequently stating the same or rhyming words or phrases);

c. Pressured speech (expressing an urgency in manner of speaking);

d. Extremely slow speech.

8. Verbal hostility or excitement:

a. Talking excitedly or loudly.

b. Argumentative, belligerent or unreasonably hostile.

c. Threatening harm to self, others or property.

9. Environmental Indicators:

a. Decorations (e.g. strange trimmings, inappropriate use of household items such as aluminum foil covering windows);

b. Waste matter and trash;

c. Accumulation of trash such as newspapers, paper bags, egg cartons, etc. (Hoarding Syndrome);

d. Presence of feces and/or urine on the floor or walls.

C. Often the symptoms of mental illness are cyclic, varying in severity from time to time. The duration of an episode also varies; some people are affected for a few weeks or months while for others the illness may last many years or for a lifetime. There is no reliable way to predict what the course of the illness may be. Symptoms may change from year to year. Also, one person's symptoms may be very different from those of another although the diagnosis may be the same.

D. In many cases of apparent mental illness, other diseases or maladies are found to be the cause including, but not limited to Alzheimer's, epilepsy, Parkinson's, Diabetes, etc. Be alert for and note behaviors to relay to mental health professionals for their diagnosis. A thorough examination by a health professional should be the first step when mental illness is suspected.

E. People with Alzheimer's disease share a number of behavioral patterns and symptoms, which include:

1. Physical clues:

a. Blank facial expression;

b. Unsteady walk/loss of balance;

c. Age (common age of onset 65+);

d. Repeats questions;

e. Inappropriate clothing for season;

f. Safe Return Program identification;

g. Inability to grasp and remember the current situation;

h. Difficulty in judging the passage of time;

i. Agitation, withdrawal or anger;

j. Inability to sort out the obvious;

k. Confusion;

l. Communication problems;

m. Delusions and hallucinations;

n. Inability to follow directions.

IV. ENCOUNTERS WITH EMOTIONALLY DISTURBED PERSONS

A. When encountering an emotionally distressed/disturbed person or a person with suspected mental illness, officers shall use de-escalation tactics to the extent possible. Such tactics include but, are not limited to:

1. Approach the person with extreme caution; be alert and maintain a calm and casual demeanor.

2. If possible, identify a friend or relative that can provide assistance in dealing with the person or who may be able to explain the behavior.

3. Speak to the person by name, if known; your tone of voice should be soothing, but firm and businesslike.

4. Avoid exciting the person; do not say or do anything that may threaten or intimidate the person.

5. Ask questions slowly, one at a time, and be patient in waiting for a response. Be prepared that the person may not understand questions and/or instructions or be able to answer in an understandable manner. Important questions to ask:

a. Do you take any medications?

b. Have you taken your medication?

c. Do you want to hurt yourself?

d. Do you want to commit suicide?

e. Do you want to hurt someone?

6. Avoid arguing with or scolding the person; do not allow anyone else to do so.

7. Avoid deceiving the person (although sometimes it may be necessary). Try to redirect the conversation toward a positive outcome.

8. Ignore verbal abuse directed at you or others.

9. Make use of friends or relatives who know how to talk to, and deal with, the person unless there is friction between them.

10. Whenever possible, try to stall until a back-up officer arrives at the scene.

11. Show kindness and understanding; maintain professionalism.

12. Be aware that the person may respond the way he/she thinks that you want.

13. If the person exhibits dangerous or violent behavior or has a history of dangerous or violent behavior, consider the use of force or the use of tactical resources when warranted.

B. Not all emotionally disturbed persons are dangerous, while some may represent danger only under certain circumstances or conditions. An emotionally disturbed person may not understand or immediately respond to police commands. Officers may use several indicators to determine whether an apparently emotionally disturbed person represents an immediate or potential danger to themselves, others, or property. These include the following:

1. The availability of any weapons;

2. Statements by the person that suggest to the officer that the person is prepared to commit a violent or dangerous act. Such comments may range from subtle innuendos to direct threat that, when taken in conjunction with other information present a more complete picture of the potential for violence.

3. A personal history that reflects prior violence under similar or related circumstances. The emotionally disturbed person's history may be known to the officer, family, friends, or neighbors who may be able to provide helpful information.

4. Failure of the emotionally disturbed individual to act prior to arrival of the officer does not guarantee that there is no danger, but it does in itself tend to diminish the potential for danger.

5. The amount of control the person demonstrates is significant, particularly the level of physical control over emotions of rage, anger, frights, or agitation. Signs of lack of control include extreme agitation, inability to sit still or communicate effectively, wide eyes, and rambling thoughts and speech. Clutching one's self or other objects to maintain control, begging to be left alone, or offering frantic assurances that he/she is okay may also suggest the individual is close to losing control.

6. The volatility of the environment is a particularly relevant factor that officers must evaluate. Agitators that may affect the person or a particular combustible environment that may incite violence should be taken into account.

C. When encountering a person suspected of having Alzheimer's disease or dementia:

1. Approach that person from the front and establish and maintain eye contact.

2. Introduce yourself as a police officer and explain that you have come to help. You may need to reintroduce yourself several times.

3. Remove the person from crowds and other noisy environments. Turn off flashing lights and lower the volume on the radio.

4. Establish one-on-one conversation. Talk in a low-pitched, reassuring tone, looking into the victim's eyes. Speak slowly and clearly, using short, simple sentences with familiar words. Repeat yourself. Accompany your words with gestures when this can aid in communication but, avoid sudden movements.

5. Explain your actions before proceeding. If the person is agitated or panicked, gently pat them or hold their hand, but avoid physical contact that could seem restraining.

6. Give simple, step-by-step instructions and, whenever possible, a single instruction. Avoid multiple, complex, or wordy instructions. Also, substitute nonverbal communication by sitting down if you want that person to sit down.

7. Ask one question at a time. 'Yes' and 'No' questions are better than questions that require the person to think or recall a sequence of events.

8. Do not leave the person alone; he/she could wander away.

9. Find emergency shelter for the person with the help of a local Alzheimer's Association chapter, if no other caregivers can be found.

D. A person who appears intoxicated but, not incapacitated, in a public place and to be in need of help:

1. If a person who has been drinking is neither intoxicated nor incapacitated, such person should be left alone unless criminal activity is observed or suspected or the person requests assistance.

2. With the person's consent, he/she may be transported or sent:

   a. Home or normal place of abode if within Carteret, and adjoining municipalities with the permission of the shift commander;

   b. To a licensed intoxication treatment facility using an ambulance;

   c. To a medical facility using an ambulance.

3. Without the intoxicated person's consent, no law enforcement action should be taken unless it appears the person is incapacitated due to alcohol or drugs.

E. A person who is so intoxicated that he/she appears to be incapacitated by alcohol and/or drugs and obviously cannot consent or decide for him/herself if he/she needs treatment should be taken into protective custody and transported to an emergency medical facility.

1. Any person who is unconscious or injured should be taken directly and immediately to an emergency medical facility.

2. An intoxicated person arrested for a violation of a disorderly persons offense may be taken directly to an intoxication treatment center or emergency medical facility to be treated before processing on the criminal offense.

F. If it is necessary to restrain or take the person into custody, do so carefully. Use physical restraints sparingly as it may cause more aggressive behavior. Keep sidearms and other weapons out of the person's reach. If unable to secure transportation by ambulance, officers shall effectuate transportation as safely as possible.

G. Avoid chokeholds and be continually aware of the potential for positional asphyxia. Chokeholds and vascular restraints are prohibited unless deadly force is justified.

H. In addition to the requirements set forth in this department's SOP on *Interviews, Interrogations, and Access to Counsel* and depending on the circumstances, personnel need to establish that any confession made by someone with mental illness is knowingly and intelligently given, see *State v. Flower* 224 NJ Super (App. Div. 1988). Consult with the Middlesex County zone prosecutor for guidance in these situations. When interviewing an individual who is mentally impaired, officers should:

1. Not interpret lack of eye contact or strange actions as indications of deceit;

2. Use simple and straightforward language; he/she may have limited vocabulary or speech impairment.

3. Recognize that the individual might be easily manipulated and highly suggestible.

I. Miranda warnings may need to be explained, rather than just read, to the individual in language that is understandable to him or her. When reading the Miranda warnings to someone with mental impairment, or to others who may have difficulty

understanding, use simple words and modify the warnings to help the individual understand. It's important to determine whether the individual genuinely understands the principles, protections and concepts within the warnings.

V. EXCITED DELIRIUM

A. Calls associated with excited delirium often include descriptions by complainants of wild, uncontrollable physical action, and hostility that comes on rapidly. While officers cannot diagnose excited delirium, specific signs and characteristic symptoms may be evidence including but, not limited to:

1. Constant or near constant physical activity;
2. Irresponsiveness to police presence;
3. Nakedness/inadequate clothing that may indicate self-cooling attempts;
4. Elevated body temperature/hot to touch;
5. Rapid breathing;
6. Profuse sweating;
7. Extreme aggression or violence;
8. Making unintelligible, animal-like noises;
9. Insensitivity to or extreme tolerance of pain;
10. Excessive strength (out of proportion to the person's physique);
11. Lack of fatigue despite heavy exertion;
12. Screaming and incoherent talk;
13. Paranoid or panicked demeanor;
14. Attraction to bright lights/loud sounds/ glass or shiny objects.

B. Physical control must be applied quickly to minimize the intensity and duration of resistance and struggle, which often are direct contributors to sudden death.

C. When responding to a call involving possible excited delirium, officers should:

1. Eliminate unnecessary emergency lights and sirens;
2. Ensure that an adequate number of backup officers have been dispatched to affect rapid control of the subject.
3. Ensure that EMS is on the scene or en route (note: where possible, EMS should be on site when subject control is initiated).

D. When the subject is responsive to verbal commands, one officer should approach the subject and employ verbal techniques to help reduce his/her agitation before resorting to the use of force. The officer should:

1. Not rush toward, become confrontational, verbally challenge, or attempt to intimidate the subject, as he/she may not comprehend or respond positively to these actions and may become even more agitated or combative; and

2. Ask the subject to sit down, which may have a calming effect; and

3. Be prepared to repeat instructions or questions.

E. When there is no apparent threat of immediate injury to the subject or others, the officer should not attempt to take physical control of the subject. This would likely precipitate a struggle and exacerbate the subject's physical and emotional distress. The officer should wait for backup and EMS assistance before attempting to control the subject.

F. Reasonable steps should be taken to avoid injury, such as moving the subject from asphalt to a grassy area to reduce abrasions and contusions, if feasible.

G. If the subject poses a threat of death or serious bodily injury to the officer, others, or to him or herself, apart from the dangers inherent in excited delirium alone, intervention should be taken using that level of force reasonably necessary to control the individual.

H. Normally, OC and batons are ineffective due to the subject's elevated threshold of pain. Officers may consider a physical takedown using multiple officers as long as an adequate number of officers are available.

I. Unless not feasible, officers should not attempt to control continued resistance or exertion by pinning the subject to the ground or against a solid object, using their body weight. When restrained, officers should position the subject in a manner that will assist breathing, such as placement on his or her side, and avoid pressure to the chest, neck, or head (positional asphyxia).

J. Officers should check the subject's pulse and respiration on a continuous basis until transferred to EMS personnel. Officers shall ensure the airway is unrestricted and be prepared to administer CPR or an automated external defibrillator (AED) if the subject becomes unconscious.

K. Whenever possible, an officer should accompany the subject to the hospital for security purposes and to provide assistance as necessary.

VI. VOLUNTARY REFERRAL

A. The preferred method of obtaining mental health evaluation and assistance is getting the person to accept a voluntary referral.

B. In most situations, no extraordinary steps are required other than to be patient, calm and attempt to convince the person to seek professional assistance.

C. Officers should tactfully inform the person that Raritan Bay Medical Center (RBMC) is equipped to handle their problems and that, if the person wishes, conveyance can be arranged to RBMC.

D. If the person refuses to cooperate and responsible adult members of the person's family or the person's guardian are known, the officer may want to contact them and suggest that they try to influence the person to seek care.

E. Officers are authorized to conduct a search of the person prior to transportation to ensure that no weapons are present.

F. Unless the person is considered a threat to himself or herself or the officer or if the person has a history of violence, officers do not have to accompany the person to the hospital/facility. If requested by EMS personnel, an officer should accompany the person to the hospital/facility.

VII. INVOLUNTARY COMMITMENT

A. The State of New Jersey is responsible for providing care, treatment and rehabilitation services to mentally ill persons who are disabled and cannot provide basic care to themselves or who are dangerous to themselves, to others, or to property. The procedures set forth in this SOP are consistent with N.J.A.C. 10:31-8.1 through N.J.A.C. 10:31-8.3.

B. There are four situations in which a mentally ill person or EDP can be taken into custody.

1. If he/she committed a crime for which, under normal circumstances, he/she would be arrested; or

2. Where from acts observed by the officer or other reliable persons, the officer believes the person poses a substantial risk of physical harm to other persons as manifested by evidence that others are placed in reasonable fear of violent behavior and serious physical harm to them.

3. From acts observed by the officer or other reliable persons, the officer believes the person poses a very substantial risk of physical impairment or injury to himself/herself as manifested by evidence that his/her judgment is so affected that he/she is unable to protect himself/herself in the community and that reasonable provision for his/her protection is not available in the community.

4. Where from acts observed by the officer or other reliable persons, the person demonstrates a substantial risk of physical harm to himself as manifested by evidence of threats of, or attempts at, suicide or serious bodily harm.

C. Where one of the situations outlined above has concluded that the person must be taken into custody, seek to convince the person to come voluntarily and peacefully. If these measures fail or are impracticable, restrain the person.

1. In restraining the person, use only as much force as is absolutely necessary.

2. Avoid chokeholds and be continually aware of the potential for positional asphyxia. Chokeholds and vascular restraints are prohibited unless deadly force is otherwise justified.

D. Upon determining that a person is in need of involuntary commitment or further evaluation, the investigating officer shall contact EMS and transport the person to Raritan Bay Medical Center

RARITAN BAY MEDICAL CENTER
530 New Brunswick Avenue,
Perth Amboy, NJ 08861
HOTLINE: (732) 442-3794

E. Officers should assess whether or not it is necessary to accompany EMS to Raritan Bay Medical Center. Normally, violent patients will warrant police officer accompaniment.

1. If the patient is violent or has a history of violence, the officer should consider disarming so that the patient does not gain control of the officer's sidearm. Surrender the sidearm to the assisting officer. Under no circumstances shall an officer surrender his/her handgun to a non-law enforcement person. If the officer does not disarm, he/she shall maintain security of his/her handgun at all times and keep his/her sidearm side away from the patient.

2. Since this is an involuntary commitment the patient might have to be placed in restraints. Common sense and sound judgment will dictate whether restraints are necessary.

   a. Officers may only utilize handcuffs, flex-cuffs, and/or leg restraints unless otherwise advised by medical/ambulance personnel.

   b. If medical/ambulance personnel determine that additional restraints are required, officers shall only assist medical/ambulance personnel with applying these additional restraints.

3. Generally, physical behavioral restraints are not authorized unless:

   a. A physician or court has authorized the placement of the restraints;

   b. The patient is in the custody of a law enforcement officer; or

   c. The medical condition of the patient mandates transportation to, and treatment at, a health care facility, and the patient manifests such a degree of behavior that he or she:

      1) Poses serious physical danger to himself or herself or to others; or

      2) Causes serious disruption to ongoing medical treatment, which is necessary to sustain his or her life or to prevent disability.

4. No patient shall be kept in physical behavioral restraints for a period greater than one hour unless:

   a. A physician or court has authorized the use of the restraints for longer than one hour; or

   b. A law enforcement officer accompanies the patient in the rear of the ambulance.

5. No physical behavioral restraint shall be of a type, or used in a manner, that causes undue physical discomfort, harm or pain to a patient. Hard restraints, such as handcuffs, are specifically prohibited unless the officer who applied the hard restraints/handcuffs accompanies the patient.

6. A patient placed in any type of restraint shall be closely monitored to ensure that his/her airway is not compromised in any way. Under no circumstances shall a patient be placed facing down on a stretcher while in restraints.

F. A screening outreach visit may have occurred without this department's prior knowledge. A physician or a family member may have arranged these visits. If the screener determines that police intervention is necessary due to the potential for danger or to escort the subject to a mental/behavioral health, they will contact this department for assistance. The screener will evaluate the potential for dangerousness prior to requesting either a police escort or transport. The screener shall base the evaluation of potential for dangerousness upon a finding of:

1. The occurrence of violent behavior;

2. A threat of violence to self or others;

3. Identified victim(s);

4. Substance abuse;

5. Command hallucinations;

6. Specified plan of violence;

7. History of violence;

8. History of arrests and involuntary admissions;

9. Subject's fear of violence and current medications;

10. Behavioral clues;

11. Weapons present;

12. Access to weapons, military or police firearms training;

13. Other lethal training and ability.

G. In situations where there is overt and extreme danger or believed to be such, officers may request screening outreach as soon as practicable.

1. Officers should attempt to stabilize the situation to the extent of their training and experience, if and when possible.

a. Certain situations may require prompt police intervention prior to the arrival of screening personnel. (Examples: person threatening to jump from a bridge, building or other structure; person threatening him/herself with a firearm or other weapon.)

b. Screening personnel should verbally engage the subject only with the approval of police officers.

c. Police officers shall not permit screening personnel to place themselves in harm's way to engage a subject.

H. Upon request by RBMC staff, officers shall remain at RBMC until APS/hospital security takes over. Once the patient has been secured, it is not necessary for the officers to remain. An officer must remain with the patient if the patient is being held on bail resulting from criminal charges or if the patient is being held on a warrant until the patient can be turned over to the Middlesex County Sheriff's Office.

I. N.J.S.A. 30: 4-27.1 et seq. does not apply to involuntary commitment of juveniles. Juveniles in need of evaluation or involuntary commitment shall be taken into short-term custody in accordance with N.J.S.A. 2A: 4A-32.

1. If an officer has reasonable cause to believe that a juvenile is in need of involuntary commitment and no probable cause that a crime has been committed, the officers shall take the juvenile into short-term custody.

2. The officer shall immediately notify the county juvenile family crisis intervention unit pursuant to N.J.S.A. 2A: 4A-80.

3. The officer shall promptly bring the juvenile to the unit or place designated by the juvenile family crisis intervention unit.

4. Although mental health screeners will be available for assistance with juveniles, it is recommended that the minor's existing psychiatrist treatment provider or the juvenile crisis intervention unit be contacted first to assist in the handling of these situations. After normal business hours, screeners from Raritan Bay Medical Center will respond

5. Contact a juvenile detective.

VIII. INCIDENTS INVOLVING AN ARREST

A. Officers are obliged to arrest any person who has committed an act in violation of any criminal statute.

1. If the person is going to be incarcerated, ensure that the person is screened for suicide potential.

2. The station commander shall order close observation of the subject while in custody.

B. When the mental status of an arrested person requires evaluation, officers shall transport the person to APS using the procedures in subsection VII or request that a screener respond to this department for an outreach screening visit.

1. If the screener determines that the subject does not meet the criteria for involuntary commitment, officers shall continue with the arrest process.

2. If the subject is determined to meet criteria for involuntary commitment, the shift supervisor shall cause transportation to RBMC.

3. If the subject remains in police custody, this department is responsible for the person.

4. If the subject is released ROR, RBMC is responsible for the person.

C. If an arrested person exhibiting signs of mental illness, emotional disturbance, or immediate danger to self or others is being transported to the Middlesex County Adult Correctional Center (MCACC):

1. The shift commander or his/her designee will notify the MCACC master control supervisor that a subject potentially requiring psychiatric evaluation is being transported to that facility prior to transporting the arrestee to the facility.

2. The intervention will be conducted in a video conferencing room located in the MCACC receiving and discharge area. Once officers place the arrestee in the room for the assessment by a psychiatric professional, the transporting officer(s) will supervise the subject. Corrections personnel will assist if necessary.

3. The psychiatric professional will make a determination if the arrestee can be accepted at that time. If a determination is made that the individual requires additional psychiatric care, the transporting officers will transport the subject to a medical facility in accordance with section VII of this SOP.

D. If the subject with pending criminal charges is admitted or committed to a state psychiatric facility, officers shall complete a *Uniform Detainer Form*. The detainer shall be forwarded to the state psychiatric facility. Copies of the *Uniform Detainer Form* must be retained by this department, filed with all police reports and filed with any criminal complaints that are forwarded to the courts.

E. Under the provisions of NJSA 30:4-27.22c, this department may be required to take custody of a person being released from involuntary commitment by the psychiatric facility and who was being held on bail resulting from criminal/disorderly person charges. Normally, this department must take custody within 48 hours. Contact the Middlesex County Sheriff's Office for transportation assistance, if necessary.

IX. REPORTING REQUIREMENTS

A. The investigating officer shall document all incidents involving an emotionally disturbed person in CAD, which shall minimally include the following information:

1. Name, address, telephone number, DOB, and SS# of subject

2. Description of circumstances that required police involvement

3. If custody of a subject is required for mental health screening, designate if the subject was:

   a. Dangerous to others or to property;

   b. Dangerous to self.

4. Name of transporting EMS, if applicable.

5. Name of mental health screening personnel contacted.

6. Name of mental health facility to where transported.

7. Whether medical attention prior to mental health screening was required.

8. Include results of APS screening:

   a. Temporary Commitment – Location;

   b. Released - Voluntary Referral.

B. In the event an arrest is made and criminal charges are filed, an investigation report shall be completed. An investigation report shall also be completed if excited delirium is suspected and the following information must be included in the report:

1. Conditions at the incident scene;

2. Description of the subject's behavior and its duration;

3. Description of what the subject said during the encounter;

4. Type and duration of resistance;

5. Identity of all officers at the scene;

6. Actions taken to control the subject;

7. Restraints used on the subject and the length of time applied;

8. Location of the restraints on the subject;

9. Response time and actions taken by EMS, including a list of drugs given to the patient;

10. Means of transport and total elapsed time of transport;

11. Behavior of the subject during transport;

12. Means of resuscitation, if applicable;

13. Information from relatives and friends of the subject that can provide insight to the potential causation of the incident.

C. Protect the identity of any person taken into custody in accordance with these procedures. Do not divulge such name to any person, except as directed by law or in the course of official proceedings.

CASE #: _____

STATE OF NEW JERSEY
DEPARTMENT OF HUMAN SERVICES
DIVISION OF MENTAL HEALTH AND HOSPITALS

UNIFORM MENTAL HEALTH DETAINER FORM

N.J.S.A. 30: 4-27.22, states in pertinent part, that:

> *...If a person in custody awaiting trial on a criminal or disorderly persons charge is admitted or committed pursuant to this act, the law enforcement authority that transferred the person shall complete a uniform detainer form [appended], as prescribed by the Division of Mental Health Services, that shall specify the charge, law enforcement authority and other information that is clinically relevant. This form shall be submitted to the admitting facility along with the screening certificate or temporary court order directing that the person be admitted to the facility.* (N.J.S.A. 30: 4-27.22a)
>
> When the person is administratively or judicially discharged and is still under the authority of the law enforcement authority, that authority shall within 48 hours of receiving notification of the discharge, take custody of the person. (N.J.S.A. 30: 4-27.22c)

DATE: _____

TO: _____
Psychiatric Facility

_____

FROM: _____
Detaining Authority

RE: _____
Name of Inmate/Patient

Date of Birth: _____ **Social Security #:** _____

Outstanding Criminal or Disorderly Persons Charges:

_____

_____

_____

Indictment Numbers, If Applicable: _____

Court in Which Charged: _____

CASE #: _____

CHECK APPLICABLE STATUS:

☐ (1) **Individual is transferred for evaluation of 'fitness to proceed' pursuant to attached court order (N.J.S.A. 2C: 4-5a(2) or 2C: 4-5c).**

☐ (2) **Individual is transferred for evaluation of whether they should be found 'not guilty by reason of insanity' pursuant to attached court order (N.J.S.A. 2C: 4-5 OR 2C: 4-8a or 2C: 4-9a).**

☐ (3) **Individual is transferred as 'involuntary civilly committed' pursuant to (N.J.S.A. 30: 4-27.1 et seq., and a certificate from a screening service or a temporary court order is attached.**

This individual must be returned to _____
upon discharge.

THIS FORM IS ONLY APPLICABLE TO INDIVIDUALS AWAITING TRIAL ON A CRIMINAL OR DISORDERLY PERSONS CHARGE.

APPLICABLE COURT ORDERS MUST BE INCLUDED WITH THIS FORM.

_____
PRINTED NAME OF PERSON COMPLETING FORM

_____
SIGNATURE

_____
TITLE

_____
PHONE NUMBER

CARTERET POLICE DEPARTMENT
STANDARD OPERATING PROCEDURES

SUBJECT: DEALING WITH THE IMMIGRANT COMMUNITY	
ACCREDITATION STANDARDS: N/A	# OF PAGES: 12
EFFECTIVE DATE: December 17, 2019	BY THE ORDER OF: Chief Dennis McFadden

PURPOSE The purpose of this standard operating procedure is to maintain procedures for dealing with the immigrant community in compliance with *New Jersey Attorney General Directive 2018-6*.

POLICY It is the policy of the Carteret Police Department to deal with the immigrant community in compliance with *New Jersey Attorney General Directive 2018-6*.

Immigrants are less likely to report a crime if they fear that the responding officer will turn them over to immigration authorities. This fear makes it more difficult for officers to solve crimes and bring suspects to justice.

Law enforcement officers protect the public by investigating state criminal offenses and enforcing state criminal laws. They are not responsible for enforcing civil immigration violations except in narrowly defined circumstances. Such responsibilities instead fall to the federal government and those operating under its authority.

Although officers should assist federal immigration authorities when required to do so by law, they should also be mindful that providing assistance above and beyond those requirements threatens to blur the distinctions between state and federal actors and between federal immigration law and state criminal law. It also risks undermining the trust between the law enforcement community and the public.

PROCEDURES

I. DEFINITIONS

A. For purposes of this SOP, the following terms are defined:

1. Judicial warrant – is a warrant issued by a federal or state judge. It is not the same as an immigration detainer (sometimes referred to as an ICE detainer) or an administrative warrant, both of which are currently issued not by judges but, by federal immigration officers.

2. Non-public personally identifying information – includes a social security number, credit card number, unlisted telephone number, driver's license number, vehicle plate number, insurance policy number, and active financial account number of any person. It may also include the address, telephone number, or email address for an individual's home, work, or school, if that information is not readily available to the public.

3. Violent or serious offense – is defined as:

a. Any 1st or 2nd degree offense, as defined in N.J.S.A. 2C: 43-1;

b. Any indictable domestic violence offense defined in N.J.S.A. 2C: 25-19;

c. N.J.S.A. 2C: 12-1 – Assault, including all assaults resulting from an act of domestic violence;

d. N.J.S.A. 2C: 12-1.1 – Knowingly Leaving the Scene of a Motor Vehicle Accident Involving Serious Bodily Injury;

e. N.J.S.A. 2C:12-10 – Stalking;

f. N.J.S.A. 2C: 12-13 – Throwing Bodily Fluids at Officers;

g. N.J.S.A. 2C: 14-3 – Criminal Sexual Contact;

h. N.J.S.A. 2C: 14-4b - Exposing genitals to minors under the age of 13 and other vulnerable populations

i. N.J.S.A. 2C: 16-1 – Bias Intimidation;

j. N.J.S.A. 2C: 17-1 – Arson;

k. N.J.S.A. 2C: 17-2 – Causing Widespread Injury or Damage;

l. N.J.S.A. 2C:18-2 – Burglary of a Dwelling;

m. N.J.S.A. 2C: 24-4 – Endangering the Welfare of Children;

n. N.J.S.A. 2C: 28-5 – Witness Tampering and retaliation;

o. N.J.S.A. 2C: 29-2b – Eluding a Law Enforcement Officer;

p. N.J.S.A. 2C: 29-3a(5), 3b(2), 3b(3) – Hindering Apprehension of Another Using Force or Intimidation;

q. N.J.S.A. 2C: 29-9 – Criminal Contempt (violation of restraining orders, domestic violence orders, etc.);

r. N.J.S.A. 2C: 39-3, N.J.S.A. 2C:39-5, N.J.S.A. 2C:39-7, N.J.S.A. 2C:39-9 – Manufacture, Transportation or Possession of Weapons

s. N.J.S.A. 2C: 40-3B – Aggravated Hazing; and

t. Any indictable offense under the law of another jurisdiction that is the substantial equivalent to an offense described in this section.

B. The following terms are also defined for T visas and U visas:

1. Alien – Any person not a citizen or national of the United States.

2. Asylee – An alien in the United States or at a port of entry who is found to be unable or unwilling to return to his/her country of nationality, or to seek the protection of that country because of persecution or a well-founded fear of persecution. Persecution or the fear thereof must be based on the alien's race, religion, nationality, membership in a particular social group, or political opinion.

3. Certifying agency – includes all authorities responsible for the investigation, prosecution, conviction or sentencing of a person meeting the qualifying criminal activity including but, not limited to:

a. Federal, state and local law enforcement agencies;

b. Federal, state and local prosecutors' offices;

c. Federal, state and local judges;

d. Federal, state and local family protective services;

e. Federal and state departments of labor;

f. Equal Employment Opportunity Commission.

4. Helpful in the investigation or prosecution – means the victim was, is, or is likely to be assisting law enforcement in the investigation or prosecution of the qualifying criminal activity of which he/she is a victim.

a. This includes being helpful and providing assistance when reasonably requested.

b. This also includes an ongoing responsibility on the part of the victim to be helpful. Those who unreasonably refuse to assist after reporting a crime will not be eligible for a U visa. The duty to remain helpful to law enforcement remains even after a U visa is granted, and those victims who unreasonably refuse to provide assistance after the U visa has been granted may have the visa

revoked by the United States Citizenship and Immigration Services (USCIS).

c. Detectives/officers should contact and inform USCIS of a victim's unreasonable refusal to provide assistance in the investigation or prosecution should this occur.

d. A current investigation, filing of charges, a prosecution, and/or a conviction are not required to sign the law enforcement certification. Many instances may occur when the victim has reported a crime, but an arrest or prosecution cannot take place due to evidentiary or other circumstances. Examples of this include, but are not limited to:

1) When the actor has fled or is otherwise no longer in the jurisdiction;

2) The actor cannot be identified;

3) Federal law enforcement officials have deported the actor.

e. There is no statute of limitations on signing the law enforcement certification. A law enforcement certification can even be submitted for a victim in a closed case.

5. Nonimmigrant – An alien who is admitted to the United States for a specific temporary period of time. There are clear conditions on their stay. There are a large variety of nonimmigrant categories, each exists for a specific purpose and has specific terms and conditions. Nonimmigrant classifications include but, are not limited to:

a. Foreign government officials;

b. Visitors for business and for pleasure;

c. Aliens in transit through the United States;

d. Treaty traders and investors;

e. Students;

f. International representatives;

g. Temporary workers and trainees;

h. Representatives of foreign information media;

i. Exchange visitors;

j. Fiancé(e)s of U.S. citizens;

k. Intra-company transferees;

l. NATO officials;

m. Religious workers.

n. NOTE: most nonimmigrants can be accompanied or joined by spouses and unmarried minor (or dependent) children.

6. Permanent Resident Card (Form I-551) – Also known as a 'green card' or 'alien registration card', this card is issued by USCIS to aliens as evidence of their lawful permanent resident status in the United States. For Form I-9, it is acceptable as proof of both identity and employment authorization. Although some permanent resident cards contain no expiration date, most are valid for 10 years. Cards held by individuals with conditional permanent resident status are valid for two years.

7. Qualifying crime – (NOTE: the below list is taken from the *Victims of Trafficking and Violence Protection Act (VTVPA)* of 2000 and applies to all 50 states and U.S. territories. Some qualifying crimes are not defined in New Jersey statutes but, the closest equivalent crime in New Jersey shall apply. Qualifying crime also includes attempt, conspiracy, or solicitation to commit any of the below, and other related, crimes):

a. Abduction;

b. Aggravated assault;

c. Aggravated sexual assault;

d. Criminal sexual contact;

e. Criminal coercion (blackmail);

f. Criminal restraint;

g. Domestic violence related crimes;

h. Extortion;

i. False imprisonment;

j. Female genital mutilation;

k. Human trafficking;

l. Kidnapping;

m. Incest;

n. Manslaughter;

o. Murder;

p. Obstruction of justice;

q. Perjury;

r. Prostitution;

s. Sexual assault;

t. Sexual exploitation;

u. Torture;

v. Witness tampering.

8. Trafficking:

a. Sex trafficking – When someone recruits, harbors, transports, provides, solicits, patronizes, or obtains a person for the purpose of a commercial sex act, where the commercial sex act is induced by force, fraud, or coercion, or the person being induced to perform such act is under 18 years of age; or

b. Labor trafficking – the recruitment, harboring, transportation, provision, or obtaining of a person for labor or services, through the use of force, fraud, or coercion for the purpose of subjection to involuntary servitude, peonage, debt bondage, or slavery.

9. T visa – is an immigration benefit that can be sought by victims who:

a. Is or has been a victim of a severe form of trafficking in persons (which may include sex or labor trafficking); and

b. Is in the United States due to trafficking;

c. Has complied with requests for assistance in an investigation or prosecution of the crime of trafficking; and

d. Would suffer extreme hardship involving unusual and severe harm if removed from the United States.

10. U visa – is an immigration benefit that can be sought by victims of certain crimes who are currently assisting or have previously assisted law enforcement in the investigation or prosecution of a crime, or who are likely to be helpful in the investigation or prosecution of criminal activity.

a. A U visa provides eligible victims with nonimmigrant status in order to temporarily remain in the United States while assisting law enforcement.

b. If certain conditions are met, an individual with U nonimmigrant status may adjust to lawful permanent resident status. Congress has capped the number of available U visas to 10,000 per fiscal year.

11. Visa – A U.S. visa allows the bearer to apply for entry to the U.S. in a certain classification (e.g. student (F), visitor (B), temporary worker (H)). A visa does not grant the bearer the right to enter the United States. The Department of State (DOS) is responsible for visa adjudication at U.S.

Embassies and Consulates outside of the U.S. The Department of Homeland Security (DHS), U.S. Customs and Border Protection (CBP) immigration inspectors determine admission into, length of stay and conditions of stay in, the U.S. at a port of entry. The information on a nonimmigrant visa only relates to when an individual may apply for entry into the U.S.

II. GENERAL

A. Nothing in this SOP or *New Jersey Attorney General Directive 2018-6* limits officers from enforcing state law and nothing in this SOP or *New Jersey Attorney General Directive 2018-6* should be construed to imply that the State of New Jersey provides sanctuary to those who commit crimes in this state. Any person who violates New Jersey's criminal laws can and will be held accountable for their actions, no matter of their immigration status.

B. Nothing in this SOP or *New Jersey Attorney General Directive 2018-6* restricts officers from complying with the requirements of federal law or valid court orders, including judicially issued arrest warrants for individuals, regardless of immigration status.

C. Nothing in *New Jersey Attorney General Directive 2018-6* prohibits this agency from imposing its own additional restrictions on providing assistance to federal immigration authorities, so long as those restrictions do not violate federal or state law or impede the enforcement of state criminal law. This SOP or *New Jersey Attorney General Directive 2018-6* does not *mandate* that officers provide assistance in any particular circumstance, even when, by the terms of *New Jersey Attorney General Directive 2018-6*, they are *permitted* to do so.

D. Under federal and state law, local law enforcement agencies are not required to enforce civil administrative warrants or civil detainers issued by federal immigration officers.

E. Annually, the Chief of Police or his/her designee shall report to the Middlesex County Prosecutor's Office, in a manner to be prescribed by the New Jersey Attorney General, any instances in which the agency provided assistance to federal civil immigration authorities for the purpose of enforcing federal civil immigration law in the previous calendar year

III. ENFORCEMENT OF FEDERAL CIVIL IMMIGRATION LAW

A. Except pursuant to subsection III.C below, no officer shall:

1. Stop, question, arrest, search, or detain any individual based solely on:

   a. Actual or suspected citizenship or immigration status; or

   b. Actual or suspected violations of federal civil immigration law.

2. Inquire about the immigration status of any individual, unless doing so is:

   a. Necessary to the ongoing investigation of an indictable offense by that individual; *and*

b. Relevant to the offense under investigation; or

c. Necessary to comply with the requirements of the *Vienna Convention on Consular Relations* (see this department's SOP on *Consular Notification and Access*).

B. Except pursuant to subsection III.C below, no officer shall provide the following types of assistance to federal immigration authorities when the sole purpose of that assistance is to enforce federal civil immigration law:

1. Participating in civil immigration enforcement operations;

2. Providing any non-public personally identifying information (see definitions) regarding any individual;

3. Providing access to any state, county, or local law enforcement equipment, office space, database, or property not available to the general public;

4. Providing access to a detained individual for an interview, unless the detainee signs a written consent form that explains:

   a. The purpose of the interview;

   b. That the interview is voluntary;

   c. That the individual can decline to be interviewed; and

   d. That the individual can choose to be interviewed only with his/her legal counsel present.

5. Providing notice of a detained individual's upcoming release from custody, unless the detainee:

   a. Is currently charged with, has ever been convicted of, or has ever been adjudicated delinquent for a violent or serious offense, as that term is defined in subsection I.A.3 of this SOP; or

   b. In the past five years, has been convicted of an indictable crime other than a violent or serious offense; or

   c. Is subject to a *Final Order of Removal* that has been signed by a federal judge and lodged with the county jail or state prison where the detainee is being held.

6. Continuing the detention of an individual past the time he or she would otherwise be eligible for release from custody based solely on a civil immigration detainer request, unless the detainee:

   a. Is currently charged with, has ever been convicted of, or has ever been adjudicated delinquent for a violent or serious offense, as that term is defined in subsection I.A.3 of this SOP; or

   b. In the past five years, has been convicted of an indictable crime other than a violent or serious offense; or

c. Is subject to a *Final Order of Removal* that has been signed by a federal judge and lodged with the county jail or state prison where the detainee is being held.

d. Any such detention can last only until 2359hrs on the calendar day on which the person would otherwise have been eligible for release.

7. Officers must notify a detained individual, in writing and in a language the individual can understand, when federal civil immigration authorities request:

a. To interview the detainee (use an *Immigration and Customs Enforcement Interview Request Consent Form*);

b. To be notified of the detainee's upcoming release from custody (use a Notification to Detained Individual of Actions by *Immigration and Customs Enforcement Form*);

c. To continue detaining the detainee past the time he or she would otherwise be eligible for release;

d. When providing such notification, officers shall provide the detainee a copy of any documents provided by immigration authorities in connection with the request.

C. Nothing in subsections III.A or III.B shall be construed to restrict, prohibit, or in any way prevent an officer from:

1. Enforcing the criminal laws of this state;

2. Complying with all applicable federal, state, and local laws;

3. Complying with a valid judicial warrant or other court order or responding to any request authorized by a valid judicial warrant or other court order;

4. Participating with federal authorities in a joint law enforcement taskforce the primary purpose of which is unrelated to federal civil immigration enforcement;

5. Requesting proof of identity from an individual during the course of an arrest or when legally justified during an investigative stop or detention;

6. Asking an arrested individual for information necessary to complete the required fields of the LIVESCAN database (or other law enforcement fingerprinting database), including information about the arrestee's place of birth and country of citizenship;

7. Providing federal immigration authorities with information that is publicly available or readily available to the public in the method the public can obtain it;

8. When required by exigent circumstances, providing federal immigration authorities with aid or assistance, including access to non-public information, equipment, or resources;

9. Sending to, maintaining, or receiving from federal immigration authorities, information regarding the citizenship or immigration status, lawful or unlawful, of any individual (See 8 U.S.C. §§ 1373, 1644).

D. This agency shall not enter into, modify, renew, or extend any agreement to exercise federal immigration authority pursuant to Section 287(g) of *the Immigration and Nationality Act*, 8 U.S.C. § 1357(g).

IV. U VISAS AND T VISAS

A. Notwithstanding any provision in section III of this SOP, officers can ask any questions necessary to complete a T Visa or U Visa certification.

1. Generally, officers cannot disclose the immigration status of a person requesting T- or U-visa certification except to comply with state or federal law or legal process, or if authorized by the visa applicant.

2. However, nothing in this section shall be construed to restrict, prohibit, or in any way prevent officers from sending to, maintaining, or receiving from federal immigration authorities any information regarding the citizenship or immigration status, lawful or unlawful, of any individual (see 8 U.S.C. §§ 1373, 1644).

B. Non-citizens may be eligible for a U visa if:

1. They are the victims of qualifying criminal activity;

2. They have suffered substantial physical or mental abuse as a result of having been a victim of criminal activity;

3. They have information about the criminal activity;

4. They were helpful, are helpful, or are likely to be helpful to law enforcement in the investigation or prosecution of the crime;

5. The crime occurred in the United States or violated U.S. laws.

6. He/she is admissible to the United States. If not admissible, an individual may apply for a waiver on a *Form I-192, Application for Advance Permission to Enter as a Non-Immigrant*.

7. If the person is under the age of 16 or unable to provide information due to a disability, a parent, guardian, or friend may assist law enforcement on your behalf.

8. NOTE: Given the complexity of U visa petitions, petitioners often work with a legal representative or a victim advocate.

C. If an individual believes he/she may qualify for a U visa, then he/she or his/her representative will complete a *USCIS Form I-918, Petition for U Nonimmigrant Status (Form I-918)* and submit it to U.S. Citizenship and Immigration Services (USCIS) with all relevant documentation, including a *USCIS Form I-918B U Visa Law Enforcement Certification (Form I-918B)*.

D. This department's responsibilities are limited to certifying that an alien, who is or was the victim of a qualifying crime in Carteret, is, has, or will cooperate with the investigation and/or prosecution of such crime. Most queries will be referred to this department from the Middlesex County Prosecutor's Office.

E. Aliens or their representatives seeking certification for a U visa or the Middlesex County Prosecutor's Office shall be referred to the detective bureau. The assigned detective will cause an inquiry into the matter to determine if the alien has been:

1. A victim of a qualifying crime under the jurisdiction of this department;

2. Has specific knowledge and details of crime; and

3. Has been, is being, or is likely to be helpful to law enforcement in the detection, investigation, or prosecution of the qualifying crime

F. Aliens or their representatives seeking certification for crimes occurring outside the jurisdiction of the Borough of Carteret shall be referred to the local jurisdiction or the county prosecutor's office in which the crime occurred.

G. The detective shall assign the inquiry a case number in CAD/RMS.

H. Upon determining that the alien has satisfied the above requirements, the detective shall execute ***Form I-918, Supplement B, U Nonimmigrant Status Certification***.

I. The completed form shall be forwarded to the Chief of Police or his/her designee for signature.

1. The original fully executed form shall be returned to the applicant or his/her representative or the Middlesex County Prosecutor's Office; and

2. The detective shall forward a copy to the records bureau to be maintained in the case file.

J. The Chief of Police or his/her designee may withdraw or disavow a Form I-918B at any time if a victim stops cooperating. The detective must notify the USCIS Vermont Service Center in writing (including as an email attachment) at: *LawEnforcement_UTVAWA.vsc@uscis.dhs.gov*; or mail to

USCIS—Vermont Service Center
ATTN: Division 6
75 Lower Welden Street
St. Albans, VT 05479

K. If the detective or the Chief of Police determines that USCIS should know something particular about a victim's criminal history, that information can be cited on the certification or with an attached report or statement detailing the victim's criminal history with that law enforcement agency or his/her involvement in the crime.

L. Such written notification regarding withdrawal or disavowal must include:

1. This department's name and contact information (if not included in the letterhead);

2. The name and date of birth of the individual certified;

3. The name of the individual who signed the certification and the date it was signed;

4. The reason the department is withdrawing/disavowing the certification including information describing how the victim's refusal to cooperate in the case is unreasonable;

5. The signature and title of the official who is withdrawing/ disavowing the certification; and

6. A copy of the signed initial certification.

M. Non-citizens may be eligible for a T Visas if:

1. Is or has been a victim of a severe form of trafficking in persons (which may include sex or labor trafficking); and

2. Is in the United States due to trafficking;

3. Has complied with requests for assistance in an investigation or prosecution of the crime of trafficking; and

4. Would suffer extreme hardship involving unusual and severe harm if removed from the United States.

N. The T visa declaration is supplementary evidence of a victim's assistance to law enforcement that an official can complete for a T visa applicant. The declaration must be provided on Form I-914, Supplement B, and instructions are available on the USCIS website at *https://www.uscis.gov/i-914.*

O. Detectives will process T Visas in the same way as U Visas.

CARTERET POLICE DEPARTMENT
STANDARD OPERATING PROCEDURES

SUBJECT: ALTERNATE CARE FOR ARRESTEE DEPENDENTS	
ACCREDITATION STANDARDS: 3.1.3	# OF PAGES: 3
EFFECTIVE DATE: July 20, 2020	BY THE ORDER OF: Chief Dennis McFadden

PURPOSE The purpose of this standard operating procedure is to maintain compliance with the N.J. Attorney General's model policy for ***Alternate Care for Arrestee's Dependents.***

POLICY It is the policy of the Carteret Police Department to provide persons taken into custody by this department a reasonable opportunity to arrange for the care of children or persons dependent, upon the arrestee for their care, sustenance and supervision. When the arrestee is unable to arrange for the care of dependent persons, this department will notify the appropriate municipal, county or state agencies of the need for alternate care for the arrestee's dependents. This department will not take direct responsibility for providing actual alternate care for any arrestee's dependents.

PROCEDURES

I. DEFINITIONS

A. Alternate care means someone, other than the arrestee/detainee, who will care for the arrestee/detainee's dependent(s) while the arrestee/detainee under arrest or is detained for a period exceeding two hours. A family member, appropriate adult friend, or municipal, county, or state entity other than a law enforcement agency can provide alternate care (e.g., church group, welfare office, NJ Department of Children and Families, Division of Senior Services, etc.)

B. Appropriate adult shall mean a competent adult or competent emancipated minor to whom an arrestee is comfortable with entrusting their dependent.

C. Arrestee/detainee is an individual that is in the custody of this department as required by law, public safety, or the safety of the individual.

D. Dependent is an individual, who resides with and/or is dependent on the arrestee for their primary care, sustenance, or supervision. Dependent individuals may be a child, handicapped person of any age, elderly person, or a person in need of continued medical care.

E. Judicial officer means a judge, clerk, deputy clerk, authorized municipal court administrator, or authorized deputy municipal court administrator (*R.* 3:2-3)

II. GENERAL

A. The existence of arrestee dependents should not be the determining factor as to whether the arrestee is held in custody or released.

B. Whenever a person is subjected to custodial arrest, or is likely to be detained for investigation for more than two (2) hours, and is accompanied by a child or other person dependent upon the person for care, sustenance or supervision:

1. If another appropriate adult is present with the person arrested or detained, the arrestee or detainee will be permitted to place the dependent in the care of that person.

2. If another appropriate adult refuses custody or is not present:

   a. The officer may remain at the scene with the arrestee for a reasonable time to arrange for an appropriate adult; or

   b. The dependent will be transported to headquarters. The dependent can be transported with the arrestee or in a separate vehicle as dictated by the circumstances of the arrest.

   c. If the dependent is a juvenile, enter the juvenile's name into the *Juvenile Admissions Log*.

3. The arrestee/detainee shall be permitted a reasonable opportunity to make arrangements by telephone for alternate care for the dependent. If contact cannot be made by telephone, an officer should be assigned to make the necessary notification in person.

4. If the appropriate adult resides outside of the Borough of Carteret, the police department with jurisdiction should be contacted to make the notification.

5. If the arrestee/detainee is unable to arrange for alternate care for the dependent(s), the arresting officer shall cause notification to the appropriate agency of the arrest and the need for alternate care.

   a. **New Jersey Department of Children & Families, Division of Child Protection & Permanency** (1-877-652-2873) may be helpful with dependent minors.

   b. Contact the Middlesex County Crisis Intervention Unit or access the **Middlesex County Juvenile and Family Support Services Directory** for referral assistance.

   c. Other resources include the New Jersey Division on Aging, the Office of Handicapped and Disabled Adults, and the Division of the Developmentally Disabled.

6. The agency assuming care of the dependent must be included in the investigation report narrative. Minimally, the following information should be included:

   a. Name of the agency;

   b. Name of the contact person;

   c. Telephone number of the contact person.

7. The arrestee/detainee must also be provided with this information and must be provided with information on how to reclaim custody of his/her dependent(s) upon release.

8. When making a determination whether to charge the defendant on a complaint-warrant or complaint-summons, notify the assistant prosecutor or judicial officer that the arrestee has dependent(s) requiring the arrestee's care and what arrangements had been made for the care of the dependents

C. Whenever a person is arrested or taken into custody and likely to be detained for more than two (2) hours, that person must be questioned as to whether or not there is any child or other person solely dependent upon the arrestee for care, sustenance or supervision. If the arrestee answers in the affirmative, these same procedures apply.

CARTERET POLICE DEPARTMENT
STANDARD OPERATING PROCEDURES

SUBJECT: BIAS-BASED POLICING	
ACCREDITATION STANDARDS: 1.5.5	# OF PAGES: 9
EFFECTIVE DATE: December 17, 2019	BY THE ORDER OF: Chief Dennis McFadden

PURPOSE The purpose of this standard operating procedure is to maintain this department's policy and procedures concerning bias-based policing, bias-based profiling, and discriminatory practices. This SOP also codifies this department's policy and procedures for dealing with transgender, LGBTQ+, non-binary, and gender non-conforming persons.

POLICY It is the policy of the Carteret Police Department to prevent and prohibit the practice of bias-based policing, bias-based profiling and other discriminatory practice by employees of this department in detention, interdiction, traffic contacts, field contacts, asset seizure and asset forfeiture. Bias-based policing, biased based profiling, and discriminatory profiling are violative of the Equal Protection Clause of the 14th Amendment to the United States Constitution and in direct contravention of *New Jersey Attorney General Directive 2005-01* and *New Jersey Attorney General Directive 2019-3*

No Borough of Carteret police officer or civilian employee, while operating under the authority of the laws of the State of New Jersey, shall engage in or tolerate any practice or act constituting bias-based policing or bias-based profiling.

Officers and civilian employees shall not harass or discriminate against individuals based on their actual or perceived gender identity, gender expression and/or sexual orientation, including by using offensive or derogatory words to describe LGBTQ+ individuals.

PROCEDURES

I. GENERAL

A. In accomplishing the mission of this agency, personnel must not exercise their authority based upon an individual's or class of individuals' race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, liability for service in the armed forces, physical or mental disability.

B. The following terms are defined:

1. Bias-based policing is the detention, interdiction, or other disparate treatment of an individual or class of individuals on the basis of their race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation, gender identify, gender expression, LGBTQ+ status, physical or mental disability. Other synonymous terms include, racially influenced policing, discriminatory profiling, racial profiling, etc.

2. Cisgender: A person whose gender assigned at birth (sometimes referred to as sex assigned at birth) matches their gender identity. For instance, if a person was assigned female at birth, and self-identifies as a woman or girl, that person is cisgender.

3. Citizen contact is a consensual encounter between an agency employee and a member of the public, initiated by either party, wherein the person is free to terminate the encounter at any time.

4. Chosen name is a name selected by a person for themselves that is different from the name the person was given at birth. An individual may have chosen a new name for themselves that more accurately reflects their gender identity (actual or perceived) or expression.

5. Chosen pronouns are pronouns that a person chooses to use for themselves in line with their gender identity (actual or perceived). For example, 'she/her'; 'he/his'; and 'they/them'.

6. Common trait is a trait shared by a group of people that is not, in itself, indicative of criminal behavior, including all of the following: race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation, physical or mental disability.

7. Detain or detention is the act of stopping or restraining a person's freedom to leave; approaching and questioning a person outside the realm of a consensual encounter, or stopping a person suspected of being personally involved in criminal activity.

8. Field interview/investigative detention is the brief detainment of a person, whether on foot or in a vehicle, based upon reasonable suspicion for the purposes of determining the individual's identity and resolving an officer's suspicions.

9. Gender assigned at birth: The gender that someone was thought to be at birth, typically recorded on the original birth certificate; the gender someone was assigned at birth may or may not match their gender identity.

10. Gender binary: A societal construction of gender that accords two discrete and opposing categories – male or female.

11. Gender identity is a person's internal, deeply held sense of gender. Unlike gender expression, gender identity is not visible to others.

12. Gender expression: A person's gender-related appearance and behavior, whether or not stereotypically associated with the person's gender assigned at birth. It is the manner in which a person represents or expresses their gender to others, such as through their behavior, clothing, hairstyles, activities, voice, or mannerisms.

13. Gender non-conforming: A person whose gender expression does not conform to traditional gender expectations. Not all gender non-conforming people identify as transgender.

14. Gender transition: A process during which a person begins to live according to their gender identity, rather than the gender they were assigned at birth. Gender transition looks different for every person. Possible steps in a gender transition may or may not include changing one's clothing, appearance, and name, and in some cases, changing identification documents or undergoing medical treatments. The steps each person takes depend on their individual needs and access to resources.

15. Intersex: A person whose biological sex characteristics may not fit medical definitions of male and female. These characteristics may include, but are not necessarily limited to, internal reproductive organs, external genitalia, and sex chromosomes

16. LGBTQ+ is an acronym that represents lesbian, gay, bisexual, transgender, and questioning individuals. The Q can also stand for queer. As the plus sign shows, this list is not meant to be exhaustive and, as used in this policy, the umbrella term also includes non-binary, gender non-conforming, and intersex individuals.

17. Non-binary is a term often used by people whose gender is not exclusively male or female. The term also captures those with more than one gender or with no gender at all.

18. Protected class – includes race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation, gender identify, gender expression, LGBTQ+ status, physical or mental disability, or liability for service in the armed forces of the United States.

19. Queer: A term that, although pejorative when used with intent to insult (historically and at present), is increasingly used by members of the LGBTQ+ community as a broad umbrella under which sexual and gender minorities may identify.

20. Questioning: A term some people use when they are in the process of exploring their sexual orientation or gender identity.

21. Reasonable suspicion – is suspicion that goes beyond a mere hunch but, is based upon a set of articulable facts and circumstances that would warrant a reasonable person to believe that an infraction of the law has been committed, is about to be committed, or is in the process of being committed by a person or persons under suspicion. Reasonable suspicion can be based on the observations of a police officer combined with his or her training and experience and/or reliable information provided by credible outside sources.

22. Search is looking for or seeking out that which is otherwise concealed from view.

23. Sexual orientation: A person's romantic, emotional, or sexual attraction to members of the same or different gender. Common terms used to describe sexual orientation include but, are not limited to, straight, lesbian, gay, bisexual, and asexual. Sexual orientation and gender identity are different: gender identity refers to one's internal knowledge of their gender, while sexual orientation refers to whom one is attract

24. Stop is the restraining of a person's liberty by physical force or a show of authority.

25. Transgender is an umbrella term for people whose gender identity and/or gender expression differs from what is typically associated with the sex they inherited at birth. People under the transgender umbrella may describe themselves using one or more of a wide variety of terms, including transgender.

    a. Transgender man: A term for a transgender person who was assigned female at birth but, identifies as a man.

    b. Transgender woman: A term for a transgender person who was assigned male at birth but, identifies as a woman.

26. Unknown, as used in this policy, is when the person's gender has not been disclosed and is otherwise unknown.

C. Bias-based policing of persons by employees of this department is strictly prohibited in detention, interdiction, traffic contacts, field contacts, and asset seizure and forfeiture.

D. Absent a valid warrant, reasonable suspicion, or probable cause, race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, physical or mental disability (unless a danger to themselves or others) will not be a factor in determining whether to interdict, detain, stop, arrest or take a person into custody.

E. Unless in response to a specific report of criminal activity, race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived),

gender expression (actual or perceived), LGBTQ+ status, physical or mental disability (unless a danger to themselves or others) will not be a factor in determining the existence of probable cause to arrest a person.

F. The stop or detention of any person(s) or vehicle(s) that is not based on factors related to a violation or violations of the laws and ordinances of the United States, State of New Jersey, County of Middlesex, Borough of Carteret, or in response to the police community caretaking function is prohibited.

G. Officers shall not search a person, their effects, or vehicle based upon race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, physical or mental disability (unless a danger to themselves or others).

H. Race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, physical or mental disability (unless a danger to themselves or others) shall not be a factor in any asset forfeiture proceedings.

I. Nothing in this directive shall be construed in any way to prohibit officers from taking into account a person's race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, physical or mental disability (unless a danger to themselves or others), or liability for service in the armed forces, when such attributes are used to describe characteristics that identify a particular individual or individuals who is/are the subject of a law enforcement investigation; or who is/are otherwise being sought by a law enforcement agency in furtherance of a specific investigation or prosecution. Officers can consider such attributes (actual or perceived) as a factor when pursuing specific leads in an ongoing criminal investigation or is trying to determine whether a person matches the description in a B.O.L.O. (be on the lookout).

J. No officer will fail to respond to, delay responding to, or treat as less important, any call or request for service or assistance because of a person's race, color, gender, creed, national origin, ethnicity, ancestry, religious beliefs, age, marital status, sexual orientation (actual or perceived), gender identity (actual or perceived), gender expression (actual or perceived), LGBTQ+ status, physical or mental disability.

K. The intentional altering or concealing of any information related to enforcement actions by an officer when based on bias-based policing or discriminatory profiling factors is prohibited.

II. INTERACTIONS WITH TRANSGENDER PEOPLE

A. All personnel shall interact with transgender people and the transgender community in a professional, respectful and courteous manner. This includes transgender juveniles. This SOP does not affect any other provisions in applicable SOPs and laws covering the processing and handling of juveniles