
Responding to Persons with a Mental Disorder

418.1 PURPOSE AND SCOPE

This procedure is to provide guidelines for all members of the Union City Police Department when interacting with persons suspected of suffering from a mental disorder. Additional guidelines regarding mental illness commitments are referenced in the Mental Illness Commitments Policy.

418.2 POLICY

The policy of the Union City Police Department is to treat all persons with dignity and compassion. Officers must become familiar with the causes and nature of mental disorders to determine if an individual may be a danger to him/herself, others, or is gravely disabled. Sworn members are not expected to make judgments about or diagnose specific mental disorders, but must be able to recognize general indicators of mental disorders so that appropriate actions can be taken.

418.3 DEFINITIONS

Mental disorder - A term used for a group of disorders causing severe disturbances in a person's thinking, feeling, judgment, behavior and ability to relate to others. A person affected by a mental disorder usually has a substantially diminished capacity for coping with the ordinary demands of life. Symptoms can vary and every person who is affected by a mental disorder is different. Often symptoms of mental disorders are cyclic, varying in severity from one time to the next. The duration of an episode also can vary. Some persons are affected for a few weeks or months, while for others, the disorder may last many years or a lifetime. Mental disorder is also commonly referred to as mental impairment or mental illness.

Thought disorder - A condition where an individual's normal thought process is disrupted causing that person to experience symptoms such as anxiety, agitation, delusions, paranoia, bizarre ideation, or visual and auditory hallucinations. The individual's speech may be confusing or illogical, and may be too rapid or too slow.

Mood disorder - A condition where an individual experiences periodic disturbances in mood, concentration, sleep, activity, appetite or social behavior. Mood disorders can be marked by periods of extreme sadness or excitement. Persons with mood disorders, such as depression may be at risk for suicide. Mood disorders are also referred to as affective disorders.

Hallucination - A false perception experienced through any one of the five senses (e.g., hearing voices, feeling one's skin crawl, smelling strange odors, seeing visions, etc.). When hallucinating, persons may be so preoccupied that they have little or no awareness of the environment around them. Officers should be aware that substance abuse (drugs and/or alcohol) can also cause delusions, hallucinations, and violent mood swings in an individual. One type of hallucination is "Command Hallucinations", this occurs when a person hears a voice telling them to do things.

Delusion - A persistent false belief, or thoughts and actions not based on reality (e.g., delusions of grandeur, self-importance, being persecuted or conspired against, etc).

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Gravely disabled - A condition in which a person, as a result of a mental disorder, is unable to provide for his or her basic personal needs for food, clothing, or shelter (Welfare and Institutions Code § 5008).

5150 W&I Code - When any person as a result of mental disorder, is a danger to others, or to himself or herself, or gravely disabled, a peace officer...may, upon probable cause, take, or cause to be taken, the person into custody and place him or her in a facility designated by the county and approved by the State Department of Mental Health as a facility for 72-hour treatment and evaluation.

418.4 PROCEDURES

418.4.1 GUIDELINES FOR RECOGNITION

(a) Verbal cues:

1. Subjects may have illogical thoughts and express a combination of unrelated or abstract topics. For example, subjects may communicate thoughts of greatness (e.g., person believes they are God). Or, they may express thoughts of being harassed or threatened (e.g., CIA monitoring thoughts through TV set). A subject may show a preoccupation with death, germs, guilt.
2. A subject may exhibit unusual speech patterns such as nonsensical speech or chatter. They may talk out loudly to themselves. A subject might frequently repeat the same or rhyming words or phrases. A subject may sometimes express urgency in his/her manner of speaking, or conversely, have extremely slow speech.
3. A subject may show verbal hostility or excitement such as talking loudly or excitedly.
4. The subject may be argumentative, belligerent or unreasonably hostile. The subject's speech may also be unusually flat, monotone, or minimal. The subject may threaten to harm him/herself or others.

(b) Behavioral cues:

1. The subject's clothing is inappropriate for the current weather (e.g., shorts in winter, heavy coat in summer). The subject may be wearing bizarre clothing or makeup, taking into account current trends. The person may neglect his/her appearance; present as dirty or un-groomed.
2. Individuals may exhibit strange postures or mannerisms; lethargic, sluggish movements, physically agitated or hyperactive.
3. Subjects may see or hear things that are not able to be confirmed. They may be confused about or unaware of their surroundings. They may have a poor connection to reality (e.g., unable to recite basic facts such as today's date, month or year, the current U.S. President, etc.).
4. Subjects may have a lack of emotional response, or may cause injury to themselves.

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5. Subjects may react to situations in an inappropriately angry or frightening way.
 6. The subject may wander around in a confused state.
- (c) Environmental cues:
1. The individual's surroundings are inappropriate, such as strange adornments, inappropriate use of household items (e.g., aluminum foil covering windows).
 2. Subjects may accumulate trash, hoard string, newspapers, paper bags, clutter. There may be the presence of feces or urine on the floors or walls.

418.4.2 INTERACTION WITH PERSONS

Interacting with persons with a mental disorder who may be a danger to themselves or others:

- (a) Persons affected by a mental disorder can be unpredictable and sometimes violent. Employees should not compromise or jeopardize their own safety or the safety of others when dealing with individuals who display symptoms of a mental disorder.
- (b) Attempt to communicate with the subject, but avoid aggravating the situation. Speak to the subject in a calm, non-threatening manner. Explain clearly what is going on. Ask the individual if they are having impulses to hurt themselves or others. Ask if they are receiving mental health treatment, taking medications, alcohol and/or drugs.
- (c) Not all persons affected by mental disorders are dangerous. Some subjects may represent danger only under certain circumstances or conditions. Subjects may behave unpredictably, going from a state of calm to being extremely agitated very quickly.
- (d) There are a number of indicators that employees may use to help determine if persons who appear to be affected by a mental disorder are dangerous to themselves or others:
 1. The availability of any weapons to the subject.
 2. Statements made by the person that suggest he/she is prepared to commit a violent or dangerous act.
 3. There is a personal history of violent acts under similar or related conditions.
 4. Information may come from a previous law enforcement contact or persons familiar with the subject.
 5. Signs of violence that were made prior to the employee arriving. The amount of self-control the subject is able to demonstrate. This can include signs of rage, anger, fright or agitation. Signs of lack of control can include an inability to sit or stand still, wide eyes, rambling speech.

418.5 AUTHORITY TO DETAIN A PERSON UNDER 5150 W&I

An officer having probable cause may take a person into custody and place the person in an approved mental health facility for 72-hour treatment and evaluation when the officer believes that, as a result of a mental disorder, the person is a danger to him/herself or others or the person is gravely disabled (Welfare and Institutions Code § 5150; Welfare and Institutions Code § 5585.50).

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When determining whether to take a person into custody, officers are not limited to determining if the person is an imminent danger and shall consider reasonably available information about the historical course of the person's mental disorder, which may include evidence presented from any of the following (Welfare and Institutions Code § 5150; Welfare and Institutions Code § 5150.05):

- (a) An individual who is providing or has provided mental health treatment or related support services to the person.
- (b) A family member.
- (c) The person subject to the determination or anyone designated by the person.

418.5.1 VOLUNTARY EVALUATION

If an officer encounters an individual who does not qualify for a 5150 commitment but desires to voluntarily be evaluated at an appropriate facility, the officers should:

- (a) Arrange for transportation of the person, via the current contracted ambulance service, to an appropriate facility that is able to conduct an evaluation of the person.
- (b) If the person does meet the criteria for a 5150 commitment, officers should proceed with a 5150 W&I commitment if appropriate.

418.5.2 MEDICAL AND MENTAL HEALTH TREATMENT

Medical and mental health treatment for persons suffering from a mental disorder:

- (a) Once the employee has taken control of a situation, he/she should assess the need for medical attention and summon medical personnel if required. Whenever a subject being detained pursuant to 5150 W&I and is in need of medical treatment, medical aid shall be summoned. After medical aid has been provided, the disposition of the subject can be determined.
- (b) Detaining persons pursuant to 5150 W&I:
 - 1. Adults who are detained pursuant to 5150 W&I will be taken to a mental health facility, which will be determined by Alameda County Protocol. Persons who are detained pursuant to 5150 W&I, and are also under the influence of alcohol or drugs, may require medical clearance prior to being transported to a mental health facility.
 - 2. All minors will be medically cleared by paramedics or emergency medical personnel staff prior to being transported to Willow Rock Center, 2275 Arlington Drive, San Leandro for a 5150 W&I evaluation. Willow Rock Center does not provide medical clearances.
 - 3. Children under 12 years of age will be transported to Children's Hospital in Oakland.
 - 4. Officers initiating a 5150 W&I will complete an "Application for 72 Hour Detention" form at the scene.
 - (a) A report number shall be drawn and noted on all copies. The white copy will be retained by the Officer and submitted as the report for the incident. The remaining copies will accompany the subject to the mental health facility.

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- (c) Transportation for persons detained pursuant to 5150 W&I will, in most cases, be via ambulance. In the interest of time, Officers may transport non-violent, cooperative adult subjects. Persons requiring medical clearance and juveniles will be transported via ambulance.
- (d) Individuals with a mental disorder who do not meet the criteria for 5150 W&I and do not want a voluntary evaluation, but are in need of services can be referred to the following resources:
 - 1. Officers should refer subjects to available individual health plans, such as Kaiser, as they provide mental health assistance.
 - 2. If no health plan is available, consider the following:
 - (a) Alameda County Crisis Response Program (South County) can be contacted Monday-Friday, 8:30 a.m. to 5:00 p.m. (510-667-4901) to schedule an appointment to assess the individual/family needs and connect them with resources.
 - (b) Additional community resources can be found by phone (24/7) at “211” for critical health and human service referrals, or on line at <http://www.211alamedacounty.org>.

418.6 CRIMINAL OFFENSES

Officers investigating an individual who is suspected of committing a minor criminal offense and who is being taken on a 5150 commitment may resolve the criminal matter by issuing a warning or a Notice to Appear as appropriate. Officers should always consider a 5150 commitment over physical arrest when mental health issues appear to be a mitigating factor for people who are suspected of committing minor crimes or creating other public safety issues.

When an individual who may qualify for a 5150 commitment has committed a serious criminal offense that would normally result in an arrest and transfer to a jail facility, the officer should:

- (a) Arrest the individual when there is probable cause to do so.
- (b) Notify the appropriate supervisor of the facts supporting the arrest and the facts that would support the 5150 commitment.
- (c) Thoroughly document in the related reports the circumstances that indicate the individual may qualify for a 5150 commitment.

After being notified of the facts regarding the incident, the on-duty supervisor shall make the decision to have the officer either arrest or transport the person to the appropriate mental health facility. The supervisor should consider the seriousness of the offense, the treatment options available, the ability of this department to regain custody of the individual, department resources (e.g., posting a guard) and other relevant factors in making this decision. If the arrestee is transported to a mental health facility prior to being booked into jail, the reporting officer shall do the following:

- (a) Notify the mental health facility that the subject being detained is also charged with a crime. The reporting officer shall advise the facility that prior to releasing the subject, they should notify the Union City Police Department who will respond to the facility

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and take custody of the subject. The notification can be written on the Application for 72 Hour Detention form or by phone call. The reporting officer shall notify the on-duty patrol supervisor regarding the pending charges against the subject.

- (b) The arresting officer shall make a copy of the arrest report, a copy of the Application for 72 Hour Detention form, and give the documents to the on-duty patrol sergeant. The officer shall also complete an informational bulletin to notify other police personnel that the subject is currently under a mental health detention and has been arrested for a crime. The bulletin shall be placed in the B.O.L book.

The on-duty patrol supervisor shall secure a copy of the arrest report, the Application for 72 Hour Detention form, and the information bulletin on the dry-erase board in the Sergeant's Office. The on-duty sergeant shall pass on the information regarding the incident to the next patrol supervisor who relieves him/her. The on-duty patrol supervisor from each shift should contact the mental health facility once per shift to check on the status of the subject until he/she is released.

Once the Union City Police Department is notified that the subject is clear for incarceration, the on-duty supervisor shall send an officer or PTO to the mental health facility. The officer or PTO will take custody of the arrestee and transport him or her to the appropriate correctional facility.

418.7 COURT ORDERED EVALUATION

A private citizen may file a petition for a 72-hour evaluation when it is alleged that a person is a danger to himself or others, or is gravely disabled. Officers coming in contact with individuals wishing to make such commitments will refer them to Highland Hospital Psychiatric Emergency Service.

- (a) Officers receiving an order of Evaluation from the courts will personally serve the person to be evaluated and will give the person being served a copy of the Petition for Evaluation and the Order of Evaluation.
 - 1. The officer will complete the return of service and forward it to the Records Unit for mailing to the court that issued the order. A copy of this return service will be scanned to the associated Union City Police report number.
 - 2. Officers shall write an ARS report documenting the service of the order.
- (b) Confinement of person found dangerous during outpatient period (Penal Code § 1609).
 - 1. If, at any time during the outpatient period, the prosecutor is of the opinion that the person is a danger to the health and safety of others while on outpatient status, the prosecutor may petition the court for a hearing to determine whether patient shall continue in outpatient status.
 - 2. Penal Code § 1610 - Upon the filing of a request for revocation of outpatient status under Penal Code § 1608 or § 1609, and pending the court's decision on revocation, the person subject to revocation may be confined in the state hospital or other facility by the county mental health director. Upon the request of the county mental health director or a designee, a Peace Officer shall take,

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or cause to be taken, the person into custody, and transport the person to a treatment facility for hospitalization under this section.

3. Transportation mode and location of confinement will be consistent with provisions of this policy.
- (c) Orders of Detention - If the person to be evaluated does not present himself for evaluation as outline by the Order of Evaluation, the treatment facility will return a Notice of Failure to Appear and Request for detention to the person who served the original order. Thereafter, the person must be detained under the authority of the notice and delivered to Highland Hospital for 72-hour treatment and evaluation.
1. Officers receiving a Notice of Failure to Appear and Request for Detention will proceed to take the individual named into protective custody and transport that person to Highland Hospital via ambulance.
 2. The original copy will accompany the patient to the hospital. The court copies will be forwarded to the Records Unit for return to the court. A copy will be attached to the associated Union City Police report number.

418.7.1 CONFISCATION OF FIREARMS AND RESPONSIBILITIES OF OFFICER

- (a) Upon confiscation of firearm(s) or other deadly weapon(s), the confiscating officer shall give a receipt to the person from whom the weapon(s) were confiscated.
- (b) The receipt shall describe the firearm(s) or other deadly weapon(s) and list any identification or serial numbers on the firearm(s) or weapons(s).
- (c) The receipt shall inform the owner of the procedure for the possible return of any firearm(s) or weapon(s) confiscated.
- (d) The original copy of the receipt shall be forwarded to Records for inclusion as an attachment to the police report. A copy shall be given to the person from whom weapon(s) were confiscated, and the remaining copy shall be forwarded to the Property Unit, prior to the end of shift.
- (e) The officer shall complete a detailed police report of the incident and use the case number from the original 5150 W&I report. The report shall include specific information leading to the confiscation of the weapon(s) and a recommendation for the weapon(s) destruction or release to the owner. The narrative shall outline the justification for the request. A copy of the police report shall be routed by the officer to the Lieutenant in charge of the Property Unit.
- (f) If the destruction of the weapon(s) is recommended, the Property Unit supervisor or designee shall:
 1. Follow all procedures as required under law, and
 2. Include all pertinent information on file to support the position that the return of the weapon(s) would likely result in endanger the person or others.
- (g) All firearms shall be checked via the Automated Firearms System (AFS). The confiscating officers are responsible for properly tagging and placing weapon(s) into

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property/evidence storage prior to the end of their shift, pursuant to the provisions of Property and Evidence Policy.

418.8 PROCEDURAL PROCESS AND RESPONSIBILITIES OF PROPERTY SUPERVISOR

If the officer has recommended destruction of the weapon(s):

- (a) The Property supervisor will notify the Lieutenant in charge of the Property Unit via email and provide him/her with the case number, which boxes, if any, were marked on the property form, and a summary of any priors in RMS and CRIMS.
- (b) In the absence of the Lieutenant in charge of the Property Unit the email notification is to be sent to the Detective Sergeant.
- (c) If a petition is not filed within the 30-day period, the weapon shall be made available for return after owner complies with required provisions of the law and policy.
- (d) Upon notification from the Lieutenant in charge of the Property Unit or the Detective Sergeant that the petition should be initiated, the Property supervisor or designee will complete and send to the City Attorney the "Request for Hearing, 5150/8102 W & I" form and a copy of the Union City Police Department report.
- (e) If the individual files a written request for a hearing, within 30 days, instruct him/her to contact the Superior Court Clerk to confirm his/her desire for a hearing.
 1. The Superior Court Clerk will make arrangement for the hearing.
- (f) If the individual fails to request a hearing, the City Attorney's Office will file a petition with the court for Order of Default.
- (g) The City Attorney will send the Property Unit a copy of the court order. The firearm(s)/ weapons will be released or destroyed pursuant to the court order.
- (h) All weapon(s) ordered destroyed by the court will be destroyed on the first destruction date following the court order, in accordance with the applicable Penal Code Section.
- (i) If the weapons are ordered to be released, the Property supervisor or designee will:
 1. Run a complete records check on owner of weapon(s) to determine weapon ownership eligibility.
 - (a) Wants/Warrants
 - (b) Restraining Order System
 - (c) CRIMS/CII History

418.9 RESTRAINTS

If a patient is violent or potentially violent, the officer may choose to handcuff or place them in a Wrap in accordance with policy. Officers should also notify the ambulance personnel of any violence or threats displayed by the patient.

If the ambulance crew decides to place the patient in soft restraints, the officer will help provide physical control of the patient, if needed.

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Once at the designated facility, the officer may assist ambulance crews or facility staff with a patient who is violent or potentially violent, as necessary.

418.10 SECURING OF WEAPONS

At no time shall officers of the Union City Police Department secure their weapons at any facility that houses patients who are committed pursuant to Welfare and Institution Code § 5150. If a secured facility prohibits weapons on its property, officers shall explain the department's policy and advise a patrol supervisor. If the securing facility insists that officers secure their weapons, the patrol supervisor shall explain the department's policy again and allow the facility designee to decide if they still need the department's assistance.

418.11 SECURING OF PROPERTY AND PROPER DOCUMENTATION

When a person is taken into custody for evaluation, or within a reasonable time thereafter, and unless a responsible relative, guardian or conservator is in possession of the person's personal property, the officer shall take reasonable precautions to safeguard the individual's personal property in his/her possession or on the premises occupied by the person (Welfare and Institutions Code § 5150). The officer taking the person into custody shall provide a report to the court that describes the person's property and its disposition in the format provided in Welfare and Institutions Code § 5211, unless a responsible person took possession of the property, in which case the officer shall only include the name of the responsible person and the location of the property (Welfare and Institutions Code § 5150).

As used in this section "responsible relative" includes the spouse, parent, adult child, or adult brother or sister of the person.

Proper documentation when securing property is required under Welfare and Institutions Code(s) § 5210 and § 5211 and should be made by the officer taking him/her into custody for evaluation. Reports by officers should be substantially in the following form:

"I hereby report to the Superior Court for the County of Alameda that the personal property of the person apprehended, described generally as _____ was preserved and safeguarded by _____ (Insert name of person taking him/her into custody, or responsible relative, guardian, or conservator).

That property is now located at _____.

Dated ____ 20__.

418.12 SUPERVISOR RESPONSIBILITIES

Upon being notified of a call for service involving a mental health crisis, in combination with a weapon or active violence, the supervisor shall, when practical, immediately respond to the scene. If a supervisor is not available to respond to the scene, the supervisor should verbally acknowledge the call over the radio.

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418.13 COMMUNICATIONS PERSONNEL RESPONSIBILITIES

Upon receiving a call for service involving a person experiencing a mental health crisis in combination with a weapon or active violence, communications personnel are expected to dispatch a supervisor to the call. If no supervisor is available, the dispatcher is expected to make sure a supervisor verbally acknowledges the call for service.

418.14 REVISIONS

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