

## CALIFORNIA RACIAL AND IDENTITY PROFILING ADVISORY BOARD

<https://oag.ca.gov/ab953/board>**CALLS FOR SERVICE SUBCOMMITTEE**  
**MEETING NOTICE AND AGENDA****Thursday, June 4, 2020****10:00 AM**

**Via Blue Jeans video and telephone conference ONLY.** The public is encouraged to join the meeting using the “Join Meeting” link below. The “Join Meeting” link will provide access to the meeting video and audio. We recommend that you log in 5-10 minutes before the start of the meeting to allow sufficient time to set up your audio/video, and to download the Blue Jeans application, if desired.

**Join Meeting**

(Join from computer or phone)

**A phone dial-in option will also be available.**

[1.888.970.4404](tel:18889704404) (Toll Free)

Meeting ID: 713 236 283

1. INTRODUCTIONS (3 min.)
2. APPROVAL OF OCTOBER 22, 2019 SUBCOMMITTEE MINUTES (3 min.)
3. OVERVIEW OF PROPOSED SUBCOMMITTEE WORK BY DEPARTMENT OF JUSTICE (5 min.)
4. SPEAKERS PANEL, “Mental Health and Law Enforcement-Community Interactions” (50 min.)
5. PUBLIC COMMENT (15 min.)
 

Both the Blue Jeans application and dial-in number will permit public comment
6. DISCUSSION OF PROPOSED CALLS FOR SERVICE CHAPTER IN THE 2021 BOARD REPORT (20 min.)
7. PUBLIC COMMENT (15 min.)
 

Both the Blue Jeans application and dial-in number will permit public comment
8. DISCUSSION OF NEXT STEPS (10 min.)
9. SERVICE APPRECIATION BY DEPARTMENT OF JUSTICE (5 min.)
 

Board Member Dave Robinson
10. ADJOURN

**Documents that will be reviewed during the meeting will be available in the Upcoming Meeting section of the Board’s website <https://oag.ca.gov/ab953/board> on May 29, 2020.**

The meeting will begin at the designated time. Other times on the agenda are approximate and may vary as the business of the Board requires. For any questions about the Board meeting, please contact Anna Rick, California Department of Justice, 1515 Clay Street, Suite 2100, Oakland, California 94612, [ab953@doj.ca.gov](mailto:ab953@doj.ca.gov) or 510-879-3095. If you need information or assistance with accommodation requests, please contact Ms. Rick at least five calendar days before the scheduled meeting.

**CALIFORNIA RACIAL AND IDENTITY PROFILING ADVISORY BOARD**

<https://oag.ca.gov/ab953/board>

**CALLS FOR SERVICE SUBCOMMITTEE MEETING MINUTES**

**October 22, 2019 – 1:07 p.m. – 1:54 p.m.**

**Subcommittee Members Present:** Calls for Service Subcommittee Chair Sandra Brown, Board Co-Chair David Robinson.

**Subcommittee Members Absent:** Board Co-Chair Sahar Durali.

**1. Call to Order and Introductions**

The fourth meeting of the Calls for Service Subcommittee was called to order at 1:07 p.m. by Allison Elgart from the California Department of Justice (DOJ). The meeting was held by teleconference with a quorum of members present.

**2. Approval of June 12 Subcommittee Meeting Minutes**

**MOTION:** Chair Brown made a motion to approve the June 12, 2019 subcommittee meeting minutes. Member Robinson seconded the motion.

**APPROVAL:** All members in attendance voted “yes,” no “no” votes, and no abstentions.

**3. Overview of Proposed Subcommittee Work by Department of Justice**

Ms. Elgart provided an overview of the draft subcommittee section of the RIPA report and requested input from the subcommittee members. Ms. Elgart mentioned the limitations in the literature about bias by proxy. She stated that the Civil Rights Enforcement Section (CRES) would continue efforts to connect with POST regarding their dispatch training and would reach out to a member of the CalSTOP Client Services Program who has experience working in dispatch. She referenced the example of the draft San Francisco Police Department policy that mentions calls for service and bias by proxy, including information from police practices expert Julio Thompson. She stated that Mr. Thompson provided input included in the draft Calls for Service and Bias by Proxy report section. Ms. Elgart highlighted an article from the Vera Institute about avoiding bias by proxy that is in line with information already incorporated into the Report.

**4. Discussion of Subcommittee Section in Report - Calls for Service and Bias by Proxy**

Chair Brown described the pervasiveness of bias-based calls for service and the lack of follow-up by agencies with callers to educate them about what is suspicious. She

recommended that agencies make contact after calls are received to educate civilians. Ms. Elgart requested confirmation that the recommendation of the Board would be for the dispatcher to request callers' contact information, allowing for follow-up or education related to the call. Chair Brown highlighted that some agencies in California do not respond to calls when there is no indication of criminal activity. She explained that this prevents placing officers in the position of contacting individuals without an indication of criminal activity.

Member Robinson agreed that follow-up on calls is important and recommended that the follow-up should be suggested rather than mandatory because of the variation in call volume across agencies. He stated that follow-up is an opportunity to educate callers. Chair Brown agreed that the follow-up should not be mandatory due to the demands on agencies that receive high volumes of calls. Member Robinson suggested alternative follow-up strategies that agencies could consider, including follow-up by dispatchers or follow-up by clerks guided by the clearance codes provided by responding officers. Chair Brown stated that this would be an excellent approach that could ideally be implemented by a community service officer. She explained that the codes used by Palo Alto include "report taken" or "no report taken" and there is a discussion of adding an "unfounded" code. She suggested that it would be feasible for the California Department of Justice to track these codes and quantify the resources consumed by these calls. Chair Brown stated that calls recorded by Computer-Aided Dispatch are searchable within agency systems. Member Robinson agreed and added that the majority of LEAs are using these types of systems.

Chair Brown explained that this would entail developing standardized methods of recording the outcomes of calls. She added that it would be important not to capture personally identifiable information about individuals contacted in response to unfounded calls; the information collected should be about the call. Chair Brown stated that these would be new data collection practices. Member Robinson describe the variance across agencies with a portion of agencies using "unfounded" clearance codes. Chair Brown proposed that a new clearance code could be "unfounded BP" to represent bias by proxy. She stated that dispatch managers have been receptive to this idea in conversations, but they are not using this practice. Ms. Elgart explained that the recommendation to agencies to add a clearance code or other dispatch system code to track this information could be included in the Report.

Ms. Elgart asked if it would be beneficial to include an example scenario involving bias by proxy. Chair Brown stated that law enforcement officers express being frustrated about responding to unfounded calls and bias-based calls, but agencies are rarely following up with callers. She explained that follow-up with individual callers about unfounded calls is a promising strategy because it is not possible or desirable to broadly discourage civilians from making calls.

Ms. Elgart asked if there were specific questions that dispatchers should ask or on which dispatchers should be trained to try to identify bias-based calls. Chair Brown stated that dispatchers make use of sets of extensive questions when receiving calls for medical assistance and recommended that a similar approach be developed to ask questions of

potential bias-based calls. She explained that the questions should be about the suspicious behavior the caller is reporting. Member Robinson agreed that the questions asked of callers should be crime-related, such as, “What crime do you think you have observed?” or “What crime does the person seem to be committing?”

Chair Brown stated that the majority of officers she asked explain that their agency’s policy requires them to respond to these calls. She added that it would be very helpful for responding officers to have information from dispatch that they are not receiving any indication of criminal activity from the caller. She explained that it is beneficial to have joint training with officers and dispatchers to increase understanding of the needs of each role and eliminate passing blame between the roles. Chair Brown spoke about the encounters in which police officers have hurt people based on bias-based calls.

Ms. Elgart discussed exploring some of the screening questions that the Next Door platform has incorporated to try to prevent bias-based publications.

#### **5. Public Comment**

No member of the public in attendance made any comment.

#### **6. Discussion and Approval of Next Steps**

Ms. Elgart stated that CRES would continue to coordinate with POST regarding training and that the importance of dispatchers’ use of targeted questions and officers’ use of clearance codes would be included in the draft Report. Chair Brown requested that POST share information about the current training for dispatchers. Ms. Elgart ensured that any relevant materials that POST could provide would be shared with the subcommittee. She stated that Board members could continue to provide edits to the draft Report. Ms. Elgart requested that subcommittee members speak with the dispatch area of their agencies to explore the training on bias by proxy that is being provided or any other information that would be useful to include.

Chair Brown stated that she would review the POST dispatcher training materials available online, in addition to discussing with her contacts.

Ms. Elgart reiterated that the revised draft would be shared with Board members in advance of the November 20, 2019 Board meeting.

#### **7. Adjourn**

Ms. Elgart adjourned the meeting at 1:54 p.m.

**SPEAKERS FOR THE MENTAL HEALTH AND LAW ENFORCEMENT-COMMUNITY INTERACTION PANEL OF THE RIPA JUNE 4, 2020 CALLS FOR SERVICE SUBCOMMITTEE MEETING**

**Detective Charles Dempsey**, is the Officer In Charge for the Los Angeles Police Department, Admin-Training Detail, Mental Evaluation Unit (MEU), Crisis Response Support Section (CRSS). With over 28 years of law enforcement experience, Detective Dempsey completed the Clinical Training Program at the National Center for Post-Traumatic Stress Disorder in Menlo Park, CA.

Detective Dempsey sought to combine his psychiatric nursing experience with his present profession in law enforcement. He is responsible for the design, development and implementation of the LAPD's training curriculum, the review and writing of the Departments policies and procedures for interacting with persons suffering from a mental illness/mental health crisis, and the weeklong Mental Health Intervention Training course.

Detective Dempsey is a member of the Innovative Sub-Committee of the Mental Health Services Act (MHSA), which is charged with looking at innovative solutions to assist those suffering from a mental illness in the State of California.

**Emily Lyles** is a Licensed Clinical Social Worker and Mobile Evaluation Team (MET) Supervisor with the Kern Behavioral Health and Recovery Services (BHRS). Emily has worked in the behavioral health field for the past 15 years. The MET is a Crisis Intervention Unit that is dispatched by Kern law enforcement agencies to the scene of behavioral health crises to provide on scene, in the moment, crisis intervention and W&IC 5150 evaluations. The MET is an important link between an incident that may start as a law enforcement response, but through collaboration with behavioral health, an intervention can be provided by a mental health professional, resulting in verbal de-escalation and a resolved call for service.

Emily is also the co-chair of the Kern Crisis Intervention Team. As co-chair of the Kern Crisis Intervention Team, she is part of a multi-disciplinary group of partnering agency leaders who collaborate for the purposes of enacting policies and programs that fill gaps in services (between behavioral health and the judicial system) as identified by the Sequential Intercept Mapping Report for Kern. Ms. Lyles also collaborates with law enforcement agencies to provide crisis negotiating training, verbal de-escalation training, and CIT 40-hour training to local police officers and sheriff's deputies.

**Vinny Eng** (He/Him) is a community organizer and mental health advocate based in San Francisco. In 2012, his sister Jazmyne Ha Eng was killed by sheriff deputies while experiencing mental crisis. This preventable tragedy became the impetus for his advocacy. He served on the Mental Health Advisory Working Group for the San Francisco Police Department since 2013, focusing on decreasing and preventing violent outcomes in calls for service through crisis intervention team trainings, use of force policy reform, building effective Civilian Oversight bodies & developing alternative first responder protocols. In 2019, Vinny was named a Food and Wine Magazine Sommelier of the Year. He is the American born son of Cambodian refugees and holds a degree in Economics from Duke University.

# Law Enforcement–Mental Health Learning Sites

Jurisdictions across the country are exploring strategies to improve the outcomes of encounters between law enforcement and people with mental illnesses. As a growing number of communities develop or enhance their comprehensive police-mental health collaboration (PMHC), many agencies are struggling with the planning process and how to tailor successful implementation strategies from other jurisdictions to address their own distinct problems and circumstances.

In an effort to expand the knowledge base for law enforcement agencies interested in starting or enhancing a PMHC, the Council of State Governments (CSG) Justice Center, with assistance from a team of national experts and the U.S. Department of Justice's Bureau of Justice Assistance (BJA), selected six police departments to serve as national law enforcement–mental health learning sites. These learning sites represent a diverse cross-section of perspectives and program examples and are dedicated to helping other jurisdictions improve their responses to people with mental illnesses. The original six learning sites, selected in 2010, are the Houston (TX) Police Department, the Los Angeles (CA) Police Department, the Madison (WI) Police Department, the Portland (ME) Police Department, the Salt Lake City (UT) Police Department, and the University of Florida Police Department. In 2017, due to the success of the program, four new sites were added, including the Arlington Police Department (MA), the Gallia, Jackson, Meigs Counties Sheriffs' Offices (OH), the Madison County Sheriff's Office (TN), and the Tucson Police Department (AZ).

## Los Angeles (CA) Police Department

**Total number of agency personnel:** 12,909

**Sworn:** 9,959 **Civilian:** 2,950

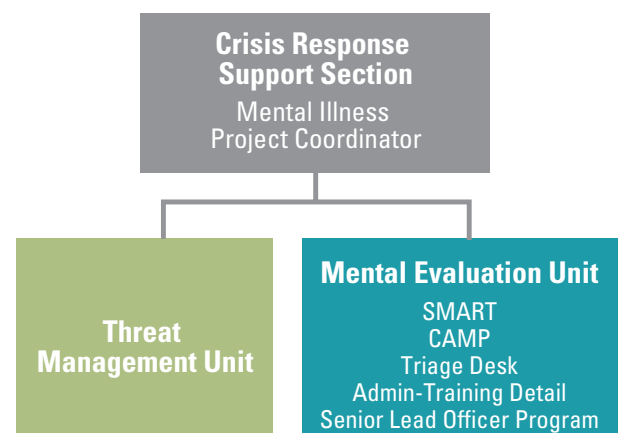
**Total population served:** 4 million people

**Jurisdiction and state:** Los Angeles, California

### Program Highlights

- Uses a [multilayered](#) approach that includes triage by trained dispatchers, 24-hour triage line, co-response teams, follow-up case managers, and focused community engagement
- Features embedded mental health professionals in police agency
- Incorporates comprehensive data collection and information-sharing procedures
- Employs a robust training strategy that includes 40-hour Mental Health Intervention Training (MHIT)
- Engages community partners through the Mental Health Crisis Response Program Advisory Board

For more than four decades, the Los Angeles Police Department (LAPD) has deployed its Mental Evaluation Unit (MEU) to assist patrol officers with mental health-related calls. With more than 160 personnel assigned to the MEU, the LAPD has one of the first and largest law enforcement-mental health co-response operations in the nation. The MEU falls within the Crisis Response Support Section (CRSS), which also includes the Threat Management Unit (focusing on stalking and workplace violence). The MEU has developed additional subunits over several decades to include Systemwide Mental Assessment Response Teams (SMART), the Senior Lead Officer program, the Case Assessment Management Program (CAMP), the Triage Desk, and the Administrative-Training Detail. It is a comprehensive operation that deploys professionals from diverse disciplines who work as a team with the goal of appropriately responding to calls for service involving people experiencing mental health crises.



## Law Enforcement—Mental Health Learning Sites

### Los Angeles (CA) Police Department

1987

MEU and  
Triage Desk

1993

SMART

2002

CIT

2005

CAMP

2015

MHIT

2017

Senior Lead  
Officer Program

### Systemwide Mental Assessment Response Team (SMART)

In 1993, Los Angeles was one of the first communities to develop and implement its police-mental health co-responder SMART program to supplement MEU activities. This program, which is co-supported by the Los Angeles County Department of Mental Health (LACDMH), helps uniformed officers effectively respond to and link people in crisis to appropriate mental health services. As of 2017, they deploy 17 SMART teams on a 24/7 basis.

### Case Assessment Management Program (CAMP)

In 2005, CAMP was implemented to help identify, track, and develop customized long-term intervention strategies. The program uses a case management approach to facilitate individuals' treatment and minimize violence and repeat encounters involving emergency first responders. CAMP pairs police detectives with psychologists, nurses, and social workers from the LACDMH.

### Triage Desk

The MEU's long-established Triage Desk fields calls from patrol officers seeking guidance for managing situations involving people who appear to have mental illnesses. The triage officer consults the MEU database to learn if the person in question has a history of police contacts. A triage mental health nurse sits alongside the officer and can check the LACDMH databases to identify the case manager, psychiatrist, or treatment centers. The triage staff determines whether to dispatch a SMART team or have the patrol officer take the person directly to a mental health facility. LAPD personnel encountering a person believed to be in a mental health crisis must contact the Triage Desk for assistance and provide a detailed incident report. Subjects of frequent calls or interventions are referred to the CAMP coordinator for follow-up. Those follow-up reports and related database have more limited access to ensure privacy protections.

### Administrative-Training Detail

The Administrative Training Detail is responsible for conducting the 40-hour MHIT, which is delivered every other week. The Detail is also responsible for addressing mental health-related topics during training for field training officers, police service representatives (911 operators), and adult custody officers (jail personnel).

Through these activities, the MEU works collaboratively to help people with mental illnesses avoid incarceration or hospitalization by accessing alternate care in the least restrictive environment. (Follow on Twitter @LAPDMEU, Instagram: LAPDMEU, Facebook: LAPDMEU.)

### Senior Lead Officer Program

The MEU Senior Lead Officer (SLO) is responsible for the Police Bureau they are assigned and all the Area Command within their assigned Police Bureau. They act as a liaison with the Area Senior Lead Officers to provide an interface between the Area SLOs, the department, the community, and county-wide resources to manage mental health-related issues or concerns, including providing community meetings, addressing COMPSTAT-related concerns, and developing response strategies.

#### To learn more about the LAPD and its initiatives, please contact:

**Name:** Brian Bixler

**Title:** Lieutenant

**Address:** 100 W. First Street, Room 320, Los Angeles, CA 90012

**Phone:** (213) 996-1300

**E-mail:** 33308@lapd.online

To learn more about the Law Enforcement/Mental Health Learning Sites, please visit <http://csgjusticecenter.org/law-enforcement/projects/mental-health-learning-sites/> or email the Law Enforcement Program team at [le-mh-learningsites@csgjusticecenter.org](mailto:le-mh-learningsites@csgjusticecenter.org).

## Resources

### Suicide Prevention and Survivor Hotline

(24 hours/7 days)

Los Angeles/Orange/Ventura/San Bernardino/Riverside/Imperial Counties:

English - (800) 273-8255

Spanish – (888) 628-9454

#### **Additional:**

CrisisChat.org

<http://www.suicide.org/hotlines/california-suicide-hotlines.html>

#### **Text Crisis Line**

Text START to 741-741

www.Crisistextline.org

#### **Substance Abuse Hotline**

(888)742-7900

[publichealth.lacounty.gov/sapc/findtreatment.htm](http://publichealth.lacounty.gov/sapc/findtreatment.htm)

#### **California Youth Crisis Hotline**

(24 hours/7 days)

(800) 843-5200

www.Calyouth.org

#### **Veteran's Crisis Line**

Veterans Crisis Line: (800) 273-8255 Press 1

www.veteranscrisisline.net

#### **Cohen Military Family Clinic**

(619) 345-4611

cohenveterans.network.org

#### **National Alliance on Mental Illness**

NAMI in LA County (213) 386-3615

(800) 950-NAMI (6264)

www.namilacc.org

#### **Los Angeles Gay and Lesbian Center**

(323) 993-7400

www.thecenterlv.org

#### **Los Angeles LGBT Center**

(323) 993-7669

[www.lalgbtcenter.org/mental\\_health\\_services](http://www.lalgbtcenter.org/mental_health_services)

#### **Family Services**

(888) 683-5084 Toll Free

info@thevillagefs.org

#### **Autism Society of Los Angeles**

(424) 299-1531/ Warmline:(310) 853-2151

www.AutismLA.org

#### **Women and Children Crisis Shelter**

(562) 945-3939

[www.wccshope.org](http://www.wccshope.org)



### Systemwide Mental Assessment Response Team (SMART)

SMART was established to prevent unnecessary incarceration and/or hospitalization, provide alternate care in the least restrictive environment and to support patrol.

### Case Assessment Management Program (CAMP)

CAMP was established as a follow-up program for SMART. The focus of CAMP is to investigate high utilizers of emergency service, use of force, targeted school violence, incidents with increasing risk behavior, incidents involving weapons, and to help link individuals to resources.

### Los Angeles Police Department Mental Evaluation Unit

100 West 1st Street

Room 630

Los Angeles, CA 90012

#### Social Media:

FB: [facebook.com/lapdmeu](https://www.facebook.com/lapdmeu)

Twitter: [@lapdmeu](https://twitter.com/lapdmeu)

Instagram: [@lapdmeu](https://www.instagram.com/lapdmeu)

## Community Mental Health Resource Guide



LOS ANGELES COUNTY  
**DEPARTMENT OF  
MENTAL HEALTH**  
hope. recovery. wellbeing.

## Department of Mental Health

LAPDONLINE.ORG  
DMH.LACOUNTY.GOV



## Crisis Response

### CALL 911

When your family is experiencing an emergency that puts yourself, your loved one, and/or the public in immediate danger, call 911.

While speaking to the 911 dispatcher use the **911 Checklist** to provide helpful information to the responding Officers.

LAPD will send a patrol unit to stabilize the crisis and detain the loved one for a mental health evaluation. During the detention officers will handcuff the loved one for everyone's safety and because it is LAPD's policy.

*"Statistics show that when officers handcuff a person who is in crisis, the application of force by officers is significantly reduced."*

When the scene is stabilized, a Systemwide Mental Assessment Response Team (SMART) unit will respond, if available, to provide mental health assistance.



(Maya Sugarman/KPCC)

## Mental Health Emergency

### CALL ACCESS (800)854-7771

For psychiatric emergency incidents involving mental illness that do not require a 911 response, please call ACCESS 24/7.

When you call ACCESS a Psychiatric Mobile Response Team (PMRT) will respond, if available, to your location.

ACCESS is a Department of Mental Health service for all members of the Los Angeles County community.

### Department of Mental Health Clinics

#### Central Los Angeles

**Northeast Mental Health** 3303 N. Broadway, LA, CA 90031 **(323) 478-8200**

**Downtown Mental Health** 529 Maple Ave, LA, CA 90013 **(213) 430-6700**

#### South Los Angeles

**Long Beach Mental Health** 1975 Long Beach Blvd, LA, CA 90806 **(562) 599-9280**

**San Pedro Mental Health Clinic** 150 W 7<sup>th</sup> St San Pedro, CA 90731 **(310) 519-6100**

#### San Fernando Valley

**San Fernando Mental Health** 10605 Balboa Blvd, Granada Hills, CA 91344 **(818) 832-2400**

**West Valley Mental Health Center** 7621 Canoga Ave, Canoga Park, CA 91304 **(818) 598-6900**

#### West Los Angeles

**Edelman West Side Mental Health Center** 11080 W. Olympic Blvd, LA, CA 90064 **(310) 966-6500**

**Didi Hirsch Community Mental Health** 4760 S. Sepulveda Bl. Culver City, CA 90230 **(310) 895-2300**

#### Additional information

[http://dmh.lacounty.gov/wps/portal/dmh/our\\_services](http://dmh.lacounty.gov/wps/portal/dmh/our_services)

## Develop a Care Plan

### National Alliance on Mental Illness

**NAMI** helps families and consumers by offering **E**ducation, **A**dvocacy, **S**upport and **R**esources.

*Find HELP, Find HOPE*

**CALL (800)950-6264**

[www.namilacc.org](http://www.namilacc.org)



211 is a service that can link you to countywide programs. When struggling to find answers for a family member that may be suffering from mental illness, this toll-free phone number is a great place to start.

When you call, expect to follow a few automated prompts before you speak to a person.

#### **What is a 5150 Hold?**

*During a mental health crisis, officers/clinicians will detain the subject to determine if he/she meets the criteria for a 5150 WIC application for a 72-hour hold. Subjects will be assessed for the danger they pose to themselves, danger they pose to others, and for grave disability. The officer's determination will be based on physical evidence, the subject's history, the subject's statements, and reliable witness statements.*

## Recursos

### Línea directa de Prevención de Suicidio y Sobrevivencia

(24 horas/7 días)

Condados de: Los Angeles/Orange/Ventura/San Bernardino/Riverside/Imperial

Ingles:(800) 273-8255/ Español: (888) 628-9454

#### **Adicional:**

CrisisChat.org

<http://www.suicide.org/hotlines/california-suicide-hotlines.html>

#### **Línea de Texto**

Textear: START al 741- 741

[www.crisistextline.org](http://www.crisistextline.org)

#### **Línea Directa de Abuso de Sustancias**

(888) 742-7900

[publichealth.lacounty.gov/sapc/findtreatment.htm](http://publichealth.lacounty.gov/sapc/findtreatment.htm)

#### **Línea Directa para Jóvenes en Crisis**

24 horas/7 días

(800) 843-5200

[www.Calyouth.org](http://www.Calyouth.org)

#### **Línea Directa para Veteranos en Crisis**

(800) 273-8255 Presione 1

[www.veteranscrisisline.net](http://www.veteranscrisisline.net)

#### **Clínica Cohen para Familias Militares**

(619) 345-4611

[cohenveteransnetwork.org](http://cohenveteransnetwork.org)

#### **Alianza Nacional de Enfermedades Mentales (NAMI)**

NAMI en el condado de LA (213) 386-3615

(800) 950-NAMI (6264)

[www.namilacc.org](http://www.namilacc.org)

#### **Centro para Lesbianas y Homosexuales en LA**

(323) 993-7400

[www.thecenterlv.org](http://www.thecenterlv.org)

#### **Centro LGBT en Los Angeles**

(323) 993-7669

[www.lalgbtcenter.org/mental\\_health\\_services](http://www.lalgbtcenter.org/mental_health_services)

#### **Servicios a Familias**

(888) 683-5084 Llamada Gratuita

[info@thevillagefs.org](mailto:info@thevillagefs.org)

#### **Sociedad de Autismo de Los Angeles**

(424) 299-1531/ Warmline: (310) 853-2151

[www.autismLA.org](http://www.autismLA.org)

#### **Refugio para Mujeres y Niños en Crisis**

(562) 945-3939

[www.wccshope.org](http://www.wccshope.org)



### **Systemwide Mental Assessment Response Team (SMART)**

#### **Equipo de Respuesta a la Evaluación Mental del Sistema (SMART)**

SMART se estableció para evitar el encarcelamiento y/o la hospitalización innecesaria, proveer cuidados alternativos en un ambiente menos restringido, y apoyar a la patrulla de policía.

#### **Case Assessment Management Program (CAMP)**

#### **Programa de Gestión de Evaluación de Casos (CAMP)**

CAMP fue establecido como un programa que responde a los casos de SMART. El enfoque de CAMP es investigar aquellos que usan servicios de emergencia continuamente, casos con uso de fuerza, violencia en las escuelas, casos con comportamiento de alto riesgo, casos que involucran armas, y conectan a la persona con servicios de salud mental.

### **Departamento de Policía de Los Angeles (LAPD) Unidad de Evaluación Mental**

100 West 1st Street, Room 630

Los Angeles, CA 90012

FB: [facebook.com/lapdmeu](https://facebook.com/lapdmeu)

Twitter: @lapdmeu

Instagram: @lapdmeu

Rev. 12/2019

## Departamento de Policía de Los Angeles

## Guía de Recursos de Salud Mental en la Comunidad



LOS ANGELES COUNTY  
**DEPARTMENT OF MENTAL HEALTH**  
hope. recovery. wellbeing.

## Departamento de Salud Mental

[LAPDONLINE.ORG](http://LAPDONLINE.ORG)  
[DMH.LACOUNTY.GOV](http://DMH.LACOUNTY.GOV)

## Llamada de Crisis

### Llame al 911

Cuando su familia tenga una emergencia que ponga a usted, a su ser querido y/o al público en peligro, llame de inmediato al 911.

Cuando hable con la operadora del 911, use la **lista de verificación del 911** para dar información necesaria a los oficiales que responderán a su llamada.

LAPD enviará una patrulla de policía para estabilizar, evaluar, y detener a la persona en crisis. Durante la detención, LAPD esposará a su familiar por seguridad y porque es la póliza de LAPD.

“Las estadísticas muestran que cuando una oficial esposa a una persona que está en crisis mental, el uso de fuerza por parte de los oficiales se reduce significativamente.”

Después de que se establezca la situación, el equipo de SMART responderá si está disponible para proveer asistencia de salud mental.



## Emergencia de Salud Mental

### Llame a ACCESS (800) 854-7771

Para incidentes de emergencia psiquiátrica de enfermedades mentales que no requieran una respuesta del 911, por favor llame a ACCESS 24/7.

Cuando llame a ACCESS, y si está disponible en su localidad, el equipo de PMRT responderá.

ACCESS es un servicio de línea directa del Departamento de Salud Mental para la comunidad del Condado de Los Angeles.

### Clínicas de Salud Mental

#### Centro de Los Angeles Northeast Mental Health

3303 N. Broadway, LA, CA 90031 **(323) 478-8200**

#### Downtown Mental Health

529 Maple Ave., LA, CA 90013 **(213) 430-6700**

#### Sur de Los Angeles

#### Long Beach Mental Health

1975 Long Beach Blvd., LA, CA 90806  
**(562) 599-9280**

#### San Pedro Mental Health

150 W 7<sup>th</sup> St., San Pedro, CA 90731  
**(310) 519-6100**

#### Valle de San Fernando

**San Fernando Mental Health** 10605 Balboa Blvd.,  
Granada Hills, CA 91344 **(818) 832-2400**

#### West Valley Mental Health

7621 Canoga Avenue, Canoga Park, CA 91304  
**(818) 598-6900**

#### Oeste de Los Angeles

#### Edelman West Side Mental Health

11080 W. Olympic Blvd., LA, CA 90064  
**(310) 966-6500**

#### Didi Hirsch Community Mental Health

4760 S. Sepulveda Blvd., Culver City, CA  
90230 **(310) 895-2300**

#### Información adicional

[http://dmh.lacounty.gov/wps/portal/dmh/our\\_services](http://dmh.lacounty.gov/wps/portal/dmh/our_services)

## Desarrolle un plan de cuidado

### Alianza Nacional de Enfermedades Mentales

**NAMI** ofrece **Educación, Abogacía, Apoyo y Recursos** a las familias y consumidores

Encuentre **AYUDA, Encuentre ESPERANZA**  
**LLAME (800)950-6264**

[www.namilacc.org](http://www.namilacc.org)



2-1-1 es un servicio que puede conectarlo a programas en el condado de Los Angeles. Cuando esté buscando ayuda para un ser querido sufriendo de una enfermedad mental, este número gratuito es un buen comienzo.

Cuando llame, siga las instrucciones para poder hablar con un representante.

### **¿Que es una detención 5150?**

Durante una crisis de salud mental, oficiales y personal clínico detendrán a la persona para determinar si el/ella cumple los requisitos para una solicitud 5150 WIC de detención de 72 horas. El cliente será evaluado para determinar si representa un peligro hacia ellos mismos o hacia otras personas y/o está gravemente discapacitado. La decisión del oficial se basará en la evidencia física, información clínica, y las declaraciones de la persona y de los testigos.



## LOS ANGELES POLICE DEPARTMENT

### Mental Evaluation Unit

## 911 Checklist

If your family member is in crisis and is a danger to themselves or others,

**Call 911**

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 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
- Height & weight** of family member
- Clothing** description of family member
- CURRENT location** of family member
- 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

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

*What to expect...*

*Who will respond to your crisis?*

- The 911 operator will dispatch **uniformed patrol officers** to your location.
- Officers will detain your family member, which **will include handcuffing** and is for the safety of everyone, including your family member.
- Officers will conduct a preliminary investigation to determine whether a crime occurred.
- 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*).
- Your statements and historical information are an important part of the mental health investigation (*CA WIC §5150.05*).
- 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*).
- Officers will notify the Mental Evaluation Unit and a SMART unit (officer & clinician) will be dispatched if available.
- If your family member is an adult, the officers and/or the SMART unit cannot disclose information about him/her due to medical records-related privacy laws.

### NON-EMERGENCY

Los Angeles County

Department of Mental Health

ACCESS – 1-800-854-7771

National Alliance on Mental Illness

NAMI 1-800-950-6264

<http://namilacc.org/>



## La Respuesta Policial:

### Que esperar....

### ¿Quién va a responder a su crisis?

## Departamento de Policía de Los Angeles Unidad de Evaluación Mental 911 Lista de Comprobación

Si un miembro de familia está en crisis o en peligro, o pone en peligro a otros,

### Llame 911

Tenga esta lista a mano para usar de referencia cuando llame al 911.

Dele a la operadora la información siguiente:

- Su nombre**
- Domicilio** al cual la policía debería responder
- Razón** de la crisis (la razón la cual necesita la policía)
- Comportamiento violento** previo o en ese momento
- Armas o acceso a armas**
- Nombre** del miembro de familia en crisis
- Edad** del miembro de familia
- Altura y peso** del miembro de familia
- La ropa** (descripción de la ropa que trae puesta el miembro de su familia)
- ¿Dónde está** en este momento el miembro de familia?
- Diagnóstico** (salud mental y/o médico)
- ¿Medicamentos** que está tomando ahora o en el pasado?)
- ¿Usa drogas** o ha usado drogas antes?
- ¿Que lo/la altera o molesta?**
- ¿Que ha ayudado en contactos anteriores con la policía** cuando esta en este estado?
- Identifique** a otras **personas en la residencia** o en el lugar

**IMPORTANTE:** Esta pidiendo que una persona que no conoce la situación, entre a su casa para resolver una crisis, y solo tendrá la información que usted dió. Es buena práctica tener a mano toda la información que se pueda, antes de que ocurra una crisis.

- La operadora del 911 enviará policías a su domicilio.
- Los oficiales detendrán a el miembro de su familia, **que incluirá esposar lo/la**, para la seguridad de todos.
- Los oficiales conducirán una investigación preliminar para determinar si un delito ocurrió.
- Los oficiales conducirán una investigación preliminar para determinar si el miembro de su familia está en peligro, o ha puesto en peligro a otros, o e tá gravemente incapacitado debido a una enfermedad mental (CA WIC Sección 5150).
- Sus declaraciones y antecedentes históricos son una parte importante de la investigación de salud mental (CA WIC Sección 5150.05)
- Los oficiales preguntarán si hay **armas de fuego o otras armas peligrosas**, y en la mayoría de los casos, lo mantendrán asegurados (de acuerdo con la Sección de CA 8102 de WIC).
- Los oficiales notificarán a la Unidad de Evaluación Mental y la Unidad SMART (un oficial y clínico) serán enviados, si están disponible.
- Si su miembro de familia es un adulto, los oficiales y/o la Unidad de SMART no pueden revelar ninguna información sobre él/ella, debido a las leyes de privacidad relacionadas con el historial médico.

**CASOS NO DE EMERGENCIA**  
**Condado de Los Ángeles**  
**Departamento de Salud Mental**

**ACCESO - (1-800) 854-7771**

**Llame a la línea de ayuda de NAMI**  
**1-800-950-6264**

<https://www.nami.org/find-support/diverse-communities/latino-mental-health>



**Los Angeles Police Department**  
**Mental Evaluation Unit**

(로스앤젤레스 경찰국 정신건강평가부)

**911 에 전화 시 준비할 정보 항목**

가족분이 위기에 처해 있고,  
본인 혹은 타인이 위험에 처한 경우  
**911 로 전화하십시오.**

911 응대자에게 “코리안 스피킹 플리즈!”라고 말씀하십시오.

911 에 전화하실 때 이 목록을 손에 들고 읽으십시오.

응대자에게 다음 정보를 제공하십시오.

- 신고자 본인의 이름
- 주소 (경찰이 출동할 주소)
- 현재 어떤 위급 상황인지 설명 (경찰이 필요한 이유)
- 이전 또는 현재의 폭력 행위 유형
- 무기 소지 또는 무기 접근 가능성 여부
- 위급상황에 처한 가족분의 이름
- 가족분의 나이
- 가족분의 키와 몸무게
- 가족분의 의복 차림새
- 가족분의 현재 위치
- 진단명 (의료 및/또는 정신건강 관련)
- 현재 복용 중인 처방약 (복용 여부)
- 마약 사용 여부 (현재 또는 과거)
- 상황 촉발요인 (화가 난 동기?)
- 이전에 경찰에 연락한 적이 있다면 어떤 도움을 받았는지 설명하십시오.
- 그 장소에 있는 다른 사람들은 누구인지 알려주십시오.

**중요 사항:** 귀하는 위급상황을 해결하기 위해 낯선이가 집에 와줄 것을 요청하고 있는 것입니다. 그들은 귀하가 제공한 정보에만 의지할 것입니다. **위급상황이 발생하기 전에** 가능한 한 많은 **정보를 확보해 놓으시는 것이 좋습니다.**

**경찰의 대응**

기대할 수 있는 것들...

누가 위급상황에 대응조치를 할 것인가?

- 911 응대자는 **정복차림의 경찰**을 해당 소로 파견할 것입니다.
- 경찰관은 **가족분에게 수갑을 채울 수 있고**, 다른 가족을 포함한 모든 사람의 안전을 위해 가족분을 구금할 수 있습니다.
- 경찰관은 범죄가 발생했는지 확인하기 위해 예비 조사를 수행합니다.
- 경찰관은 예비 정신 건강 조사를 수행하여 가족분이 정신질환으로 인해 자해의 위험이 있는지, 다른 사람에게 위험한지 또는 자신을 돌볼 수 없을 만큼 심각하게 장애가 있는지의 여부를 판단합니다(CA WIC §5150).
- 귀하의 진술과 과거력 정보는 정신 건강 조사에 있어서 중요한 부분입니다(CA WIC §5150.05).
- 경찰관은 총기 또는 기타 치명적인 무기가 있는지 물어볼 것이고, 대부분의 경우 안전한 보관을 위해 무기를 압류할 것입니다(CA WIC §8102 에 따름).
- 경찰관은 정신평가부서에 통지하고 가능한 경우 SMART 부서(경찰관 및 임상가로 구성된 특별팀)가 파견됩니다.
- 귀하의 가족분이 성인인 경우, 경찰관 및 / 또는 SMART 부서는 의료 기록 관련 개인 정보 보호법에 의거하여 가족분에 대한 정보를 공개할 수 없습니다.

**응급 외 연락처**

**로스앤젤레스 카운티 정신건강국**  
**ACCESS 1-800-854-7771**

**National Alliance on Mental Illness**  
**(정신질환 전국연맹)**  
**NAMI 1-800-950-6264**  
**<http://namilacc.org/>**

# MET

## Mobile Evaluation Team



## Who we are

When law enforcement officers go to help someone, they never know exactly what situation they will encounter. If officers are faced with a behavioral health emergency, they call in the Mobile Evaluation Team, Kern Behavioral Health & Recovery Services' crisis intervention team.

Made up of behavioral health professionals, MET's primary goal is to divert people from the judicial system by connecting them to local mental health services. MET does this by assessing a person during a crisis and referring them to appropriate resources in the community.

## What we do

### Virtual MET

With the help of iPads and the Zoom app, officers from the outlying areas of Kern County, like Taft, Delano and Ridgecrest, can also virtually connect to MET.

### Crisis Intervention Team

A multi-agency task force that works to fill in gaps within services to keep people out of the judicial system.

### MET

This crisis intervention team responds alongside law enforcement to behavioral health emergencies to provide crisis intervention and evaluations for voluntary and involuntary treatment.

### Join Evaluation Teams

Their goal is to decrease 3 types of recidivism – incarceration, inpatient psychiatric and homelessness by connecting people to services.

### Community Outreach

Provides crisis intervention training to local law enforcement as well as specialized trainings to hospitals.

For more information, contact Emily Lyles at 661-868-8126 or Janet Bewley at 661-868-8115.



Crisis Hotline 1-800-991-5272  
Suicide Prevention Hotline 1-800-273-8255



### Commission Accreditation of Rehabilitation Facilities

Kern Behavioral Health & Recovery Services has been accredited by CARF for the following programs: Mental Health Programs-Case Management; Children and Adolescents-Case Management & Crisis Stabilization; Integrated Alcohol & Other Drug-Case Management & Children & Adolescents-Case Management; Employment Services-Community Employment Services.

## **DRAFT OUTLINE<sup>1</sup>**

### **2021 RIPA Annual Report**

1. **Executive Summary**
2. **Introduction**
  - a. Letter from Board Co-Chairs
  - b. Purpose and intent of this year's report
    - i. Summary of the report contents
    - ii. Board ideas for moving from analysis/review to policy and practice recommendations – how do we make this count?
  - c. Overview of the work completed since the release of the 2020 report
    - i. Board meetings and subcommittee meetings.
    - ii. Submission of Wave 1 and 2 stop data records
    - iii. Kickoff meetings and commencement of stop data collection for Wave 3 agencies
    - iv. Survey of Wave 1 and Wave 2 LEAs
3. **Stop Data Analysis** (*Stop Data Subcommittee*)
  - a. Analysis of stop data – January 1, 2019 through December 31, 2019
    - i. Stop Demographics
    - ii. Decision to Stop
    - iii. Comparisons to Census, SWITRS, and Light Condition Data
    - iv. Post-Stop Outcomes (search rates, yield rates)
  - b. Board-focused research questions – intersectional analyses
4. **Racial and Identity Profiling Policies and Accountability** (*State and Local Policies and Accountability Subcommittee*)
  - a. Overview of the Board's charge in regard to racial and identity profiling policies
  - b. Review of "Bias-Free Policing" or equivalent policy from all Wave 2 agencies
5. **Calls for Service and Bias by Proxy** (*Calls for Service Subcommittee*)
  - a. Update to list of best practices for avoiding bias by proxy in calls for service
  - b. Intersection of mental health and law enforcement and best practices for LEAs
6. **Complaints: Policies and Data Analysis** (*Civilian Complaints Subcommittee*)
  - a. Overview of civilian complaint data reported to the DOJ and the Board's charge in regard to civilian complaint policies and procedures
  - b. Analysis of 2019 civilian complaint data
    - i. Overview of data examined
    - ii. Analysis of civilian complaints for stop data reporters statewide

---

<sup>1</sup> This proposed outline is for the RIPA Board's consideration and its purpose is to serve as a starting point for discussion of topics to include in the upcoming report. All topics are subject to change.



- iii. Agency-level data snapshot
  - iv. Findings discussion and implications
  - c. Update (if any) on factors impacting disparities in complaint reporting
  - d. Update (if any) on Penal Code section 148.6
  - e. Review of Civilian Complaint Forms of Wave 2 agencies
7. **Training** (*POST Training and Recruitment Subcommittee*)
- a. Overview of the Board's charge in regard to POST and training
  - b. Overview of the development of a POST-certified training on AB 953
  - c. Update and details on Self-Paced Refresher Course
  - d. Update and details on Racial Bias and Profiling Video
8. **Update on Relevant Legislation Enacted in 2020**
9. **Conclusion**
- a. Goals/vision for future reports

### ***Appendices***

Data that is required to be reported per Penal Code section 13519.4, subdivision (j)(3)(E): Each report shall include disaggregated statistical data for each reporting agency. The report shall include, at a minimum, each reporting law enforcement agency's total results for each data collection criteria under subdivision (b) of Section 12525.5 of the Government Code for each calendar year.

We will also include a methodology appendix to reduce the size of the stop data section of the report while still maintaining transparency. In addition, we plan to include an appendix similar to the Technical Report Section 2 from the 2020 RIPA Report.