

**RESOLUTION 2022-02** 

## **Provincial Funding for Police Response to Mental Health Calls and to Establish a Transfer of Care Protocol**

**WHEREAS** in Ontario, police typically provide the first response to persons in need of urgent care within the mental health system or because they are experiencing a crisis involving behaviour that is threatening or dangerous such that the police response is required to protect the person or members of the public around them, and

**WHEREAS** under Section 17 of the *Mental Health Act*, only police currently have the authority to apprehend an individual for the purpose of compelling examination by a physician in relation to mental health, and police are required to transport the identified individual to a schedule one psychiatric facility for such examination, and

**WHEREAS** in 2019, the Government of Ontario released the *Police-Hospital Transitions Framework* to improve health outcomes for individuals apprehended by police, to assist with the transition of clients between municipally delivered police services and provincially delivered hospital services, and to aid partnerships involved in the transition, and

**WHEREAS** on August 9, 2021, the Ontario Association of Chiefs of Police (OACP) adopted the *Response to Mental Health (Non-Public Safety) Calls and Authorities under the Mental Health Act* resolution (#2021-06) that called on the Government of Ontario to establish an authority for a more appropriate first response to mental health calls and to appropriately fund partners and 911 dispatch agencies, and

**WHEREAS** Police reforms to responding to mental health calls have been significant, including improvements to crisis call diversion programs to reduce the use of police personnel for non-emergent responses when appropriate use of crisis workers to help determine whether an individual in crisis should be sent to an emergency department for treatment, and use of technologies as part of a brief mental health screening process, and

**WHEREAS** the Government of Ontario has prioritized the health, safety, and well-being for persons in crisis by providing funding to directly support police mental health response in excess of \$4.8 million annually, including \$2 million annually for Mobile Crisis Response Teams and \$2.8 million annually for the Ontario Provincial Police Crisis Response Call Diversion Program. In addition, indirect support for mental health response has been provided through partner

agencies funded by Ontario Health and funding within the Community Safety and Policing grant, and

**WHEREAS** a 2020 review by York Regional Police showed the cost of police response to mental health calls in excess of \$4.0 million annually. Using York's study as a proxy, the province-wide policing costs of mental health calls exceed \$48 million annually, and

**WHEREAS** as a comparison, designated upper-tier and single-tier municipal governments co-fund and deliver essential paramedic services. The Land Ambulance Service Grant represents a funding source of approximately 50% of the cost of municipally delivered community paramedicine services, and

**WHEREAS** the province, along with the Canadian Mental Health Association, the Human Services Justice Coordination Committee, the Ontario Hospital Association, and the OACP, jointly reported on a framework to improve police-hospital transitions in 2019, and

**WHEREAS** certain municipalities have entered into a memorandum of understanding to establish a 30-minute transfer of care protocol to efficiently transition patient care from municipally delivered paramedic services to provincially delivered hospital service.

**THEREFORE BE IT RESOLVED** that the Ontario Association of Chiefs of Police (OACP) calls on the Government of Ontario to establish consistent and sustainable funding for police response within the mental health system by co-funding 50% of the cost of calls for service related to mental health.

**BE IT FURTHER RESOLVED** that the OACP calls on the Government of Ontario to improve the police-hospital transition by establishing a transfer of care protocol standard between police services and hospitals of 30 minutes.