

INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM A MENTAL ILLNESS

The purpose of this Field Notebook Divider is to summarize general guidelines when dealing with a person suspected of suffering from a mental illness.

5150 Welfare and Institutions Code

An Application for a 72-hour Detention for Evaluation and Treatment Form may be initiated when an officer conducts an assessment of a person believed to be suffering from a mental illness and the officer concludes there is **probable cause to believe** any or all of the following conditions exist:

1. **DANGER TO SELF:** **Due to a mental disorder**, a person has threatened, attempted, or does physical harm to themselves, or has engaged in behavior, which deliberately or otherwise, has a likely consequence to cause harm to themselves.
2. **DANGER TO OTHERS:** **Due to a mental disorder**, a person has threatened, attempted, or does harm to others, or has engaged in behavior, which deliberately or otherwise, has a likely consequence to harm others.
3. **GRAVELY DISABLED:** **Due to a mental disorder**, 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.

Note: Section 5585 Welfare and Institutions Code (WIC) is used for juveniles.

Conducting an Assessment

In order to determine if a person meets the criteria for an application for an evaluation pursuant to 5150 or 5585 WIC, officers should conduct an assessment of the individual. Questions should be clear, concise, and asked in a calm, non-threatening manner. Officers should take into consideration medications, or lack thereof, when conducting an assessment.

5150.05 Welfare and Institutions Code Available and Relevant Information

When determining if probable cause exists to take a person into custody pursuant to 5150 or 5585 WIC, officers *shall* consider available relevant information from any mental health provider, or other credible person, including family members or witnesses. The subject's prior mental health history may be taken into consideration, however, it solely would not merit a subsequent involuntary psychiatric hospitalization.

When conducting an assessment of a person suspected of suffering from a mental illness, officers should ask any relevant questions to determine if an application for an evaluation should be initiated. The following suggested questions are provided as a guideline:

- How are you feeling today?
- Are you taking any medications? Are you still taking them and what are they? Inspect the medication.
- Are you hearing voices others can't hear? If so, what are the voices saying to you?
- Do you want to hurt or kill yourself or someone else?
- Do you have a history of mental illness? If so, name the clinic or hospital where services have been obtained.
- Have you ever been admitted into a psychiatric hospital or have you ever been hospitalized for a psychiatric reason?
- Why were the police called today?
- Do you have the means to hurt yourself?
- Do you have access to weapons?
- How do you care for yourself? (i.e., as lodging, income, work)
- Do you have a doctor, counselor, or therapist? (What is his/her name?)
- What do you plan to do when/if we leave?
- How is your sleep? How many hours do you sleep?
- Do you take street drugs? (If yes, what type?)
- Have you recently suffered a traumatic episode?
- Have you threatened or attempted to use violence or acted dangerously towards yourself or others?
- Do you have any family history of mental illness, or suicide attempts?

Field Encounters

- Control and assess the situation
- Officers *shall* handcuff the subject. (Manual Section 4/217.36)
- Complete the Field Interview Report, Form 15.43.00.
- Conduct a Want and Warrant check.
- Check the Automatic Firearm System (AFS) (NECS system) for firearms.
- Interview family, neighbors, and witnesses.
- If firearm is present, seize and book pursuant to Section 8102 WIC.
- Interview the subject.
- Notify the MEU at (213) 996-1300 (Manual Section 4/260.20).
- A SMART Unit will be dispatched if available.
- If NOT AVAILABLE, a MEU number will be issued.
- Complete the Application for 72-hour Detention for Evaluation and Treatment Form (MH 302).
- Provide advisement pursuant to Section 5150(f)(1) WIC, also located on top right of Application for 72-hour Detention for Evaluation and Treatment Form (MH 302).
- Transport the subject to the designated facility.
- Fax and gray mail (Mail Stop 400) a copy of the completed Application Form to (213) 996-1320.

Note: Upon request, uniformed officers shall assist the Lanterman-Petris-Short (LPS) Act-designated County Psychiatric Mobile Response Teams, LPS designated mental health clinician, the court-designated conservator, or court mandated treatment provider in the apprehension of persons suffering from a mental illness, or violent mental patients who are being placed on a mental health hold (Manual Section 4/260.20).

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TELEPHONE NUMBERS FOR POLICE USE ONLY

LAPD MEU/SMART (213) 996-1300	MEU FAX (213) 996-1320	
LASD Inmate Reception Center (IRC) (213) 893-5324	LASD Century Regional Detention Facility (CDRF) (323) 568-4506	
Harbor UCLA Medical Center	1000 West Carson Street, Torrance, CA	Psychiatric ER (310) 222-3510
L.A County USC Medical Center	1983 Marengo Street, Los Angeles, CA	Psychiatric (323) 409-6861
Olive View Medical Center	14445 Olive View Drive, Sylmar, CA	Psychiatric (818) 364-4433

Arrest and Booking

When a subject is a suspect in a felony crime or high-grade misdemeanor, or the subject has warrants, the criminal matters shall take precedence. If the subject is under arrest for a low grade misdemeanor, misdemeanor warrant, or infraction and meets the criteria for an Application for 72-Hour Detention for Evaluation and Treatment, booking is at the discretion of the Area watch commander. Arrestees suffering from mental illness may be booked at any Department jail facility. Brief information concerning the mental illness should be documented in any booking reports and under the "Additional" heading in the Arrest Report. The MEU Detective Support and Vice Division is available for advice and assistance in facilitating 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.

Notifications

When the only reason for detention is the person's suspected mental illness, the MEU **SHALL** be contacted **PRIOR** to transporting an apparently mentally ill person to any health facility or hospital. **Exception:** In those situations where the subject is injured and requires immediate medical treatment, the MEU *shall* be contacted after the subject is transported to an appropriate medical facility.

When a person with suspected mental illness has been taken into custody for a criminal offense, the MEU **SHALL** be contacted **PRIOR** to the person being booked (Department Manual Section 4/260.20).

When an officer receives information that a welfare check is being requested for a person suspected of suffering from a mental illness, the officer, when reasonable, shall conduct a search of the Department of Justice (DOJ), Automated Firearms System (AFS), via the California Law Enforcement Telecommunications System (CLETS), to determine whether the person is a registered owner of a firearm, per Penal Code Section 11106.4.

Officers who receive information from a mental health professional regarding a potential threat to any person (Tarasoff Notification) *shall* immediately notify the MEU.

Hospital or Psychiatric Facility Patients

When an Los Angeles Fire Department Rescue Ambulance unit has transported a person to a medical facility for medical reasons due to a suicide attempt, officers are required to respond to the hospital and conduct an investigation. Officers should also advise the paramedics and the hospital staff that the subject requires a psychiatric evaluation by the hospital mental health staff or LA County Psychiatric Mobile Response Team (PMRT). Officers are not required to remain with the subject until the subject is medically cleared. Officers may be advised by the MEU to complete an application for an evaluation.

If a mentally ill person is a patient at any hospital, or secure facility, officers should not remove the subject from that facility. It is the facility staff's responsibility to arrange for the proper security and care for any patient in their facility. Officers may contact the MEU for advice.

Mandatory Confiscation and Custody of Firearms or Other Dangerous Weapons

Whenever a person who has been detained or apprehended for examination of his/her mental condition, or who is a person described in Sections 8100 or 8103 of the WIC, is found to own, has possession of, or is in control of, any firearm whatsoever, or any other deadly weapon, that firearm/deadly weapon shall be confiscated by any law enforcement peace officer/agency and shall retain custody of the firearm or other deadly weapon. "Deadly weapon," as used in this section is described in Section 8100 WIC. *A Receipt and Notice of Rights for Confiscated Firearms/Other Deadly Weapons, Form 10.10.05, must be issued for any weapons confiscated. Officers must telephonically notify the MEU of the seizure of firearms and be guided by the advice of the investigator on duty (Manual Section 4/260.25).* A copy of any reports associated with the confiscation should be forwarded to the MEU/Case Assessment Management Program (CAMP) Unit, Stop No. 400, as soon as possible.

If a firearm or other deadly weapon within the residence or premises is owned by a person **other than** the person being detained or apprehended pursuant to WIC Sections 5150, 8100 or 8103, and the firearm or deadly weapon is secured and not accessible to the person being detained, officers must not seize the firearm or other deadly weapon. The officer(s) shall provide the owner a Release of Firearm Advisement, Form 10.10.06, which provides him/her with an overview of the law and the responsibilities delineated within WIC Section 8101.

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Note: A copy of the patient Property Receipt and the Release of Firearm Advisement, Form 10.10.06 must be sent via Department mail to MEU.

Mental Illness Disposition Codes

Officers SHALL use one of the six mental illness-related incident disposition codes to clear all incidents dispatched as involving a person suspected of mental illness (e.g., "918-person with mental illness," "245-ADW suspect, possibly mentally ill").

1. **ARM - Arrest, Indication of Mental Illness**
Subject arrested, and exhibits indication of mental illness.
2. **HOM - Hospitalized/hold, Indication of Mental Illness**
Subject met California Welfare and Institutions Code Section 5150 (5150 WIC) hold criteria and was hospitalized.
3. **REM - Referral, Indication of Mental Illness**
Subject exhibits signs of mental illness, but does not meet requirement for a hold or arrest; subject was released with referral advice.
4. **NMI - No Indication of Mental Illness**
Subject does not exhibit any indication of mental illness.
5. **ARN - Arrest, No Indication of Mental Illness**
Subject arrested, and does not exhibit any indication of mental illness.
6. **GOA - Gone on Arrival**
All parties [person(s) reporting or subject] cannot be located for officers to make a determination if mental illness is involved.

Referrals

When a person does not meet the criteria for 5150 WIC, consider providing referral information to the subject and his/her family. If the subject voluntarily wants to receive treatment, refer the subject to a psychiatric ER facility or urgent care center. These locations can be obtained from the MEU.

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| <input type="checkbox"/> LA County Mental Health Health/Crisis Help Line (800) 854-7771 | <input type="checkbox"/> Autism Society of America (562) 804-5556 |
| <input type="checkbox"/> Mayor Crisis Response Team, via RACR (213) 484-6700 | <input type="checkbox"/> Alzheimer's Safe Return (800) 272-3900 |
| <input type="checkbox"/> LA County Suicide Prevention and Survivor Hotline/
<i>Didi Hirsch 24-hour Crisis Line</i> (877) 727-4747 | <input type="checkbox"/> Child Abuse Hotline (800) 540-4000 |
| <input type="checkbox"/> Alzheimer's Association Help Line (800) 272-3900 | <input type="checkbox"/> Elder Abuse Hotline (800) 992-1660 |
| | <input type="checkbox"/> Teen Line (800) 852-8336 |

Critical Incidents

The MEU should be contacted by the first responding unit at a critical incident, such as a possible barricade, jumper, or other crisis where the psychological status of a subject, witness, or other involved person may be in question. Be prepared to give the MEU Desk the following information if available:

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| <input type="checkbox"/> Synopsis of situation. | <input type="checkbox"/> From what direction should the SMART Team/CAMP Unit respond? |
| <input type="checkbox"/> Subject's information, if known. | <input type="checkbox"/> Has Metropolitan Division been contacted? Are they responding? |
| <input type="checkbox"/> Number of involved persons. | |
| <input type="checkbox"/> Command post location and telephone number, if available. | |