
Policy Review and Assessment Report of the Oakland Police Department's Departmental General Order O-1.1:

Crisis Intervention Program

Tuesday, August 26, 2025



**CITY OF OAKLAND
OFFICE OF THE INSPECTOR GENERAL**

250 Frank H. Ogawa Plaza • Oakland, CA 94612
Zurvohn A. Maloof, Inspector General



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August 26, 2025

To: Chief Floyd Mitchell
Oakland Police Department
[VIA EMAIL ONLY]

Re: Policy Review of DGO O-1 (Persons with Mental Illness) and DGO O-1.1 (Crisis Intervention Program)

Dear Chief Mitchell,

The Office of Inspector General (OIG) has completed its policy review of Department of General Order (DGO) O-1 (Persons with Mental Illness) and DGO O-1.1 (Crisis Intervention Program) within the Oakland Police Department (OPD).

Enclosed is the OIG final report, which includes:

- Detailed findings from the policy review
- OIG recommendations for policy and procedural improvements
- OPD's Response to the OIG policy review of DGO O-1 and DGO O-1.1

To ensure transparency and continued accountability, and in accordance with the OIG Standard Operating Procedures:

The OIG should keep appropriate officials, and the public properly informed of the OIG's activities, findings, recommendations, and accomplishments consistent with the OIG's mission, legal authority, organizational placement, and confidentiality requirements.

Should you have any questions, concerns, or require further clarification, please do not hesitate to contact the Office of Inspector General at (510) 238-2916.

Sincerely,

Zurvohn A. Maloof, JD, CIG
Inspector General
Office of the Inspector General

CC: Commission Chair Ricardo Garcia-Acosta
Vice Commission Chair Shawana Booker
Assistant Chief Anthony Tedesco
Deputy Chief Lisa Ausmus
Captain Bryan Hubbard
COS Mykah Montgomery
City Administrator Jestin Johnson



City of Oakland Office of Inspector General

POLICY REVIEW AND ASSESSMENT REPORT

POLICY



Departmental General Order (DGO) O-1.1 Crisis Intervention Program

RELEVANT LAW & POLICY



- Charter of the City of Oakland, Section 604(f)5
- Departmental General Order (DGO) O-1.1
- Welfare and Institutions Code Section 5150

WHY THIS POLICY MATTERS



The Oakland Police Department (OPD) has created a Crisis Intervention Program which seeks to provide evaluation, de-escalation, and referral services for persons with mental disorders. DGO O-1.1 establishes a Crisis Intervention Team (CIT) which consists of officers selected and trained to carry forward the goals of the Crisis Intervention Program. This policy is important in conjunction with DGO O-1 to ensure that during the triage process, the CIT officers have the guidance to implement their specialized training and understand the procedures necessary for effective and accountable crisis intervention.

RECOMMENDATIONS IN BRIEF

To Chief Mitchell; OPD Management:

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Policy Review and Assessment

Section I: Background

Section 604(f)(5) of the Oakland City Charter, gives the Office of the Inspector General (OIG) the authority to *“review legal claims, lawsuits, settlements, complaints, and investigations, by, against or involving the Department and the Agency to ensure that all allegations of police officer misconduct are thoroughly investigated, and to identify any systemic issues regarding Department and [Community Police Review] Agency practices and policies.”*

The mission of the OIG is to ensure accountability, enhance community trust, and increase transparency via fair and thorough assessments of the Oakland Police Department’s (OPD) compliance with the law and departmental policies. Fulfilling this mission includes reviewing and assessing whether OPD has effective and legal practices and policies in their training bulletins and departmental general orders.

The OIG conducted a policy review and assessment of OPD’s Departmental General Order (DGO) O-1 Persons with Mental Illness. DGO O-1.1 Crisis Intervention Program was written alongside DGO O-1, and so reasonably the OIG chose to simultaneously conduct a policy review and assessment of this analogous policy. While DGO O-1 is established to guide field officers in the procedures necessary when encountering persons with mental disorders who will be detained or arrested, DGO O-1.1 is established for select, crisis intervention trained officers to provide “evaluation, de-escalation, and referral services” for persons suspected of having a mental disorder who may be in need of crisis intervention, and/or pose a risk to themselves and/or others, or are “gravely disabled.” OPD has set forth this policy “to ensure the appropriate triage of individuals with mental health challenges who come to the attention of the Oakland Police Department.”

The OIG’s assessment is to determine if OPD’s policy and procedures for employing its crisis intervention program and crisis intervention team, during encounters with Oakland community members with mental health disorders, aligns with the law, best practices in law enforcement, and serves to uphold constitutional policing.

Section II: Objective, Scope, Methodology, Limitations

OBJECTIVE

The objective of this policy assessment is to determine whether DGO O-1.1 Crisis Intervention Program, aligns with the law, best practices in law enforcement, and has sufficient procedural guidance to allow CIT officers to utilize the policy in a manner that best serves community members and upholds constitutional policing.

SCOPE

This assessment of DGO O-1.1, in conjunction with the assessment of DGO O-1, is a review and assessment of the full policy to determine if recommendations for revisions, updates, or considerations are necessary.

METHODOLOGY

The OIG reviewed related laws, bills, and legal codes regarding mental disorders and law enforcement; in addition, the OIG utilized academic and scholarly reports, media and resource documents, and scholarly publications as a part of this methodology, including but not limited to:

- ❖ American Psychiatric Association, Diagnostic and Statistical Manual (DSM-5-TR)
- ❖ Assembly Bill No. 360: Excited Delirium
- ❖ Bulletin No. 2023-65: Recent Legislative Changes Prohibiting Use of the Term “Excited Delirium”
- ❖ California Code, Welfare and Institutions Code §5150
- ❖ Crisis Intervention Training for Officers Outline (OPD, 2021)
- ❖ Oakland Departmental General Order O-1: Persons with Mental Illness
- ❖ Oakland Departmental General Order O-1.1: Crisis Intervention Program
- ❖ *Oakland police trained on mental illness* (SFGate)
- ❖ People with Mental Illness, 2nd Edition, Guide No. 40 (ASU Center for Problem-Oriented Policing 2022)

LIMITATIONS

This report is a *policy review and assessment* of DGO O-1-1. This report is not an audit, inspection, or compliance review of whether OPD is fully compliant with the procedures of DGO O.1-1. The OIG may schedule an audit, evaluation, or inspection of OPD compliance with DGO O.1-1 in the future.

This report is also not a review and assessment of OPD’s Crisis Intervention Team training. While the report does mention the training in a consideration area, that is based on an accessed former training outline. The OIG may determine at a later time if an audit, evaluation, or inspection of the current CIT training procedures is required.

Section III: Policy Assessment and Recommendations: Departmental General Order (DGO)

O-1.1 Crisis Intervention Program

DGO O-1.1 was created at the same time as an analogous policy to DGO O-1. DGO O-1.1 speaks to many of same procedures as is contained in DGO O-1 for field officers, except it refers to those procedures specifically for its Crisis Intervention Team (CIT) officers. When field officers respond to a scene for a person with a mental disorder, based on their assessment, the field officer is required to detain or arrest, or if that is not necessary to release the person, take them home, or take them to the Youth and Family Services Section. When CIT officers respond to situations when mental disorder is a concern, CIT officers are trained to attempt to provide evaluation, de-escalation, and referral services, as well as detain and arrest if necessary.

After a thorough review of DGO O-1.1, the OIG has one recommendation and two offers of consideration with the intent to enhance this policy.

Recommendation 1: The OIG recommends that OPD update and revise the Mental Health Resource Card as indicated in DGO O-1 Section V Policy.

This is essentially the same recommendation as was provided in the policy assessment of DGO O-1 because both DGOs indicate usage of the same Mental Health Resource Card.

DGO O-1.1 Section V. C 1. provides that when a subject, family member, or caregiver desires mental health services, when practical CIT officers shall provide a Mental Health Resource Card, informational resources, or assistance in making arrangements for voluntary or out-patient treatment, including transportation.

Providing the Mental Health Resource Card is a useful service to individuals, family members or caregivers to provide necessary information about county mental health services. However, a review of the card (form TF 3354) shows that there are names that should be corrected, such as the John George Psychiatric Hospital, many of the phone numbers have changed, and some locations like United Advocates for Children and Families (UACF) no longer exist in the area and need to be removed altogether. OPD might also determine that there is new information on resources that can be used to revise the form. The mental health resource card should be updated to include current, viable resource information.

Consideration 1: The OIG submits for consideration that OPD update and revise Section III CIT Personnel to include the recruitment and selection criteria for officers who might want to become CIT members.

The policy indicates that the CIT Coordinator shall coordinate efforts to recruit and accept requests for interested sworn personnel to become CIT members. Selected officers receive CIT training and become certified members of the CIT. The policy does not provide an officer who might be interested in becoming a CIT member any factors the CIT Coordinator considers if a request to join is made. Since there are no requirements, characteristics, work history, mental health history or any other information provided in the policy, an officer would not know that they can or should attempt to apply, or which areas they might need to improve in order to apply for the team. In addition, there is no information provided for the actual selection criteria. Reviewing this policy, an officer would not know what factors are considered in determining who to select for training. An update or revision of the policy to provide officers with information to help them decide whether to request to join CIT, and the selection criteria utilized, could improve the number and of officers applying, and serve to clarify and enhance the policy.

Consideration 2. The OIG submits for consideration that OPD conduct a thorough review of the current CIT training referred to in Section IV Training, to determine necessary updates and revisions.

This assessment is not a review of OPD CIT training. The OIG did not request or view OPD's current CIT training materials, as that assessment would occur under a separate audit, inspection or evaluation. However, in reviewing reports, documents, and information for the assessment of the DGOs, the OIG found online an OPD CIT training outline document from 2021. That training document included language that must be removed, specifically the verbiage "excited delirium." The use of this classification and term was prohibited in Assembly Bill No. 360 (2023),¹ which was acknowledged by the OPD in Bulletin No. 2023-65,² and has since been removed from The Commission on Peace Officer Standards and Training's publications. The OIG submits that if not done already, OPD conduct a thorough review and revision of its CIT training to ensure that the classifications and information dispensed in the program aligns with law, current policy, and modern understanding of mental illness as outlined in the most recent iteration of the DSM (currently the DSM-5-TR).³

¹ California Assembly Bill (AB) 360 (2023): https://leginfo.legislature.ca.gov/faces/billNavClient.xhtml?bill_id=202320240AB360

² Commission on Peace Officer Standards and Training Bulletin No. 2023-65: https://post.ca.gov/Portals/0/post_docs/bulletin/2023-65.pdf

³ American Psychiatric Association. (2022). Diagnostic and statistical manual of mental disorders (5th ed., text rev.).

<https://doi.org/10.1176/appi.books.9780890425787>

OIG REPORTING REQUIREMENT & DISCLOSURE PRACTICES

We are providing this report to comply with Oakland Ordinance §2.45.100 and City Charter §604(f)(5), which requires that we keep OPD Command Staff, the Police Commissioners, and the public informed of our findings and recommendations from audits, inspections, evaluations, and analysis of OPD's policies and procedures.

The OIG does not provide the names of those being audited or evaluated. This avoids violating privacy and confidentiality rights granted by law. This practice does not prevent individuals from requesting documents under the California Public Records Act. However, such disclosures may be restricted or limited by law.

RECOMMENDATIONS AND/OR CONSIDERATIONS		
1.	Recommendation 1:	The OIG recommends that OPD update and revise the Mental Health Resource Card as indicated in DGO O-1 Section V Policy.
2.	Consideration 1:	The OIG submits for consideration that OPD update and revise Section III CIT Personnel to include the recruitment and selection criteria for officers who might want to become CIT members.
3.	Consideration 2:	The OIG submits for consideration that OPD conduct a thorough review of the current CIT training referred to in Section IV Training, to determine necessary updates and revisions.

APPENDIX

Acronym List

Acronym	
CIT	Crisis Intervention Team
DGO	Departmental General Order
DSM	Diagnostic and Statistical Manual of Mental Disorders
OIG	Office of Inspector General
OPD	Oakland Police Department
SB	Senate Bill
W&I	Welfare and Institutions Code
YFSS	Youth and Family Services Section

OFFICE OF CHIEF OF POLICE
OAKLAND POLICE DEPARTMENT

MEMORANDUM

TO: All Personnel

DATE: 03 Oct 14

SUBJECT: New DGO O-1.1 CRISIS INTERVENTION PROGRAM

The purpose of this new DGO is set forth policy and procedures to ensure the appropriate triage of individuals with mental health challenges who come to the attention of the Department.

This policy establishes a Crisis Intervention Team (CIT.) CIT personnel receive specialized training to assist field units and the public when dealing with incidents involving individuals who are either known or suspected to be in acute mental health or emotional crisis and who may pose a risk to themselves or others or are determined to be gravely disabled.

The Evaluation Coordinator for this order shall be the Training Commander. The Evaluation Coordinator shall receive, review and document the acceptance or rejection of all comments and/or recommendations received prior to submitting his/her six-month evaluation report.

The Evaluation Coordinator shall forward a copy of the six-month evaluation report, along with the comments/recommendations received, without further notice, to the Planning and Research Section.

Personnel shall acknowledge receipt, review, and understanding of this directive in accordance with the provisions of DGO A-1, DEPARTMENTAL PUBLICATIONS.

By order of



Sean Whent
Chief of Police

Date Signed: 10-6-14



DEPARTMENTAL
GENERAL
ORDER

O-1.1

Index as:

Crisis Intervention Program

Effective Date:
03 Oct 14

Evaluation Coordinator:
Training Commander

Evaluation Due Date:
03 Apr 15

Automatic Revision Cycle:
3 Years

CRISIS INTERVENTION PROGRAM

The purpose of this order is to set forth Department policy and procedures to ensure the appropriate triage of individuals with mental health challenges who come to the attention of the Oakland Police Department.

I. INTRODUCTION

The Chief of Police has established the Crisis Intervention Team (CIT) to carry out the mission of the Crisis Intervention Program.

II. MISSION

CIT personnel are trained to respond to incidents and attempt to provide evaluation, de-escalation and referral services in dealing with incidents involving individuals who are either known or suspected to be in acute mental health or emotional crisis and who may pose a risk to themselves or others or are determined to be gravely disabled.

III. CIT PERSONNEL

The CIT Coordinator shall coordinate efforts to recruit and accept requests from interested sworn personnel to become CIT members. The duties of a trained and certified CIT officers shall be considered an ancillary assignment.

IV. TRAINING

Officers selected to become part of the CIT shall receive CIT training and be certified as a member of the CIT.

- A. Selected CIT candidates shall attend an approved training program consisting of instruction regarding mental illness, basic crisis intervention, de-escalation of crisis situations and available community resources. Training will enable CIT personnel to deal more effectively with individuals suffering from mental health challenges.

- B. The CIT Program has five primary goals:
 - 1. To de-escalate crisis situations;
 - 2. To reduce the necessity for the use of force;
 - 3. To decrease recidivism among jail inmates who experience mental health challenges;
 - 4. To create a working collaboration with community agencies; and
 - 5. To increase lawful self-reliance and health enhancing behaviors.
- C. Certified CIT officers may wear the authorized pin on their Class B uniform identifying them as a CIT member.

V. POLICY

- A. CIT members shall respond to calls for service involving individuals experiencing mental health emergencies. The use of CIT trained personnel is not limited to situations or calls involving the mentally ill.

The use of CIT members extends to any circumstance wherein an individual may be in need of crisis intervention due to a psychological/emotional crisis, and/or when the individual may be a danger to themselves or others, and/or may be gravely disabled.
- B. Dispatch of CIT Personnel

The Communications Section shall attempt to dispatch an available CIT unit to any call coded “5150”, “5150B”, or “evaluation” or any calls suspected of involving a mental health crisis.
- C. Persons (subject, family member or caregiver) who do not meet the criteria set forth in section 5150 of the Welfare and Institutions Code (W&I) but desire mental health services shall be provided, when practical:
 - 1. Mental Health Resource Card
 - 2. Informational resources (e.g., liaison for contacts/referrals); and/or
 - 3. Assistance in making arrangements for voluntary or out-patient treatment, including transportation.

VI. PROCEDURES

A. Communications Section

The Communications Section shall attempt to dispatch an available CIT unit to any call coded “5150”, “5150B”, or “evaluation” or any calls suspected of involving a mental health crisis utilizing the following procedures:

1. Dispatch the closest available CIT officer to the call (CIT trained personnel are flagged in the CAD system);
2. Advise responding units if no CIT officer is available to respond; and
3. Notify the appropriate Patrol Sergeant of the incident and the location.

B. Dispatch/Field Unit Requests

In situations other than mental health crisis incidents, Communications Section or field personnel may request the response of a CIT officer for incidents which include but are not limited to:

1. When personnel reasonably believe that a subject, family, or caregiver may benefit from a CIT consult/intervention;
2. A disturbance call where an individual may be suffering from a mental health related behaviors; or
3. On-scene field personnel determine a need and request a CIT officer to respond.

C. Field personnel may request assistance for a psychological evaluation of an individual in crisis from:

1. Mobile Mental Health Unit (37C51); and/or
2. A CIT officer.

VII. ON-SCENE RESPONSIBILITIES

A. CIT Officer

When a CIT officer is on-scene, the CIT officer shall be responsible for the following:

1. Applicable evaluations pursuant to W&I 5150.

In the event an Emergency Psychiatric Detention is warranted, the CIT officer shall prepare the required documentation. The CIT officer shall additionally be responsible for making appropriate referrals, transportation arrangements to mental health facilities, or shelters.

2. If also the primary patrol unit, the CIT officer shall complete the appropriate offense report, Consolidated Arrest Report/Juvenile Record and the recovery of any property for evidence or safekeeping, if applicable.

B. Patrol (Non-CIT) Unit

1. The primary Patrol unit, if different from the CIT officer, on scene shall be responsible for completing the appropriate offense report, Consolidated Arrest Report/Juvenile Record, and the recovery of any property for evidence or safekeeping, if applicable.
2. When a CIT officer is not on the scene, unavailable or an extended distance away, non-CIT officers may complete the application for emergency psychiatric detention form and request an ambulance for transportation of the detained person.
3. When a person experiencing mental health challenges is the victim of a crime, a Patrol officer may request a CIT officer, if not already on-scene, to respond to assist with interviewing the victim or to provide resource information.

C. Firearms and Other Deadly Weapons Confiscation

Officers shall confiscate any firearm or other deadly weapon described in 8102 W&I and prepare a Consolidated Property Record for Safekeeping (TF-1084) and deposit with the Property and Evidence Unit in accordance with the provisions of DGO H-4, WEAPONS TAKEN FROM MENTALLY DISORDERED PERSONS.

DEPARTMENTAL GENERAL ORDER
OAKLAND POLICE DEPARTMENT

O-1.1

Effective Date:
03 Oct 14

By Order of



Sean Whent
Chief of Police

Date Signed: _____



INTER OFFICE MEMORANDUM

TO: Office of Inspector General
Deputy Inspector General, Charlotte Jones

PREPARED BY: Pranita Tulsi
Police Officer

SUBJECT: Department Response to Policy Reviews for
DGO O-1: Persons with Mental Illness and
DGO O-1.1: Crisis Intervention Program

DATE: August 25, 2025

The purpose of this memorandum is to respond to the Office of the Inspector General's (OIG) policy review and assessments of Department General Order (DGO) O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program. We have carefully reviewed OIG's findings, and this memo outlines our response to the recommendations and planned course of action.

OIG's Recommendations for DGO O-1: Persons with Mental Illness:

Recommendation 1(a):

Recommendation	Response	Action
The OIG recommends that OPD update and revise Section I to include the current definition of a mental disorder and provide examples of characteristics officers should recognize to deduce that a person potentially has a mental disorder.	Agree	OPD will update DGO O-1 with the following language: <u>Updated definition of Mental Disorder</u> DSM-5-TR: "A mental disorder is a syndrome characterized by clinically significant disturbance in an individual's cognition, emotion regulation, or behavior that reflects a dysfunction in the psychological, biological, or developmental processes underlying mental functioning. Mental disorders are usually associated with significant distress or disability in social, occupational, or other important activities." <u>Insert New Characteristics</u> • Rapid or dramatic shifts in emotions or depressed feelings, greater irritability • Problems with concentration, memory, logical thought and speech that are hard to explain. • Unusual or exaggerated beliefs about personal powers to understand meanings or influence events; illogical or "magical" thinking typical of childhood in an adult. • Odd, uncharacteristic, peculiar behavior.

To: Office of Inspector General

Subject: Department Response to Policy Reviews for DGO O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program

DATE: August 20, 2025

		• Fear or suspiciousness of others or a strong nervous feeling. • A vague feeling of being disconnected from oneself or one’s surroundings, a sense of unreality. OPD will also update Training Bulletin III-N, <i>Police Contact with Mentally Ill Persons</i> (Sept. 29, 2006), to align with the changes.
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Recommendation 1(b):

Recommendation	Response	Action
The OIG recommends that OPD update and revise Section I to reflect the updated definition of “gravely disabled” and “gravely disabled minor.”	Agree	OPD will update DGO O-1 with the following language: <u>Updated definition of Gravely Disabled Adult</u> In 2023, California Senate Bill 43 (SB-43) made additions to the language in W&I Section 5008(h)(1) and in Section 5150, including adding additional mental health provisions, and revising the definition of the term “gravely disabled,” which now means any of the following: (A) 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. <u>Add definition of Gravely Disabled Minor</u> In addition, the Children’s Civil Commitment and Mental Health Treatment Act of 1988, in Welfare and Institutions Section 5585.25, which is for juveniles under the age of 18 with mental disorders, specifically provides a definition for a minor considered a “gravely disabled minor.” A “gravely disabled minor” is a minor who, as a result of a mental disorder, is unable to use the elements of life that are essential to health, safety, and development, including food, clothing, and shelter, even though provided to the minor by others.

To: Office of Inspector General

Subject: Department Response to Policy Reviews for DGO O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program

DATE: August 20, 2025

Recommendation 2

Recommendation	Response	Action
The OIG recommends that OPD update Section II to provide the correct names of the treatment facilities and revise the list to include all Section 5150 hold facilities where Oakland community members with mental disorders can be taken if necessary.	Partially Agree	OPD will update DGO O-1 as follows: <u>Change</u> • John George Psychiatric Pavilion to John George Psychiatric Hospital. • Alameda County Hospital, Highland to Alameda Health Systems Highland Hospital. Define facilities for juveniles: • UCSF Benioff Children’s Hospital, 5275 Claremont Ave, Oakland, CA (ages 11 years old and under) • Willow Rock, 2050 Fairmont Drive, San Leandro, CA (ages 12 to 17 years old) Remove the following facilities: • Alta Bates – Herrick Campus, 2001 Dwight Way, Berkeley, CA • Kaiser Oakland – 3801 Howe Street, Oakland, CA

Recommendation 3

Recommendation	Response	Action
The OIG recommends that OPD update Section IV to concur with the direction provided in Section III, specifically that ambulance personnel have the authority to determine whether a person with a mental disorder requires medical attention.	Agree	OPD will update DGO O-1, Section IV.C.1 as follows: <u>Remove</u> If the subject is under arrest in conjunction with a 5150 W&I detention, the member shall consult with the Paramedic/EMT to determine if medical clearance is needed.

To: Office of Inspector General

Subject: Department Response to Policy Reviews for DGO O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program

DATE: August 20, 2025

		<u>Add</u> The transporting ambulance personnel determine if the person requires medical attention and have the final decision as to the appropriate facility for medical clearance.
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Recommendation 4

Recommendation	Response	Action
The OIG recommends that OPD update and revise Section V to include the current definition of dementia and provide examples of characteristics officers should recognize to deduce that a person potentially has dementia.	Agree	OPD will update DGO O-1, Section V, with a definition of dementia and conduct a review to determine which characteristics to provide in the policy to provide officers with the necessary guidance.

Recommendation 5

Recommendation	Response	Action
The OIG recommends that OPD update and/or revise Form TF 3354, referred to in Section VI, to include current, accurate mental health resources.	Agree	OPD is currently revising the Mental Health Resource Card, Form TF 3354, to ensure all information is correct and to add new resource information (i.e., MACRO, Cherry Hill Detox Facility, etc.).

OPD acknowledges that OIG presented two offers of consideration. After forming a team to work on the policy, OPD will consider the below when revising DGO O-1:

1. The OIG submits for consideration that in addition to the above recommendations, OPD update and revise DGO O-1 to include relevant definitions, explanations, and clarifications regarding the detention and arrest of persons with mental disorders based on the current language of Welfare and Institutions Code §5008, §5150 and §5525, and Senate Bill 43 (SB-43).
2. The OIG submits for consideration that OPD revise DGO O-1 or create a new DGO to include information to guide an officer into providing meaningful service when they have contact with people with mental disorders, but no resulting detention or arrest is necessary.

To: Office of Inspector General

Subject: Department Response to Policy Reviews for DGO O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program

DATE: August 20, 2025

OIG's Recommendations/Considerations for DGO O-1.1: Crisis Intervention Program:

Recommendation 1

Recommendation	Response	Action
The OIG recommends that OPD update and revise the Mental Health Resource Card as indicated in DGO O-1 Section V Policy.	Agree	OPD is currently revising the Mental Health Resource Card, Form TF 3354, to ensure all information is correct and will add new resource information (i.e., MACRO, Cherry Hill Detox Facility, etc.).

Consideration 1

Consideration	Response	Action
The OIG submits for consideration that OPD update and revise Section III CIT Personnel to include the recruitment and selection criteria for officers who might want to become CIT members.	Partially Agree	OPD will update DGO O-1.1 to reflect our current practice of seeking volunteers to become trained members of the CIT. The Department no longer “recruits” officers and dispatchers, as the training has been an ongoing monthly training since 2011. The training is offered to all officers and dispatchers who have successfully completed field training. There is no other “criteria” required.

Consideration 2

Consideration	Response	Action
The OIG submits for consideration that OPD conduct a thorough review of the current CIT training referred to in Section IV Training, to determine necessary updates and revisions.	Agree	The State of California Commission on Police Officer Standards Training (POST) attended the CIT class on February 10-13, 2025. OPD received the POST auditor’s recommendations for changes to the CIT training curriculum. OPD adopted and implemented changes. In addition, Special Order 9216 was issued to remove the term “Excited Delirium” from existing policies and training; however, the Oakland Police Department acknowledged and complied with Assembly Bill 360 as it was signed in 2023.

To: Office of Inspector General

Subject: Department Response to Policy Reviews for DGO O-1: Persons with Mental Illness and DGO O-1.1: Crisis Intervention Program

DATE: August 20, 2025

CONCLUSION:

The Department appreciates the Office of Inspector General's thorough review and constructive input on the above policies regarding mental health. We remain committed to strengthening the policies and ensuring alignment with best practices and regulatory standards. Should you require any further information or wish to discuss the proposed amendments, please do not hesitate to contact us.

Respectfully submitted,



Lisa Ausmus
Acting Assistant Chief of Police
Oakland Police Department

Prepared by:



Pranita Tulsi, PsyD
Police Officer
Policy and Publications
Oakland Police Department

