

Psychological Evaluation of Adults

6.14.01 PURPOSE

The purpose of ~~†~~This order ~~outlines policies and procedures for dealing with~~ is to establish protocols when members contact adults with mental health disorders and who are psychologically or emotionally distressed adults, including abate~~ments~~, ~~detainment~~detentions, and arrests. ~~It includes~~The order also outlines procedures for admission to facilities, medical treatment, weapons confiscation, and preparation of incident reports.

I. GUIDELINES

~~A. CRITERIA FOR INVOLUNTARY DETENTIONS. Officers may detain an individual for psychiatric evaluation pursuant to Section 5150 of the Welfare and Institutions Code only when the officer believes that, as a result of mental illness, an individual is:~~

- ~~1. — A danger to himself/herself, or~~
- ~~2. — A danger to others, or~~
- ~~3. — Gravely disabled, meaning the individual is unable to care for himself/herself and has no reliable source of food, shelter or clothing.~~

~~H.~~ 6.14.02 POLICY

~~A. — It is the policy of the San Francisco Police Department that in incidents involving psychologically distressed adults, officers shall~~

- ~~1. — ABATE. If the individual has not committed a crime and is not, as a result of a mental disorder, a danger to himself/herself, a danger to others, or gravely disabled, abate the incident and recommend that the individual contact a mental health professional.~~
- ~~2. — DETAIN. If an individual has not committed a crime but is, as a result of a mental disorder, a danger to himself/herself, a danger to others, or gravely disabled, detain the individual for psychiatric evaluation and treatment.~~
- ~~3. — ARREST. If an individual has committed a crime, arrest the individual and book or cite according to Department policies and procedures. Cited individuals who are, as a result of mental disorder, a danger to themselves, a danger to others, or are gravely disabled shall also be detained for psychiatric evaluation.~~

The San Francisco Police Department (Department) is committed to responding in a manner that is humane, compassionate, and supportive while providing the highest level of service to all communities, including persons with mental illness, intellectual and developmental disabilities (IDD), those in behavioral crises, and those suffering from the adverse consequences of substance use disorder. The causes and impacts of mental health disorders vary and are not bound by race,

gender, or socioeconomic status. How law enforcement responds to persons living with a mental health disorder can tremendously impact how these encounters will be resolved.

It is the policy of the Department that, in incidents involving adults suspected of having a mental health disorder and who are psychologically or emotionally distressed, members shall, if feasible, utilize strategic communication, crisis intervention, and de-escalation strategies and techniques consistent with Department policies and training to address persons in crisis, before resorting to force. To limit unnecessary confrontation between members and persons with a mental health disorder, members shall work to divert non-criminal calls for service away from the Department to non-law enforcement agencies.

The Department is committed to de-criminalizing and reducing the stigma associated with mental health disorders, and will attempt to seek out diversion programs, resources, and alternatives to arrest, when appropriate.

6.14.03 LEGAL STANDARDS AND DEFINITIONS

A. Legal Standards:

1. **Criteria for Involuntary Detentions** - Welfare & Institutions Code § 5150(a) states that when a person, as a result of a *mental* health disorder, *is a danger to others*, or to themselves, or gravely disabled, a peace *officer* may, upon probable cause, take or cause to be taken, the person into custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a facility.
2. **Third Party Information:** In making a probable cause finding as to whether the person is a danger to others, to themselves, or is gravely disabled as a result of a mental health disorder, or severe substance use disorder, members shall consider available relevant information about the historical course of the person's mental health disorder, or severe substance use disorder from family members or clinicians. Members should evaluate if the information provided has a reasonable bearing on the determination of the assessment.

B. Definitions:

1. **Danger to Self** - A person may be a danger to self when they have recently threatened/attempted suicide or threatened/attempted some serious bodily injury to themselves. The person may have demonstrated danger of substantial and imminent harm to themselves through some recent act, threat, or attempt of the same.
2. **Danger to Others** - A person may be a danger to others when they have recently threatened/attempted death or some serious bodily injury to others. The person may have

demonstrated danger of substantial and imminent harm to others through some recent act, threat, or attempt of the same.

3. **Gravely Disabled** - A condition in which a person, as a result of a mental health disorder, a severe substance use disorder, or a co-occurring mental health disorder and a severe substance use disorder, is unable to provide for their basic personal needs for food, clothing, shelter, personal safety, or necessary medical care.
 - a. Gravely Disabled is **not** any of the following:
 - i. Surviving safely with the help of responsible family, friends, or others who are both willing and able to help provide basic personal needs (food, clothing, and shelter).
 - ii. Using poor judgement or displaying eccentric behavior.
 - iii. Chosen lifestyle or lack of funds.
4. **Necessary Medical Care** - Care that a licensed health care practitioner, while operating within the scope of their practice, determines to be necessary to prevent serious deterioration of an existing physical medical condition which, if left untreated, is likely to result in serious bodily injury as defined in Welfare & Institutions Code § 15610.67.
5. **Personal Safety** - The ability of one to survive safely in the community without involuntary detention or treatment.
6. **Severe Substance Use Disorder** - A diagnosed substance-related disorder that meets the diagnostic criteria of "severe" as defined in the most current version of the Diagnostic and Statistical Manual of Mental Disorders (DSM-5).

~~B. ASSISTANCE TO OUTSIDE AGENCIES~~

- ~~1. STAFF MEMBER IS PRESENT. It is the intention of the Department that police assistance to clinicians will be restricted to cases where the person to be detained for psychiatric evaluation (5150 W & I) is currently violent and presenting a public safety risk.~~
- ~~2. STAFF MEMBER IS NOT PRESENT. When an emergency evaluation is requested by a clinician who is not at the scene, the officer shall make his/her own independent evaluation and take appropriate action consistent with that evaluation.~~
- ~~3. APPLICATION FOR EVALUATION. Except in an emergency situation as determined by the officer, a clinician must prepare the "Application for 72Hour Detention for Evaluation and Treatment" and make arrangements with Psychiatric Emergency Services (PES) prior to requesting assistance.~~
- ~~4. STAFF IDENTIFICATION. Clinicians who are certified to initiate involuntary detentions must carry an identification card issued by the County Director of Mental Health. If the clinician cannot show his/her card, the decision to detain will be the responsibility of the officer at the scene.~~
- ~~5. TRANSPORTATION. If all criteria are met for a psychiatric detention, take the person and the clinician's paperwork to PES at SFGH only. If the person is currently not demonstrating a~~

~~public safety risk, do not transport. Advise the clinician to consult with his/her supervisor regarding appropriate transportation.~~

~~III.~~ **6.14.04 PROCEDURES**

In determining the appropriate procedures to follow during mental health crisis calls, members should contact Department of Emergency Management (DEM) to request a response from other non-law enforcement agency resource programs through San Francisco Fire Department (SFFD) or Department of Public Health (DPH.) Members may also suggest resources, such as walk-in facilities, if applicable.

When members on-view or are dispatched to a call for service involving a person suspected of having a mental health disorder, members may abate, detain, arrest, or disengage as described below:

A. Abatement - ~~When abating a situation involving a mentally disturbed individual, follow these procedures: If the individual has not committed a crime and is not, as a result of a mental health disorder, a danger to themselves, a danger to others, or gravely disabled, members should abate the incident and recommend that the individual contact a mental health professional. Members may also notify their station Crisis Intervention Team (CIT) Liaisons of the contact with the individual for appropriate follow-up. When abating a situation involving someone with a mental health disorder, members should follow these procedures, if appropriate:~~

- 1. Incident Report** - ~~If the individual needs psychiatric evaluation but does not meet 5150 W & I criteria, member prepares an incident report, entitled "Aided Case/Request Evaluation" and list the individual as "D" (detained). the report should be titled "Investigative Detention", and 2. COPIES. Forward a copy of the report should be forwarded to the Psychiatric Liaison Unit CIT Unit which will be responsible for appropriate follow-up.~~
- 2. Resources** - Members should provide mental health resources to the involved parties. Members should consider contacting DEM to request a response from other non-law enforcement agency resource programs through SFFD or DPH. Members may standby until the arrival of the other agency, if feasible and appropriate.

B. Detention - As specified under Welfare & Institutions Code § 5150(a), a person, as a result of a mental health disorder, who is a danger to others, or to themselves, or gravely disabled may be detained for psychiatric evaluation. When detaining an individual for psychiatric evaluation and treatment, members shall follow these procedures:

1. **Advisement** - Pursuant to Welfare & Institutions Code § 5150(g)(1), each person, at the time they are first taken into custody under this section, shall be provided, by the member who takes them into custody, the following information orally in a language or modality accessible to the person. If the person cannot understand an oral advisement, the information shall be provided in writing. The information shall be in substantially the following form:

“My name is (your name). I am a peace officer with the San Francisco Police Department. You are not under criminal arrest, but I am taking you for an examination by mental health professionals at (name of facility). You will be told your rights by the mental health staff.”

2. If taken into custody at their own residence, members shall provide the person with the following information:

“You may bring a few personal items with you, which I will have to approve. Please inform me if you need assistance turning off any appliance or water. You may make a phone call and leave a note to tell your friends or family where you have been taken.”

- ~~1.3. **Transportation** - Take the individual to Psychiatric Emergency Services (SFGH) only and complete an "Application for 72Hour Detention for Evaluation and Treatment."~~ Members should request an ambulance to transport the individual to a hospital. If the ambulance's response is delayed, members may transport *the individual to Psychiatric Emergency Services (PES) at Zuckerberg San Francisco General Hospital (ZSFGH) or other designated facility.*

- a. If the subject is actively violent and a danger to the public, at least one member should accompany the medics or follow the ambulance to the receiving facility. A member who observed the behavior leading to the detention shall directly provide an assessment to the receiving facility.

- b. Pursuant to Welfare & Institutions Code § 5150.2, whenever a peace officer has transported a person to a designated facility for assessment under Welfare & Institutions Code § 5150, that officer shall not be detained/delayed any longer than the time necessary to complete documentation of the factual basis of the detention under Welfare & Institutions Code § 5150 and a safe and orderly transfer of physical custody of the person.

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4. **Evaluation Form** - Members shall complete a DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and electronically attach a copy of it to the incident report.
5. **2. Incident Report** - Prepare an incident report and title it "~~Aided Case/5150 W & I.~~ List the individual as "D" (detained). **Mental Health Detention**" and list the individual as detained. Forward a copy of the report to the CIT Unit for appropriate follow-up.
- a. **Criteria** - Describe the circumstances that formed the probable cause to believe that one or more of the criteria, listed under 6.14.03, has been met.
- b. ~~a. Description~~ - Include a detailed physical description of the individual, and an accurate residence address, and/or contact information should the subject be a person experiencing homelessness. Also ~~If available~~, include his/her their date of birth, SF number, driver's license number, Social Security number, SF number, and any other identification numbers.
- c. ~~b. Firearms/Weapons~~ - ~~If applicable~~, list any confiscated firearms or deadly weapons in the incident report.
- d. ~~e. Property~~ - ~~If applicable~~, describe how ~~if any~~ of the person's property was safeguarded, or placed in police custody, or provided to a third party or medical facility on the San Francisco Police Department Psychological Evaluation Patient Property Receipt Form (SFPD 627). The inventory form shall be electronically attached to the incident report.
- d. **CRITERIA**. Describe the circumstances that formed the reasonable and probable cause to believe that one or more of the criteria listed under Section I., A. above were present.
- C. **Arrests** - ~~After arresting a mentally disturbed individual for~~ **If a person has committed a criminal offense, cite or book and meets Welfare & Institutions Code § 5150 criteria, members should make an arrest** according to Department policy (see DGO 5.06, Citation Release). Also and follow these the below procedures, if feasible:
1. **Citation** - If an individual is eligible for citation, release, but as a result of a mental disorder is a danger to himself/herself, a danger to others, or is gravely disabled, cite the individual and take him/her them to a PES at SFGH facility. Indicate on the "~~Application for 72Hour Detention for Evaluation and Treatment~~" **DHCS 1801 Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment form** that the person has been cited for an offense.

2. **Booking** - If ~~an~~the individual cannot be cited pursuant to Department policy, ~~book him/her and request on the booking form that the Jail Psychiatric Services evaluate the individual in the jail.~~ **take them to a PES facility for a psychiatric evaluation prior to booking.**
3. **INCIDENT REPORT.** ~~In either of the above cases, prepare an incident report and forward a copy to the Psychiatric Liaison Unit. Title the report by the offense and indicate that you have either cited and detained the individual for psychiatric evaluation or booked the individual and made a referral to Jail Psychiatric Services. Example: Battery/Fists/Cited & 5150'd, Robbery/Gun/Referral Made to Jail Psychiatric Services~~
Transportation - Members should request an ambulance to transport the individual to a hospital. If the ambulance's response is delayed, members may transport the individual to a PES facility.

Members are reminded to adhere to DGO 5.18, *Prisoner Handling and Transportation* when a subject has committed a criminal offense and meets Welfare & Institutions Code §5150 criteria.

4. **Evaluation Form** - Members shall complete a DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and electronically attach a copy of it to the incident report.
5. **Incident Report** - *In either of the above cases, prepare an incident report and forward a copy to the CIT Unit.*
 - a. When booking the individual, *title the report by the offense(s) and indicate* in the narrative that the individual was transported to PES or other designated facility for evaluation.
 - b. When citing the individual, *title the report by for the offense(s) committed and add the title "Mental Health Detention."*

D. **FACILITIES.** ~~Currently, adults are evaluated at Psychiatric Emergency Services (PES) at SFGH. Due to policy and budget considerations, facilities may change along with the hours of operation. Any changes will be announced in Department Bulletins.~~

Disengagement - Disengagement should be considered when continued contact might result in an undue safety risk to the person, members of the community, and/or Department members. See DGO 5.24, *Disengagement Procedures*.

E. **VOLUNTARY ADMISSIONS.** ~~There is no such thing as a "voluntary 5150."~~

The fact that an individual is willing to accompany you to a psychiatric facility does not make the evaluation voluntary. If you believe that psychiatric evaluation is necessary, complete an "Application for 72Hour Detention for Evaluation and Treatment" even though the individual willingly accompanies you to PES.

Handling Non-Law Enforcement Agencies Request for Assistance

- 1. Clinician or Other City Agency Representative is on Scene** - Members should assist clinicians when a person is to be detained for psychiatric evaluation, specified under Welfare & Institutions Code § 5150, and is currently violent and presenting a public safety risk.

Except in an emergency as determined by the member, the clinician or other city agency representative must prepare the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and make arrangements with a PES facility.

- 2. Clinician or Other City Agency Representative is Not on Scene** - When a psychiatric evaluation is requested by an individual who is not at the scene and is not providing third party information, the officer shall make his/her should conduct their own independent psychiatric evaluation and take appropriate action consistent with Welfare & Institutions Code §5150.

- 3. Conservatorship** - A conservator has the authority to detain the conservatee and place them in a designated facility (Welfare & Institutions Code § 5358.5). If a member of the Conservator's Office request assistance in providing a standby for their safety while administering treatment, follow the below listed procedures.

Unless the conservatee is currently violent and presenting a public safety risk, members should consider contacting DEM to request a response from other non-law enforcement agency resource programs through SFFD or DPH.

If the conservatee is currently violent and presenting a public safety risk, members shall follow these procedures:

- a.** Prior to facilitating the standby, members shall verify that the certified court document has not expired and bears the name of the individual given treatment.
- b.** Standby for the administration of medication.
- c.** If the individual refuses medication and the conservator requests transportation to a hospital, members shall request an ambulance to transport the individual to a hospital.

- d. Members shall not assist in the administration of medication. If the subject refuses medication and becomes combative or assaultive, members should attempt to offer de-escalation strategies and techniques. Members shall adhere to DGO 5.01, *Use of Force and Proper Control of a Person*.
- e. Members are not required to complete a DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form.
- f. Members shall write an Aided Case report.

F. ~~COORDINATING PSYCHIATRIC DETENTION WITH EMERGENCY MEDICAL TREATMENT.~~ If an individual is injured or ill, you must have him/her medically treated before requesting a psychiatric evaluation. The following procedures apply when an individual is not under arrest: **Facilities - Adults detained for psychiatric evaluation are evaluated at PES at ZSFGH or other designated facility.** Facilities and hours of operation are subject to change. *Any changes will be announced in a Department Notice.*

- ~~1. SAN FRANCISCO GENERAL HOSPITAL.~~ If the individual is being treated at San Francisco General Hospital, Emergency Department, go to the Psychiatric Emergency Services (PES) and complete the "Application for 72Hour Detention for Evaluation and Treatment." Leave the original at PES and take a copy to the emergency room attending physician. Your responsibility ends here. Any security services will be provided by SFGH Institutional Police.
- ~~2. OTHER MEDICAL FACILITIES.~~ When an individual is being treated at any other hospital emergency room, complete the "Application for 72Hour Detention for Evaluation and Treatment" and present it to the attending physician. The physician is responsible for arranging for transportation of the patient to PES at San Francisco General Hospital. Any security required will be provided by the hospital's security staff. Your responsibility ends here.
- ~~3. INCIDENT REPORT/EVALUATION FORM.~~ In either of the cases above, prepare an incident report, title it "Aided Case/5150 Detention," and attach a copy of the "Application for 72Hour Detention for Evaluation and Treatment" to it. List the individual as "D" detained and include the circumstances of the incident, the name of the medical facility, and the attending physician.

G. JUVENILES. See DGO 7.02, Psychological Evaluation of Juveniles. **Diversion -** When PES at ZSFGH declares "Condition Red," meaning they are on diversion, the detained individual should be redirected to any emergency room in the City and County of San Francisco.

~~H. FIREARMS AND DEADLY WEAPONS. Welfare and Institutions Code Section 8102 requires law enforcement officers to seize firearms and other deadly weapons from individuals detained or apprehended for examination of a mental condition pursuant to Section 5150 W&I. When seizing a firearm, or deadly weapon, advise the individual to contact the SFPD Legal Division concerning its return. Also fax a copy of your incident report to the Department's Legal Division.~~

Voluntary Admissions - When an individual meets Welfare & Institutions Code § 5150 criteria and is willing to be transported to a PES facility, members should contact DEM to request a response from other non-law enforcement agency resource programs through SFPD or DPH. If no other non-law enforcement agencies are available, members shall follow the guidelines set forth in 6.14.04.B and complete the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and request an ambulance for transportation.

~~1. MENTAL HEALTH FIREARMS PROHIBITION SYSTEM. The Department of Justice, Bureau of Criminal Identification and Information, has developed a data base for the Mental Health Firearms Prohibition System (MHFPS). If you are conducting a criminal investigation that involves the acquisition, carrying or possession of a firearm, the CLETS data base will include a message that the person you are investigating may be subject to a mental health firearms prohibition pursuant to Sections 8100/8103 of the Welfare and Institutions Code. This message is provided in addition to the person's name, personal description, available identifying numbers, such as driver's license, Social Security, California Identification, Military Identification, or other miscellaneous identification numbers. You can use any CABLE terminal that has CLETS inquiry capability to access this data base using one of two ways:~~

~~a. Using RF/~~

- ~~• RF/CJS/FQA Name inquiry~~
- ~~• RF/CJS/FQN Number inquiry~~
- ~~• RF/CJS/FQP Record number inquiry~~

~~b. Using the HELP system~~

~~You can access the three inquiries listed above using the HELP system by first selecting the Firearms category (E), then the MHFTS category (E7), finally entering the respective category for name inquiry (E7A), number inquiry (E7B), or record number inquiry (E7C). If you need the reason a person has been prohibited from owning firearms, contact the DOJ Firearms Clearance Section.~~

~~I. PROPERTY. When detaining an individual per 5150 W & I, take reasonable precautions to secure his/her premises and private property. Document this in your incident report. Any personal property that cannot be properly secured must be booked as Property for Safekeeping (see DGO 6.15, Property Processing).~~

Coordinating Psychiatric Detention with Emergency Medical Treatment - *If an individual is injured or ill, members must have them medically treated before requesting a psychiatric evaluation.*

1. The following procedures apply when an individual is not under arrest:

a. Zuckerburg San Francisco General Hospital - *If the individual is being treated at ZSFGH Emergency Department:*

- i. *Complete the DHCS 1801 Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment form and present it to the attending physician.*
- ii. *The hospital staff is responsible for the security and patient transfer to PES. Unless the individual is violent, members are not required to remain at the hospital.*

b. Other Medical Facilities - *When an individual is being treated at any other hospital emergency room:*

- i. *Complete the DHCS 1801 Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment form and present it to the attending physician.*
- ii. *The hospital staff is responsible for the security and patient transfer to PES at ZSFGH. Unless the individual is violent, members are not required to remain at the hospital.*

c. Incident Report/Evaluation Form - *In either of the cases above, prepare an incident report, title it "Mental Health Detention" and include the circumstances of the incident, the name of the medical facility, and the name of the attending physician. Electronically attach a copy of the DHCS 1801 Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment form to the incident report.*

J. MEDICATION. ~~Any medication seized goes with the individual either to jail or the hospital.~~
Mental Health Firearms Prohibition System - *Department of Justice, Bureau of Criminal Identification and Information, has developed a database for the Mental Health Firearms Prohibition System (MHFPS). If members are conducting a criminal investigation that involves the acquisition, carrying, or possession of a firearm, the CLETS data base will include a message that the person the member is investigating may be subject to a mental health firearms prohibition pursuant to Welfare & Institutions Codes §§ 8100 or 8103. This message is provided in addition to the person's name, personal description, available identifying*

numbers, such as driver's license, Social Security, California Identification, Military Identification, or other miscellaneous identification numbers. Members can use Level II to access CLETS, which has the capability to access this database using the MHFPS mask.

1. *If members need the reason a person has been prohibited from owning firearms, contact the DOJ Firearms Clearance Section.*
2. If the individual is not subject to a firearms prohibition, members should, when feasible, attempt to obtain a Gun Violence Restraining Order (GVRO) if the individual threatens to obtain or use a firearm. Follow Department policies in obtaining a GVRO.

K. QUESTIONS. ~~For consultation or information, call officers at the SFPD Psychiatric Liaison Unit (PLU) at 2068099 (Monday-Friday 0900-1700 hrs.). During nonbusiness hours, contact the PLU through the Operations Center.~~ **Duty to Confiscate Firearms/Deadly Weapons -** Members have a duty to confiscate *firearms and deadly weapons* (Welfare & Institutions Code § 8102).

1. Members shall confiscate firearms and deadly weapons that are located on the detained person or are otherwise legally accessible to the member and provide the person with a property receipt (Welfare & Institutions Code § 8102). Such items will be classified as property for safe keeping unless it is evidence. The obligation under Welfare & Institutions Code § 8102 to confiscate firearms and other deadly weapons does not carry with it an automatic right to search places or property not accompanying the person to the facility. Members need a search warrant or recognized warrant exception before entering a residence or other place to search.
2. If no exception (e.g. consent, exigent circumstances) to the warrant requirement applies, members should consider obtaining a search warrant to take possession of firearm(s) or deadly weapons inside a residence, vehicle, the detainees' personal belongings left with a friend or relative, or any other area in which a warrant would be required to access (Welfare & Institutions Code § 8102 and Cal. Penal Code § 1524(a)(10)).
3. When seizing a firearm, or deadly weapon, *advise the individual to contact the CIT Unit concerning its return.*
4. A list of deadly weapons is found in Cal. Penal Code section 16590.

L. TARASOFF INCIDENTS. ~~See DGO 6.21, Tarasoff Incidents.~~

Duty to Safeguard Property - Members have a duty to preserve and safeguard the personal property of an individual taken into custody for an evaluation (Welfare & Institutions § 5150(f)).

1. Members shall search all persons detained prior to transport, pursuant to Welfare & Institutions Code §5150, and all personal property in their immediate possession. Members shall also complete SFPD 627. If the person detained requests or consents to leave their personal items such as purses, backpacks, or bags with an on-scene third party, such items should not be searched without a search warrant or other recognized warrant exception.
 2. If the person detained under Welfare & Institutions Code § 5150 is a person experiencing homelessness and that individual is in possession of an excessive amount of personal property, the member shall contact DPW for assessment and processing and follow current Department protocol for processing property consistent with DPW's "Bag & Tag" policy.
- M. Medication** - Upon request or if appropriate, document any relevant medication in the incident report.
- N. Tarasoff Incidents** - *See DGO 6.06, Tarasoff Incidents.*
- O. Juveniles** - *See DGO 7.02, Psychological Evaluation of Juveniles*
- P. Questions/Consultations** - Calls for service involving mental or behavioral health issues may be complex. *For consultation or additional information, members can call the CIT Unit at Field Operations Bureau 415-575-7142 (Monday – Friday 0800-1800 hours). Contact the CIT Coordinator through the Department Operations Center during non-business hours.*

References

California Commission on Peace Officer Standards and Training – Learning Domain 37: *People with Disabilities*

~~DGO 3.05, Department Weapon Return Panel~~

~~DGO 3.23, Department Weapon Return Panel~~

DGO 5.01, *Use of Force and Proper Control of a Person*

DGO 5.03, *Investigative Detentions*

DGO 5.06, *Citation Release*

DGO 5.18, *Prisoner Handling and Transportation*

DGO 5.21, *The Crisis Intervention Team (CIT) Response to Person in Crisis Calls for Service*

DGO 5.24, *Disengagement Procedures*

DGO 6.06, *Tarasoff Incidents*

DGO 7.02, *Psychological Evaluation of Juveniles*

5150 W & I Code

8102 W & I Code