

VIA EMAIL Ref. 661992

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John McNamee
Acting Chief Coroner
Office of the Chief Coroner
Ministry of Public Safety and Solicitor General
Email: <a href="mailto:chiefcoronercorrespondence@gov.bc.ca">chiefcoronercorrespondence@gov.bc.ca</a>

## Dear John McNamee:

Thank you for your office's letter of February 12, 2024, in which you provided the Verdict with Coroner's comments from the Inquest into the death of Kyaw Naing MAUNG. The following recommendations were directed to the Ministry of Public Safety and Solicitor General:

**Recommendation 2**. Provide significant funding (or increase funding) for resources to be developed, implemented and maintained to support first responders attending mental health incidents.

**Recommendation 4.** Institute, fund and maintain a telephone service available 24 hours per day, 7 days per week, separate and apart from 911 and HealthLink BC, to anyone called to respond to a person experiencing a mental health crisis in BC, so the responder can access and consult with mental health professionals. This could assist first responders, such as police and families or anyone else seeking resources to assist someone in a mental health crisis before calling the police.

With respect to recommendation number 2, my ministry recognizes the importance of investing in innovative and evidence-based resources that will enhance the police response to mental health related calls. In March 2024, we announced the implementation of the HealthIM system through \$2 million in funding provided to the BC Association of Chiefs of Police to roll out the new digital tool across the province. This evidence-based digital tool will support a better interaction between the person in crisis and the responder in the first instance. It will facilitate better assessments and enhance communication between police and clinicians by using the same language and providing the information doctors and nurses need at hand immediately.

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Mailing Address: Parliament Buildings Victoria BC V8V 1X4 In addition to other forms of training, experience and professional judgement, police officers will be able to use the information made available through HealthIM to help determine whether an individual should be transported to a hospital. When a police officer decides not to transport someone to hospital, when set up, the police officer can refer an individual to a mental health community response team. Throughout 2024, the project will continue to focus on the significant due diligence work to ensure successful implementation across all health authorities and police agencies. Active implementation will occur for several police agencies in 2024 and finalize by the end of 2025. Ongoing funding of \$1 million annually will be provided to continue to sustain the program.

In response to recommendation number 4, our government remains committed to improving mental health and addictions support and is working to deliver the mental health and addiction care people need to live full and healthy lives, including prevention, early intervention, harm reduction, treatment and recovery. The Ministry of Mental Health and Addictions has purview of mental health and substance use services and it is my understanding that they will also provide a response to this recommendation.

I note from the two recommendations to the Ministry of Public Safety and Solicitor General that they pertain to recommendations on officer response when attending incidents involving a person experiencing a mental health crisis. In British Columbia, binding provincial policing standards require that police officers take mandatory training in crisis intervention de-escalation (see standards 3.2.2 at: <a href="www2.gov.bc.ca/assets/gov/law-crime-and-justice/criminal-justice/police/standards/3-2-2-cid-training.pdf">www2.gov.bc.ca/assets/gov/law-crime-and-justice/criminal-justice/police/standards/3-2-2-cid-training.pdf</a>). This training is designed to ensure that police officers will be able to use crisis intervention and de-escalation techniques to effectively de-escalate crisis situations, including incidents involving intervention with a person experiencing a mental health crisis. The training supports officers in their critical thinking and risk assessments and also complements the National Use of Force Framework/ Incident Management Intervention Models.

Thank you again for bringing these recommendations to my attention. Police officers in British Columbia experience firsthand the impacts and challenges associated with responding to persons experiencing mental health or substance use crisis. When someone calls police seeking assistance when a person is in distress because of a mental health or substance use emergency, it is important that front line responders have the training and tools to ensure the person is safe and connected to the care they need.

Sincerely,

Mike Farnworth

Minister of Public Safety and Solicitor General

and Deputy Premier

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