

**KANSAS CITY, MISSOURI POLICE DEPARTMENT
CRISIS INTERVENTION TEAM REPORT**

APPROVED BY [Signature]

CRN [REDACTED]

SERIAL # 4191

RELATED CRN

DATE 08-20-2014 TIME RECEIVED 1635 TIME ARRIVED 1650 TIME CLEARED 1710

SUBJECT	LAST NAME		FIRST NAME		INIT.	JR/SR	RACE	SEX	DATE OF BIRTH
	<u>[REDACTED]</u>		<u>[REDACTED]</u>		<u>[REDACTED]</u>		B	F	04/08/1993
	SSN.	STREET #	STREET NAME & CLASSIFICATION			APT. #	CITY	STATE	ZIP CODE
	<u>[REDACTED]</u>	<u>[REDACTED]</u>	<u>[REDACTED]</u>				Kansas City	MO	<u>[REDACTED]</u>
	RES. PHONE		BUSINESS/SCHOOL ADDRESS					BUSINESS PHONE	
<u>913-309-0030</u>									
WITNESS	REL/ACQ (NAME)		(ADDRESS)		(RESIDENCE PHONE)		(RELATIONSHIP)		
	<u>[REDACTED]</u>		<u>[REDACTED]</u>		<u>[REDACTED]</u>		<u>[REDACTED]</u>		
		ADDRESS					PHONE		

THREAT ASSESSMENT:

Suicide Threat: ☐ YES ☒ NO

Suicide Attempt: ☐ YES ☒ NO

WEAPON/METHOD:

☐ Firearm ☐ Edged Weapon ☐ Hanging ☐ Carbon Monoxide
☐ Overdose ☐ Jumping ☐ Police ☐ Other

Threat to Harm Police: ☐ YES ☐ NO

Threat to Harm Other(s): ☐ YES ☐ NO

WEAPON/METHOD:

☐ Firearm ☐ Edged Weapon ☐ Physical Force
☐ Other

INJURIES: ☒ None

Subject-Prior to Police Contact: ☐ YES ☐ NO ☐ Unknown

Type/Extent of Injury

Subject-Due to Use of Force: ☐ YES ☐ NO ☐ Unknown

Type/Extent of Injury

Injury to other person: ☐ YES ☐ NO ☐ Unknown

Type/Extent of Injury

Injury to Police: ☐ YES ☐ NO

Type/Extent of Injury

POLICE HOLD: ☐ YES ☒ NO

Reason

NARRATIVE

MENTAL HEALTH FACILITY:

☐ YES ☒ NO

Location

TRANSPORTED BY:

☐ Police ☐ Ambulance ☐ Other

SUBSTANCE USE:

☒ None
☐ Unknown ☐ Marijuana
☐ Alcohol ☐ Methamphetamine
☐ Cocaine ☐ Overdose
☐ Heroin ☐ Other

MEDICATIONS:

☒ YES ☐ NO

List Unknown

CASE WORKER:

☐ YES ☒ NO

Name

Facility

Phone

On 08-20-2014, at 1640 hours, P.O. Reeves (R-329) and I (R-367) were dispatched to [REDACTED] on a reported Disturbance involving an EDP.

Officer

Serial #

NARRATIVE

CRN [REDACTED]

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DATE 08-20-2014

Upon arrival contact was made with [REDACTED] who stated she contacted the police for assistance with her granddaughter ([REDACTED]). [REDACTED] further stated she was babysitting [REDACTED] while her guardian was away. [REDACTED] added that [REDACTED] has been diagnosed with an unknown mental issue which is control by medication and further treatment. [REDACTED] advised me that [REDACTED] became uncooperative and highly agitated and began to destroy things in her home. [REDACTED] was unable to regain control of the situation; therefore she contacted the police department.

[REDACTED] was contacted who advised me that she was upset and wanted to be alone. [REDACTED] stated she had no reason for being angered, but wanted to be away from [REDACTED]. [REDACTED] advised me that a doctor diagnosed her with ADHD and prescribed her two unknown medications to take daily. [REDACTED] stated she would calm down if she was left alone with her favorite books to read. [REDACTED] further stated she was not a threat to herself or others.

The situation was resolved after obtaining a couple of books for [REDACTED] to read. [REDACTED] was not a threat; therefore further action was not needed. This report was taken for documentation.

/s/L.Wiggins #5216

Officer [REDACTED] Serial # [REDACTED]