



# DEPARTMENT NOTICE

25-045

Published: 04/29/25

Expires: 04/29/28

## **Department General Order 6.14 Psychological Evaluation of Adults Update Packet #123**

The purpose of this directive is to announce the revision of Department General Order 6.14, *Psychological Evaluation of Adults*, adopted by the Police Commission on April 16, 2025. The Police Commission agreed to a 30-business day implementation period and therefore, members will be held accountable for this policy starting May 29, 2025.

The updates in this policy include, but are not limited to the following:

- A Legal Standard section has been added to include criteria for involuntary detentions and accepting third party information.
- A Definitions section has been created to include definitions for: Danger to Self, Danger to Others, Gravely Disabled, Necessary Medical Care, Personal Safety, and Severe Substance Use Disorder.
- The definition of the term 'gravely disabled' matches the opinion of the SF City Attorney so it is aligned with all city agencies.
- There is a heavy emphasis on de-escalation and reliance on non-law enforcement resources.
- SB 43, a major legal update that went into effect January 1, 2024 and expanded the scope of mental health detentions, has been included.
- Language for oral advisement has been standardized when taking individuals in for an examination by mental health professionals.
- Guidance has been included regarding transportation and writing incident reports.
- A new form, SFPD 627 *Patient Property Receipt Form* has been created and included in the DGO.
- Guidance has been included regarding handling non-law enforcement agencies requests for assistance, and members' responsibility depending on the agency.
- Additional guidance has been included on members' duty to confiscate firearms and deadly weapons.

Members are expected to have a working knowledge of all directives applicable to their respective assignment and comply with their provisions, per DGO 3.01, *Department Written Directives*. Members shall obey all written orders, policies, and procedures of the Department, per DGO 2.01, *General Rules of Conduct*.

Department General Order update packet #123 is attached to this Notice and is available to members on the PowerDMS site.

  
WILLIAM SCOTT  
Chief of Police

*Per DN 23-152, all sworn & non-sworn members shall electronically acknowledge this Department document in PowerDMS within (30) thirty calendar days of issuance. Members whose duties are relevant to this document shall be held responsible for compliance. Any questions regarding this policy should be sent to [sfpd.writtendirectives@sfgov.org](mailto:sfpd.writtendirectives@sfgov.org), who will provide additional information.*

## **Psychological Evaluation of Adults**

### **6.14.01 PURPOSE**

The purpose of this order is to establish protocols when members contact adults with mental health disorders and who are psychologically or emotionally distressed, including abatelements, detentions, and arrests. The order also outlines procedures for admission to facilities, medical treatment, weapons confiscation, and preparation of incident reports.

### **6.14.02 POLICY**

The San Francisco Police Department (Department) is committed to responding in a manner that is humane, compassionate, and supportive while providing the highest level of service to all communities, including persons with mental illness, intellectual and developmental disabilities (IDD), those in behavioral crises, and those suffering from the adverse consequences of substance use disorder. The causes and impacts of mental health disorders vary and are not bound by race, gender, or socioeconomic status. How law enforcement responds to persons living with a mental health disorder can tremendously impact how these encounters will be resolved.

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

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

### **6.14.03 LEGAL STANDARDS AND DEFINITIONS**

#### **A. Legal Standards**

- 1. Criteria for Involuntary Detentions** - Welfare & Institutions Code § 5150(a) states that when a person, as a result of a mental health disorder, is a danger to others, or to themselves, or gravely disabled, a peace officer may, upon probable cause, take, or cause to be taken, the person into custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a facility.

2. **Third Party Information** - In making a probable cause finding as to whether the person is a danger to others, to themselves, or is gravely disabled as a result of a mental health disorder, or severe substance use disorder, members shall consider available relevant information about the historical course of the person's mental health disorder, or severe substance use disorder from family members or clinicians. Members should evaluate if the information provided has a reasonable bearing on the determination of the assessment.

**B. Definitions**

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

## 6.14.04 PROCEDURES

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

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

- A. Abatement** - If the individual has not committed a crime and is not, as a result of a mental health disorder, a danger to themselves, a danger to others, or gravely disabled, members should abate the incident and recommend that the individual contact a mental health professional. Members may also notify their station Crisis Intervention Team (CIT) Liaisons of the contact with the individual for appropriate follow-up. When abating a situation involving someone with a mental health disorder, members should follow these procedures, if appropriate:
  - 1. Incident Report** - If the member prepares an incident report, the report should be titled "Investigative Detention", and a copy of the report should be forwarded to the CIT Unit for appropriate follow-up.
  - 2. Resources** - Members should provide mental health resources to the involved parties. Members should consider contacting DEM to request a response from other non-law enforcement agency resource programs through SFFD or DPH. Members may standby until the arrival of the other agency, if feasible and appropriate.
- B. Detention** - As specified under Welfare & Institutions Code § 5150(a), a person, as a result of a mental health disorder, who is a danger to others, or to themselves, or gravely disabled may be detained for psychiatric evaluation. When detaining an individual for psychiatric evaluation and treatment, members shall follow these procedures:
  - 1. Advisement** - Pursuant to Welfare & Institutions Code § 5150(g)(1), each person, at the time they are first taken into custody under this section, shall be provided, by the member who takes them into custody, the following information orally in a language or modality accessible to the person. If the person cannot understand an oral advisement, the information shall be provided in writing. The information shall be in substantially the following form:

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

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

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

3. **Transportation** - Members should request an ambulance to transport the individual to a hospital. If the ambulance’s response is delayed, members may transport the individual to Psychiatric Emergency Services (PES) at Zuckerberg San Francisco General Hospital (ZSFGH) or other designated facility.
- a. If the subject is actively violent and a danger to the public, at least one member should accompany the medics or follow the ambulance to the receiving facility. A member who observed the behavior leading to the detention shall directly provide an assessment to the receiving facility.
  - b. Pursuant to Welfare & Institutions Code § 5150.2, whenever a peace officer has transported a person to a designated facility for assessment under Welfare & Institutions Code § 5150, that officer shall not be detained/delayed any longer than the time necessary to complete documentation of the factual basis of the detention under Welfare & Institutions Code § 5150 and a safe and orderly transfer of physical custody of the person.
4. **Evaluation Form** - Members shall complete a DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and electronically attach a copy of it to the incident report.
5. **Incident Report** - Prepare an incident report and title it "Mental Health Detention" and list the individual as detained. Forward a copy of the report to the CIT Unit for appropriate follow-up.
- a. **Criteria** - Describe the circumstances that formed the probable cause to believe that one or more of the criteria, listed under 6.14.03, has been met.
  - b. **Description** - Include a detailed physical description of the individual, an accurate residence address, and/or contact information should the subject be a person experiencing homelessness. If available, include their date of birth, driver’s license number, Social Security number, SF number, and any other identification numbers.
  - c. **Firearms/Weapons** - If applicable, list any confiscated firearms or deadly weapons in the incident report.
  - d. **Property** - If applicable, describe if any of the person's property was safeguarded, placed in police custody, or provided to a third party or medical

facility on the San Francisco Police Department Psychological Evaluation Patient Property Receipt Form (SFPD 627). The inventory form shall be electronically attached to the incident report.

**C. Arrest** - If a person has committed a criminal offense and meets Welfare & Institutions Code § 5150 criteria, members should make an arrest according to Department policy and follow the below procedures, if feasible:

- 1. Citation** - If an individual is eligible for citation, cite the individual and take them to a PES facility. Indicate on the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form that the person has been cited for an offense.
- 2. Booking** - If the individual cannot be cited pursuant to Department policy, take them to a PES facility for a psychiatric evaluation prior to booking.
- 3. Transportation** - Members should request an ambulance to transport the individual to a hospital. If the ambulance's response is delayed, members may transport the individual to a PES facility.

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

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

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

**E. Handling Non-Law Enforcement Agencies Request for Assistance**

- 1. Clinician or Other City Agency Representative is on Scene** - Members should assist clinicians or other city agencies when a person is to be detained for psychiatric

evaluation, specified under Welfare & Institutions Code § 5150, and is currently violent and presenting a public safety risk, or is exhibiting pre-assaultive indicators.

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

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

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

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

If the conservatee is currently violent and presenting a public safety risk, or is exhibiting pre-assaultive indicators, members shall follow these procedures:

- a.** Prior to facilitating the standby, members shall verify that the certified court document has not expired and bears the name of the individual given treatment.
- b.** Standby for the administration of medication.
- c.** If the individual refuses medication and the conservator requests transportation to a hospital, members shall request an ambulance to transport the individual to a hospital.
- d.** Members shall not assist in the administration of medication. If the subject refuses medication and becomes combative or assaultive, members should attempt to offer de-escalation strategies and techniques. Members shall adhere to DGO 5.01 *Use of Force and Proper Control of a Person*.
- e.** Members are not required to complete a DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form.
- f.** Members shall write an Aided Case report.



- F. Facilities** - Adults detained for psychiatric evaluation are evaluated at PES at ZSFGH or other designated facility. Facilities and hours of operation are subject to change. Any changes will be announced in a Department Notice.
- G. Diversion** - When PES at ZSFGH declares “Condition Red,” meaning they are on diversion, the detained individual should be redirected to any emergency room in the City and County of San Francisco.
- H. Voluntary Admissions** - When an individual meets Welfare & Institutions Code § 5150 criteria and is willing to be transported to a PES facility, members should contact DEM to request a response from other non-law enforcement agency resource programs through SFFD or DPH. If no other non-law enforcement agencies are available, members shall follow the guidelines set forth in 6.14.04.B and complete the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and request an ambulance for transportation.
- I. Coordinating Psychiatric Detention with Emergency Medical Treatment** - If an individual is injured or ill, members must have them medically treated before requesting a psychiatric evaluation.
1. The following procedures apply when an individual is not under arrest:
    - a. **Zuckerburg San Francisco General Hospital** - If the individual is being treated at ZSFGH Emergency Department:
      - i. Complete the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and present it to the attending physician.
      - ii. The hospital staff is responsible for the security and patient transfer to PES. Unless the individual is violent, members are not required to remain at the hospital.
    - b. **Other Medical Facilities** - When an individual is being treated at any other hospital emergency room:
      - i. Complete the DHCS 1801 *Application for Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment* form and present it to the attending physician.
      - ii. The hospital staff is responsible for the security and patient transfer to PES at ZSFGH. Unless the individual is violent, members are not required to remain at the hospital.
    - c. **Incident Report/Evaluation Form** - In either of the cases above, prepare an incident report, title it "Mental Health Detention" and include the circumstances of the incident, the name of the medical facility, and the name of the attending physician. Electronically attach a copy of the DHCS 1801 *Application for*

*Assessment, Evaluation and Crisis Intervention or Placement for Evaluation or Treatment form to the incident report.*

**J. Mental Health Firearms Prohibition System** - Department of Justice, Bureau of Criminal Identification and Information, has developed a database for the Mental Health Firearms Prohibition System (MHFPS). If members are conducting a criminal investigation that involves the acquisition, carrying, or possession of a firearm, the CLETS data base will include a message that the person the member is investigating may be subject to a mental health firearms prohibition pursuant to Welfare & Institutions Codes §§ 8100 or 8103. This message is provided in addition to the person's name, personal description, available identifying numbers, such as driver's license, Social Security, California Identification, Military Identification, or other miscellaneous identification numbers. Members can use Level II to access CLETS, which has the capability to access this database using the MHFPS mask.

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

**K. Duty to Confiscate Firearms/Deadly Weapons** - Members have a duty to confiscate firearms and deadly weapons (Welfare & Institutions Code § 8102).

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

4. A list of deadly weapons is found in Cal. Penal Code section 16590.

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

1. Members shall search all persons detained prior to transport, pursuant to Welfare & Institutions Code § 5150, and all personal property in their immediate possession. Members shall also complete SFPD 627. If the person detained requests or consents to leave their personal items such as purses, backpacks, or bags with an on-scene third party, such items should not be searched without a search warrant or other recognized warrant exception.
2. If the person detained under Welfare & Institutions Code § 5150 is a person experiencing homelessness and that individual is in possession of an excessive amount of personal property, the member shall contact DPW for assessment and processing and follow current Department protocol for processing property consistent with DPW's "Bag & Tag" policy.

**M. Medication** - Upon request or if appropriate, document any relevant medication in the incident report.

**N. Tarasoff Incidents** - See DGO 6.06, *Tarasoff Incidents*.

**O. Juveniles** - See DGO 7.02, *Psychological Evaluation of Juveniles*.

**P. Questions/Consultations** - Calls for service involving mental or behavioral health issues may be complex. For consultation or additional information, members can call the CIT Unit at Field Operations Bureau [REDACTED] (Monday – Friday 0800-1800 hours). Contact the CIT Coordinator through the Department Operations Center non-business hours.

#### References

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

DGO 3.05, *Department Weapon Return Panel*

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

DGO 5.03, *Investigative Detentions*

DGO 5.06, *Citation Release*

DGO 5.18, *Prisoner Handling and Transportation*

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

DGO 5.24, *Disengagement Procedures*

DGO 6.06, *Tarasoff Incidents*

DGO 7.02, *Psychological Evaluation of Juveniles*