

Los Angeles Police Department and the Los Angeles County Department of Mental Health

Law Enforcement and Mental Partnerships



A collaboration serving the City of Los Angeles

Presenter

LOS ANGELES POLICE DEPARTMENT

Captain Darnell Davenport, MPA
Commanding Officer
Southwest Patrol Division



LAPD Historical Response to Mental Illness

Why Change was required?

Eula Love shooting in South Los Angeles, changed LAPD shooting policy from “shoot to kill” to “shot to stop.”

1979

Crack cocaine epidemic. LAPD for the first time experience drug induced mental illness and had no real plan to address it.

1980

Mitchell, who was pushing a shopping cart along La Brea Avenue, lunged at officers with a screwdriver and that one of the officers stumbled and then fired, killing her.

2000

Federal Consent Decree to improve respond to mental illness.

2001

San Diego study found that the least experienced officers were assigned mental illness calls and that within 15 minutes of dispatch a Use of Force occurred.

LAPD changed dispatch policy for mental illness calls.

2016



LAPD in 2016

Community Focused with collaborations

What is the System-wide Mental Assessment Response Team?



SMART received 14, 238 phone calls from patrol officers seeking guidance on handling people in the midst of a mental health crisis

Provided crisis intervention in response to 4, 724 calls in 2014 saving the LAPD 6,600 hours of patrol time.

Mental Evaluation Unit

The LAPD's MEU is responsible for defusing potentially explosive encounters with people in the midst of a mental health crisis. The MEU boasts specialized teams known as "System-wide Mental Assessment Response Team." SMART –comprise of a police officer and a psychologist, psychiatric nurse, or other clinician. There are 111 officers assigned and 44 DMH employees.

Presenter

LOS ANGELES POLICE DEPARTMENT

Senior Lead Officer Mark Wheeler
Mental Evaluation Unit
Detective Support and Vice Division



What is the mission of the collaborative between LAPD and LACDMH?

The Mission is to reduce the potential for violence during police contacts involving people suffering from mental illness while simultaneously assessing the mental health services available to assist them.

This requires a commitment to problem solving, **partnership**, and **supporting a coordinated effort** from law enforcement, mental health services and the greater community of Los Angeles.



What Are the Goals?

1. Prevent unnecessary incarceration and/or hospitalization of mentally ill individuals.
2. Provide alternate care in the least restrictive environment through a coordinated and comprehensive system-wide approach.
3. Prevent the duplication of mental health services.
4. Facilitate the speedy return of police patrol units to patrol activities.



When Do I Call The Police?

If your family member is in a crisis and is:

- A danger to themselves, and/or
- A danger to others, and/or
- Gravely disabled (the person is unable to appropriately provide basic personal needs such as food, clothing, or shelter. This inability must be due to a mental disorder and not merely a lifestyle or personal choice)
- All of the above due to a **MENTAL ILLNESS**.

Call 911

Something To Think About



You are asking a stranger to come into your home to resolve a crisis. They will only have the information that you provide them. It is a good practice to **gather** as much of this **information** as possible **before a crisis occurs.**

911 Checklist

Hold this list in your hand when you call **911**, so you can read from it

Give the dispatcher the following information:

- **Your name**
- **Address** to which the police should respond
- **Nature** of the crisis (Why do you need the police?)
- **Prior** or **current violent behavior**
- **Weapons** or **access to weapons**
- **Name** of your family member in crisis
- **Age** of family member in crisis



911 Checklist Continued.....

- **Height** and **weight** of family member in crises
- **Clothing** description of family member in crises
- **Current location** of family member in crises
- **Diagnosis** (Mental Health and/or Medical)
- Current **medications** (On or Off?)
- **Drug use** (current or past)
- **Triggers** (what upsets them?)
- State what has helped in **previous police contacts**
- **Identify** other **persons in the residence** or at the location

The Police Response

What to expect?... Who will respond to your crisis?

1. The **911** operator will dispatch **uniformed patrol officers** to your location.
2. Officers will detain your family member, which **will include handcuffing** and is for the safety of everyone, including your family member.
3. Officers will conduct a preliminary investigation to determine whether a crime occurred.
4. Officers will conduct a preliminary mental health investigation to determine whether your family member is a **danger to self, danger to other(s), or gravely disabled** due to a mental illness (CA WIC §5150).
5. Your statements and historical information are an important part of the mental health investigation (CA WIC §5150.05).

The Police Investigation



1. Patrol Officers will inquire about any **firearms** or **other deadly weapons**, and in most cases will seize them for safe-keeping (pursuant to CA WIC §8102).
2. Patrol Officers will notify the MEU and a SMART unit (officer & clinician) will be dispatched, if available.
3. If your family member is an adult the investigating officers and/or the SMART Unit **cannot** disclose information about him/her due to medical records-related privacy laws.

Field Protocols for call Management and Diversion

- After an incident is tactically stable, patrol officers must conduct an assessment of the detained individual to determine whether there is mental illness and whether the individual meets criteria for an involuntary mental health hold under section 5150 of the WIC. The incident can be managed by a SMART unit, if available, or by the patrol officers with the guidance of the MEU.
- When a person with suspected mental illness has been taken into custody for a criminal offense, MEU will be contacted **prior** to the person being booked .

Arrest and Booking

- When a subject is detained for a felony crime or high-grade misdemeanor or the subject has warrants, **the criminal matter takes precedence.**
- Booking the arrestee for misdemeanor warrants is at the discretion of the Area watch commander. Arrestees who suffer from mental illness may be booked at any LAPD jail facility.
- The MEU is available for advice and assistance to facilitate the transfer of the subject to a Los Angeles County Jail Facility.
- Any questions concerning the arrest, booking, housing, or transfer of an individual suspected of suffering from a mental illness should be directed to the MEU Watch Commander.

Jail Monitoring

- All Adult Corrections Officers (ACOs) have received eight hours of training titled “Mental Illness Introduction for Adult Corrections Officers.”
- All sworn jail personnel have received four hours of mental illness training.
- All arrestees are screened during the booking process and ACOs ensure that the arresting officers have notified the MEU if the arrestee indicated that he/she suffers from mental illness, which will prompt an MEU information report.
- If an arrestee is determined to be in a mental health crisis or is suffering from a chronic mental illness, and the arrestee can be released on their own recognizance or arrange bail, jail personnel or a patrol unit will conduct the mental illness assessment and transport to a psychiatric facility.
- The MEU provides telephonic advice, documents the incident, and directs transporting units to appropriate hospitals.

Diversion Programs

Pre-booking diversion occurs via the patrol officers or via SMART when:

- A crime was committed;
- The crime is a low grade misdemeanor;
- A report or citation and release is completed; and,
- The person with mental illness is taken to the Psychiatric Emergency Department coordinated through the MEU.

Post-booking diversion occurs when the subject can be released on their own recognizant or bail is posted. The subject can also be diverted to a mental health treatment provider during the arraignment process or as a condition of their plea or conviction.

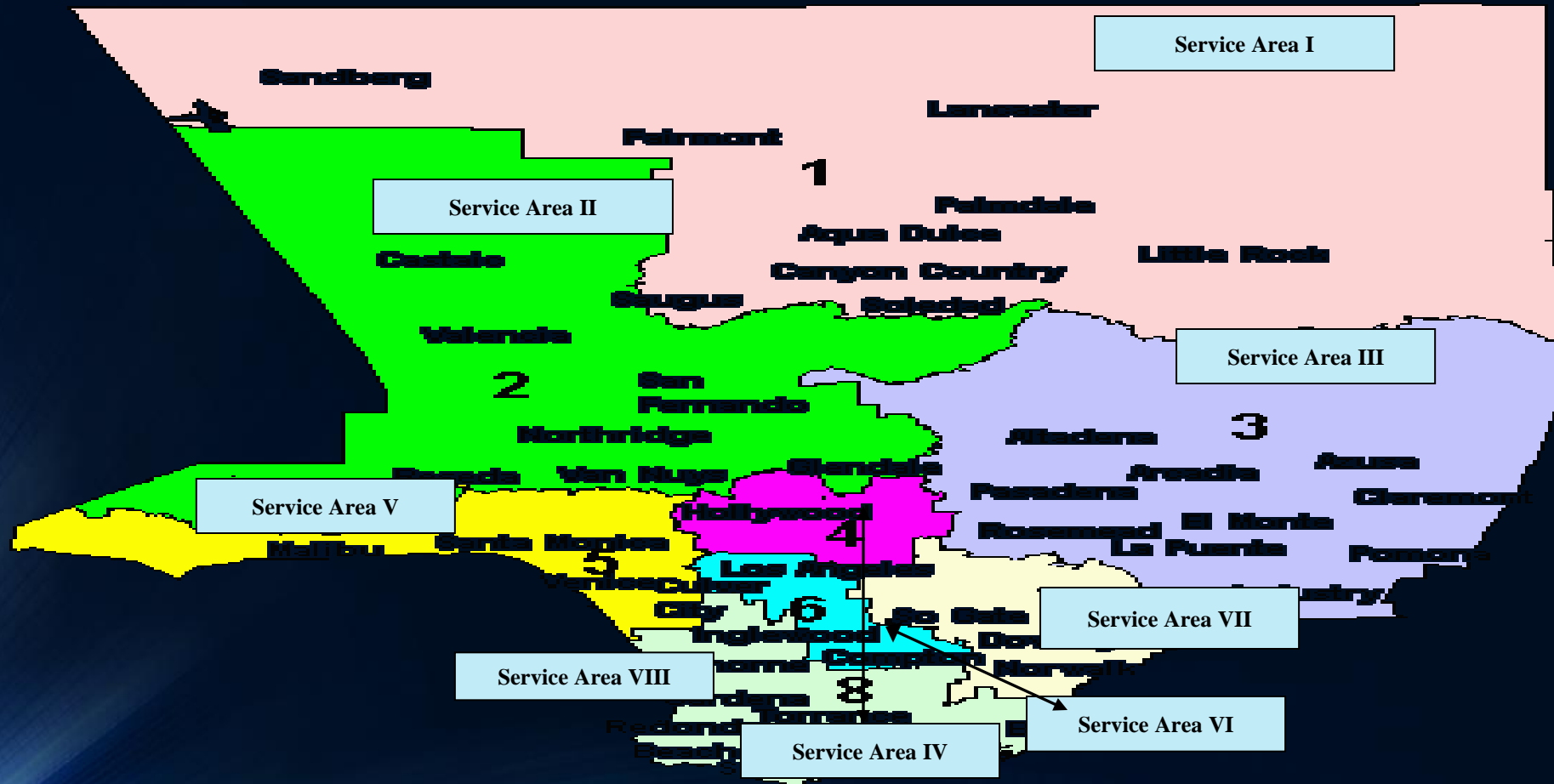
Presenter

LOS ANGELES COUNTY DEPARTMENT OF MENTAL HEALTH

Mr. Chuck Lennon, LCSW
Mental Health Clinical Program Head
Law Enforcement Programs



EOB Serves Los Angeles County



Police Departments with Mental Health Law Enforcement Teams

January 2017



POLICE DEPTS BY LAW ENFORCEMENT TEAM STATUS

- No
- Yes

BOUNDARIES

- Police Division by LET Team Status - Yes
- Police Division by LET Team Status - No
- Other Law Enforcement (e.g. Sheriff)
- Supervisory District
- Service Area

Blue Label = Police Division Name

CITY POINT

- City/Community



Map updated Jan 11, 2017
by ESRI/GeoInfo/GeoInfo
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Table 1: EMERGENCY OUTREACH BUREAU
Field Response Operations

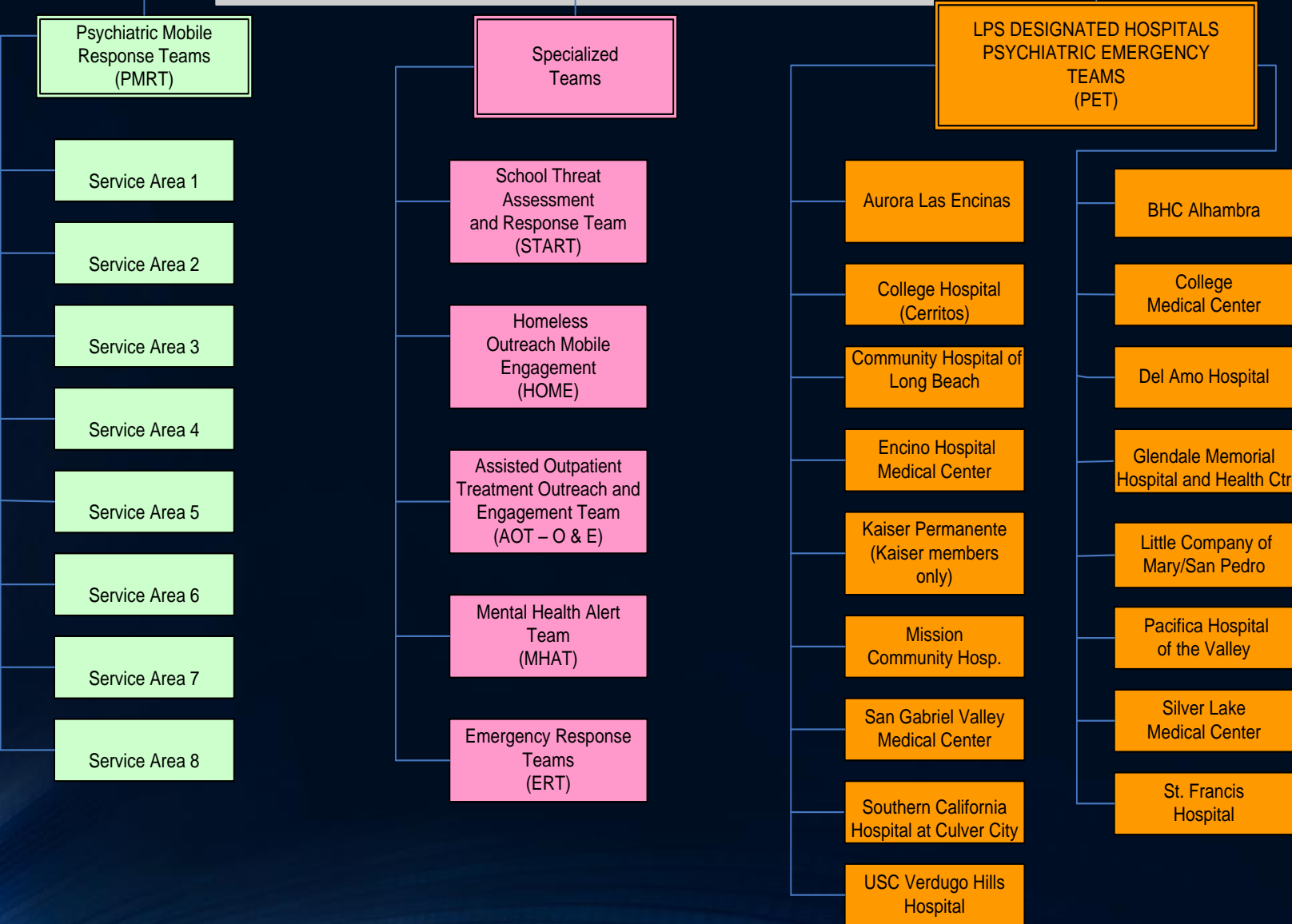


Table 2: EMERGENCY OUTREACH BUREAU
Field Response Operations
Law Enforcement Team Collaboratives

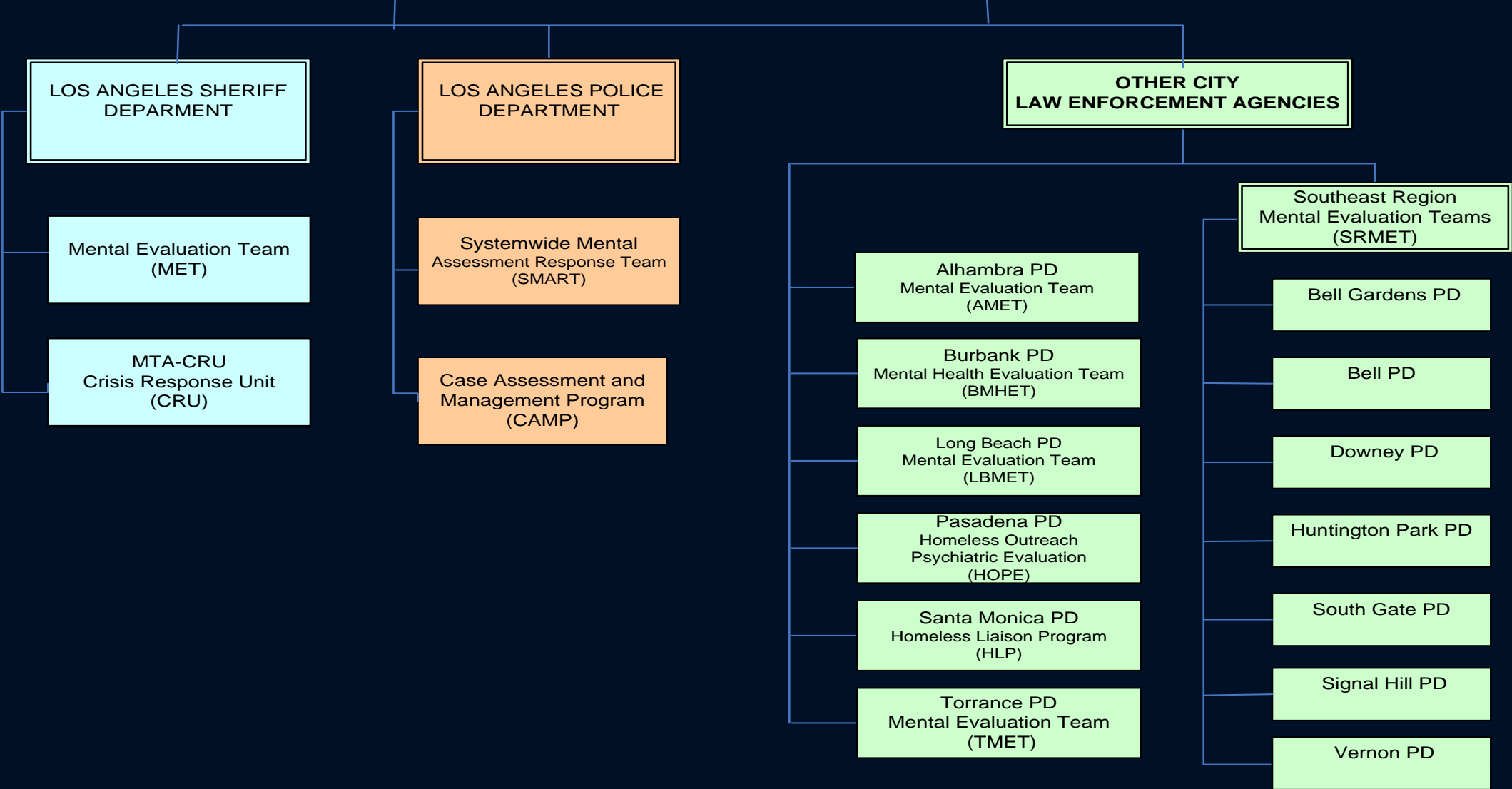


Table 3: EMERGENCY OUTREACH BUREAU
Field Response Operations
Law Enforcement Team Collaboratives (Cont.)

**OTHER CITY LAW
ENFORCEMENT AGENCIES**

**BEACH CITIES
Mental Evaluation
Teams (BCMET)**

Hermosa Beach PD

Manhattan Beach PD

Redondo Beach PD

**SOUTH BAY
Mental Evaluation
Teams (SBMET)**

Gardena PD

Hawthorne PD

**EAST SAN GABRIEL
Mental Evaluation Teams
(ESGMET)**

Azusa PD

Covina PD

Glendora PD

West Covina PD

**WEST SAN GABRIEL
Mental Evaluation Teams
(WSGMET)**

Arcadia PD

Irwindale PD

Monrovia PD

South Pasadena PD

Culver City PD
Mental Evaluation
Team (CCMET)

Inglewood PD
Mental Evaluation
Team (IMET)

Monterey Park PD
Mental Evaluation
Team (MPMET)

Montebello PD
Mental Evaluation
Team (MMET)

Pomona PD
Mental Evaluation
Team (PMET)

Santa Monica PD
Mental Evaluation
Team (SMMET)

Psychiatric Mobile Response Teams (PMRT)

The PMRT is composed of paraprofessional staff of 8 to 10 members consisting of social workers, psychiatric nurses, and psychiatric technicians. One team is assigned to each LA County service area. They respond 7-days a week between 8:00 a.m. and 2:00 a.m. They evaluate community members to determine if they are dangerous to self/others, and/or gravely disabled. The PMRT will arrange for transport to inpatient psychiatric facility. Additionally, they provide follow-up and linkage to outpatient mental health services.

The PMRT provides field response to:

- Residences,
- board and care facilities, and
- other community settings.

Field Response Services

- Crisis Intervention
- W.I.C. 5150 or 5585 Assessments
- 911 Response
- Homeless Outreach or Engagement
- Targeted School Threat Response
- Referrals and Follow-up
- Critical Incident or Disaster Response

Involuntary Psychiatric Hospitalization Welfare Institution Codes 5150 or 5585

- Danger to Self -Anyone Expressing or Posing Danger to Self.
- Danger to Others - Anyone Expressing/Posing Danger to Others.
- Grave Disability - Anyone Showing Signs of Grave Disability.
- All of the Above: Due to a Mental Disorder.
- Provide field response to:
 - residences,
 - board and care facilities,
 - group homes, and
 - other community settings.

DMH (LAW Enforcement Teams)

DMH clinician and law enforcement officer co-response to 911 or patrol officers requests on calls involving mentally ill individuals for several police departments as follows:

- Alhambra Police Department
- Beach Cities Police Departments (Hermosa, Manhattan, etc)
- Burbank Police Department Mental Health Evaluation Team
- Culver City Police Department
- East San Gabriel (Azusa, Covina, Glendora and West Covina)
- Inglewood Police Department
- LA Police Department Case Assessment and Management
- LAPD System wide Mental Assessment Response Team (SMART)
- LASD Metropolitan Transit Bureau Team

- Long Beach Police Department
- Los Angeles County Sheriff's Department MET
- Monterey Park Police Department
- Montebello Police Department
- Pasadena Police Department Homeless Psychiatric Evaluations
- Pomona Police Department
- Santa Monica Police Department Homeless Liaison Program
- South Bay Police Departments (Gardena & Hawthorne)
- Southeast Region Police Departments (Bell, Bell Gardens, Downey, Huntington Park, Signal Hill, South Gate & Vernon)
- Torrance Police Department
- West San Gabriel Police Departments
- Whittier Police Departments (Santa Fe Springs & Whittier)

Law Enforcement Teams

- Teams composed licensed social workers and mental health clinicians, psychiatric nurses.
- Respond to 911 calls for service involving mentally ill individuals.
- Evaluate for danger to self/others, grave disability and arrange for transport to inpatient psychiatric facility.
- Provide follow-up and linkage to out patient mental health services.

DMH-DCFS Joint Response

For DCFS minor, PMRT or LET Staff will contact DCFS and initiate a joint DCFS-DMH assessment and necessary follow-up to address mental health needs of the child.

FRO Bulletin #001 “24/7 Crisis Response to DCFS Children” and FRO Bulletin #002 “DCFS Real Time Notification by field Response Operations.”

Los Angeles County Sheriff's Department Metropolitan Transit Authority (MTA) Crisis Response Unit (CRU)

The MTA CRU responds to calls for service involving the homeless mentally ill on bus, rail or any other MTA property.



Assisted Outpatient Treatment (AOT-LA)

- Allows LAC DMH to serve seriously mentally ill persons at substantial risk of deterioration and/or detention under section 5150 of the WIC as a direct result from poor psychiatric treatment compliance.
- AOT-LA included extensive outreach and engagement to engage them voluntarily in Full Service Partnership (FSP) services.
- If person refuses services, AOT-LA may petition court to order person into psychiatric outpatient treatment, i.e., FSP.

Homeless Outreach Team

- Intensive field response to seriously mentally ill homeless persons at risk for incarceration or involuntary hospitalization.
- Linkage to outpatient mental health services, physical health providers, general relief, housing or shelter.
- Collaborate with other field-based teams for appropriate linkage (e.g., homeless veteran).
- Evaluation for Section 5150 of the WIC and transport to inpatient psychiatric facility, if needed.

LPS Designated Psychiatric Inpatient Facilities

- Facilities designated by LACDMH to evaluate and treat persons involuntarily detained under LPS Act.
- Forty-one LPS designated facilities which are involuntary and 2 are voluntary inpatient facilities.

Designated Bed for Adults	Designated Beds for Minors	Voluntary Beds
2147	267	100+

Suicide Assessment Five Step Evaluation and Triage

Risk Factors

Protective Factors

Suicide Inquiry

Risk Evaluation

Documentation

Procedures

Call ACCESS at (800) 854-7771 or PMRT SA 7 at (310) 482-3260, Monday through Friday, between 8:00a.m. and 5:00 pm.

Everyone with knowledge of the crisis must be available, at minimum by telephone.

Often decisions by the Team are based on collateral information

Teams cannot be left alone for safety.

If the situation changes, immediately notify ACCESS or PMRT.

Adults or minors in crisis should not be left alone.

Call 911 if the situation warrants it.

Once law enforcement and DMH arrive what is the procedure (May take up to 3-5 hours)

Teams interviews client and all collaterals

Determination of disposition is made

Meet with the caller and provide a disposition

Hospital or urgent care (Bed secure), if needed.

Ambulance Requested, if needed.

Referrals made to outpatient services when hospitalization is not required.

Follow-up Services

PMRT handles the initial call.

Referral to Start, if required.

Linkage to mental health services.

References

Life Threatening Emergency

CALL

911

Non-Emergency Resources
Los Angeles County Department
of Mental Health
ACCESS
24-Hour Hotline
(800) 854-7771

National Alliance of Mental Illness
(NAMI)
(800) 950-6264
[Http://namilacc.org/](http://namilacc.org/)

LAPD Intervention Programs (Preparing Youth for the future)

Police Orientation Preparation Program

- Obtain Associate Arts (AA) Degree
- Allows senior in high school to complete college courses at LAPD academy with other youth. Upon completion of high school and one additional year of education the student will have a AA degree.

Police Academy Magnet Schools

- Youth interested in public service can attend. Designed to expose youth to law enforcement.

Cadet Leadership Program

- Mentor students by helping to instill self esteem, discipline, leadership, scholastic excellence, and life-skills development.



End of Presentation

Questions?

