

## 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