



# OFFICE OF THE SHERIFF

COUNTY OF LOS ANGELES

HALL OF JUSTICE

ROBERT G. LUNA, SHERIFF



May 11, 2023

Danielle Butler Vappie, Interim  
Executive Director  
Sheriff Civilian Oversight Commission  
World Trade Center  
350 South Figueroa, Suite 288  
Los Angeles, California 90071

**LOS ANGELES COUNTY SHERIFF'S DEPARTMENT  
RESPONSE TO CIVILIAN OVERSIGHT COMMISSION REQUEST FOR  
INFORMATION ON MENTAL HEALTH EVALUATION TEAMS (MET)**

Dear Ms. Vappie:

Thank you for the Civilian Oversight Commission's request for additional information regarding the current state of the Mental Health Evaluation Teams.

Enclosed please find a comprehensive report titled "Mental Evaluation Team Integrated Report," along with a "MET Fact Sheet" that we believe provides the answers to the questions listed in your correspondence of March 15, 2023.

We thank you for the opportunity to provide a comprehensive description of the important work performed by MET.

Should you have questions regarding our response, please contact me at

Sincerely,

ROBERT G. LUNA, SHERIFF

  
HOLLY FRANCISCO  
ASSISTANT SHERIFF

211 WEST TEMPLE STREET, LOS ANGELES, CALIFORNIA 90012

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— Since 1850 —

## FACT SHEET

### Los Angeles County Sheriff's Department Mental Evaluation Team Expansion

**April 2023**

**Purpose:** This Fact Sheet has been prepared to offer a succinct, high-level overview of the resources needed to successfully expand the Mental Evaluation Team (MET) within the Los Angeles County Sheriff's Department. By highlighting the necessary additional resources to facilitate a 24/7 operational capacity for MET, this document aims to ensure that patrol deputies can depend more on MET assistance by providing valuable insight into the unit's responsibilities and functions. This Fact Sheet has been developed for the Los Angeles County Sheriff Civilian Oversight Commission and other County policy and decision-makers.

#### BODY

Compare past and current mental health-related calls to MET requests in conjunction with the current number of personnel in the MET Unit:

Year	Patrol Handled	MET Handled	% MET Handled
2018	6,755	3,178	47.0%
2019	7,131	4,609	64.6%
2020	7,423	6,036	81.3%
2021	6,618	5,083	76.8%
2022	6,426	5,068	78.9%

*NOTE: The statistics mentioned above encompass the instances when patrol officers initially responded to mental health-related calls for service. MET call handling refers to situations in which the patrol requested the support of MET for addressing mental health-related radio calls, with MET successfully resolving these calls. Distinct from other co-response models, MET proactively engages with in-progress 9-1-1 calls and requests, entering scenes before safety confirmation to positively influence outcomes at the earliest possible stage.*

*Additional personnel requirements based on prior MET requests and [Civilian Oversight Commission MET Report recommendations](#)*

Staffing needs to increase to address the increasing incidents involving persons experiencing mental illness. An expansion will require a commitment from the Department of Mental Health to dedicate additional personnel to MET. One MET unit is a deputy sheriff paired with a DMH clinician.

**The current** MET model deploys one *specialty trained MET Deputy* and *mental health worker* co-response team to the field and to operate the *Triage Desk*.

Shift	South	North	Triage	All Units
AM	4	2	1	7
PM	4	2-3	1	7.5
Overlap	1	1	1	3
Graveyard (0200-0600)	0	0	1	1
Grand Total	9	5.5	4	18.5

**Current Needs** to restore deployment configuration without exhausting crisis response personnel with mandatory overtime.

Position Title	Need	Have	Difference
Field Deputies	34	26	8
Field Sergeants	4	4	0
Triage Deputies (24/7)	6	6	0
RAMP Investigators	6	5	1
RAMP Sergeants	2	1	1
DMH Field Clinicians	34	23	11
DMH Triage Clinicians (20/7)	3	3	0

NOTE: These numbers have not been adjusted to account for long-term Injured while on Duty staff. These field deputy and clinician numbers exclude the separately funded and contracted personnel.

**MET Personnel Funding**

\$10.8 million is allocated through AB109, while the Sheriff’s Budget is \$1.2 million to sustain the current staffing level, which is exhausted before year end to compensate for the shortfall of vacant positions or staff on medical leave.

**The Civilian Oversight Commission Recommended** MET model deploys 60 specially trained MET Deputy and mental health worker co-response teams to the field and expands Triage Desk staffing to meet the community’s needs conservatively.

Assuming the expansion to 60 deputies is distributed proportionally across the shifts and regions, the new deployment schedule would look like the table below:

Shift	South	North	Triage	All Units
AM	13	6	3	22
PM	13	8	3	24
Overlap	3	3	3	9
Graveyard (0200-0600)	2	0	3	5
Grand Total	31	17	12	60

NOTE: *Deployment fluctuates based on trends produced by data*

**Projected Staffing Needs** to meet recommended deployment needs:

Position Title	Need	Have	Difference
Field Deputies	60	26	34
Field Sergeants	6	5	1
Triage Deputies (24/7)	12	6	6
RAMP Investigators	9	5	4
RAMP Sergeant	2	1	1
DMH Field Clinicians	60	23	37
DMH Triage Clinicians (20/7)	6	3	3

**Logistical equipment:**

***The current Physical Vehicle Needs*** to sustain current staff deployment.

Role	Have	Need	Notes
MET Units	30	4	Generally, reflects a fleet loaner and over-designated miles vehicle to maintain service or a salvaged vehicle
RAMP	5	3	
Supervisor	5	4	The two-unit lieutenants are without administrative vehicles
10% Down for service	0	3	Vehicles being repaired or serviced for any amount of time
Total Additional Need		13	

***Projected Vehicle Needs*** to meet recommended deployment needs.

Role	Have	Need
MET Units	30	30
RAMP Units	5	6
Supervisor	5	6
Spare and Admin Vehicles <i>*to support vehicles being serviced and community engagement</i>	0	4

**Risk Assessment and Management Program (RAMP) Expansion Consideration:**

The RAMP team is dedicated to guiding individuals away from the criminal justice system and towards appropriate treatment, aligning with the "care first" philosophy of the Board of Supervisors. To better address the growing need for these services, it is recommended that RAMP be allocated an additional three sworn and three clinical personnel. RAMP teams involve a Deputy Sheriff investigator collaborating with a Mental Health Clinician.

The key objectives of RAMP include the following:

- Evaluate and manage high-risk cases involving individuals with mental illness by connecting them to appropriate mental health services.

- Ensure proper mental health history documentation facilitates mental health service providers and the court system to develop suitable treatment plans.
- Collaborate with divisional and specialized personnel to provide mental health history that aids in criminal cases, mandated treatment, and risk mitigation.
- File criminal and civil order cases to achieve compliance and remove potential dangers.
- Engage with families and stakeholders to devise strategies that minimize risks and promote stabilization.
- Create Officer Safety Flyers and managing Special Locations to inform personnel of high-risk individuals affected by mental illness in their area.
- Provide safety assistance requests from DMH's high acuity patient Assisted Outpatient Treatment (AOT) team (Laura's Law).
- Serving Gun Violence Restraining Orders.
- Conduct school threat assessments.
- Confiscate firearms from individuals prohibited from possessing them based on mental health history.
- Engage high utilizers of police resources and connecting them to mental health treatment.
- Assist DMH HOME with temporary conservatorship orders for high-acuity consumers of services.
- Operate on an on-call basis after hours.

RAMP investigations often diverge from a linear fact pattern, necessitating collaboration with various stakeholders. These may include specialized investigative units such as the Executive Force Review, Major Crimes Bureau, Psychological Services Bureau, and external agencies like the District Attorney's Office, City Attorney's Office, Federal Bureau of Investigation, and the United States Department of Veterans Affairs. RAMP investigators prioritize and manage caseloads, identify patterns, devise strategies, and assess and mitigate risks through a comprehensive network of resources spanning city, county, and state levels.

By adopting a collaborative approach to risk management, RAMP fosters long-term solutions that extend beyond the confines of the criminal justice system.

The expansion of MET teams will result in increased referrals to RAMP.

## **ANALYSIS**

The Los Angeles County Sheriff's Department (LASD) Mental Evaluation Team (MET) deputies represent an innovative fusion of mental health workers and peace officers, as evidenced by their specialized training, daily tasks, and adaptability in the field.

MET deputies undergo rigorous training, completing over [750 hours \(p.34\) in various mental health-related subjects](#) such as nonviolent crisis intervention, crisis negotiations, crisis stabilization, crisis de-escalation, autism awareness, veterans culture awareness, recognizing mental illness, and trauma-informed care. Additionally, their 880 hours of CA POST academy training for safety further solidifies their dual roles. This extensive training equips them with the expertise to address mental health crises effectively.

Field-based learning and collaboration are integral to MET deputies' development. Working daily alongside licensed mental health clinicians, they acquire invaluable hands-on experience managing mental health cases. This collaboration enhances their ability to respond to mental health crises and enables them to function similar to mental health workers, while performing their law enforcement duties.

Community engagement and education are also critical aspects of their role. MET deputies share responsibilities with community health workers in providing outreach, engaging with community members, reducing stigma, and advocating for vulnerable populations. Their comprehensive mental health training makes them well-equipped to interact with communities, fostering understanding, reducing stigma, and promoting mental health awareness.

Crisis intervention and support are central to community health workers' and psychiatric technicians' responsibilities. With their specialized training and experience, MET deputies adeptly provide these services within a law enforcement context. MET deputies employ a multidisciplinary approach; working alongside mental health professionals enables them to address someone's mental health needs more comprehensively and effectively.

A significant distinction between LASD MET and LAPD SMART lies in their operational strategies. Unlike LAPD's SMART, which typically waits for a scene to be secure before acting, LASD MET co-responds in real time to effectively influence the call's outcome as it unfolds. This proactive approach allows MET deputies to utilize their mental health training and crisis intervention skills immediately, potentially reducing the risk of escalation and improving the overall safety and well-being of the individuals involved.

## **CONCLUSION**

MET represents a well-established alternative response model that incorporates best practices for managing calls for service involving individuals experiencing mental health crises. MET also provides crisis and de-escalation training to all sworn members of the LASD and police agencies. However, current staffing and equipment constraints limit MET's capacity to respond to all dispatched mental health crisis calls. The Department has reviewed and modified MET dispatch procedures to reduce response times. Still, the substantial expansion of personnel, equipment, and resources is necessary to support 24/7 patrol and address all MET requests effectively.

The Los Angeles County Department of Mental Health (DMH) actively supports these expansion efforts and strives to achieve parity between mental health workers and deputies.

Due to the national shortage of clinicians, DMH has faced significant challenges with hiring clinicians for the night shift and weekend duty. DMH is currently reviewing a multitude of incentive options to enhance their ability to hire additional personnel.

The Los Angeles County Sheriffs Department also faces significant challenges in staffing levels. Even though MET has tremendous organizational support, the current staffing levels preclude growth.

Currently, MET leadership at both Departments are meeting to discuss real world options to address the need for expansion in the current climate. There are additional co response models to be examined, to find a solution to the current situation.

GRD/am

# MENTAL EVALUATION TEAM INTEGRATED REPORT



**Robert G. Luna**

**Sheriff**

Los Angeles County Sheriff's Department

*Report to the Sheriff Civilian Oversight Commission Regarding the Mental  
Evaluation Team Program of the Los Angeles County Sheriff's Department*



**Geoffrey Deedrick**  
**Captain**  
Community Partnerships Bureau

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**Lieutenant**  
Community Partnerships Bureau  
Mental Evaluation Team

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**April 2023**

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# FORWARD

The COVID-19 pandemic has left an indelible mark on our world, profoundly affecting communities' mental health and well-being. The collective trauma experienced during this unprecedented crisis has highlighted the need for increased understanding and support for those struggling with mental health challenges.

LASD personnel faced immense difficulties throughout the pandemic, working tirelessly on the frontlines to serve and protect our community. We sincerely thank these dedicated individuals for their unwavering commitment and resilience in adversity.

As we move into the recovery phase, we must prioritize the mental health of the Los Angeles community. By doing so, we foster a more compassionate, responsive, and practical approach to public safety, ultimately contributing to the well-being and resilience of our society.

The LASD Mental Evaluation Team (MET) is dedicated to playing a pivotal role in this recovery process. MET is actively restoring our community's sense of safety and stability while fostering greater empathy and understanding for those affected by mental health challenges by providing specialized mental health support, crisis intervention, and outreach services.

Together, we can build a brighter, more inclusive future for all.

Sincerely,

***Captain Geoffrey Deedrick & Your Mental Evaluation Team***

# LASD CULTURE



The Los Angeles County Sheriff's Department (LASD) is undergoing a cultural transformation, emphasizing empathy, understanding, and compassion. The Mental Evaluation Team (MET) and Psychological Services Bureau (PSB) collaborate to facilitate holistic, trauma-informed training programs. This empowers deputies to maintain their well-being and effectively engage with the public.

The collaboration offers training that equips deputies with essential skills while fostering empathy and improving community relations. MET delivers 24/7 real-time crisis de-escalation, negotiation, and mental health advocacy during emergencies. The MET and PSB partnership is reshaping LASD's culture, creating a more compassionate, empathetic, and efficient public safety system, emphasizing the well-being of deputies and the communities they serve.

INTRODUCTION

# Executive Summary (1/2)



Based on the crisis response data from 2022, LASD/DMH MET handled 78.9% of all crises in LASD patrol jurisdictions. In 2021, they handled 76.8%. That goal was achieved by the MET program in 2018 despite the continual increase in mental health crises in the past nine years (up 92%), as reflected in the data summarized below:

WIC §§ 5150 or 5585 "Holds"	2022	4-yr Change	9-yr Change	MET Calls (2022)	MET Holds (2022)	% of Holds by MET (2022)
Central Patrol Division	1,217	UP 43% ↑	UP 170% ↑	952	810	78.7%
South Patrol Division	1,558	DOWN 4% ↓	UP 121% ↑	1,289	1,072	68.8%
East Patrol Division	1,351	DOWN 11% ↓	UP 119% ↑	1,155	987	73.1%
North Patrol Division	2,300	DOWN 17% ↓	UP 45% ↑	2,751	2,199	95.6%
All Patrol Divisions	6,426	DOWN 5% ↓	UP 92% ↑	6,147	5068	78.9%



For years, the MET units struggled to get to calls Countywide due to severe understaffing –five deployed MET units did their best for more than two (2) decades with response times to calls exceeding 55 minutes on average. With such long response times, MET was a myth to most patrol deputies who never experienced MET support in the field. While the concept and intent was noble, deployment of only five MET units in essence set the program up to fail.



Due to the recent investments in expansion of the MET unit, coupled with the revised deployment model (centralized dispatch / desk operation), the MET unit's average response time Countywide is 29.5 minutes per call.



MET units are strategically deployed daily to reduce response times. MET units are increasingly arriving in time (corresponding with patrol units in some cases) to affect the way cases are handled from the initial contact with the subject in question.



By adopting a collaborative approach to risk management, RAMP fosters long-term solutions that extend beyond the confines of the criminal justice system.



# Executive Summary (2/2)



## RAMP team productivity for 2022

RAMP 2022	
MET Contact Review/Triage	9000
New RAMP Cases	500
Closed RAMP Cases	299
Event Action Plan	7
Search Warrants	2
Arrest Warrants	2
5346 WIC court orders	5
8102 WIC weapon confiscations & Weapons submission	26
Gun Violence Restraining Orders	2
Restraining Orders	3
Caring Contacts	49
DOJ Firearm Prohibition entries	64
Outside agency assist	13
Arrests	3
RAMP Use of Force	1
Criminal Cases Filed by RAMP w/D.A.	3
Assist Stations and facilitated an arrest	3
Mental Health Diversion via Court	17
5150 WIC Hold	2
<b>Average Per investigator</b>	<b>76</b>
<b>Average Case Load Per Investigator 2022</b>	

Disposition of cases handled and closed by RAMP investigators, resulting in linkage to mental health services

## RAMP Incidents Disposition

DISPOSITION CODE/DETAIL	Count of Referrals	Percentage
35- Unable To Handle (UTH)	94	24%
17- Other	56	14%
(blank)	49	12%
9- Law Enforcement	30	8%
10- Private MH Provider	29	7%
4- County DMH Outpatient	28	7%
5- Contract DMH Outpatient Services	20	5%
8- Full Service Partnership (FSP)	20	5%
18- AOT	11	3%
28- Residential Alcohol/Drug Rehab Program	10	3%
16- Regional Center	9	2%
3- DCFS	9	2%
23- VALOR Program	6	2%
2- Drug/Alcohol Treatment Outpatient	5	1%
30- Board and Care	4	1%
11- Primary Care Provider	4	1%
29- Crisis Residential Program	3	1%
25- Conservatorship	3	1%
19- Whole Person Care (WPC)	2	1%
33- Psych Hospital	1	0%
15- Social Service Agency	1	0%
7- Mental Health Urgent Care	1	0%
<b>Grand Total</b>	<b>395</b>	

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# YOUR MENTAL EVALUATION TEAM



## Mission Statement:

The mission of the Los Angeles County Sheriff's Department Mental Evaluation Team (LASD MET) is to provide compassionate, respectful, and effective crisis response and intervention services to individuals experiencing mental health crises. We strive to build trust with the communities we serve, promote safety, and help people get the mental health treatment they need.

## Vision:

Our vision is to be recognized as a national leader in crisis intervention and mental health response. We envision a future where all individuals in crisis receive the support and care they need, and where mental health services are accessible, equitable, and effective.

## Core Values:



**Respect:** We believe in treating all individuals with respect and dignity, regardless of their mental health status or background.



**Collaboration:** We value collaboration and partnerships with community members, mental health providers, and other law enforcement agencies to create a holistic approach to crisis response.



**Accountability:** We are accountable to the communities we serve, and we strive for transparency, fairness, and integrity in our operations.



**Innovation:** We are committed to continuous learning and improvement, and we seek innovative solutions to the challenges of crisis response and mental health care.



**Safety:** We prioritize safety for all involved in crisis situations, including individuals in crisis, responding team members, and the community at large.



**Empathy:** We recognize the importance of empathy in crisis response and strive to approach all interactions with compassion and understanding.



**Wellness:** We promote the well-being of our team members and work to ensure that they have the resources and support they need to provide effective crisis response services.

# TEAM EVOLUTION

The Los Angeles County Sheriff's Department (LASD) Mental Evaluation Team (MET) has come a long way since its inception in 1991. Over two years, 2021 and 2022, the team has faced challenges, achieved milestones, and continued to make strides in improving the mental health response within the community.



## Timeline:

- 1991** "Crisis Intervention Detail" Proposal MET Concept proposed Threat Management Team proposed Merge with CNT propose
- 1992** Early Co-Response Team Trials Involving LASD and DMH
- 1993**
  - MET Main Office Opens
  - County of Los Angeles Officially Deploys 3-5 Teams Countywide
- 2015** Antelope Valley MET Office Open
- 2016**
  - 10 Teams Deployed Countywide
  - RCPI Endorsed Simulator + Autism Training
  - Santa Clarita MET Office Opens
- 2017**
  - Early RAMP Trial Implementation (1 part time investigator)
  - Triage Desk Officially Opens in Dec 2017
- 2018**
  - Cerritos MET Office Opens
  - Lennox MET Office Opens
  - East Los Angeles MET Office Opens
  - Lakewood MET Office Opens
  - West Hollywood becomes the first city in Los Angeles County to contract with MET for a full-time dedicated team in the city. (Bonus deputy and DMH clinician)
  - COC recommends MET expansion to 60 teams over the next two years. 8 Teams Deployed Countywide.
  - MH Simulator + Autism Training Begins
  - RAMP Implemented Officially (1 north and 1 south investigator, 2 clinicians).
  - 23 Regional Teams Countywide + 1 Contract "LA Found" Program Launch (Sept. 2018). "VMET"
  - Program Launch (Co-Respond w/VA).

2019

- 33 Regional Teams Countywide + 1 Contract
- 6 RAMP Inv Teams (summer)
- MET Assumed Oversight of CIT Training (7/1)

2020

- COVID-19
- VMET expands and mobilizes full time and collaborates with VA and various non-profit organizations as their co-response partners.
- MET proposed expansion to 45 regional teams but LACDMH designated MET as unmet needs.

2021

- MET loses clinical staff to promotion.
- LASD proposed MET expansion to 45 regional teams. LACDMH unable to match staffing needs due to challenges with hiring new personnel.

2022

- Los Angeles Community College District contracts with LASD for MET deputy to restore HEAT services at ( 9 ) college campuses.
- MET proposed expansion to 45 regional teams but LACDMH continues to have challenges with hiring new personnel

2023

Civilian Oversight Commission and LA Board of Supervisors calls for MET expansion



**WE HONOR THE  
SUPPORT OF OUR  
TRUSTED ELECTED  
LEADERS**



**Los Angeles County Sheriff  
Robert G. Luna**



WE HONOR THE  
SUPPORT OF OUR  
TRUSTED LEADERS



Los Angeles County  
**Board of Supervisors**



*Lindsey*  
**Horvath**  
LA County Supervisor



*Kathryn*  
**BARGER**  
5<sup>th</sup> District Supervisor



Los Angeles County Supervisor  
**HILDA L. SOLIS**  
First District



**HOLLY J. MITCHELL**  
COUNTY OF LOS ANGELES SUPERVISOR - FIFTH DISTRICT



COUNTY OF LOS ANGELES SUPERVISOR - FOURTH DISTRICT  
**JANICE HAHN**

# COMMUNITY COLLABORATORS

MET is grateful for the support of various stakeholders and numerous community organizations. These collaborations enhance our effectiveness in addressing mental health crises and improving the lives of those we serve.



Civilian Oversight Commission



Los Angeles Community College District



Los Angeles County Department of Mental Health



Working Dogs for Warriors



Los Angeles County Sheriff's Department Psychological Services Bureau



Veteran Peer Advocate Network



United States Veterans Administration



Secure Measures



City of West Hollywood



Autism Interactive Solutions



# OVERVIEW OF MET PROGRAMS AND INITIATIVES



## Field Teams

### MET Crisis Response Teams:

The MET crisis response teams are crucial in addressing mental health crises and ensuring public safety with empathy and understanding. These teams comprise skilled professionals collaborating to de-escalate situations, provide crisis intervention, and connect individuals with appropriate support services. MET aims to create an environment where everyone involved feels heard, respected, and cared for.

### Deployment Structure:

MET's deployment structure is designed for maximum efficiency and responsiveness. By strategically positioning teams throughout the county, MET ensures help is available when and where needed. Partnerships with organizations like the **California Highway Patrol (CHP)**, **LA County Probation**, **LA County Fire Department**, and cities across the county expand MET's reach and impact in promoting a compassionate approach to public safety.

Crisis response teams are strategically placed throughout the county, allowing for rapid response to 9-1-1 calls and real-time support for those in need. Specially designed patient-centric vehicles are unmarked, reducing the stigma and shame associated with mental health crises. Deputies receive over 750 hours of specialized mental health and crisis negotiation training.



## Training Programs

MET's training initiatives aim to raise empathy and mental health awareness within the LASD. Deputies are now being trained in the ROAR response model for crisis stabilization and deescalation. Additional programs are offered, including **FOCIS-360**, **CIPAT**, **Autism Awareness Training**, **Veteran Cultural Awareness**. These programs are designed to improve department culture and community interactions.



## Dedication to Veterans

Our new **Veterans Mental Evaluation Team (VMET)** addresses veterans' unique mental health needs. VMET deputies are either veterans themselves or family members of veterans, ensuring a deep understanding and commitment to serving this community.



### RAMP Initiative:

LASD MET's Risk Assessment and Management Program (RAMP) is an essential adjunct to the MET program that addresses the needs of patients with severe mental illness who meet designated criteria. RAMP combines intensive case management, patient advocacy, and assertive community treatment. The program aims to provide multidisciplinary, flexible treatment and support to people with mental illness 24/7. The MET unit's objective is to divert the mentally ill away from the criminal justice system when feasible, actively assisting patients in avoiding the criminalization of mental illness wherever possible.



### Higher Education Assessment Team (HEAT) Initiative

Anticipating mental health concerns when campuses returned to on-campus learning in July 2022, the **Los Angeles Community College District** voted to restore HEAT for all nine campuses. The board unanimously voted to contract a MET deputy to partner with service providers on each campus to respond to mental health crisis calls and collaborate with **DMH START** mental health professionals to prevent on-campus violence through early interventions and assessments.



### LA Found and Project Lifesaver Partnership

MET partnered with LA Found to bring Project Lifesaver (PLS) to the county. This premier search and rescue program provides a timely response to locate individuals with Alzheimer's dementia or Autism who wander. Since its inception, PLS has resulted in 3,513 successful searches, with each patient being found. The partnership between LA Found and LASD MET is crucial to locate members of the public who are reported missing and bringing them back safely to their loved ones.



### West Hollywood Contract MET

The city of West Hollywood recognized the importance of providing dedicated mental health support to its residents and contracted with LASD MET to provide a dedicated MET unit during designated hours. The pilot project year was a phenomenal success, and the city has since annually renewed the contract with LASD and DMH for a dedicated MET unit to reduce response times to their residents.

# MENTAL HEALTH TRAINING MENU

With a commitment to professional development, LASD and MET offer comprehensive training programs to equip deputies with the skills and knowledge needed to handle various situations with empathy, understanding, and competence. The opening of the **Mental Health Regional Training Facility** further underscores the department's dedication to a more compassionate approach to public safety.



## Effective training programs for first responders



### Mental Health Awareness

Understanding the signs and symptoms of various mental health disorders and the impact of trauma and stress on individuals' behavior helps first responders recognize when someone is in crisis and responds with appropriate care and sensitivity.



### Communication and De-escalation Techniques

Effective communication and de-escalation strategies empower first responders to establish rapport, build trust, and calm individuals in crisis, reducing the likelihood of conflict or harm.



### Cultural Competence

A diverse community requires first responders to be aware of and sensitive to cultural differences, ensuring they can effectively engage with individuals from various backgrounds and understand their unique needs and perspectives.



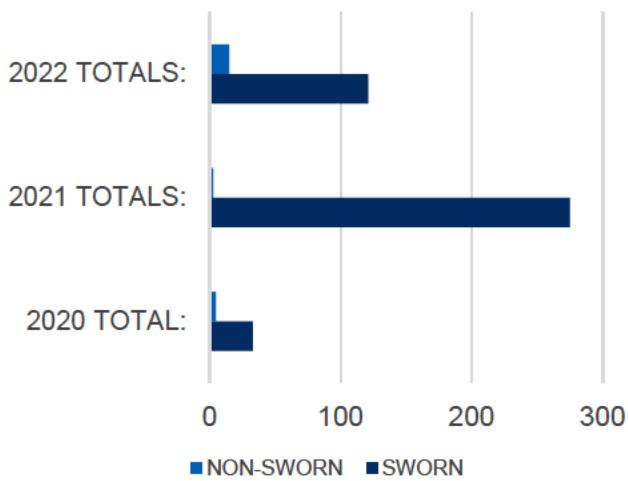
### Self-Care and Resilience

Self-care and resilience training is essential for first responders, who frequently face high-stress situations and vicarious trauma. By maintaining their mental well-being, they are better equipped to navigate the complexities of mental health crises, ultimately promoting public safety and fostering a more compassionate, understanding approach to crisis response.

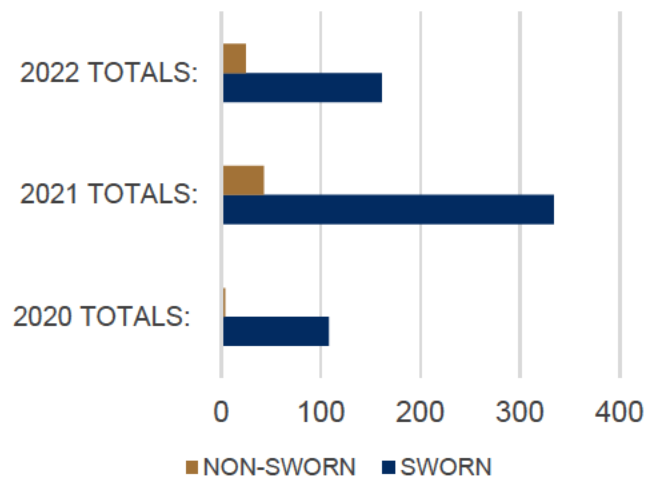
# DEPARTMENT-WIDE MENTAL HEALTH TRAINING

MET training initiatives aim to raise empathy and mental health awareness within the LASD and equip deputies with the skills to handle mental health crises. We offer various programs, including FOCIS 360, CIPAT, Autism Awareness Training, Veteran Cultural Awareness, and the ROAR model. These programs are designed to improve department culture and interactions with the community.

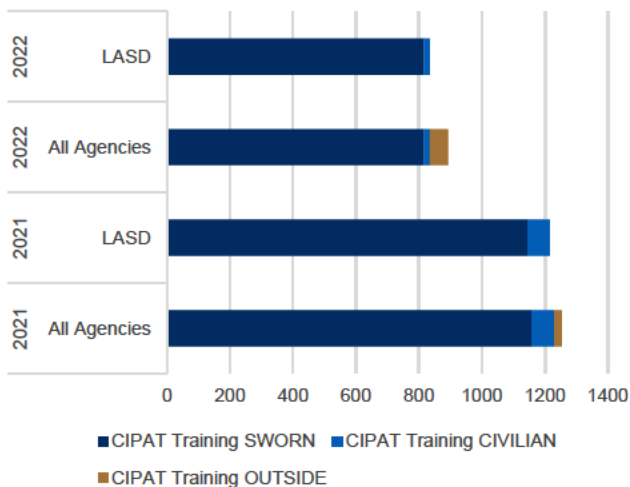
### FOCIS 32-Hour Training



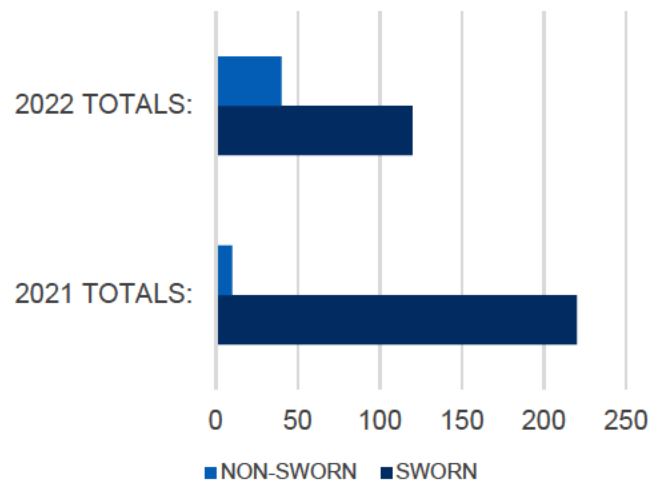
### Autism Awareness Training



### CIPAT Training



### Veteran Culture Training (Basic)





## Mental Health / Autism and Cognitive Disorders

3 classes totaling 8 hours

This course is designed for patrol personnel who may encounter individuals with mental illness and developmental disabilities during their regular duties. Officers and deputies new to patrol and those assigned to mental evaluation teams (MET) attend this training. The course emphasizes recognizing subject behavior and utilizing crisis stabilization/de-escalation techniques without sacrificing officer safety. Participants will demonstrate proficiency in these strategies to reduce the likelihood and severity of the use of force in common law enforcement situations.

### This course is divided into three key segments:



Mental health update



Strategic communications



Autism interactions solutions

**Total Number of Classes: 14**  
**Total Student Number: 186**  
**161 LASD**  
**25 Outside Agency**



## Veterans / Law Enforcement Interaction

Basic (POST CPT/PSP) - 8 hours

Learning objectives include identifying veterans and military members appropriately when responding to incidents, recognizing signs and symptoms of mental health issues among veterans, identifying veterans in crisis, using officer safety skills to stabilize and secure the scene, employing crisis stabilization/de-escalation techniques when applicable, and knowing appropriate resources to assist veterans further.

*\*An intermediate-level veterans' course is also offered, which builds upon veteran culture and mental illnesses.*

**Total Number of Classes: 13**  
**Total Student Number: 160**  
**120 LASD**  
**40 Outside Agency**





## Field Operations Crisis Intervention Skills (FOCIS-360)

32 hours (POST CPT)

Phase 1-3 Trainees Required to Attend *Per 3-02/080.01 MPP.*

This course delves into the signs, causes, symptoms, and methods of dealing with individuals experiencing mental illness, intellectual/developmental disabilities, autism, and cognitive disorders. Additionally, the course addresses suicide, wellness, and changes in law AB 392 and their impact on law enforcement.

**Total Number of Classes: 6**

**Total Student Number: 136**  
**121 LASD**  
**15 Outside Agency**

*New for 2022-2023*



## Crisis Intervention Training (FOCIS-360)

16 hours (POST CPT)

This course goes into depth about the signs, causes, symptoms and ways to deal with individuals dealing with mental illness, intellectual/developmental disabilities, autism and cognitive disorders. It also addresses issues such as suicide, wellness, and changes in law ab392 and how it impacts law enforcement.

**Total Number of Classes: 1**

*Revamped for 2022-2023*

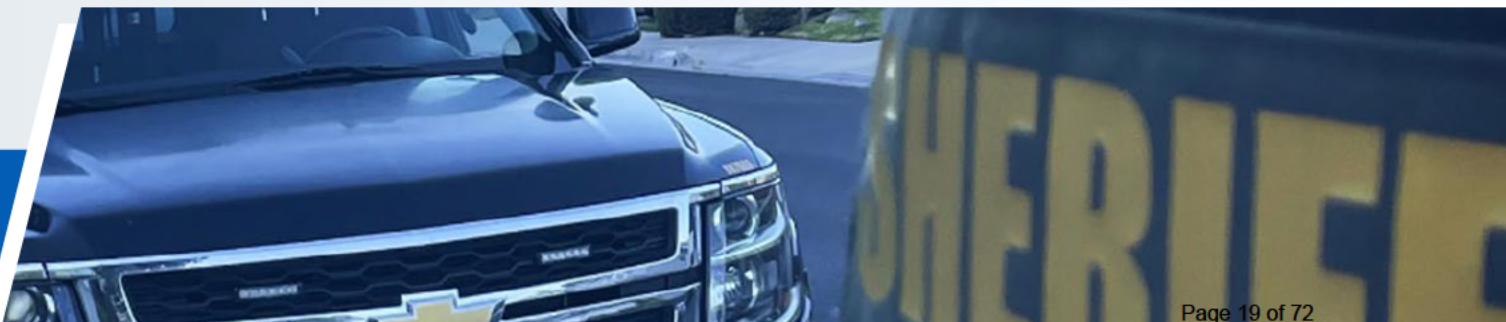


## Law Enforcement & Effective Interaction with the Mentally III

8 hours (POST CPT)

Senate Bill 29 requires newly appointed FTOs to attend at least 8 hours of "Behavioral Health Training" within 180 days of appointment.

*\*FTO School does not count as meeting this requirement*





## **Crisis Stabilization for Dispatchers and Call-Takers**

**8 hours**

This non-POST CPT or PSP-certified course is designed for both sworn and civilian staff assigned to dispatch. It teaches techniques to detect possible mental illness over the phone and provides solutions for de-escalation and crisis management.

**Total Number of Classes: 4**

**Total Student Number: 24**

**24 LASD**

**10 Outside Agency**



## **Use of Force**

**Force Options Simulator – 4 Hours (PSP)**

This course employs the MILO (Multi-Interactive Learning Objectives) training system, a portable and immersive interactive video setup that can be used anywhere. Scenarios involving individuals with mental health issues, developmental disabilities, or intellectual disabilities challenge participants to utilize their resources and crisis stabilization/de-escalation skills for the best possible outcome.

**Total Number of Classes: 29**

**Total Student Number: 665**

**641 LASD**

**24 Outside Agency**



## **CIPAT Cognitive Impairment Practical Application Training**

**In-Service Training at Stations**

This training offers station-level education on crisis stabilization and de-escalation techniques. It includes briefings on AB 392, SB 230, and Penal Code sections 192 and 935a, which pertain to justifiable homicide by a peace officer and using force during arrests. Additionally, it covers FOD 16-003, addressing calls for service involving individuals with suspected mental illnesses. This training meets numerous mandates under AB 392 and SB 230 and satisfies 4 hours of the POST, PSP/CPT bi-annual requirements.

**Total Number of Classes: 48**

**Total Student Number: 381**

**306 LASD**

**75 Outside Agency**





## Field Training Officer School

Hosted by Advanced Officer Training, 4-Hour Block, POST Mandated

Total Mental Health Segments Taught: 5



## Patrol School

Hosted by AOT, 3-hour block, POST Mandated

Total Mental Health Segments Taught: 6



## Airforce Security Forces

Total Number of Classes: 1

*\*Initial training to see if a value is added.*

*Training will continue with AFB, with two classes scheduled in February of 2023.*



## SRO School

School Resource Officer Training, Hosted by Community Partnerships Bureau

Total Mental Health Segments Taught: 2



## Additional Activities of Training Unit:

- Assist Custody Division with DeVRT Training
- Provide continuous in-service training at various stations regarding the "Special Alert"
- Attend monthly meetings and training for the LA Found tracking systems

# CO-RESPONSE CRISIS TEAM MAKEUP

The composition and design of our crisis response teams focus on providing practical, compassionate support to those experiencing mental health crises.



## Key features of each team include:



Strategic placement throughout the county to ensure rapid response to 9-1-1 calls



To reduce the stigma and shame often associated with mental health crises, the MET personnel adhere to WIC § 5153 by using unmarked, patient-centric vehicles and wearing discreet attire, such as black polo shirts and green pants, rather than traditional police uniforms.



Deputies receiving over 750 hours of specialized mental health and crisis negotiation training

These measures enable our MET units to deliver real-time support to individuals in crisis, demonstrating our commitment to promoting mental health and well-being in the community.



Department of  
Mental Health (DMH)  
Licensed Clinician



Mental Health  
Bonus Deputy  
Sheriff



Co-Responds to  
in Progress Crises

# OUR VEHICLES



The team operates unmarked and patient-centric vehicles. Each vehicle features a single patient transport area. The partition is made of clear reinforced plastic instead of bars and is climate-controlled. Their design aims to reduce feelings of shame and stigma for asking for help.



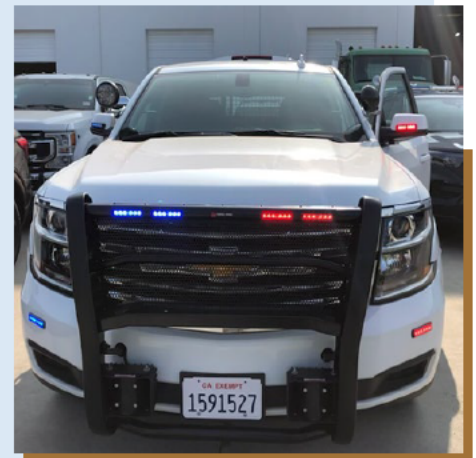
**25  
New Cars**

PT Press Telegram Menu

Search

**L.A. County unveils new response vehicles designed to aid folks experiencing mental health crises**

Hayley Munguia



More vehicles are needed to support expansion and vehicles being serviced.



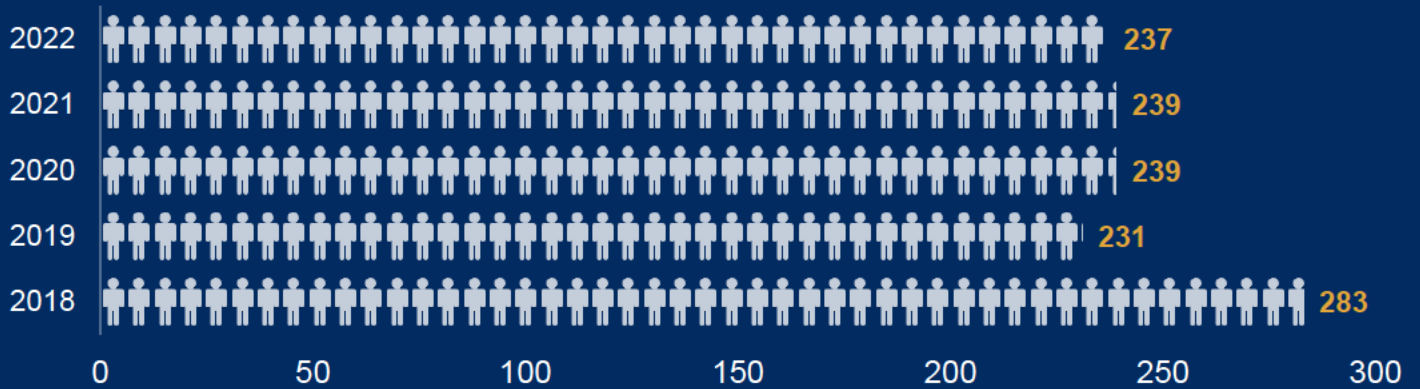
There is a 2-year lead time on acquiring vehicles due to the production interruptions of COVID-19.

# COUNTYWIDE MENTAL HEALTH TRENDS

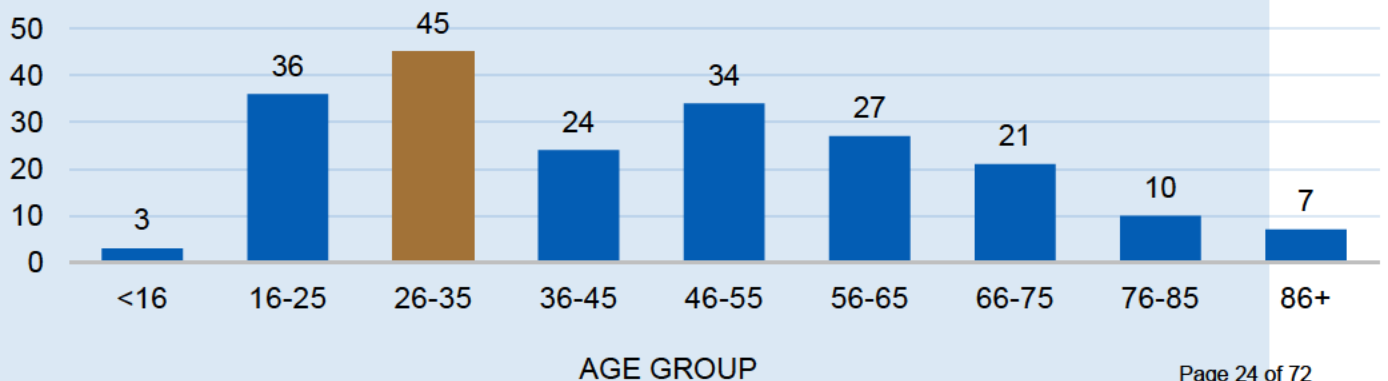
## Mental Health



## Suicides



## Countywide Suicides by Victim Age Group 2022



# 24/7 TRIAGE DESK

Responsible for receiving incoming calls for assistance from field personnel



Each call is assessed by both a mental health clinician and MET Deputy



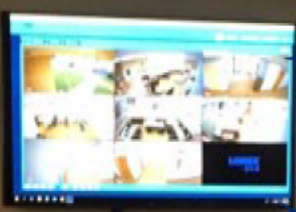
Dispatch a team to the location AND/OR advise field personnel



Contact hospitals for pre-admittance for instances when a MET team is not available



ALWAYS  
**OPEN**



**MET Watch Deputy is staffed for 24 hours.**

**Department of Mental Health License Clinician is staffed for 20 hours (0600-0200)**

**In 2021, the desk handled 6,647 calls.**  
**In 2022, the desk handled 9,695 calls.**

# COUNTYWIDE DISPATCH RESPONSE TIMES

**2016**

Response times  
County Wide



**ETA 50+  
Minutes**

**2022**

Response Times



**29.5  
Minutes**

*\*Increase in the Number of MET Offices*

There was a significant improvement in response times from 2016 to 2022. In 2016, response times were over 50 minutes. By 2022, response times dropped to 29.5 minutes. This positive change is attributed to the expansion of the team from 10 to 34 teams, along with the addition of several satellite offices during this period.

# WEST HOLLYWOOD DEDICATED TEAM

The LASD Mental Evaluation Team (MET) takes pride in being highly valued by the City of West Hollywood. This esteem has resulted in the city's request to subcontract their own MET for one shift, four days a week. This partnership has flourished, garnering the respect of city policymakers. MET deeply appreciates the city's trust in the team, leading to this impactful collaboration. The metrics of this dedicated team offer valuable insight into the effectiveness of a team assigned to a station, even if not present every day or during every shift of the week.

## WHMET Hospitalizations



Hospitalization tracking for 2022 indicates that 25% of all incidents resulted in hospitalization under either section 5150 or 5585. Of 126 incidents, 32 led to hospitalizations, while 94 did not. Hospitalization rates showed significant variation throughout the year, with the lowest rate in January and September at 0% and the highest in June at 33%.

WHMET						
Months	5150	5585	Total Hospitalized	Not Hospitalized	All Incidents	% HOSPITALIZATION
Jan			0	5	5	0%
Feb	4		4	4	8	50%
Mar	3		3	8	11	27%
Apr	5		5	12	17	29%
May	2		2	9	11	18%
Jun	4		4	8	12	33%
Jul	2		2	9	11	18%
Aug	3		3	7	10	30%
Sep				8	8	0%
Oct	2		2	5	7	29%
Nov	5		5	12	17	29%
Dec	2		2	7	9	22%
<b>Total</b>	<b>32</b>		<b>32</b>	<b>94</b>	<b>126</b>	<b>25%</b>

# RAMP INITIATIVE

The Risk Assessment and Management Program (RAMP) focuses on individuals with serious mental illnesses and is vital to the MET program. RAMP offers a comprehensive approach with the following key features:

- RAMP follows up on the most intense cases. MET handles direct referrals and high level case management, with the intention of reducing chronic use of first responders to treat crises.
- Combines intensive case management, patient advocacy, and assertive community treatment.
- Provides 24/7 multidisciplinary treatment and support.
- Team consists of six specially trained deputies, six clinicians, two analysts, one clinical supervisor, and two supervisors.

## **RAMP clinicians, deputies, and crime analysts collaborate to:**

- Assess the threat level of patients with serious mental illness
- Identify those who may pose a significant risk to themselves or others
- Engage individuals and connect them with mental health resources before they become dangerous

## **Measurable goals of the RAMP program include:**

- Reducing hospitalizations for chronic users of police services
- Preventing further calls for police services or new cases within the criminal justice system for high utilizers

## **The RAMP process involves the following:**

- Regular review of new MET cases and referrals by RAMP supervisors, including LASD Sergeants and a DMH Clinician Supervisor
- Use of database tools and face-to-face meetings for case screenings to determine eligibility for RAMP follow-up
- Assigning each RAMP patient's case to a licensed clinical social worker from the RAMP unit, who ensures comprehensive care, follows up on treatment plans, and assists with linkage to support programs

## **RAMP Deputy Investigators:**

- Act as lead investigators for Level 4+ cases involving seriously mentally ill patients
- Provide security for Level 3 case follow-up
- Collaborate with MET counterparts, patrol, and outside agency law enforcement personnel during field investigations
- Access law enforcement databases, create "Be on the Look Out" (BOLO) fliers, and author search warrants to locate high-risk patients

RAMP investigations often require collaboration with various stakeholders, including specialized investigative units and external agencies such as the District Attorney's Office, City Attorney's Office, Federal Bureau of Investigation, and the United States Department of Veterans Affairs. RAMP investigators prioritize and manage caseloads, identify patterns, devise strategies, and assess and mitigate risks.



# RAMP INITIATIVE

The key objectives of RAMP include:

- Evaluating and managing high-risk cases involving individuals with mental illness by connecting them to appropriate mental health services.
- Ensuring proper documentation of mental health history to facilitate mental health service providers and the court system in developing suitable treatment plans.
- Collaborating with divisional and specialized personnel to provide mental health history that aids in criminal cases, mandated treatment, and risk mitigation.
- Filing criminal and civil order cases with the objective of achieving compliance and removing potential dangers.
- Engaging with families and stakeholders to devise strategies that minimize risks and promote stabilization.
- Creating Officer Safety Flyers and managing Special Locations to inform personnel of high-risk individuals affected by mental illness in their area.
- Providing safety assistance requests from DMH's high acuity patient Assisted Outpatient Treatment (AOT) team (Laura's Law).
- Serving Gun Violence Restraining Orders.
- Conducting school threat assessments.
- Confiscating firearms from individuals prohibited from possessing them based on mental health history.
- Engaging high utilizers of police resources and connecting them to mental health treatment.
- Assisting DMH HOME with temporary conservatorship orders for high acuity consumers of services.
- Operating on an on-call basis after hours.

# RISK ASSESSMENT & MANAGEMENT PROGRAM (RAMP)



**12%** patients **495**

**149 Patients** with 3+ Crises YTD

**4 Patients** with 10+ Crises YTD

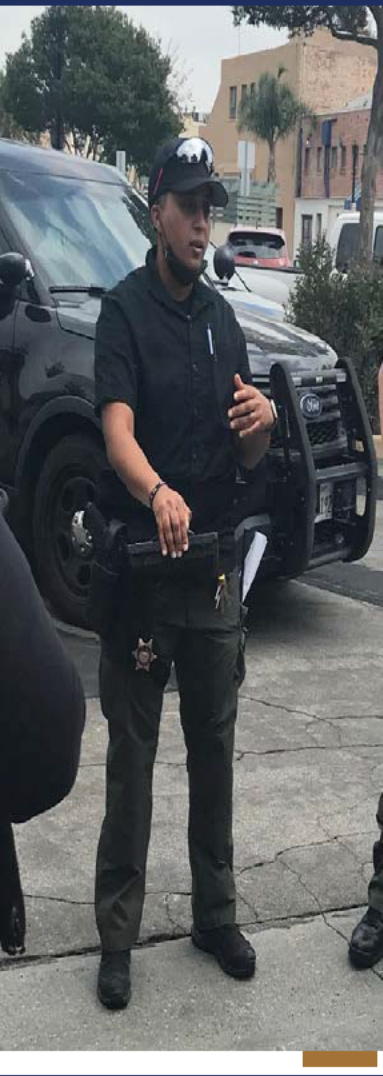


## RAMP criteria for case referral:

- Increasing High Risk Behavior
- High Utilizer
- Suicidal
- Suicide by Cop?
- Guns/ Weapon(s) Involved
- Barricade/ Critical Incident?
- School Violence
- Terrorist Threat
- Veteran with MI/PSTD?
- Threat to Public Figure
- Use of Force
- Difficult Homeless Individual
- Jumper?

# RAMP IMPACT 2022

The Risk Assessment and Management Program (RAMP) has significantly promoted safety and mental health support in our communities in 2022. The following statistics provide an overview of RAMP's accomplishments during this period, showcasing its dedication to reducing risks, promoting mental health, and collaborating with various agencies. These numbers highlight the program's positive impact on individuals and communities, demonstrating RAMP's ongoing commitment to providing essential services and support. In 2022 RAMP recorded the following statistics:



- Open cases: **500**
- Moderate risk Event Action Plan (EAP) Operations: **5**
- Search warrants: **2**
- Arrests: **2**
- WIC § 5346 detention court orders: **5**
- WIC § 8102 weapons confiscations: **26**
- Gun Violence Restraining Orders: **2**
- Restraining Orders: **3**
- Caring Contacts: **49**
- DOJ Prohibited possessor/Tarasoff entries made: **64** (58 adults & 6 juveniles)
- Outside agency requests: **13**
- Criminal cases filed by District Attorney: **4**
- Arrests: **3**
- Assisted LASD facilitated arrests: **3**
- Intake Booking Diversion: **3**
- Mental health treatment court diversion: **17**

# COUNTYWIDE MENTAL HEALTH TRENDS



**SUCCESS STORIES** The Risk Assessment and Management Program (RAMP) has achieved numerous successes in addressing mental health crises and ensuring the safety of individuals and their communities. The following stories highlight RAMP's dedication to providing compassionate and professional support to those in need, through collaboration with various agencies and family members, advocating for appropriate services, and ensuring a safe environment for all.

## Story #1

A female veteran threatened to harm herself and her children. RAMP quickly intervened, ensuring that she received proper psychiatric care and collaborated with the hospital staff to delay her discharge while securing her firearms from her residence. Establishing trust with the veteran, RAMP retrieved all firearms and connected her with mental health resources.

## Story #2

An elderly couple in declining health experienced a crisis when the husband threatened suicide. RAMP assessed his mental state, suspecting early dementia signs. They secured firearms in both homes and, working with the grandson, located two unaccounted firearms. RAMP also placed the husband on a prohibition status as mandated by law.

## Story #3

RAMP supported "D" at Cedar House, where his dangerous behavior escalated due to physical illness and noncompliance with medication. After months of collaboration with the staff, D was arrested for assaulting a resident, and RAMP worked with MET to hospitalize him for evaluation. RAMP advocated for D, placing him in a locked facility for everyone's safety.

## Story #4

"M" assaulted family members and threatened their lives, refusing medication and hospitalization. RAMP placed him on a psychiatric hold and coordinated with the social worker for a discharge plan to his grandfather's home. RAMP referred him to Assisted Outpatient Treatment (AOT), providing him with food, therapy, and medication assistance.

## Story #5

"Mr. K" caused significant property damage and displayed manic episodes, leading to RAMP's involvement. After initial success connecting him to mental health services, he was arrested for felony vandalism. RAMP advocated for mental health diversion through the court system, and Mr. K was connected to Hathaway Sycamores for board and care services.

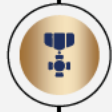
*\*names and details have been slightly altered to protect patient identity*

# VETERANS MENTAL EVALUATION TEAM

Los Angeles County is dedicated to supporting veterans experiencing mental health crises. To address this need, the LASD MET unit partnered with the Department of Veterans Affairs and federal police officers to establish the Veterans Mental Evaluation Teams (VMET) program. Inspired by the success of LASD MET and LAPD SMART units, VMET's key features and objectives include the following:



Partner with licensed clinical social workers with sworn peace officers to co-respond to crises



Employ veterans as VMET personnel who understand the unique language and culture of all military branches



Expertise in navigating the Department of Veterans Affairs (VA) system and knowledge of available resources



Ability to connect with veterans personally and provide invaluable support during times of crisis



Proactive outreach to help veterans at risk of future crises, coordinating with LASD RAMP personnel for complex cases



Connect and re-connect with the VA



Reduce the number of Veteran Suicides

Currently, there are four full-time VMET pairs and one sergeant connecting with community groups and utilizing clinicians from the VA to respond to veterans in crisis or experiencing displacement. Sergeant Bojorquez is the liaison supervisor between MET and all entities addressing veterans' mental health needs, including support for families and caretakers. He also leads LASD MET's participation in the "Mayor's Challenge to End Veterans' Suicides" in Los Angeles County, sponsored by the federal Substance Abuse and Mental Health Services Administration (SAMHSA).

# VMET IMPACT



MET has expanded its services to include a specialized Veterans Mental Evaluation Team (VMET), collaborating with West Los Angeles and Long Beach Veterans Administration facilities to reduce suicide and connect veterans to essential services. VMET's primary mission is crisis response and stabilization, suicide response and prevention, and veteran advocacy. This team aims to alleviate the burden on Los Angeles County DMH Facilities by utilizing VA hospital beds for treatment and care. VMET deputies receive an additional 300 hours of specialized training in veteran-related topics, veteran benefits, and peer support.

From January 2022 through November 2022, the Veterans Mental Evaluation Team (VMET) has made remarkable strides in supporting veterans and fostering collaboration with outside agencies. Their dedication and hard work have resulted in numerous veteran outreaches, successful housing efforts, and open cases managed by the LASD VMET and the joint VAPD VMET & LASD VMET teams. The following statistics highlight the significant impact VMET has had on the veteran community during this period.

Veteran outreaches: **420**

Outside agency collaborations: **77**

Assisted in housing veterans: **60**

Open cases with LASD VMET: **70**

Joint VAPD VMET & LASD VMET cases: **117**

# VMET IMPACT



**SUCCESS STORIES:** The Veterans Mental Evaluation Team (VMET) has profoundly impacted veterans' lives, addressing their unique challenges with compassion, professionalism, and dedication. The following success stories highlight the transformative power of human connections and the importance of addressing the complex issues veterans face through empathy and collaboration.

## Story #1

A large encampment of veterans existed along San Vicente Boulevard in Los Angeles for six years, caught in a jurisdictional nightmare. In 2021, the Los Angeles County VMET and the Veteran Affairs Police Department (VAPD) assisted the LASD HOST team to address the situation. Working together, they built relationships with the veterans and provided care, housing, and medical treatment. Most veterans relocated to VA facilities through their persistent effort

## Story #2

"Mr. G," a veteran in Los Angeles County, was caught in a "mental health incarceration cycle," with hundreds of calls for service, hospitalizations, and placements under 5150 WIC. The situation changed when VMET members, VAPD, and the West Los Angeles Veterans Administration (WLA-VA) Police Department intervened. They built a rapport with Mr. G and helped him enter a live-in treatment facility. Mr. G has been clean and sober for over ten months, with no police response incidents for over a year. This collaborative approach has also worked for at least five other war veterans who were deputies.

## Story #3

"Mr. B," an army veteran, lived in a dangerously dilapidated house with no utilities and was in poor physical health. VMET's Deputy Michael Horsley intervened, arranging for Mr. B's hospitalization and eventual transfer to an assisted living and care facility. Deputy Horsley located Mr. B's family, and they reunited after 30 years. An end-of-life care plan was developed for Mr. B, utilizing VA resources. Mr. B's house was restored and sold, with the proceeds supporting him. Though Mr. B's dementia has worsened, he now has dignity, comfort, and the love of his family, thanks to Deputy Horsley and VMET's efforts.

*\*names and details have been slightly altered to protect patient identity*

# PUBLIC RELATIONS

Community connection and outreach will help to reduce the stigma involved with reaching out for mental health.



## EXPANSION OF COMMUNITY PRESENCE

### Current

- Regular participation in community meetings
- Connecting with mental health organizations (ex., NAMI)
- Re-imagining of social media presence
  - Connecting with mental health advocacy groups
  - Providing usable mental health resources
  - Inform of current events
  - Influence hiring and retention of team members
  - Increase social media presence

### Projected

- Establish presence on school campuses
- Connect with local college mental health and law enforcement related programs
  - Encourage early cross training
  - Advocate for mental wellness

# AWARDS AND RECOGNITION

The MET program has received numerous awards and recognition for its innovative approach to addressing mental health crises in the community. This section will highlight some of the most prestigious awards and accolades received by the MET team.



## Awards

2022 **Centurion Award for “Excellence in Innovation”**  
Peace Officer Association of Los Angeles County

2022 **Sheriff’s Exemplary Service Award**  
Los Angeles County Sheriff’s Office



## News/Media About MET:

**Advocates Co-Response Training & Technical Assistance Center:** LA’s VMET program helps save veterans’ lives.

<https://www.advocates.org/news/las-vmet-program-helps-save-veterans-lives>

**City of West Hollywood:** the City of West Hollywood and the Los Angeles County Civilian Oversight Commission will host a Community Listening Session on Mental Health and Homelessness Response from Law Enforcement.

<https://www.weho.org/Home/Components/News/News/9808/>

**CBS Los Angeles:** LASD’s Mental Health Evaluation Team takes a new approach when encountering violence

<https://www.cbsnews.com/losangeles/news/lasds-mental-health-evaluation-team-takes-new-approach-when-encountering-violence/>

**Orange County Register:** Flashcards, fidget spinners: How donated tools help police communicate with autistic people.

<https://www.ocregister.com/2022/04/19/flash-cards-fidget-spinners-how-donated-tools-help-police-communicate-with-autistic-people>

# COMMUNITY ENGAGEMENT

Throughout 2022, the Los Angeles County Sheriff's Department Mental Evaluation Team (LASD MET) has actively participated in a diverse range of mental health advocacy and training events and community outreach initiatives. These events have strengthened the MET's understanding of mental health challenges and fostered collaboration with various stakeholders to enhance mental health response and support. The following list showcases the wide array of events the LASD MET team has participated in during 2022, demonstrating their commitment to promoting mental health awareness and providing essential support to those in need.

## Regular Presenter Throughout the Year

- Sheriff Bi-weekly Townhall LA County Suicide Prevention Board
- 988 Implementation Planning meetings
- FBI Basic CNT School
- *\*Scenario Monitor*
- International liaison (Consular and Parliament) Information sessions about MET and Special Alert

## Ongoing Engagements

- Homeless Outreach Service Team Assistance  
*\*MET Deputy and Clinician permanently embedded with HOST  
\*No impact on MET field teams; DMH directly funds the team*

## Weekly

- Coffee with veterans
- Veteran Alliance
- Breakfast with veterans

## Monthly

- Pizza with veterans
- Mental Health Advisory Board meetings

## Special Engagements

### April

- Sirens of Silence- Autism Awareness Training at the Pomona Regional Center  
*\*Hosted by the LA County Fire Department*
- Rosemead High School Q&A with Staff  
*\*Mental Health Response and school safety post COVID-19*
- City of Industry Autism Awareness Event
- Southgate Police Department Autism Awareness Event

### May

- Didi Hirsch Mental Health Awareness Month Campaign
- LA County Fire coordinated a training meeting (ongoing)  
*\*Assist LACFD in creating mental health responder training for first responders*
- Exemplary Service Award (Entire Unit)

## August

- National Night Out, Crescenta Valley Station

## September

- Deafness Awareness Event  
*\*Hosted by LASD at STARS Center Academy*
- City of Industry City Managers Meeting
- Compton City Council Members participated in MILO Simulator Training
- Facebook Live with ALZ California Q&A  
*"How Families Can Assist Law Enforcement"*

## October

- International Mental Health Day Conference sponsored by Argentina in Trieste, Italy  
*\*Participated as an LASD representative.*
- Global Mental Health Conference on Mental Health and Human Rights in Rome, Italy  
*\*Participated as an LASD representative.*
- California/Hawaii 35th Annual Criminal Justice Conference  
*\*Panelist*

## November

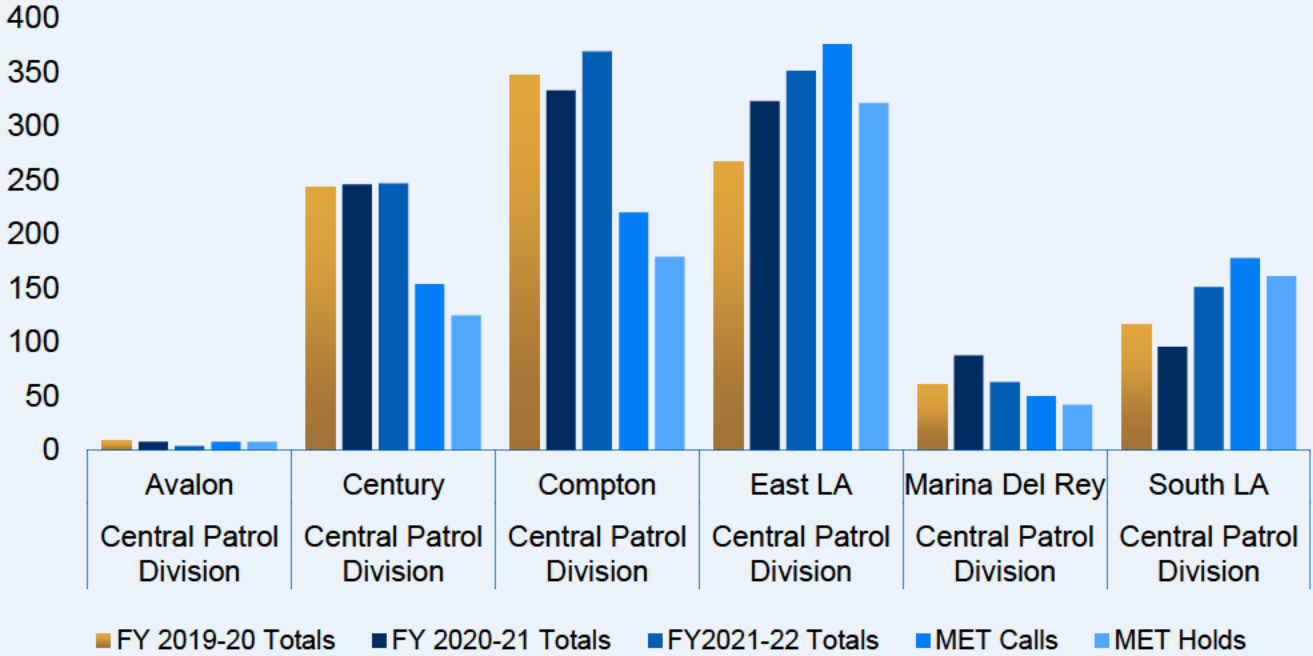
- **Recruit Class 464 Support**
  - Active role in peer support/critical incident stress debriefing, outreach, and veteran assistance
  - Daily visits, phone calls, and support to the hospitalized and non-hospitalized recruits
  - Assisted in linkage to resources, including the VA, counseling, and financial support

## December

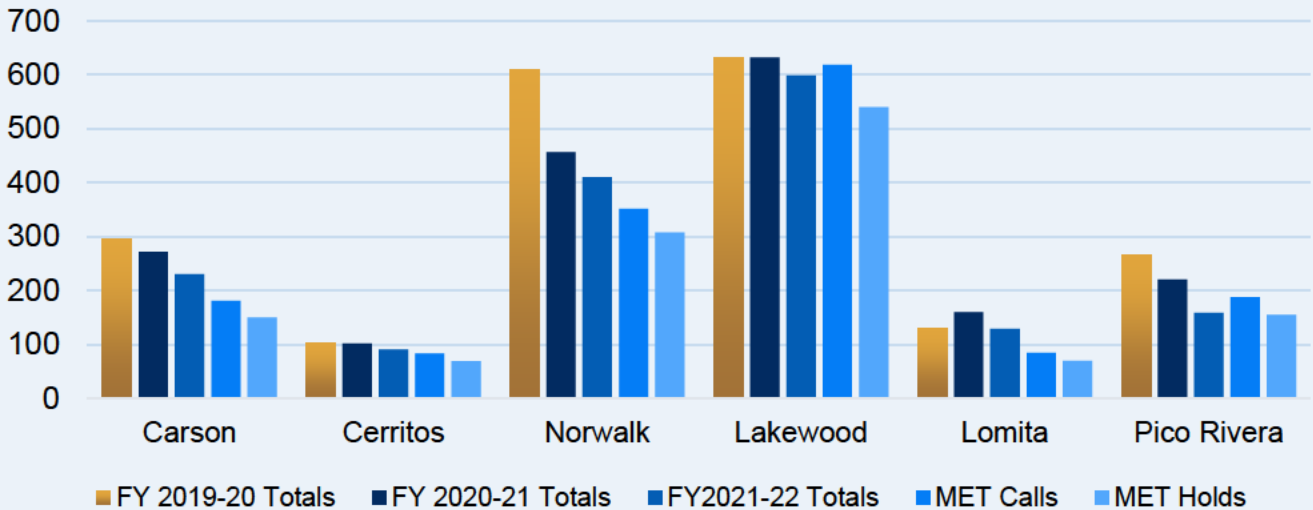
- LA Walk at Dodger Stadium  
*\*Hosted by Autism Speaks*

# DIVISION PERFORMANCE

## Central Patrol Division

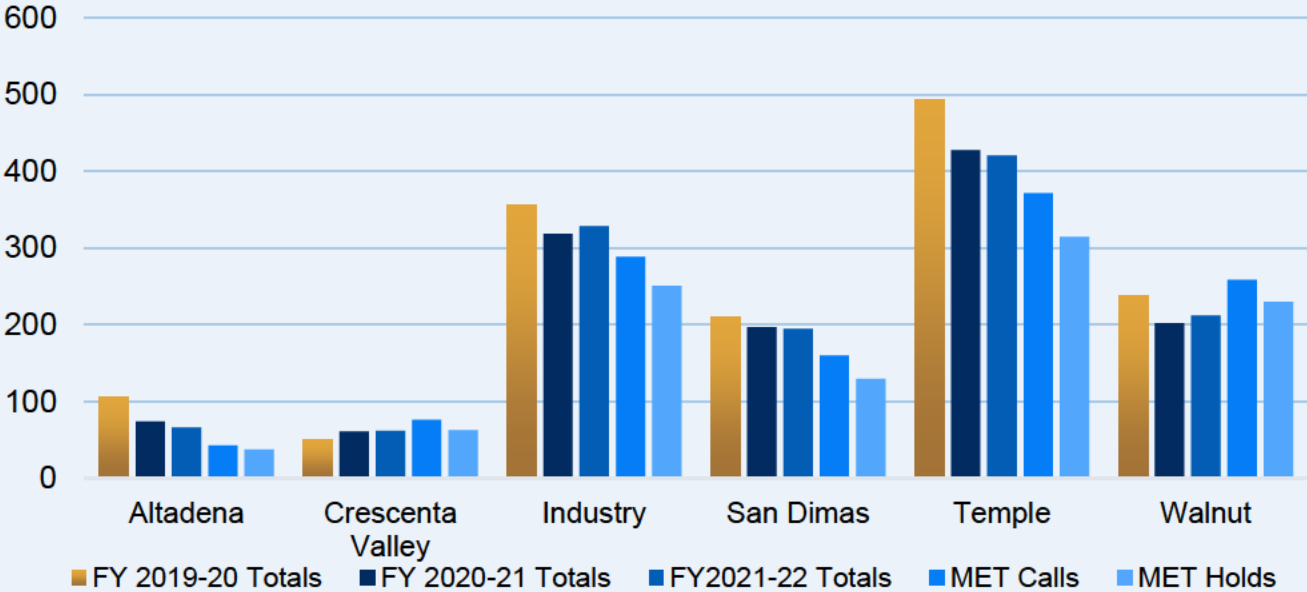


## South Patrol Division

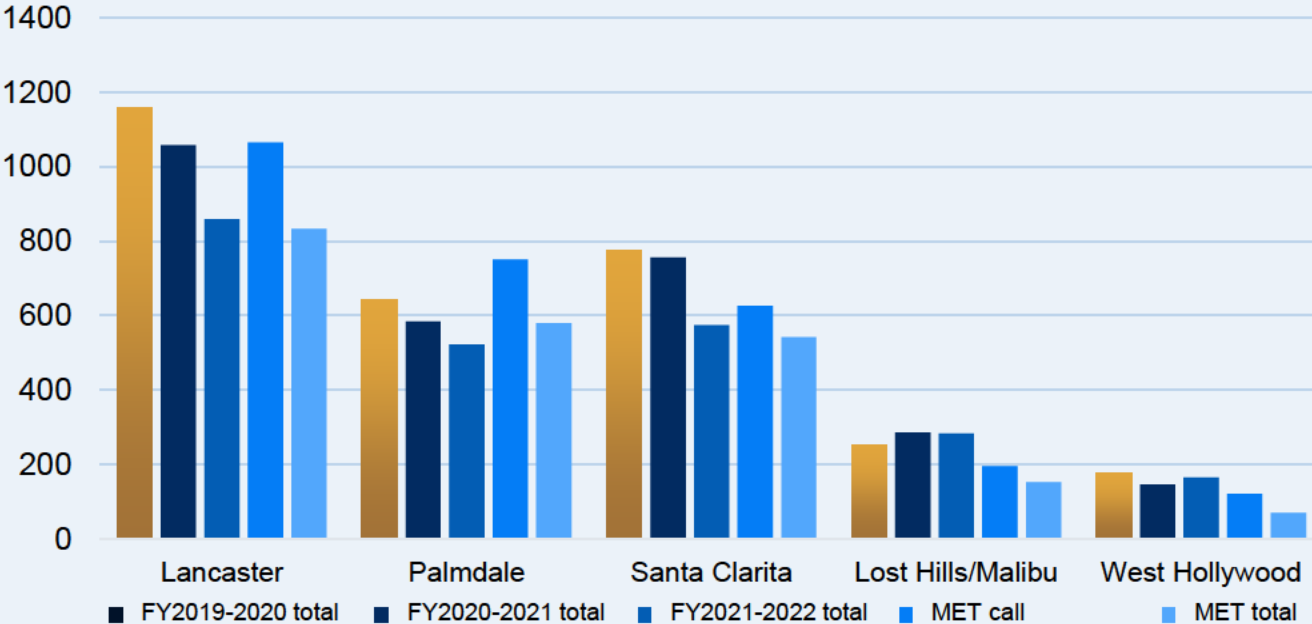


# DIVISION PERFORMANCE

## East Patrol Division



## North Patrol Division



# CURRENT STATE OF THE MET PROGRAM



The Mental Evaluation Team (MET) program has provided mental health crisis response and reduced unnecessary incarcerations. However, the program faces significant challenges.



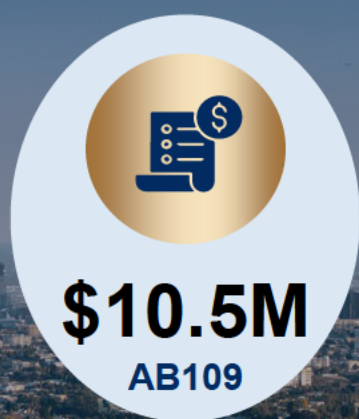
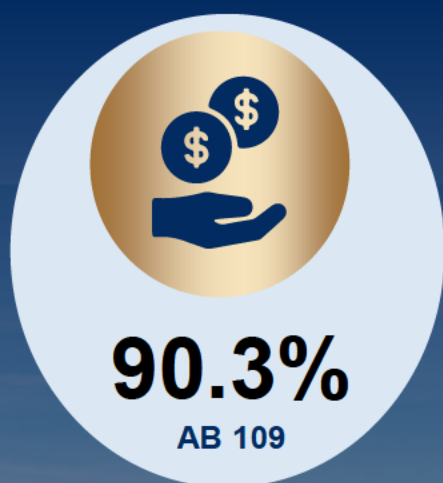
As of this report, the program operates 34 teams, falling short of the 60 teams required to address the county's growing needs. This shortage directly affects MET's response times, due to understaffing and limited resources. Currently, the LASD and LACDMH are facing significant challenges in hiring new personnel.

An analysis of the program demonstrates MET's effectiveness in reducing use of force incidents, hospitalizations, and unnecessary incarcerations. The program has improved response times and managed more calls than in previous years. Stakeholder feedback and satisfaction survey results have been overwhelmingly positive, showcasing the program's impact.



# FUNDING TRANSPARENCY

The MET unit operates as a function of patrol, serving as first responders. Equipped with lights and sirens, MET vehicles co-respond in real-time to active 9-1-1 calls and requests for assistance from patrol stations and law enforcement agencies without their co-response team across the county. Funding for the LASD personnel of the MET unit is primarily sourced from AB 109, which covers 90.3% of the costs, amounting to \$10.5 million. An additional \$1.2 million is provided by the LASD's general budget, ensuring the continued operation and support of the MET unit in serving the community.



**Assembly Bill 109:** California's Public Safety Realignment Act was enacted in 2011 to address overcrowding in state prisons. The bill shifts the responsibility for non-serious, non-violent, and non-sexual offenses from state prisons to county jails and local authorities. Additionally, AB 109 emphasizes the importance of rehabilitation and community-based programs as alternatives to incarceration, aiming to reduce recidivism rates and improve public safety.

# FUTURE PLANNING

The MET is committed to continuous growth and improvement to better address the community's ever-changing needs. By embracing innovative initiatives and collaboration, MET aims to strengthen crisis response capabilities, tackle gender-based violence, and support the mental well-being of department members and the broader community during crises.



## ENHANCING CRISIS RESPONSE CAPABILITIES

Exploring the integration of "persons with lived experiences" into response teams to bolster their crisis response capabilities. By incorporating the unique insights and perspectives of individuals who have navigated mental health challenges, MET can foster a more empathetic and practical approach to crisis intervention.



## EMOTIONAL SUPPORT ANIMALS

Researching and developing emotional support dog programs for VMET and MET crisis response teams. This initiative is crucial for veterans and individuals experiencing crises and first responders, who can benefit from the calming and supportive presence of emotional support animals.



## ADDRESSING GENDER-BASED VIOLENCE

MET is leveraging its infrastructure and expertise to research and develop a pilot countywide Domestic Abuse Response Team, providing comprehensive support and resources to domestic violence victims. The MET crisis intervention cadre is also exploring a survivor-centered training program for patrol deputies focused on sexual and domestic violence, ensuring officers can handle sensitive cases with care, empathy, and understanding.



## EMOTIONAL SUPPORT DURING A CRISIS

Led by the Psychological Services Bureau (PSB) and in collaboration with MET, a unit mobilization plan for large-scale emergencies is being devised. This plan enhances the department's capacity to support its members' mental well-being and the broader community during challenging times. Additionally, MET deputies will be trained in psychological first aid and response strategies, enabling them to provide critical support to those affected by crises and disasters.



## STRENGTHENING COMMUNITY PARTNERSHIPS

MET will continue fostering relationships with key stakeholders, such as mental health service providers, law enforcement agencies, and community organizations, to ensure a comprehensive and coordinated approach to addressing mental health challenges. MET can leverage various partners' expertise and resources through collaboration to create a more inclusive, compassionate, and effective public safety system.

These forward-thinking initiatives highlight MET's ongoing commitment to fostering a more compassionate, inclusive, and effective approach to public safety and mental health support for the people of Los Angeles County. By continuously assessing and adapting its services, MET is paving the way for a brighter, safer, and more resilient future for all community members.

Robert G. Luna  
Sheriff



## APPENDIX II STATISTICS



**Geoffrey Deedrick**  
Captain  
Community Partnerships Bureau  
Los Angeles County Sheriff's Department

# 2022 LASD Calls Involving the Mentally Ill (1/4)



STAT CODE	PATROL STATIONS	ALL BUREAUS
<b>890 Contact Made: Person(s) with No Indication of Mental Illness</b>	5,139 (34%)	8,234 (37%)
<b>891 Contact Made: Person(s) With Indication of Mental Illness</b>	8,566 (56%)	12,461 (55%)
<b>892 Arrest: Person(s) with No Indication of Mental Illness</b>	296 (8%)	302 (4%)
<b>893 Arrest: Person(s) With Indication of Mental Illness</b>	309 (4%)	313 (3%)
<b>894 Unable to Locate Person(s) with Alleged Mental Illness</b>	1,544 (10%)	1,794 (8%)
<b>898 Contact Made: Indication(s) of Homelessness</b>	5,987	6,172
<b>899 Arrest: Person(s) with Indication(s) of Homelessness</b>	711 (12%)	719 (12%)

In 2018, the LASD began using new 89x statistical codes to clear all calls involving contact with the mentally ill (898 and 899 for homelessness). The codes reflected above must be entered when clearing calls in the computer aided dispatch (CAD) system.

Approximately 15,249 calls were received by LASD patrol deputies, which involved contact with a mentally ill or alleged mentally ill person. When all Bureaus are taken into consideration, there were 22,489 total contacts logged with mentally ill or alleged mentally ill persons.

## Notable findings:

- Callers to 911 or the Station desks who reported a subject was mentally ill proved to be inaccurate nearly 1/3 of the time (often, drug use is mistaken for mental illness).
- Contact with a mentally ill person resulted in arrest in just 3.3% of all encounters with patrol deputies. That number drops to under 2.3% of encounters when all non-patrol Bureaus are factored.

## Average MET Incident Handling Times



- The average MET crises handling time for incidents in 2022, which resulted in a hold, was 2 hours, 40 minutes.
- For “holds” where the patient met RAMP criteria, the average incident handling time for MET was 2 hours, 52 minutes.
- The average incident handling time for MET to conduct de-escalation and patient evaluation that did not result in a “hold” was 1 hour, 17 minutes in 2022.
- The average MET wait time Countywide for all urgent care centers and hospitals was 1 hour, 25 minutes in 2022.

# 2022 LASD Calls Involving the Mentally II (2/4)



## Mental Health Crises Trend Summary



Mental health “holds” from 911 calls about crises are increasing dramatically, as shown below. The final column shows the percentage of “holds” handled by MET in 2022:

WIC §§ 5150 or 5585 “Holds”	2022	9-yr Change	4-yr Change	MET Calls	MET Holds	% of Holds by MET
<b>Central Patrol Division</b>	<b>1,217</b>	<b>UP 170% ↑</b>	<b>UP 43% ↑</b>	<b>952</b>	<b>810</b>	<b>78.70%</b>
Avalon	4	100%	-78%	6	6	150%
Century	272	224%	17%	155	131	48.20%
Compton	311	61%	31%	161	130	41.80%
East LA	382	423%	71%	333	279	73%
Marina Del Rey	50	52%	2%	50	38	76%
South LA	198	200%	113%	247	226	114.10%
<b>South Patrol Division</b>	<b>1,558</b>	<b>UP 121% ↑</b>	<b>DOWN 4% ↓</b>	<b>1,289</b>	<b>1,072</b>	<b>68.80%</b>
Carson	234	64%	29%	167	141	60.30%
Cerritos	90	96%	13%	57	47	52.20%
Norwalk	424	207%	-5%	342	287	67.70%
Lakewood	542	193%	-14%	498	417	76.90%
Lomita	124	25%	9%	85	72	58.10%
Pico Rivera	144	53%	-15%	140	108	75%
<b>East Patrol Division</b>	<b>1,351</b>	<b>UP 119% ↑</b>	<b>DOWN 11% ↓</b>	<b>1,155</b>	<b>987</b>	<b>73.10%</b>
Altadena	72	140%	-47%	35	31	43.10%
Crescenta Valley	63	15%	7%	103	91	144.40%
Industry	336	118%	-4%	290	246	73.20%
San Dimas	202	80%	15%	118	103	51%
Temple	464	164%	-17%	366	313	67.50%
Walnut	214	138%	-10%	243	203	94.90%
<b>North Patrol Division</b>	<b>2,300</b>	<b>UP 45% ↑</b>	<b>DOWN 17% ↓</b>	<b>2,751</b>	<b>2,199</b>	<b>95.60%</b>
Lancaster	798	82%	-29%	1,052	841	105.40%
Palmdale	512	16%	-12%	731	572	111.70%
Santa Clarita	562	16%	-22%	757	668	118.90%
Lost Hills/Malibu	272	84%	84%	140	95	34.90%
West Hollywood	156	120%	-15%	71	23	14.70%
<b>All Patrol Divisions</b>	<b>6,426</b>	<b>UP 92% ↑</b>	<b>DOWN 5% ↓</b>	<b>6,147</b>	<b>5,068</b>	<b>78.90%</b>

# 2022 LASD Calls Involving the Mentally II (3/4)



## Number of MET field visits by age



Age in 10 year Increments	5150	5585	Total Hospitalized	Not Hospitalize	Total Incidents	% Hospitalization
Age Not reported	861	250	1111	692	1803	62%
6-15	8	168	176	70	246	72%
16-25	243	79	322	171	493	65%
26-35	440	1	441	365	806	55%
36-45	295	1	296	219	515	57%
46-55	150		150	118	268	56%
56-65	98	1	99	94	193	51%
66-75	20		20	21	41	49%
76-85	3		3	4	7	43%
86-95	1		1		1	100%
<b>Grand Total</b>	<b>2119</b>	<b>500</b>	<b>2619</b>	<b>1754</b>	<b>4373</b>	<b>60%</b>

# 2022 LASD Calls Involving the Mentally II (4/4)

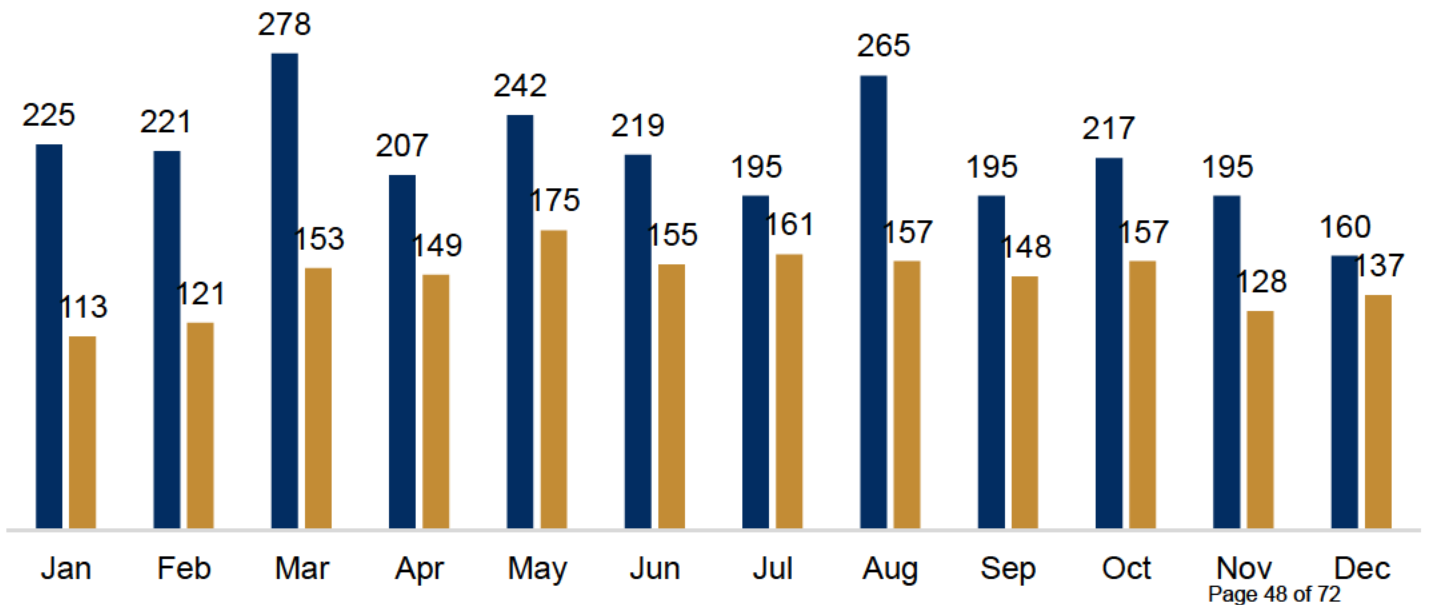


## MET field visits by Month and Outcome



MET INCLUDING WHMET						
Months	5150	5585	Total Hospitalized	Not Hospitalized	All Incidents	% HOSPITALIZATION
Jan	187	38	225	113	338	67%
Feb	180	41	221	121	342	65%
Mar	229	49	278	153	431	65%
Apr	174	33	207	149	356	58%
May	195	47	242	175	417	58%
Jun	187	32	219	155	374	59%
Jul	164	31	195	161	356	55%
Aug	222	43	265	157	422	63%
Sep	150	45	195	148	343	57%
Oct	162	55	217	157	374	58%
Nov	144	51	195	128	323	60%
Dec	125	35	160	137	297	54%
<b>Grand Total</b>	<b>2119</b>	<b>500</b>	<b>2619</b>	<b>1754</b>	<b>4373</b>	<b>60%</b>

**MET field visits by Month and Outcome Jan-Dec 2022**  
**Total Incidents = 4,373**





# MET Expansion Return on Investment (ROI) (1/4)

- In 2022, Mental Evaluation Teams had an extraordinary impact on uses of force in patrol. Data was captured daily by handling MET deputies and the Triage Desk staff, following every crisis incident. The results of MET data entry and benefits of MET expansion are summarized below.
- Having additional MET units in 2022 allowed for deployment at more localized offices to help reduce the ETA of MET units to arrive in time during emergencies and MET helped positively impact the trajectory of the incident and de-escalate the crisis in literally hundreds of incidents. In fact, MET ETA to calls was reduced from over 56 minutes Countywide on average in FY 2016-17 to approximately 29 minutes on average in 2022.

## Relief of Patrol Units by MET



- On average in 2022, MET units relieved 2.8 patrol deputies at each incident after arriving on scene and after the situation was rendered safe. Patrol deputies return to proactive patrol duties and 911 call handling once MET assumes care of the patient.
- On average in 2022, MET units relieved 1 patrol sergeant (mandated response per policy) at each crisis after they arrived on scene and after the situation was rendered safe.

## Averted Uses of Force Involving the Mentally Ill



- Based on the opinion of the handling patrol deputy and/or supervisor at the scene, patrol deputies would have very likely used at least "Level-1" force to subdue patients during 271 incidents in 2022, were it not for MET personnel arriving on scene in time to de-escalate the patient.
  - This represented approximately 3% of the MET responses in 2022.
- Based on the average estimated cost of to the County per use of force investigation, the total estimated cost savings estimated based on those 271 use of force incidents that never happened in 2022, due to MET resolving the situation peacefully, exceeded \$4,830,229 in saved expenditures (not including possible lawsuits, workers compensation claims, etc.)
- The estimated costs savings does not account for the multiple staff injuries that never occurred during those 271 incidents (besides injuries from auto collisions, fighting with suspects is one of the highest risk and costliest factors in deputy injuries and lost work productivity)
- We will never know how many of the 271 uses of force would have resulted in patient injuries, added hospital costs for patient treatment, subsequent civil claims and any number of lawsuits that will never be filed against the County of Los Angeles since MET resolved those 271 incidents without use of force becoming necessary.
  - 34 (83%) of the incidents were resolved without need for deploying an extraction team because MET personnel successfully talked the inmate out of the cell with NO use of force.

# MET Expansion Return on Investment (ROI) (2/4)



## Relief of Patrol Units by MET



- 22 incidents reportedly ended with LESS use of force required by patrol personnel (a lower level of force) as a direct result of MET arriving on scene to help de-escalate the patient.

## MET Return on Investment (ROI): Other Cost Savings

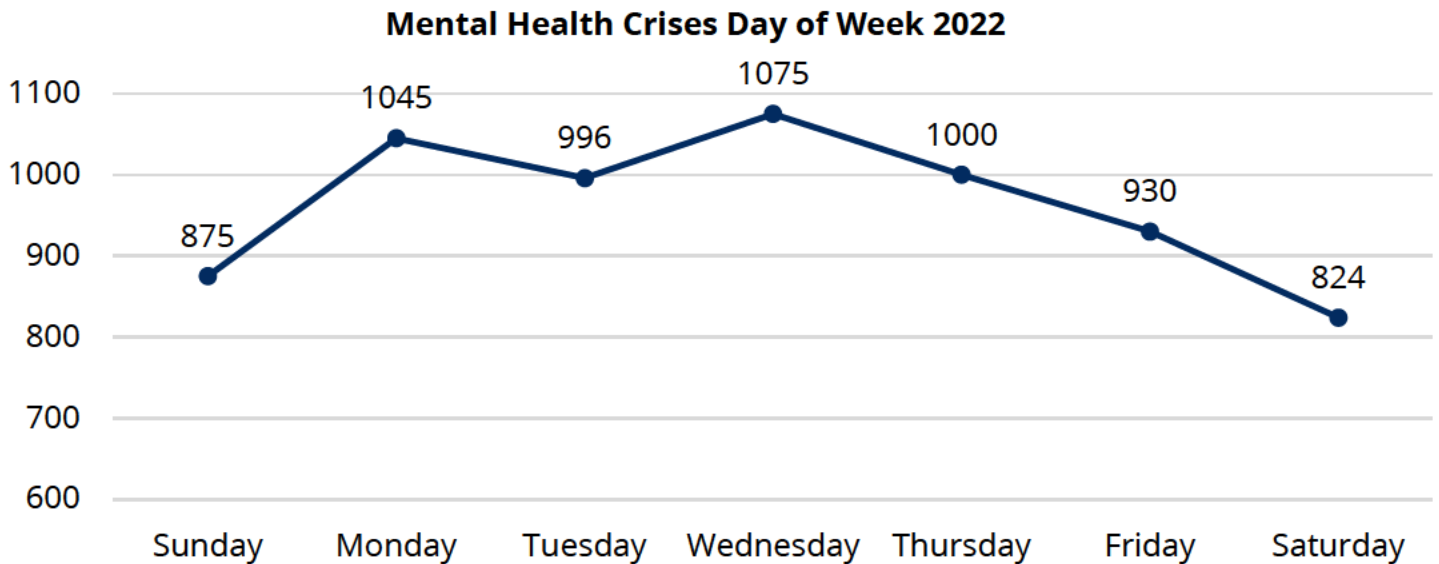


- In 2022, Mental Evaluation Teams positively impacted various aspects of daily operations of the Department, which is summarized below:
- MET team members handled 42 incidents in direct support of patrol that used to require calling in off-duty Crisis Negotiation Team (CNT) personnel. In fact, off-duty, collateralized CNT staff responded to just 23 incidents in 2022, compared to nearly 100 incidents each year in 2016 and 2017.
- MET deputies are all CNT “Advanced-Level” trained and able to respond to major incidents in a fraction of the time compared to calling in staff off duty using considerable overtime expenditures – and long delays to arrive and support patrol.
- The entire on-call Special Enforcement Bureau (SEB) team did not have to be called in, saving considerable overtime and deployment expenditures for 16 separate incidents in 2022, because MET personnel were able to resolve the incident quickly upon arrival. Patrol deputies would have otherwise summoned the full SWAT team for tactical incidents such as barricades – generally resulting in lengthy, costlier deployments.

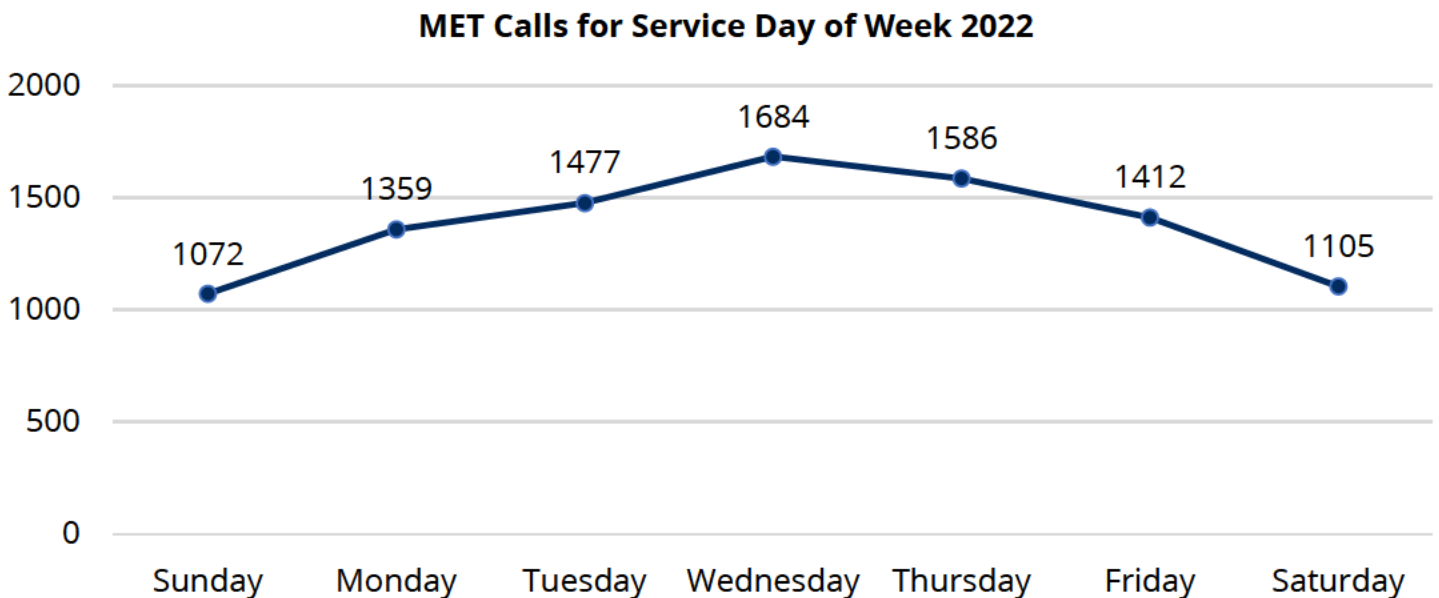
# MET Expansion Return on Investment (ROI) (3/4)



## Crises by Day of the Week



- The table above reflects how many mental health crises occurred during each day of the week as reported to the Triage Desk. Mental health crises occur more often during the weekdays and decline over the weekend, which is a trend observed now for over a decade in LA County.
- Accordingly, MET calls for service are also higher during the weekdays and lower on the weekends



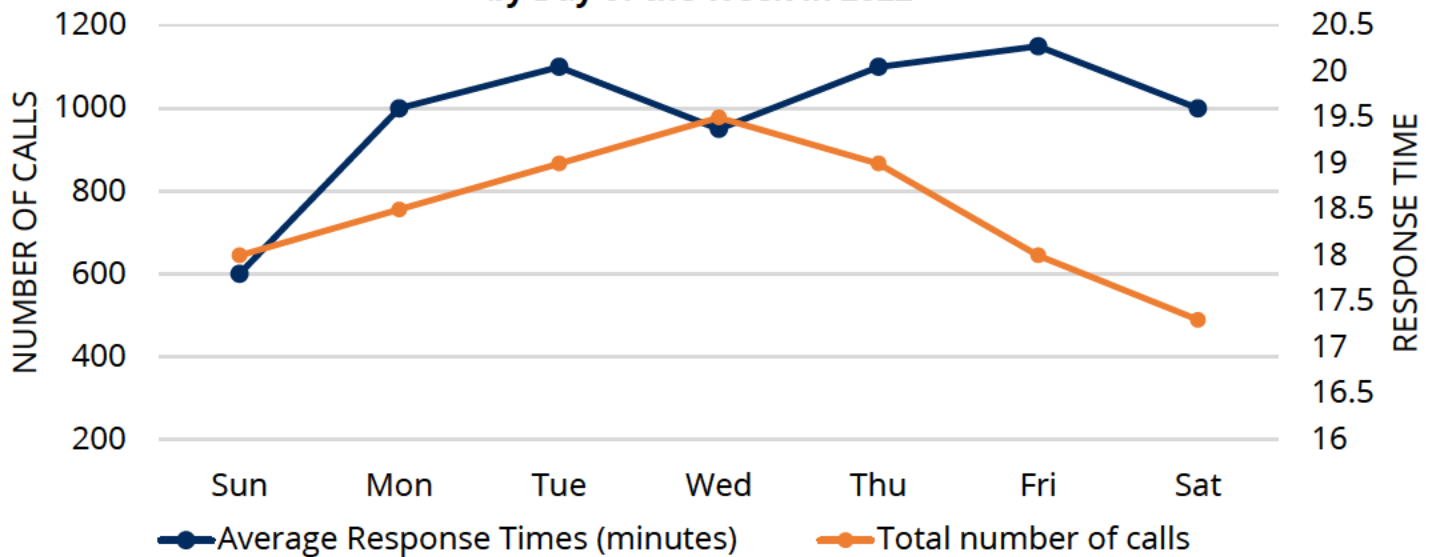
# MET Expansion Return on Investment (ROI) (4/4)



## Response Times to MET Calls for Crises

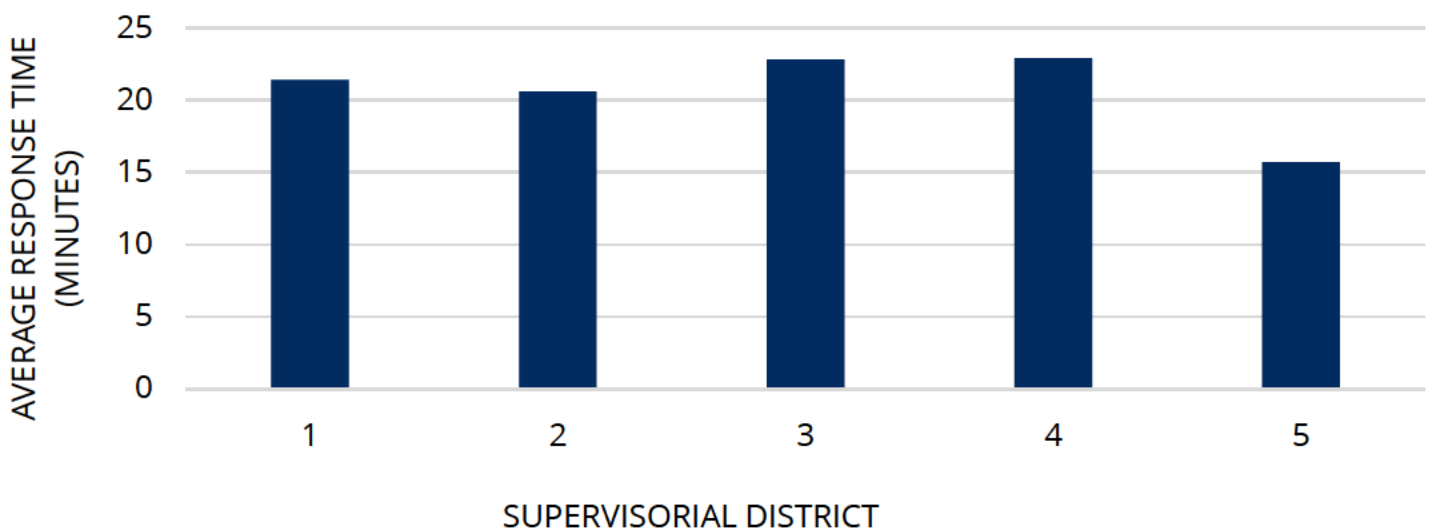


**MET Calls for Service & Average Unit Response Time by Day of the Week in 2022**



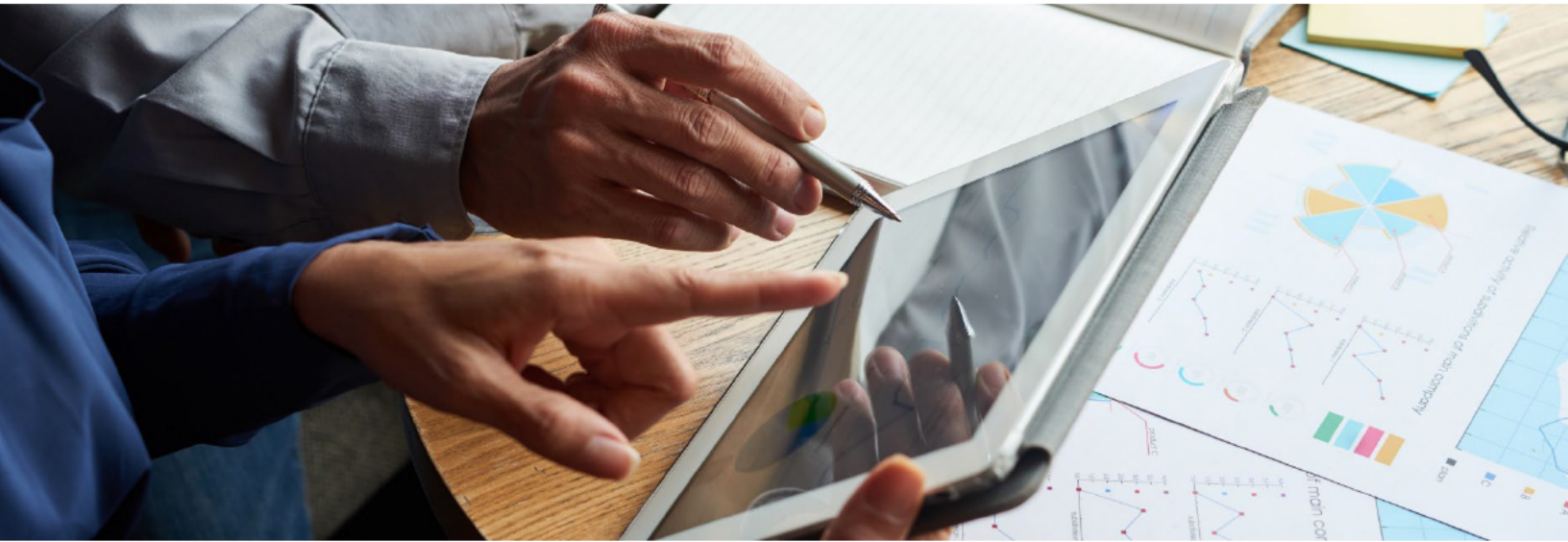
- As the chart above depicts, MET unit response times are generally shorter on Wednesdays, where there is a shift overlap and more units are available.

**MET Average Unit Response Times by Supervisorial District in 2022**



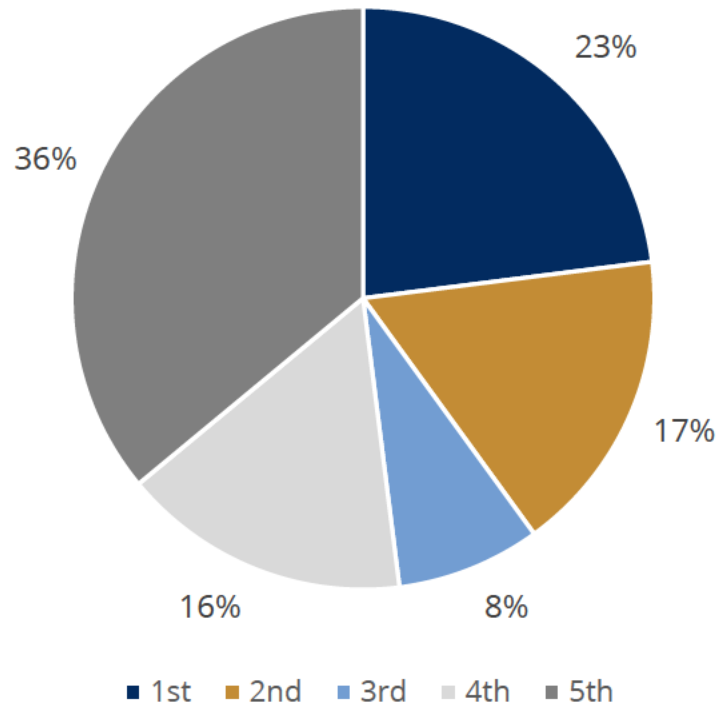
- The above chart shows the average response time of MET units in each supervisorial district.

# MET Calls by Supervisorial District



The chart below represents the breakdown of percentage of crisis MET was requested to respond in 2022:

**MET Responses to Crises by Supervisorial District (2022)**

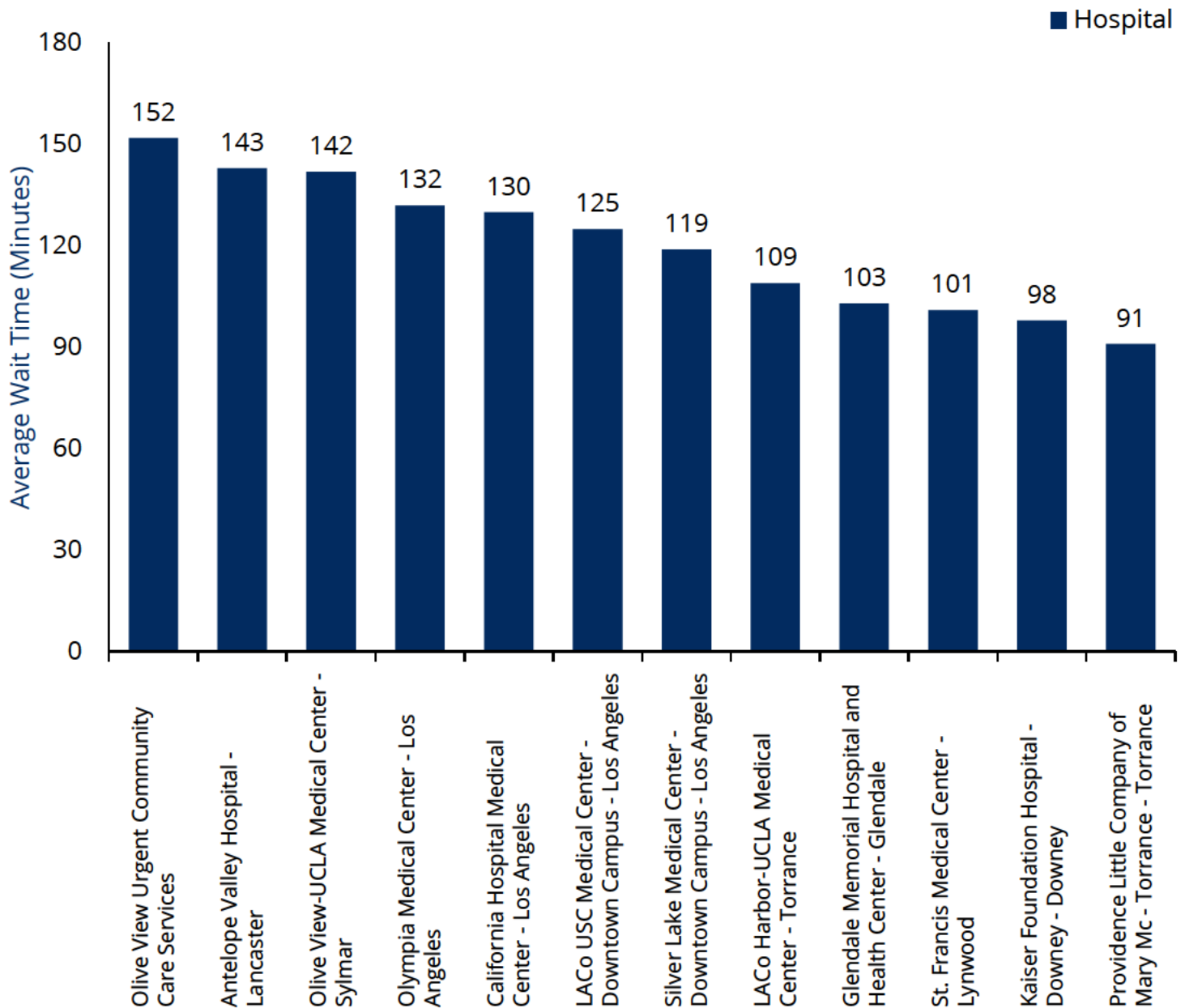


# Hospitalizations in 2022 (1/5)



This chart shows the 12 hospitals with the longest wait times for MET units in 2022. On the following page is a table with all recorded hospital wait times logged by MET deputies at hospitals Countywide in 2022, sorted from longest to shortest average wait times for MET.

### Average Hospital Wait Times in 2022



# Hospitalizations in 2022 (2/5)



<b>HOSPITAL</b> 	<b>AVG WAIT TIME (min)</b> 
Olive View Urgent Community Care Services	151.6
Antelope Valley Hospital - Lancaster	142.9
Olive View-UCLA Medical Center - Sylmar	142.3
Olympia Medical Center - Los Angeles	131.5
California Hospital Medical Center - Los Angeles	130.0
LACo USC Medical Center - Los Angeles	125.2
Silver Lake Medical Center-Downtown Campus - Los Angeles	119.0
LACo Harbor-UCLA Medical Center - Torrance	109.3
Glendale Memorial Hospital and Health Center - Glendale	102.8
St. Francis Medical Center - Lynwood	101.3
Kaiser Foundation Hospital - Downey - Downey	97.9
Providence Little Company of Mary Mc - Torrance - Torrance	90.5
Exodus Urgent Care Center - Harbor UCLA	88.0
Garfield Medical Center - Monterey Park	85.9
Coast Plaza Hospital - Norwalk	85.6
Providence Holy Cross Medical Center - Mission Hills	84.0
Huntington Memorial Hospital - Pasadena	83.6
Pomona Valley Hospital Medical Center - Pomona	83.3
White Memorial Medical Center - Los Angeles	83.3
Citrus Valley Medical Center - IV Campus - Covina	83.2
St. John's Health Center - Santa Monica	83.0
VA Long Beach	81.8
VA West Los Angeles	80.0
San Gabriel Valley Medical Center - San Gabriel	79.7
Kaiser Fnd Hosp - South Bay - Harbor City	79.7
Aurora Las Encinas Hospital	79.3
Palmdale Regional Medical Center - Palmdale	79.3
Long Beach Memorial Medical Center - Long Beach	77.8
Centinela Hospital Medical Center - Inglewood	77.8
Mission Community Hospital - Panorama Campus - Panorama City	77.3
Whittier Hospital Medical Center - Whittier	77.2
San Dimas Community Hospital - San Dimas	75.0
USC Verdugo Hills Hospital - Glendale	73.5
Southern California Hospital At Culver City - Culver City	72.7
Methodist Hospital of Southern California - Arcadia	72.4
Presbyterian Intercommunity Hospital - Whittier	72.3
Exodus Recovery Inc., Venice	71.0

# Hospitalizations in 2022 (3/5)



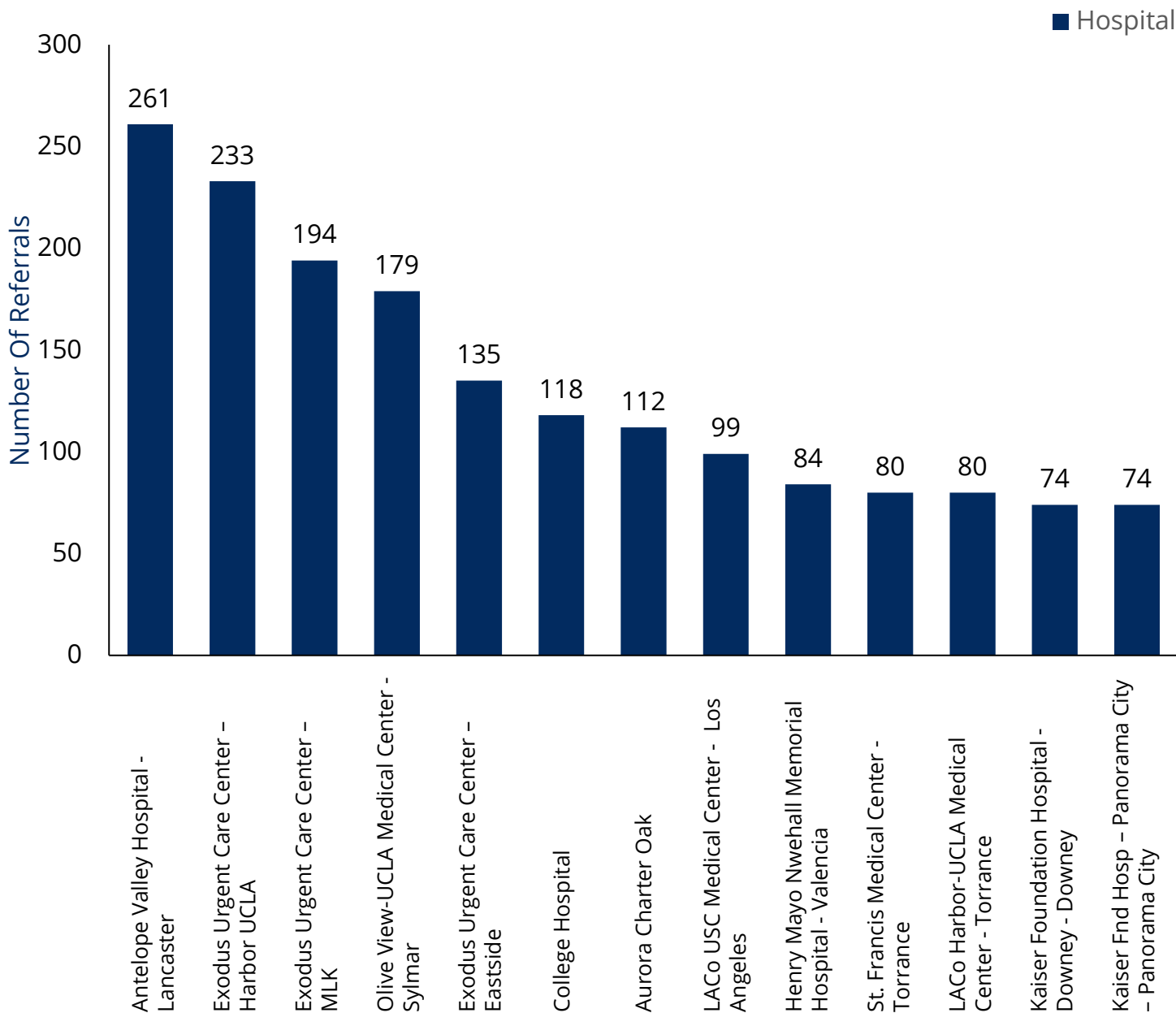
<b>HOSPITAL</b> 	<b>AVG WAIT TIME (min)</b> 
Lakewood Regional Medical Center - Lakewood	70.5
Star View Adolescent - P H F - Torrance	69.8
College Medical Center - Long Beach	69.8
West Hills Hospital and Medical Center - Canoga Park	69.5
Foothill Presbyterian Hospital-Johnston Memorial - Glendora	67.7
Del Amo Hospital	66.6
Aurora Charter Oak	66.3
Sherman Oaks Hospital - Sherman Oaks	66.3
Citrus Valley Medical Center - QVH Campus - West Covina	66.3
Kaiser Fnd Hosp - Baldwin Park - Baldwin Park	65.8
Beverly Hospital - Montebello	65.6
Glendale Adventist Medical Center - Wilson Terrace - Glendale	64.8
Torrance Memorial Medical Center - Torrance	64.2
College Hospital	63.2
Cedars Sinai Medical Center - Los Angeles	63.1
Northridge Hospital Medical Center - Northridge	62.3
Henry Mayo Newhall Memorial Hospital - Valencia	61.8
Exodus Urgent Care Center - Westside	61.4
Marina Del Rey Hospital - Marina Del Rey	60.0
Kaiser Fnd Hosp - Panorama City - Panorama City	59.6
Pacifica Hospital of the Valley - Sun Valley	59.0
Exodus Urgent Care Center - MLK	57.2
Exodus Urgent Care Center - Eastside	56.7
Las Encinas Mental Health Hospital	54.6
Pacific Alliance Medical Center, inc. - Los Angeles	54.0
Kedren Community Mental Health Center	53.3
Gateways Hospital and Mental Health Center - Los Angeles	52.0
Exodus Recovery Inc., Crisis Residential Treatment Program	51.7
Kaiser Fnd Hosp - Los Angeles - Los Angeles	51.0
Ronald Reagan UCLA Medical Center - Los Angeles	50.5
Kaiser Fnd Hosp - Woodland Hills - Woodland Hills	48.0
Los Robles Medical Center, Thousand Oaks	43.1
Greater El Monte Community Hospital - South El Monte	38.5
East Los Angeles Doctors Hospital - Los Angeles	36.7
Pih Hospital - Downey - Downey	29.8
Community Hospital of Huntington Park	26.0
VA Loma Linda	23.0

# Hospitalizations in 2022 (4/5)



This chart shows the hospitals with the most referrals for MET units in 2022.

### Hospital Referrals by LASD MET 2022

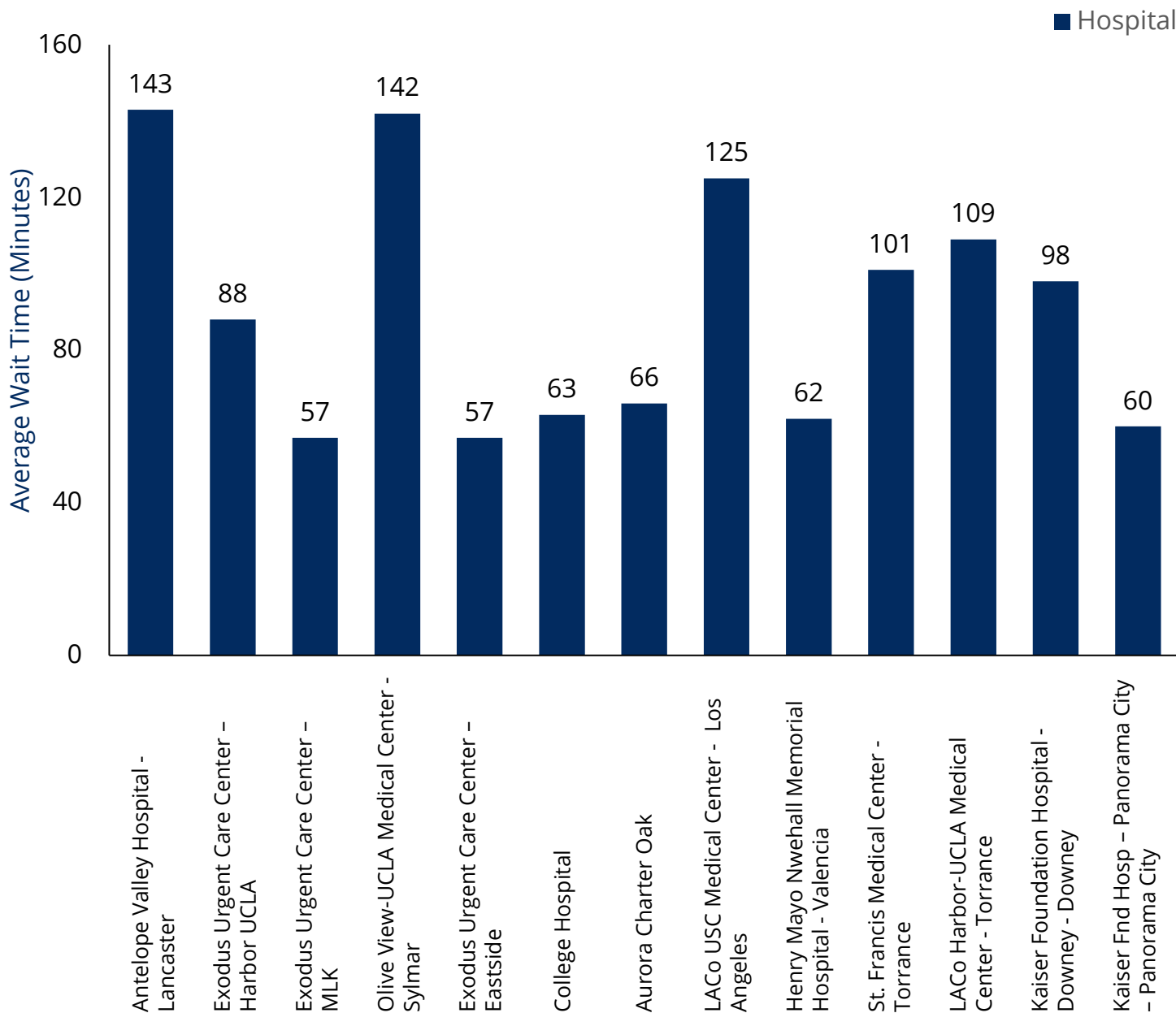


# Hospitalizations in 2022 (5/5)



This chart shows the hospitals with the most referrals for MET units in 2022 with their average wait time reflected.

**Average Wait Times for Hospitals with the Most Referrals in 2022**

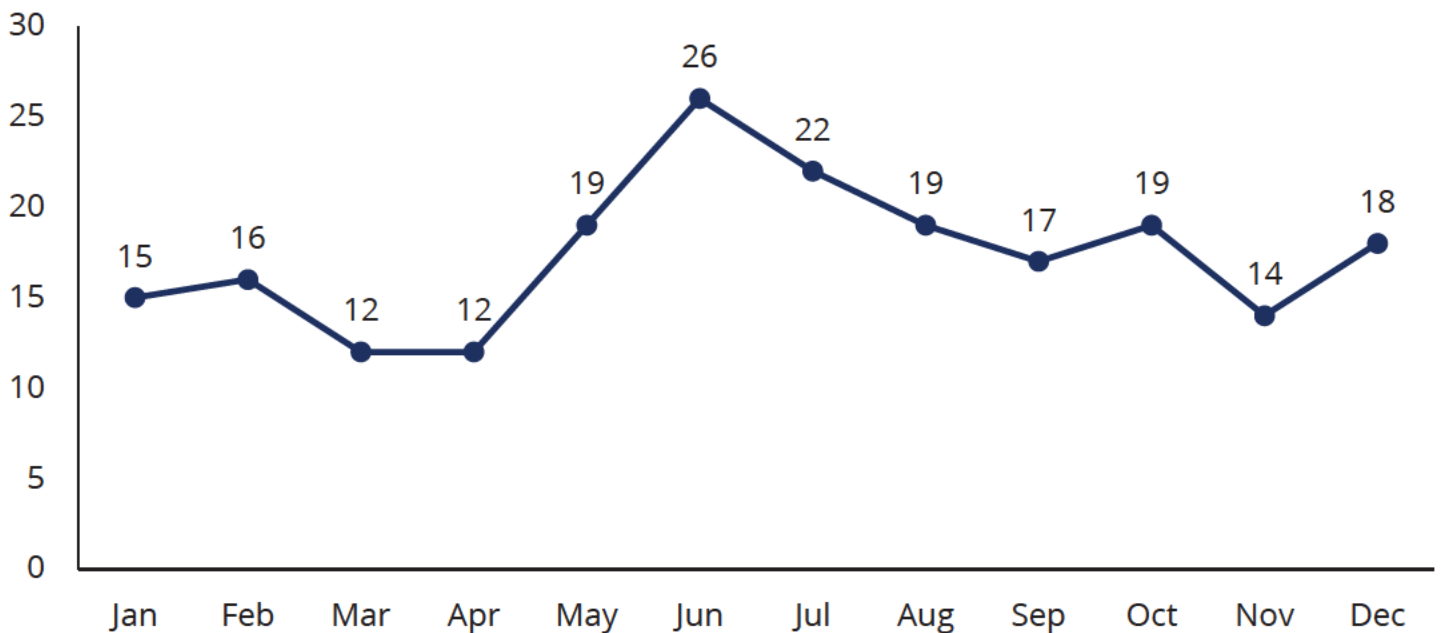


# Suicide Data (1/5)



209 total suicides were reported in LASD jurisdictions in 2022. The number of occurrences per month is depicted below:

**Countywide Suicides  
in 2022 (LASD Jurisdictions)**



This chart represents the number of suicides that occurred in each month in LASD jurisdiction. June had the most suicides while March and April had the fewest. 1 suicide occurred every 1.7 days on average.

Number of days with...	
1 suicide	115
2 suicides	37
3 suicides	4
4 suicides	2
0 suicides	207

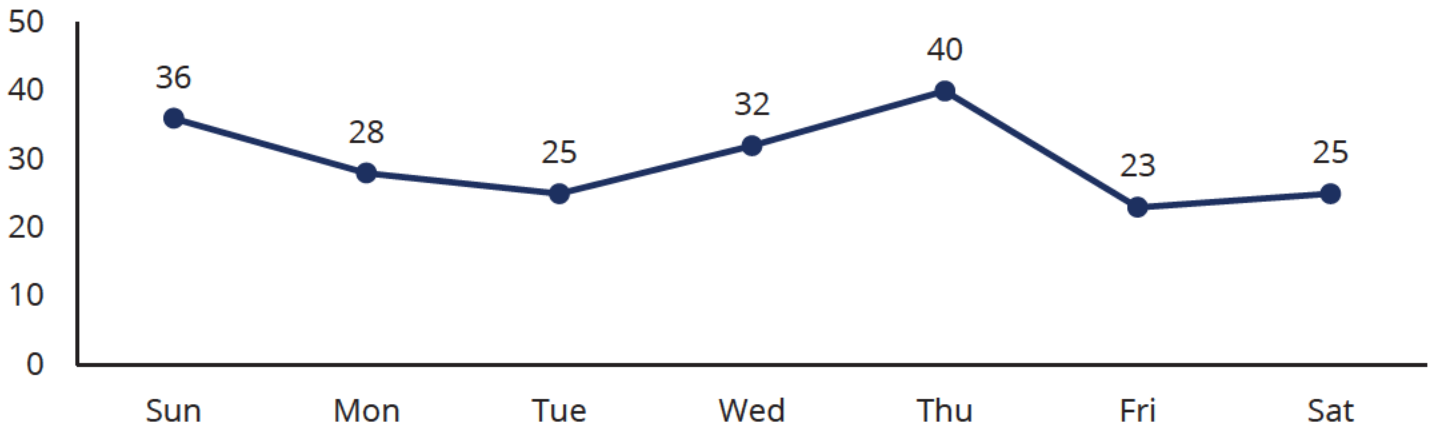
The above frequency table shows how many days of the year had a certain number of suicides



# Suicide Data (2/5)

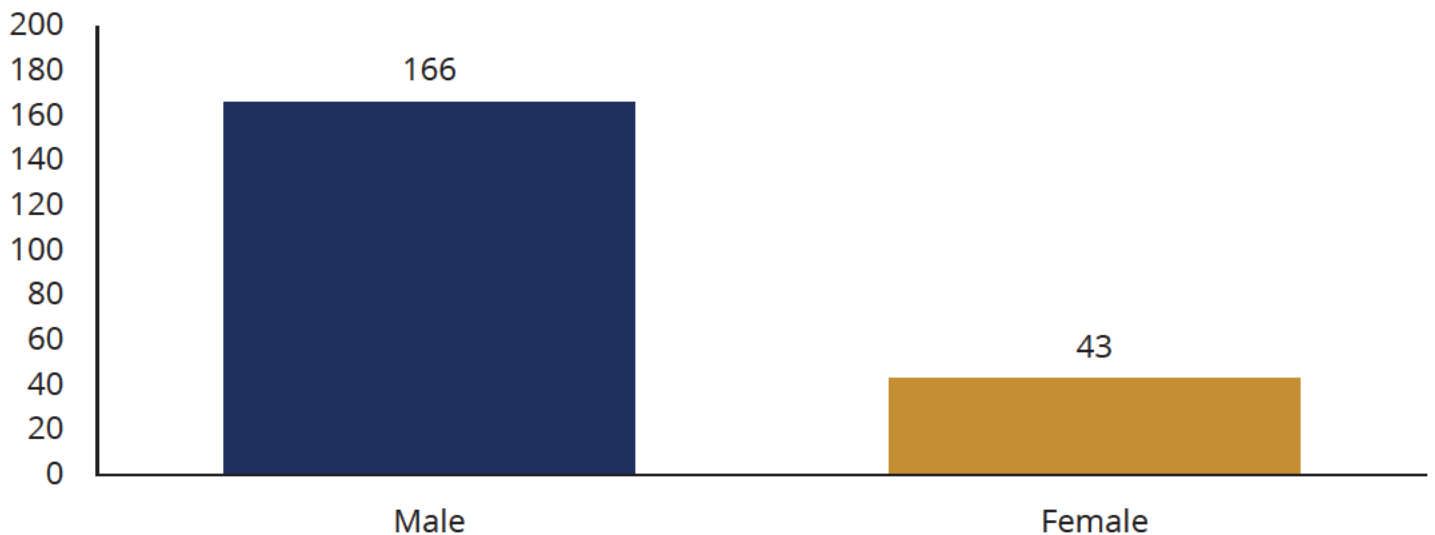


### Countywide Suicides Day of the Week 2022



This graph shows the number of suicides committed by day of week. The number of suicides are much higher on Sundays and Thursdays and drop significantly on Tuesdays, Fridays and Saturdays, a trend fairly consistent with the previous year.

### Countywide Suicides by Victim Sex 2022

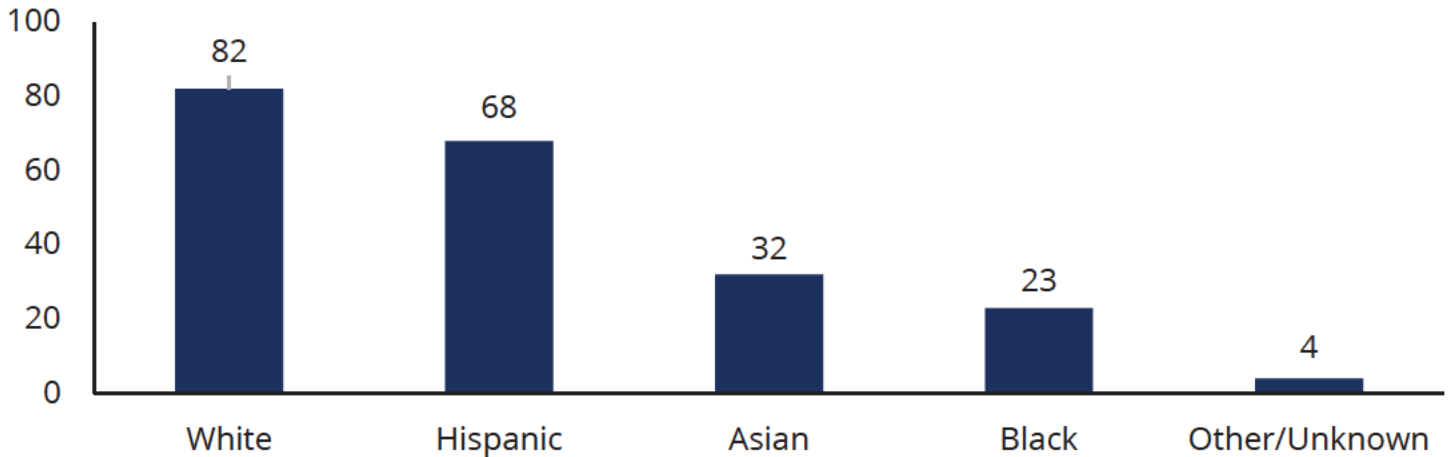


This graph shows the number of suicides by victim's sex. Males are nearly four times as likely as females to commit suicide.

# Suicide Data (3/5)

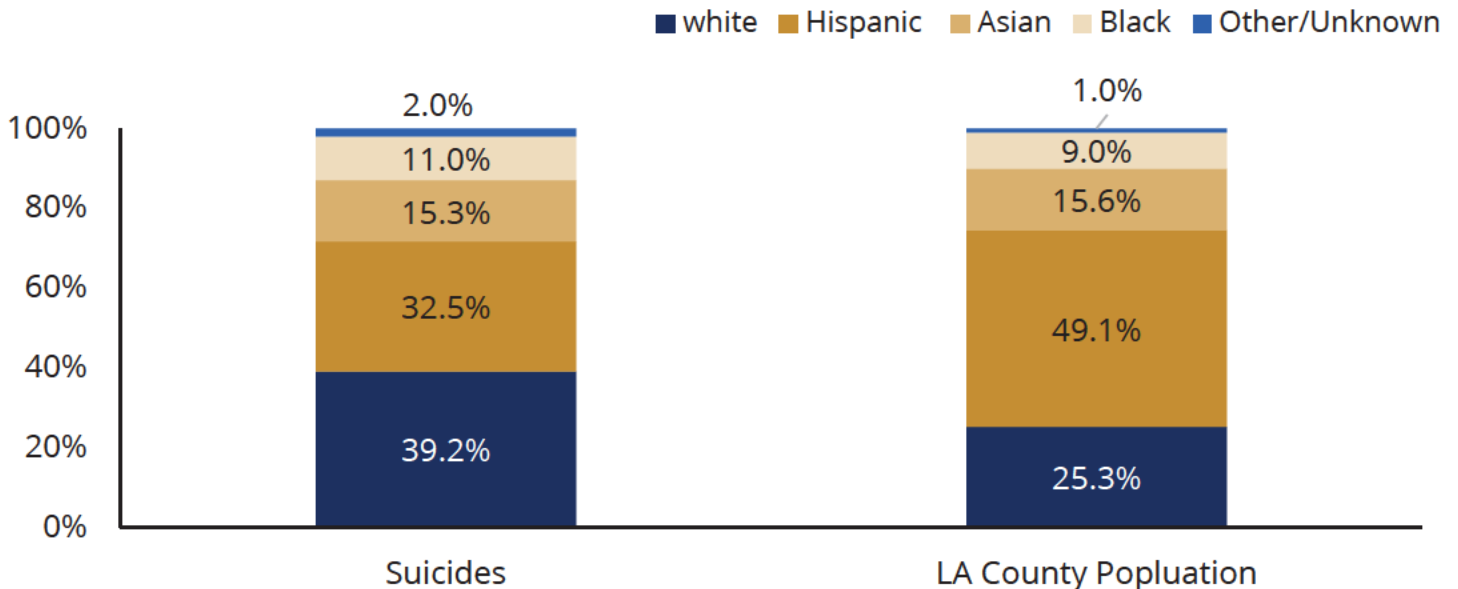


**Countywide Suicides  
by Victim Race 2022**



This chart depicts the number of suicides that occurred by victim's race.

**County-Wide Suicides  
Racial Composition Comparison 2022**

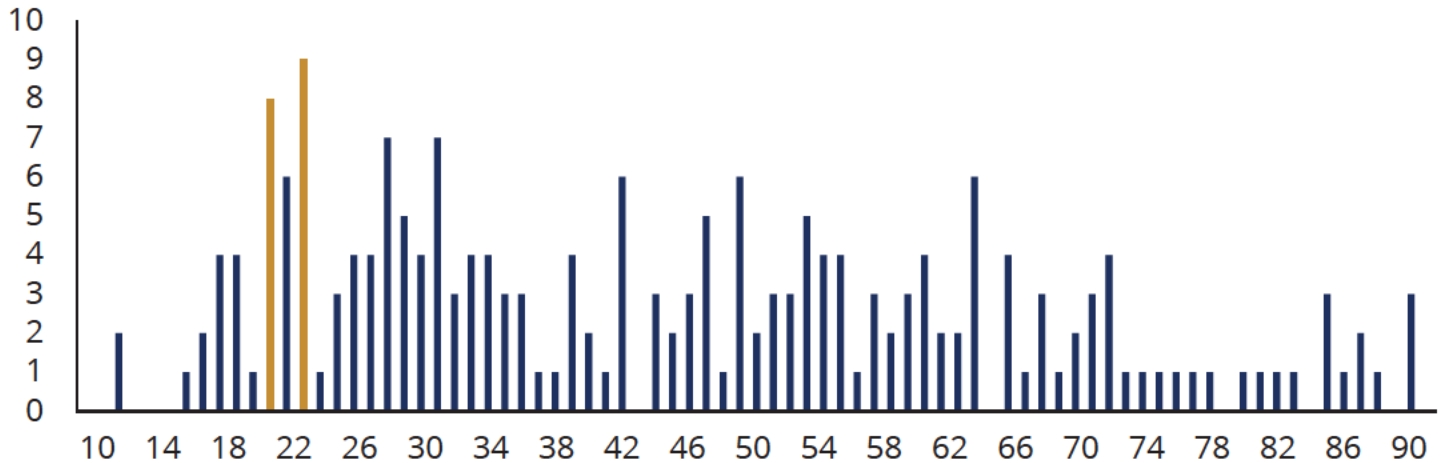


LA County racial composition data was obtained via the US Census' most recent estimates (July 2022). While white individuals are heavily overrepresented in suicides Countywide, Asian individuals are also slightly overrepresented in the 2022 totals.

# Suicide Data (4/5)

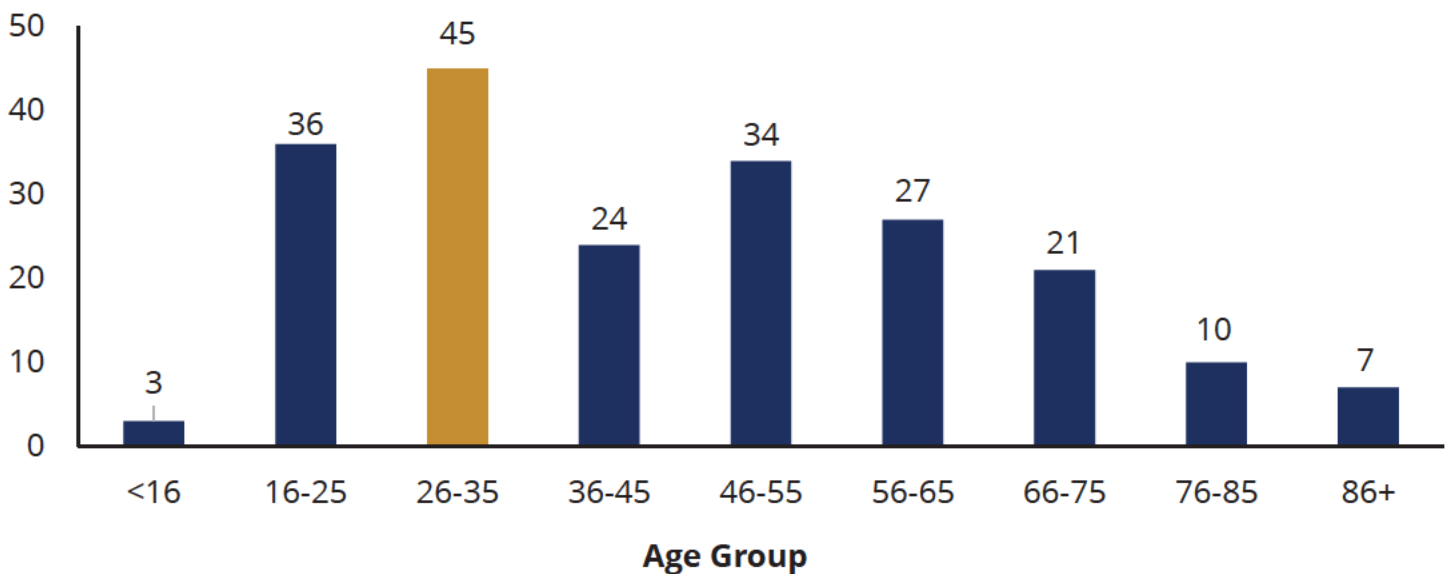


**Countywide Suicides  
by Victim Age 2022**



This chart depicts the number of suicides that occurred by age of the victim. 22-year-olds and 24-year-olds committed the most suicides in 2022.

**Countywide Suicides  
by Victim Age Group 2022**

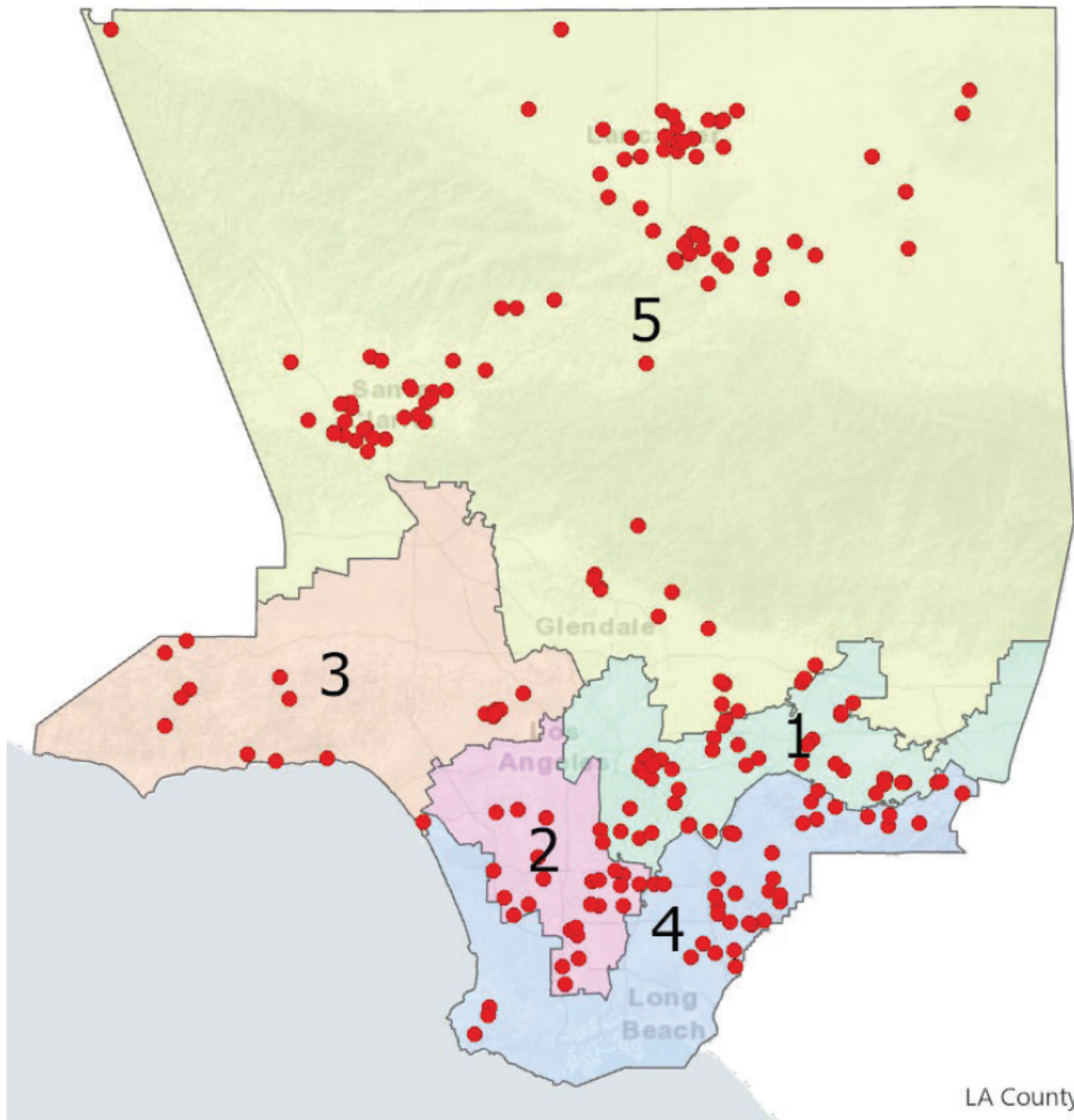


This table breaks down the number of suicides by age group. Suicides occurred most often for young adults between the ages of 26 and 35.

# Suicide Data (5/5)



Countywide Suicides 2022



**THE MAP ABOVE DEPICTS WHERE IN LA COUNTY EACH SUICIDE IN 2022 OCCURRED**

# APPENDIX:2021 Statistics (1/3)



This section of the report focuses on analysis of data and metrics associated with mental illness crises and MET responses in 2021.

WIC §§ 5150 or 5585 "Holds"	2021	4-yr Change	9-yr Change	MET Calls (2021)	MET Holds (2021)	% of Holds by MET (2021)
Central Patrol Division	1,029	UP 20% ↑	UP 128% ↑	895	729	70.8%
South Patrol Division	1,693	UP 4% ↓	UP 140% ↑	1,508	1,267	74.8%
East Patrol Division	1,256	DOWN 17% ↓	UP 104% ↑	1,177	974	77.5%
North Patrol Division	2,640	DOWN 4% ↓	UP 67% ↑	2,821	2,113	80%
All Patrol Divisions	6,618	DOWN 2% ↓	UP 97% ↑	6,401	6,036	76.8%



For years, the MET units struggled to get to calls Countywide due to severe understaffing –five deployed MET units did their best for more than two (2) decades with response times to calls exceeding 55 minutes on average. With such long response times, MET was a myth to most patrol deputies who never experienced MET support in the field. While the concept and intent was noble, deployment of only five MET units in essence set the program up to fail.



Due to the recent investments in expansion of the MET unit, coupled with the revised deployment model (centralized dispatch / desk operation), the MET unit's average response times Countywide are now approximately 27.3 minutes per call.



MET units are strategically deployed daily to reduce response times. MET units are increasingly arriving in time (corresponding with patrol units in some cases) to affect the way cases are handled from the initial contact with the subject in question.



# APPENDIX:2021 Statistics (2/3)



## 2021 LASD Calls Involving the Mentally Ill



STAT CODE	PATROL STATIONS	ALL BUREAUS
890 Contact Made: Person(s) with No Indication of Mental Illness	5,438 (32%)	7,693 (31%)
891 Contact Made: Person(s) With Indication of Mental Illness	9,899 (58%)	14,829 (60%)
892 Arrest: Person(s) with No Indication of Mental Illness	332 (3.3%)	338 (2.3%)
893 Arrest: Person(s) With Indication of Mental Illness	220	226
894 Unable to Locate Person(s) with Alleged Mental Illness	1,810 (11%)	2,005 (8%)
898 Contact Made: Indication(s) of Homelessness	8,047	8,145
899 Arrest: Person(s) with Indication(s) of Homelessness	1,223 (15%)	1,231 (15%)



In 2018, the LASD began using new 89x statistical codes to clear all calls involving contact with the mentally ill (898 and 899 for homelessness). The codes reflected above must be entered when clearing calls in the computer aided dispatch (CAD) system.



Approximately 17,147 calls were received by LASD patrol deputies, which involved contact with a mentally ill or alleged mentally ill person. When all Bureaus are taken into consideration, there were 24,527 total contacts logged with mentally ill or alleged mentally ill persons.

### Notable findings



- Callers to 911 or the Station desks who reported a subject was mentally ill proved to be inaccurate nearly 1/3 of the time (often, drug use is mistaken for mental illness).
- Contact with a mentally ill person resulted in arrest in just 3.3% of all encounters with patrol deputies. That number drops to under 2.3% of encounters when all non-patrol Bureaus are factored.



# APPENDIX:2021 Statistics (3/3)



## Average MET Incident Handling Times



- The average MET crises handling time for incidents in 2021, which resulted in a hold, was 2 hours, 25 minutes.
- For “holds” where the patient met RAMP criteria, the average incident handling time for MET was 2 hours, 41 minutes.
- The average incident handling time for MET to conduct de-escalation and patient evaluation that did not result in a “hold” was 1 hour, 7 minutes in 2021.
- The average MET wait time Countywide for all urgent care centers and hospitals was 1 hr 17 minutes in 2021.

## Mental Health Crises Trend Summary



Mental health “holds” from 911 calls about crises are increasing dramatically, as shown below. The final column shows the percentage of “holds” handled by MET in 2021:

WIC §§ 5150 or 5585 “Holds”	2021	2-yr Change	8-yr Change	MET Calls	MET Holds	% Holds by MET
<b>Central Patrol Division</b>	<b>1,029</b>	<b>UP 20% ↑</b>	<b>UP 128% ↑</b>	<b>895</b>	<b>729</b>	70.8%
Avalon	5	-72%	150%	8	8	160%
Century	230	-1%	174%	159	120	52.2%
Compton	291	22%	51%	162	120	41.2%
East LA	302	35%	314%	364	309	102.3%
Marina Del Rey	83	69%	152%	74	61	73.5%
South LA	118	27%	79%	128	111	94.1%
<b>South Patrol Division</b>	<b>1,693</b>	<b>UP 4% ↑</b>	<b>UP 140% ↑</b>	<b>1,508</b>	<b>1,267</b>	74.8%
Carson	226	24%	58%	175	144	63.7%
Cerritos	90	13%	96%	84	71	78.9%
Norwalk	423	-5%	207%	330	288	68.1%
Lakewood	628	0%	239%	642	544	86.6%
Lomita	142	25%	43%	72	55	38.7%
Pico Rivera	184	8%	96%	205	165	89.7%
<b>East Patrol Division</b>	<b>1,256</b>	<b>DOWN 17% ↓</b>	<b>UP 104% ↑</b>	<b>1,177</b>	<b>974</b>	77.5%
Altadena	66	-51%	120%	51	37	56.1%
Crescenta Valley	68	15%	24%	58	43	63.2%
Industry	322	-8%	109%	271	240	74.5%
San Dimas	184	5%	64%	155	122	66.3%
Temple	402	-28%	128%	384	314	78.1%
Walnut	214	-10%	138%	258	218	101.9%
<b>North Patrol Division</b>	<b>2,640</b>	<b>DOWN 4% ↓</b>	<b>UP 67% ↑</b>	<b>2,821</b>	<b>2,113</b>	80%
Lancaster	1,000	-11%	128%	1,116	818	81.8%
Palmdale	549	-6%	24%	765	563	102.6%
Santa Clarita	646	-10%	33%	604	507	78.5%
Lost Hills/Malibu	287	94%	94%	188	141	49.1%
West Hollywood	158	-14%	123%	148	84	53.2%
<b>All Patrol Divisions</b>	<b>6,618</b>	<b>DOWN 2% ↓</b>	<b>UP 97% ↑</b>	<b>6,401</b>	<b>5,083<sup>1</sup></b>	76.8%

<sup>1</sup> DMH clinicians authored 2,587 “holds” (81%) and MET deputies wrote the remainder of “holds” (19%).

Robert G. Luna  
Sheriff



## APPENDIX II

# Meeting the Pillars of 21st Century Policing

The innovative foundations  
of the Los Angeles County  
Sheriff's Department Mental  
Evaluation Team



**Geoffrey Deedrick**  
Captain  
Community Partnerships Bureau  
Los Angeles County Sheriff's Department



# Meeting the Pillars of 21<sup>st</sup> Century Policing

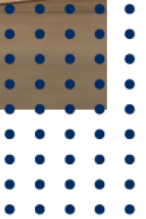
## EXECUTIVE SUMMARY

- This brief presents an overview of the Los Angeles County Sheriff's Department (LASD) Mental Evaluation Team (MET), demonstrating its alignment with the principles of the 21st Century Policing Task Force and emphasizing its essential role in addressing community safety and mental health crisis intervention. The report delves into MET's past, present, and potential future developments, showcasing the team's dedication to addressing mental health crises and fostering community trust.
- **Key findings from the report highlight the importance of:**
  1. Building trust and legitimacy through transparency, community engagement, and proactive mental health crisis intervention.
  2. Implementing effective policies and oversight measures to ensure consistency and accountability within the MET program.
  3. Utilizing technology and social media to enhance communication with the community and improve service delivery.
  4. Promoting community policing and crime reduction by adopting innovative strategies, such as specialized mental health response teams and collaborations with local organizations.
  5. Enhancing training and education to equip deputies with the necessary skills to handle mental health crises and complex situations effectively.
  6. Prioritizing officer wellness and safety through various initiatives, including collaboration with support services and psychological first aid training.

By continually evolving and enhancing its programs and initiatives, LASD MET has the potential to lead the way in transforming policing, strengthening community trust, and ensuring the safety and well-being of both its deputies and the public it serves.

## Introduction

- The Los Angeles County Sheriff's Department (LASD) Mental Evaluation Team (MET) embodies the principles of the 21st Century Policing Task Force, serving as a vital component in addressing community safety and mental health crisis intervention. This report offers an overview of MET's past, present, and possible future developments, underscoring the team's dedication to tackling mental health crises in Los Angeles County.
- In the current landscape of policing, community trust, and public safety, MET's role has grown increasingly significant. Factors such as the prevalence of mental health issues, the rising awareness of trauma-informed practices, and the ongoing national dialogue about law enforcement's relationship with communities emphasize the need for effective mental health response teams like MET. Recent events, including the COVID-19 pandemic and social unrest following the killing of George Floyd, have further highlighted the importance of a compassionate and efficient mental health crisis response infrastructure.
- This brief explores MET's evolution in serving the community, focusing on initiatives that strengthen trust and legitimacy, policy and oversight, technology and social media usage, community policing and crime reduction, training and education, and officer wellness and safety. By providing a comprehensive evaluation of LASD MET's current state, this report aims to contribute to the ongoing conversation surrounding mental health crisis intervention, community trust, and public safety.



## Building Trust and Legitimacy

- **Past**
- Established trust and legitimacy through effective mental health crisis intervention, evidence-based practices, and collaborations.
- Focused on developing a foundation for mental health crisis response and prioritizing individual and family needs.
- **Present**
- Fosters trust and legitimacy through initiatives such as Project Lifesaver and West Hollywood Station Contracted MET.
- Demonstrates commitment to community safety and well-being.
- **Possible**
- Enhance response to diverse community needs while maintaining trust and legitimacy.

## Policy and Oversight

- **Past**
- Established a framework of effective policies and oversight measures.
- Developed guidelines for crisis response and partnerships with mental health professionals and community organizations.
- **Present:**
- Implements policies and oversight measures, such as the RAMP Inmate Booking and Diversion Program.
- Independent Report by Civilian Oversight Committee recommends expanding MET and RAMP teams.
- **Possible:**
- Engage third-party research firm to study MET for an objective evaluation.
- Collaborate with LASD Psychological Support Services Bureau to deploy RAMP investigators for LASD employees in crisis.

# Meeting the Pillars of 21<sup>st</sup> Century Policing



## Technology & Social Media

- **Past:**
  - Early adoption of technology and social media facilitated improved operations, community communication, and mental health crisis response, leading to increased visibility and community engagement.
- **Present:**
  - The Triage Desk exemplifies the efficient use of technology for dispatching MET teams, optimizing crisis response.
  - Social media platforms promote awareness, resources, and updates for mental health issues and available services.
- **Possible:**
  - Adopt innovative technologies such as telehealth or mobile apps to improve access to mental health services.
  - Expand social media engagement and partnerships.

## Community Policing & Crime Reduction

- **Past:**
  - Prioritized well-being and safety of the public
  - Focused on mental health and crisis intervention
  - Reduced likelihood of violent encounters
  - Diverted individuals to appropriate mental health services
- **Present:**
  - Higher Education Assessment Team collaboration with Community College District
  - Contracted MET units deployed to specific areas
  - Expanded reach and impact of community policing efforts
- **Possible:**
  - Deployment of RAMP investigators to support LASD employees in crisis
  - Enhanced officer well-being for more effective and empathetic policing
  - Continued innovation in community policing and crime reduction strategies



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## Training & Education

- **Past:**
  - Emphasis on effective training and education programs
  - Development and refinement of training programs for mental health and community policing
- **Present**
  - Comprehensive training programs, including CIT, ROAR, and FOCIS 360
  - Best practices for mental health crisis interaction and de-escalation
- **Possible**
  - Expanded training and education initiatives
  - Support and resources for employees in need
  - Incorporation of survivor-centered sexual and intimate partner violence training



## Officer Wellness & Safety

- **Past**
  - Prioritized officer wellness and safety
  - Addressed mental and emotional well-being of deputies
  - Improved personal well-being and operational effectiveness
- **Present**
  - Collaboration with LASD Psychological Support Services Bureau
  - Psychological first aid training for department members and community
- **Possible**
  - Expanded efforts to promote officer wellness and safety
  - Application of Ecological Systems Theory Analysis
  - Targeted strategies for enhancing officer wellness and resilience

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## Conclusion

The 2021 and 2022 Integrated MET Report highlights the critical role the Mental Evaluation Team plays in addressing mental health crises, fostering community trust, and ensuring public safety. Through its various initiatives, programs, and collaborations, MET has made significant progress in implementing the principles of 21st-century policing.

Key findings from the report emphasize the importance of building trust and legitimacy, implementing effective policies and oversight measures, utilizing technology and social media, promoting community policing and crime reduction, enhancing training and education, and prioritizing officer wellness and safety.

As part of ongoing efforts to improve MET and promote transparency and accountability, engaging a third-party research firm to study MET's policies, practices, training programs, and collaborations is recommended. The results of this evaluation can provide valuable insights and evidence-based recommendations for enhancing the program, fostering community trust, and ensuring the best possible outcomes for the community.

As society confronts the challenges of mental health and crisis intervention, MET serves as a valuable model for how law enforcement can adapt and respond more effectively to these complex issues. By continuing to innovate and expand its programs and initiatives, LASD MET has the potential to lead the way in transforming policing, strengthening community trust, and ensuring the safety and well-being of both its deputies and the public it serves.

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