OFFICE OF THE CHIEF OF POLICE

ADMINISTRATIVE ORDER NO. 9

August 15, 2013

SUBJECT: INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM MENTAL ILLNESS - FIELD NOTEBOOK DIVIDER, FORM 18.47.00 -

REVISED; AND, RADIO CALL DISPOSITION CODE "ARN" -

ACTIVATED

A recent audit by Internal Audits and Inspections PURPOSE: Division revealed that the correct Mobile Data Computer disposition codes were not being properly utilized to document the disposition of dispatched radio calls involving persons suspected of mental illness. To assist officers in utilizing the correct disposition codes, a list of the codes have been added to the Incidents Involving Persons Suspected of Suffering from Mental Illness - Field Notebook Divider, Form 18.47.00. This Order also activates mental illness incident disposition code "ARN" - Arrest, No Indication of Mental Illness. All other mental illness disposition codes and procedures outlined in Operations Order No. 8, dated May 16, 2007 entitled, Incident Disposition Codes for Incidents Involving Persons Suspected of Mental Illness - Revised, will remain valid. The Department has ensured that all of the codes are compatible with the Mobile Data Computers.

PROCEDURE:

- I. ACTIVATION OF NEW MENTAL ILLNESS DISPOSITION CODE. After arresting the suspect and making a determination that there was no indication of mental illness, officers must use the new disposition code:
 - * ARN Arrest, No Indication of Mental Illness.

Example: A call is dispatched as a "918M - Male with mental illness wandering in and out of traffic." Upon investigation, officers determine that the subject does not suffer from mental illness and does not meet the criteria for a 5150 Welfare and Institutions Code (WIC) hold. However, while officers are conducting their investigation a victim arrives to the scene and alleges that the subject is responsible for a robbery. The officers determine that probable cause exists for the crime and arrest the subject. In this instance the officers must use "ARN" to clear the incident.

II. INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM MENTAL ILLNESS - FIELD NOTEBOOK DIVIDER, FORM 18.47.00 - REVISED. The notebook divider has been revised. The following radio call disposition codes are now listed:

- ARM Arrest, Indication of Mental Illness. Subject arrested, and exhibits indication of mental illness;
- **HOM** Hospitalized/hold, Indication of Mental Illness. Subject met 5150 WIC hold criteria and was hospitalized;
- REM Referral, Indication of Mental Illness. Subject exhibits signs of mental illness, but does not meet the requirement for a hold or arrest; subject was released with referral advice;
- NMI No Indication of Mental Illness. Subject does not exhibit any indication of mental illness;
- ARN Arrest, No Indication of Mental Illness. Subject arrested, and does not exhibit any indication of mental illness; and,
- 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.

FORM AVAILABILITY: A copy of the Incidents Involving Persons Suspected of Suffering from Mental Illness - Field Notebook Divider is attached for immediate use and duplication, and is available in LAPD E-Forms on the Department's Local Area Network (LAN). All other versions of this form must be marked "obsolete" and placed into the divisional recycling bin.

AUDIT RESPONSIBILITY: The Commanding Officer, Internal Audits and Inspections Division, will review this directive and determine whether an audit or inspection will be conducted in accordance with Department Manual Section 0/080.30.

Chief of Police

Attachment

DISTRIBUTION "D"

INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM 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 (WIC)

An Application for a 72- hour Detention for Evaluation and Treatment 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. <u>DANGER TO SELF:</u> <u>Due to a mental disorder</u>, 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. <u>DANGER TO OTHERS</u>: <u>Due to a mental disorder</u>, 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. <u>GRAVELY DISABLED</u>: <u>Due to a mental disorder</u>, 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 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 WIC Available and Relevant Information

When determining if probable cause exists to take a person into custody pursuant to 5150 or 5585 WIC, officers *must* 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? How do you care for yourself? (Such as lodging, income, Are you taking any medications? Are you still taking them work) and what are they? Inspect the medication. Do you have a doctor, counselor, or therapist? (What is Are you hearing voices others can't hear? If so, what are the his/her name?) voices saying to you? What do you plan to do when/if we leave? Do you want to hurt or kill yourself or someone else? ☐ How is your sleep? How many hours do you sleep? Do you have a history of mental illness? If so, name the ☐ Do you take street drugs? (If yes, what type?) clinic or hospital where services have been obtained. Have you recently suffered a traumatic episode? Have you ever been admitted into a psychiatric hospital or Have you threatened or attempted to use violence or acted have you ever been hospitalized for a psychiatric reason? dangerously towards yourself or others? Why were the police called today? Do you have any family history of mental illness, or suicide attempts? Field Encounters Control and assess the situation □ Notify the MEU at (213) 996-1300. (Manual Section П Officers must handcuff the subject. 4/260.20) (Manual Section 4/217.36) ☐ A SMART Unit will be dispatched if available. Complete the field interview card. ☐ If NOT AVAILABLE, a Central Dispatch Office Number Conduct a Want and Warrant check. will be issued. ☐ Complete the Application for 72-hour Detention for Check the AFS (NECS system) for firearms. Evaluation and Treatment Form (MH 302). Interview family, neighbors, and witnesses. Transport the subject to the designated facility. Interview the subject. Fax and gray mail (Mail Stop 400) a copy of the completed

Note: Upon request, uniformed officer must assist the Lanterman-Petris-Short Act designated County Psychiatric Mobile Response Team or the court-designated conservator 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).

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

Application Form to (213) 996-1320.

Harbor UCLA Medical Center LA County USC Medical Center 1000 West Carson Street, Torrance, CA 1983 Marengo Street, Los Angeles, CA Psychiatric ER (310) 222-3510 Psychiatric ER (323) 409-7085

Olive View Medical Center

14445 Olive View Drive, Sylmar, CA

Psychiatric ER (818) 364-4340

18.47.00 (08/13)

INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM MENTAL ILLNESS

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 *must* take precedence. The booking for misdemeanor warrants is at the discretion of the Area watch commander. Arrestees suffering from mental illness may be booked at any LAPD 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 is available for advice and assistance in facilitating the transfer of the subject to an LA 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 at (213) 996-1300.

Notifications

When the only reason for detention is the person's suspected mental illness, the MEU <u>MUST</u> be contacted <u>PRIOR</u> 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 *must* 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 <u>MUST</u> be contacted **PRIOR** to the person being booked (Department Manual Section 4/260.20).

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

Hospital or Psychiatric Facility Patients

When an LAFD RA 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 or her mental condition, or who is a person described in Sections 8100 or 8103 WIC, is found to own, have in his or her possession, or under his or her control, any firearm whatsoever, or any other deadly weapon, the firearm or other deadly weapon shall be confiscated by any law enforcement agency or peace officer, 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, will 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.

Mental Illness Disposition Codes

Officers MUST 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." etc.)

- 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 Institution Code Section 5150 (5150 WIC) hold criteria and was hospitalized.
- 3. **REM** <u>Referral</u>, <u>Indication of Mental Illness</u>
 - 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.

INCIDENTS INVOLVING PERSONS SUSPECTED OF SUFFERING FROM MENTAL ILLNESS

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.

	LA County Mental Health Health/Crisis	Autism Society of America (562) 804-5556
	Help Line (800) 854-7771	Alzheimer's Safe Return (888) 572-8566
	Mayor Crisis Response Team (213) 978-0697	Child Abuse Hotline (800) 540-4000
	LA County Suicide Prevention and Survivor Hotline/	Elder Abuse Hotline (800) 992-1660
	Didi Hirsch 24-hour Crisis Line (877) 727-4747	Teen Line (800) 852-8336
	Alzheimer's Association Help Line (800) 660-1993	,
oth	ne Mental Evaluation Unit should be contacted by the first responser crisis where the psychological status of a subject, witness, or of EU Desk the following information if available:	at a critical incident, such as a possible barricade, jumper,
	Synopsis of situation.	From what direction should the SMART/CAMP team
	Subject's information if known	respond?
Ш	Subject's information, if known.	respond?
	Number of involved persons.	Has Metropolitan Division been contacted?