

WELLNESS CHECKS

1. GENERAL

- A. It is the policy of HRP to conduct wellness checks to assess the overall well-being of individuals when there is concern for their health, safety, or general welfare. Under exigent circumstances, this may involve entering a residence without a warrant.
- B. Wellness checks may include requests to confirm the wellbeing of a person who is not responding, is unreachable, or is experiencing a mental health crisis. All calls for service whether known to be mental health related or not, shall be responded to with appropriate training and caution, and with an understanding that each situation requires a unique approach.
- C. HRP is committed to delivering responses that are culturally informed and sensitive to the circumstances of each individual case, ensuring safety and support during wellness checks.

2. POLICY

- A. Recognizing that calls for wellness checks may result in unexpected deaths, suicides, missing persons, mental health crises, medical emergencies, or the individual being in good health, HRP members should familiarize themselves with the related policies such as Sudden and Suspicious Death, Missing Persons, the Involuntary Psychiatric Treatment Act, and Mental Health Crisis Response.
- B. The preliminary investigation of all Wellness Checks shall be conducted by the Patrol Division.
- C. It is not the responsibility of HRP to conduct a wellness check on an individual who resides outside of HRP jurisdiction.
 - i. In the cases of complainants requesting a wellness check on an individual who resides outside of HRP jurisdiction, the member who takes the request shall direct the complainant to the appropriate agency.

COMPLAINT TAKER'S ROLE

- D. Upon receiving a request for a wellness check, Integrated Emergency Services (IES) or an HRP member taking the call shall gather information related to:
 - i. Relationship to the individual of concern;
 - ii. The reason for concern;
 - iii. The level of risk to the individual of concern (i.e. access to weapons, mental illness, health concerns);
 - iv. Location of individual of concern and/or the individual's residence;
 - v. Individual of concern's contact information;
 - vi. Complainant's contact information; and
 - vii. History of wellness checks/police interactions.

- E. Using appropriate prioritization in relation to the information received and risk to the individual's safety, IES will dispatch the appropriate HRP resources required to respond to the call for service.
- F. IES will query the individual of concern and relay any relevant information to officer(s) arriving at the scene.

RESPONDING OFFICER'S ROLE

- G. The responding officer's responsibility is to assess the needs of the individual in crisis and to respond accordingly. Thus, the exact procedures will vary depending on the situation.
 - i. If the concern for safety is a result of a mental health crisis or concern for a possible suicide attempt, officers shall refer to HRP's procedures for Mental Health Crisis Response and attempt de-escalation when safe and possible to do so.

ESTABLISH CONTACT

- H. The following steps should be taken when establishing contact for a wellness check:
 - i. When possible, prior to attempting physical contact with the individual of concern, officers shall attempt to contact them by phone. If there is no answer or identity/safety cannot be confirmed, officers shall continue with the procedures in this policy,
 - ii. If there is reason to believe that there is a significant risk of loss of life or injury to the individual, and that pinging their cellphone could assist in locating the individual, officers shall refer to HRP's policy Requests for Confidential Information from a Telecommunications Company and follow procedures,
 - iii. Prior to arriving at a scene responding officers shall acquire any information available from IES,
 - iv. Officers may enter a dwelling without permission from the resident or a warrant when there are exigent circumstances,
 - v. If officers must enter through force, officers shall request approval from supervisors prior to entering, and property damage should be minimized to the extent practical,
 - vi. If contact is made, and once safe to do so, officers shall inform the individual of the reason for their presence, ask for the individual's name, and if the individual is not a threat to themselves or others, officers shall inform them that they may refuse service:
 - 1. If an individual is not a threat to themselves or others and refuses service, officers are to leave the premises and may notify the complainant that contact has been made.

ASSESS THE SITUATION

- I. The primary duties of members while responding to wellness checks are to confirm that the individual of concern is safe. To do so, the following steps shall be taken:
 - i. Upon arrival, assess for any risks or threats of safety to the individual, the community, or officers,
 - ii. Officers shall check around the premise, and will note any signs that there is a lack of activity in or around the property,

- iii. Officers shall canvas the area and speak with neighbours/landlords/building managers/etc. to check for information or a housekey,
- iv. If no contact is made, and exigent circumstances exist to force entry into a premise, the officer is to obtain approval from a supervisor whenever possible.
 - 1. Upon approval, officers will check all doors and windows of the premise to determine where entry can be made with the least possible damage.
 - 2. If exigent circumstances do not exist to justify entry without a warrant, officers shall not force entry and will instead attempt other means to connect with the individual of concern.
- v. Once the decision is made to force entry, the officers will enter the residence and will loudly announce "POLICE" as they search the residence,
- vi. If initial contact is made, officers shall assess the status of the individual. Officers shall also identify themselves and the reason for their presence,
- vii. Based on the outcome, officers shall determine if additional service and/or resources are needed.

PROVIDE SERVICES

- J. The responding officer shall provide the appropriate services depending on the situation:
 - i. If medical attention is needed, officers shall request Emergency Health Services (EHS) to attend the scene and begin first aid response.
 - ii. If the individual is experiencing a mental health crisis, officers shall follow procedures detailed in the HRP Mental Health Crisis Response Policy.
 - iii. If the individual is found deceased, officers shall follow Sudden and Suspicious Death procedures.
 - iv. If specialized services or response is required, officers shall request assistance from specialized units with the approval of supervisory officers.
- K. If the individual does pose a threat to themselves or others, continue to re-assess the situation and attempt to bring a peaceful and appropriate resolution by utilizing de-escalation techniques. If required, follow procedures for Mental Health Crisis Response and the Involuntary Psychiatric Treatment Act (IPTA).
- L. If the wellness check results in the individual of concern not being located and there is still concern for the individual's safety; officers shall attempt to continue locating the individual and consider following proper procedures for Missing Persons.

DEPART FROM THE SCENE

- M. Once reasonable efforts have been made to provide resources or confirm the individual is safe, and identified risks have been alleviated, officers should depart the scene.
 - i. Prior to departure, officers shall provide the individual of concern with an incident number,
 - ii. If the dwelling was damaged upon entry, members shall ensure that it is secured prior to departing.

DOCUMENT THE INCIDENT

- N. Preparing a thorough report is essential whenever officers respond to a wellness check and especially when they enter a residence without a warrant. Wellness checks should be documented as follows:

- i. Officers shall complete a General Occurrence (GO) report for the call for service, the GO report shall include:
 1. The reason for the wellness check and any additional information provided by the individual of concern, and the status of the check.
- ii. During incidents where the individual is found in good health and the situation is easily resolved without need for further intervention, the investigation is considered closed,
- iii. Officers are required to complete an Emotional Disturbed Person (EDP) Contact Form when interacting with a Person with Mental Illness (PMI),
- iv. If officers enter the property by force due to exigent circumstances, the justification, means of entry, and damage to property shall be documented,
- v. Any recommendations for follow-up from officers to the original caller or to the individual of concern shall be documented. If the wellness check was a follow-up, that shall be documented as well.

3. DEFINITIONS

- A. **Cell phone ping (ping):** the process of locating a cell phone whereby the carrier transmits a signal to the phone and tracks its approximate location through the cellular network.
- B. **Crisis Intervention Training (CIT):** Specialized training in mental illness, de-escalation, and crisis intervention techniques.
- C. **Exigent Circumstances:** Allows for a peace officer to enter a house without a warrant during circumstances in which the peace officer: (a) has reasonable grounds to suspect the entry into the dwelling-house is necessary to prevent imminent bodily harm or death to any person; or (b) has reasonable grounds to believe that evidence relating to the commission of an indictable offence is present in the dwelling-house and that entry into the dwelling-house is necessary to prevent the imminent loss or imminent destruction of the evidence.
- D. **Mental Health Crisis:** An acute disturbance of thinking, mood, behaviour, or social relationship that requires immediate intervention which involved an element of unpredictability, usually accompanied by a lack of response to social controls and which may be defined as a crisis by the client, the family, or member of the community. A mental or behavioural crisis may include:
 - i. Suicidal behaviour
 - ii. An individual threatening harm to themselves and/or others;
 - iii. A psychotic break (sudden loss of contact with reality and/or bizarre behaviour);
 - iv. An unusual or prolonged reaction to traumatic event(s); and/or
 - v. Any behaviour that is unreasonably disturbing to the academic, work, or living environment.
- E. **Wellness Checks:** the health and status of an individual who, by way of community member or police reporting, has been brought to the attention of police as having concern for their well-being.
- F. **Well-being:** refers to the psychological, emotional, mental, and/or physical health of an individual.

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| Policy Owner | Superintendent Dave Boon |

By Order Of:



Chief Don MacLean
Chief of Police

