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November 10, 2015

The Honorable Judge Glenda Sanders Presiding Judge of the Superior Court 700 Civic Center Drive West Santa Ana, CA 92701

RE: Report of the 2014-2015 Orange County Grand Jury – "The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency."

Dear Presiding Judge Sanders:

The City of Newport Beach appreciates the time and effort the Grand Jury spent on the development of their report, "The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency."

The City Council has reviewed the report and authorized the attached response to the findings and recommendations noted in the report. The City values the opportunity to respond to this report, share our perspective, and provide a response to each of the issues requested by the Grand Jury in their report.

If the City of Newport Beach can provide additional information or clarification of our response, please do not hesitate to contact me.

Sincerely,

Edward D. Selich

Mayor of Newport Beach

Encl: Response to Findings and Recommendations

cc: The Orange County Grand Jury (w/enclosure)
City of Newport Beach Council Members (w/enclosure)
Police Chief Jay R. Johnson (w/enclosure)
Deputy Chief David McGill (w/enclosure)

RE:

Report of the 2014-2015 Orange County Grand Jury – "The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care

Agency."

FROM:

City of Newport Beach, California

DATE:

November 10, 2015

The Report obligates the City to respond no later than September 28, 2015 (with a current extension granted to November 26, 2015) to:

Findings: F1 and F2; and

Recommendations: R1 and R2.

The Newport Beach City Council and the Newport Beach Police Department have reviewed the Orange County Grand Jury report, "The Mental Illness Revolving Door: A Problem for Police, Hospitals, and the Health Care Agency." Under the authority of the Chief of Police, Jay R. Johnson, Acting Deputy Chief Steve Rasmussen has provided the following response, in accordance with California Penal Code Section 933.05 (a) and (b).

FINDINGS:

F1: Deputy Sheriffs and police officers receive insufficient training on how to evaluate and handle the mentally ill in the field.

The Newport Beach Police Department agrees with the finding.

F2: Deputy Sheriffs and police officers receive insufficient training regarding Laura's Law.

The Newport Beach Police Department agrees with the finding.

RECOMMENDATIONS:

R1: All law enforcement officers should receive at least 40 hours of comprehensive Crisis Intervention Training on how to handle and evaluate the mentally ill in the field with periodic refresher training. (F.1.)

The recommendation will not be implemented because it is not warranted or is not reasonable.

The Newport Beach Police Department (NBPD) is committed to increasing training for its police officers as it relates to homelessness and mental illness. In the past four

years, the NBPD has cycled 32 police employees through the Commission on Peace Officer Standards and Training (POST) approved Crisis Intervention Training (CIT) for Law Enforcement two-day course (16 hours) offered through Golden West College. The NBPD is well on its way to meeting its current mandate of having all of its police officers attend this CIT two-day course (16 hours).

It is the position of NBPD that a CIT five-day course (40 hours) is excessive and unnecessary and that the current POST-approved CIT two-day course (16 hours) is sufficient to provide its police officers with the basic tools necessary to: identify signs and symptoms of mental illness; recognize various developmental disabilities; increase awareness and knowledge of community services and resources available; and develop crisis intervention skills, communication techniques, and officer safety awareness to effectively assist and address subjects suffering from mental illness that are encountered in the field. Further, there is currently no POST-approved CIT five-day course (40 hours) available.

Both SB 11 and SB 29 (as referenced in the Grand Jury's Report) were signed into law by the Governor on October 3, 2015. However, the final versions of each law were significantly amended since the release of the Grand Jury's Report and are no longer accurately depicted. The changes to both bills were based in part on efforts made by leaders of the California Peace Officers' Association (CPOA), California Police Chiefs Association (CPCA), and the California State Sheriffs' Association (CSSA), who collectively convinced the bill's author to reduce the mandated hours for mental health training due to its significant and negative impact upon law enforcement in terms of financial costs and deployment concerns. All law enforcement professionals believed that more mental health training is certainly warranted, but mandating 40 hours is unreasonable for the benefits received.

SB 11's final version signed by the Governor requires training on mental health for the POST police academy basic course to be at least 15 hours, and that at least three consecutive hours of mental health continuing education be mandated for all sworn personnel with an active POST appointment assigned to patrol duties or supervising those assigned to patrol duties. POST has until August 2016 to institute this change. The NBPD's mandate of having all of its police officers obtain 16 hours of POST approved CIT training via Golden West College far exceeds this bill's mandate.

SB 29's final version signed by the Governor requires all Field Training Officers (FTOs), and not all police officers, to have at least eight hours of crisis intervention behavioral health training, and that four hours of instruction in the FTO Course be dedicated to addressing how to interact with persons with mental illness or intellectual disabilities. Again, the NBPD's mandate of 16 hours of POST-approved CIT training for all of its police officers will exceed this requirement.

Finally, the NBPD believes the POST-approved CIT two-day course (16 hours) is sufficient for its patrol officers due to our supplemental implementation of a Psychiatric Evaluation and Response Team (PERT) team in May 2013. Our PERT team consists of

an NBPD patrol officer (designated mental liaison officer) and an embedded PERT clinician from the Orange County Health Care Agency, Behavioral Health Services (OCHCA-BHS). When patrol officers come across a subject who could benefit from the assistance of our PERT team, they are requested to respond.

The NBPD PERT team makes weekly rounds to our homeless population and other mentally ill residents to assess their physical and mental needs, build trust and rapport, and develop strategies for intervention and care. The patrol officer assigned to the PERT team, Officer Tony Yim, has received extensive training well beyond the Grand Jury's recommended 40 hours of CIT training, thus making him our resident expert on homelessness and mental illness. Officer Tony Yim's OCHCA-BHS partner is PERT clinician, Margaret "Peg" Peterson. We believe that maintaining a PERT team with extensive and ongoing specialized training in addressing homelessness and mental illness is much more effective than increasing the overall number of CIT training hours for all police officers to 40 hours.

The NBPD PERT team averages 10 mental health evaluations and three California Welfare and Institutions Code Section 5150 holds a month. In addition to the mental health evaluations and holds, the PERT team is tenacious in their follow up with clients. This encompasses hospital visits, home visits, phone follow-ups, linkages to appropriate services, consultations with family members, and connections with ongoing mental health resources.

By having an experienced mental health worker in the patrol car and on scene during a crisis intervention, the NBPD believes the PERT team's onsite mental health evaluations are more effective than those conducted by the Centralized Assessment Team (CAT). This is not only due to the embedded nature of the PERT clinician and her familiarity with our mentally ill population, but rather the added value of not having to wait for a mental health professional to respond from another location when a mental health evaluation is needed. This immediacy of service is particularly useful in assisting our homeless population as the PERT team is better able to assess all of the patient's needs (e.g., mental health, food, shelter, etc.) simultaneously during the contact. Because of the success NBPD has had with our PERT partner, we implore the OCHCA to increase the quantity of hours of PERT clinicians dedicated to OC law enforcement agencies.

R2: All law enforcement officers should receive mandatory and specific training regarding Laura's Law. (F.2.)

The recommendation will not be implemented because it is not warranted or is not reasonable.

An assisted outpatient treatment (AOT) referral under Laura's Law requires significant documentation and background information on the patient before the petition can be justified. Nine elements must be met under California Welfare and Institutions Code Section 5346(a) for a successful petition. This necessitates knowledge of prior

treatment history and behavior of the patient along with subjective judgments that are best left to an experienced mental health professional who either has knowledge of the patient through previous encounters or has the training to establish a relationship of trust and rapport with the patient that will allow them to conduct an in-depth, probing interview that would reveal the necessary background information.

Other than being informed about the benefits of an AOT under Laura's Law, the NBPD believes it is unrealistic to expect a regular patrol officer to conduct a Laura's Law AOT assessment. The NBPD believes such assessments are best left to a well-trained and experienced PERT team as opposed to a police officer with basic CIT training.