2021 Police Commission Crisis Intervention Team Annual Report

PURPOSE:
The San Francisco Police Department’s highest priority is safeguarding the life, dignity, and liberty of all persons. Officers shall demonstrate this commitment in their daily interactions with the community they are sworn to protect and serve. The Department is committed to accomplishing this mission by using rapport-building communication, crisis intervention, and de-escalation principles, whenever feasible, before resorting to force.

The Department is dedicated to providing the highest level of service to all communities, including individuals diagnosed with mental illnesses or other disabilities, as well as those suffering from the adverse consequences of substance abuse and personal behavioral crises. The Department has adopted the Crisis Intervention Team (CIT) program to address persons in crisis incidents. CIT members shall use tactics consistent with CIT training to address persons in crisis incidents, with the safety of all of persons being considered.

—San Francisco Police Department General Order 5.21

The following report includes some recent highlights, accomplishments and operational goals of the San Francisco Police Department’s Crisis Intervention Team program spanning training and field work. Attached to this report is the Crisis Intervention Team Working Groups annual report for 2021. The CIT Working Group is outlined in DGO 5.21 and is comprised of representatives from private and public agencies.
# 2021 Police Commission Crisis Intervention Team Annual Report

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*The Crisis Intervention Team: Who We Are*
Setting the Scene for 2021

Crisis Intervention: Rising to The Challenges of Change

In 2021 the San Francisco Police Department demonstrated its profound commitment to public safety as COVID-19 restrictions continued to place a significant burden on city resources. Throughout ongoing pandemic concerns and simultaneous societal changes, SFPD Officers continued to respond effectively and efficiently to thousands of calls for service with utmost reverence for the health and safety of the communities they serve.

Crisis Intervention skills were implemented with critical finesse by officers during another year that required optimized resilience and sensitivity as our San Francisco communities continued to struggle with the ongoing uncertainties imposed by COVID-19 and the resultant cascade of economic, medical, and social stresses.
2021: SFPD Implements Crisis Intervention and Compassionate Engagement Throughout a Continued Health and Safety Crisis

As the pandemic continued to impose adversities worldwide, SFPD officers contended with hundreds of confirmed COVID-19 exposures and cases, which resulted in staffing emergencies that pushed personnel to exhaustion as they faithfully responded to calls for service. As the City rallied in the face of adversity and dealt with the influx of multiple strains of COVID-19 such as Delta and Omicron, SFPD officers worked within shifting protocols and strict mandates. As officers were exposed to the virus, many became ill, tested positive and then recovered in recommended quarantines while their colleagues continued to work. Anecdotally, the preparation of this very report was suspended as multiple officers of the CIT Unit were recovering from COVID and unable to work: this work stoppage serves as a small example of the way work was disrupted and dysregulated by the virus.

While staffing shortages certainly presented a strain in 2021, the pandemic continued to cast a dark shadow of loss and grief over the SFPD family when two members, retired and current, succumbed to illnesses related to COVID-19. In fact, as stated by the New York Times journalist Derrick Bryson Taylor, “COVID-19 was the leading cause of death for law enforcement officers in the United States.” He further stated that “a total of 458 officers died in the line of duty in the country last year making it the deadliest year in more than 90 years, and a 55 percent increase from 2020” according to preliminary data compiled by the Law enforcement Officers Memorial Fund. Of those it found that 301 federal, state, tribal, and local law enforcement officers had died because of COVID-19” and “these officers died due to direct exposure to the virus during the commission of their official duties.”
2021: COVID-19 Continues to ‘Intensify’ Crisis Incidents
The SFPD Hostage/Crisis Negotiations Team (H/CNT) and Crisis Intervention Team

In 2021 SFPD Officers responded to the highest number of Hostage/ Crisis Negotiation Team “Callouts” since the team was instated. As indicated in the 2020 Year End Report, the Crisis Intervention Team observed numerous significant and unusual developments in human behaviors and crisis activity throughout the Covid-19 pandemic that may directly correlate to the additional layer of stress and strain caused by the extended state of medical emergency in San Francisco. Most simply, these trends were evidenced in the sharp increase of official crisis negotiations requiring response from the SFPD Hostage/Crisis Negotiations Team (H/ CNT) which is supported by the CIT Unit. These trends continued in 2021.

The Hostage/Crisis Negotiation Team (H/CNT) is a specialized unit consisting of selected police officers who have completed up to 80 hours of Basic Crisis Negotiations Training (FBI and D-PREP) and 20 hours of annual training. The H/CNT unit facilitates resolutions for the most serious crisis-related calls and often may involve a barricaded subject (usually in crisis) who has either committed a violent crime, and/or taken hostages, and/or expressed suicidal intent, and/or threatens to harm others.
In 2019, the H/CNT unit responded to 36 callouts requiring crisis negotiation. In 2020 the H/CNT unit responded to 78 callouts requiring crisis negotiations. In 2021 the Hostage Negotiations Unit responded to 80 callouts indicating the highest number on record. The number of HNT callouts in 2021 and 2020 are both over double in yearly numbers compared to 2019. This prolonged increase in C/HNT callouts since 2019 indicates an extreme need for Crisis Negotiations in 2020 and 2021, possibly as an indicator that Covid-19 continued to operate as a crisis ‘enhancer’ for those struggling with serious pre-existing issues.

One of the functions of the CIT unit is to respond with DPH Crisis Specialists to HNT callouts to coordinate care for the subject on scene. All members of the Crisis Intervention Field Unit are trained crisis negotiators and members of Hostage Negotiations Team. The CIT Unit also facilitates follow-up response and engagement with these crisis subjects after the situation is resolved. This follow-up goal is a significant component of CIT principles, so people get the appropriate resources. It should be noted that a significant number of subjects who require Crisis/Hostage Negotiation Team callouts have significant mental health histories and/or behavioral history of violence.
San Francisco Police Officers demonstrate *Safety with Respect* every day in the field because we know that conveying earnest respect for our communities is a foundation of building authentic trust and legitimacy. *Safety With Respect* is a core concept; especially in crisis situations when rapport-building and de-escalation strategies are pivotal tools in the safe resolution of dynamic problems.

The challenges of 2021 called SFPD officers to rise towards the highest level of professionalism with great flexibility and endurance. Our City is a convergence of brilliant, shimmering voices and cultural influences – our neighborhoods shine with spirit that represents the greatest arc of humanity. At the heart of *Crisis Intervention*, the values of courage, compassion, and critical decision-making are woven into the rich fabric of human engagement that our officers demonstrate every day in the field.

It is evident that *Crisis Intervention* skills and strategies are deeply relevant not only in the specific interactions law enforcement officers have with people - but also central to the larger aspirational ethos of 21st Century Policing. The San Francisco Police Department is resoundingly committed to delivering the essential promise of *Safety with Respect* to all those who inhabit, work in, and visit our incredible City.
2021: SFPD Crisis Intervention Team: A Model for 21st Century Policing

The San Francisco Police Department is the leading edge of Law Enforcement in the nation, with specific reference to its advanced applications of Crisis Intervention Training (CIT) and de-escalation-based field tactics, along with its rigorous adherence to an extremely progressive Use of Force policy.

The SFPD Crisis Intervention Team (CIT) is an award-winning program that serves as a model for major metropolitan cities throughout the nation. SFPD CIT operates at the forefront of crisis engagement, negotiations, field tactics, training, and intervention, and was acknowledged with an Award of Distinction in 2019 from the California Association of Police Officers. The SFPD Crisis Intervention Team Training Division has trained a distinct majority of its own law enforcement personnel (67% of SFPD sworn officers have completed 40-hr CIT Certification course and 100% percent of SFPD sworn officers have completed 10-hr CIT Field Tactics and De-escalation Course.) The SFPD Crisis Intervention Team has also trained other agencies in crisis intervention, such as The San Francisco Fire Department EMS 6, San Francisco Sheriff’s Department, Park Police, University of San Francisco Police Department, UCSF Police Department, Bridge Patrol, BART PD, San Francisco Department of Emergency Management, and select outside agency personal.

The SFPD Crisis Intervention Team was selected to present original material at the International Association of Chiefs of Police (IACP) Conference in 2019. Most recently, members of the SFPD Crisis Intervention Team (CIT) and the Crisis/Hostage Negotiations Team (C/HNT) were asked to present a course at the California Association of Hostage Negotiators Annual State Conference in Burbank, California in 2021.

As our nation is collectively grappling with major law enforcement issues requiring collaborative revision and reform, it is also reasonable to look inward and recognize the localized excellence of the San Francisco Police Department and the impactful role that the Crisis Intervention Team has had upon police training and culture.
2021: A Structural Outline of the Crisis Intervention Team:
Training Initiatives, Practical Applications & Building Community Partnerships

The Crisis Intervention Team is committed to providing CIT training to police personnel and facilitating practical applications of Crisis Intervention in the field. The following categories represent extremely significant components of the CIT unit. The CIT Unit consists of: CIT Training Division, The CIT Field Unit, The CIT Liaison Program, and The CIT Working Group.

CRISIS INTERVENTION TRAINING: An Invaluable Curriculum

During 2021 The CIT Program continued to provide a 40-hr Crisis Intervention Certification Course to Law Enforcement as well as a 10-hr CIT Field Tactics Course to patrol, both of which are certified by Police Officer Standards and Training (P.O.S.T.) Given the social distancing protocols mandated by COVID much training was cancelled and/or postponed in 2021. However, the CIT Trainers developed a revolutionary remote learning course over the ZOOM platform. The CIT Trainers later developed a hybrid course that consisted of both remote learning via ZOOM and socially distanced scenario-based training in-person. With this strong core of Crisis Intervention training, patrol has a wealth of capable and invested officers who are committed to the practices and principles of Crisis Intervention. The Crisis Intervention Team is forged by a tradition of critical and informed training along with the practical applications of patrol strategies.

- 40-hr - CRISIS INTERVENTION TRAINING and Mental Health Awareness Course
  (CIT Certification upon completion of course)

- 10-hr – FIELD TACTICS/ DE-ESCALATION CIT COURSE
  (To be completed by all assigned to Patrol, Investigative and Administrative Units)
The SFPD Crisis Intervention Team has long been regarded as the leading edge of Crisis Intervention training, and while it has been providing in-house training to law enforcement personnel for years, it has also helped train other agencies upon request, to foster working partnerships and to also create greater transparency regarding policy and procedure. As such, SFPD Crisis Intervention Team has provided select CIT training modules to the following: San Francisco Fire Department EMS 6, Department of Emergency Management, Comprehensive Crisis Services (DPH), Department of Police Accountability (DPA), Civilian Groups, and Department of Justice (DOJ). SFPD Crisis Intervention Unit was recognized in 2019 when the unit was presented with the Award of Distinction for Excellence in CIT Training and Crisis Response by California Police Officer’s Association.

The CIT Training Division is on track to complete TEN 40-hr CIT Certification Courses in 2022. (TWO 40-hour course were cancelled due to COVID-19)
2021: THE CRISIS INTERVENTION FIELD UNIT: A Working Partnership with Comprehensive Crisis Services (CCS)

Throughout 2021, The Crisis Intervention Team continued to fortify its partnerships with DPH Comprehensive Crisis Services (CCS). Members of the CIT Field Unit will respond to situations to provide supportive assistance to crisis specialists, when they need to engage higher risk subjects who pose public safety concerns and danger potential.

This working partnership between CIT and CCS exists so first responders and clinicians can work together to effectively assist subjects in crisis with an emphasis on scene safety and subject engagement. Given that DPH and Comprehensive Crisis have an existing infrastructure to provide services and support to subjects who need assistance, their efforts are strengthened by the presence of CIT offices who are both conversant in de-escalation, crisis negotiations, and safety protocols.

DPH Crisis Specialists can respond to police incidents in the field. Both professions forge close working relationships to facilitate the most immediate an effective arc of crisis intervention. In high-risk incidents which require a Hostage and Crisis Negotiation Team (H/CNT) response from SFPD, the CIT Field Unit will meet with DPH specialists on scene to help coordinate care for the subject(s) as needed.
2021: THE CIT LIAISON PROGRAM: A Patrol Based Approach to Crisis Engagement

As per Department General Order (DGO 5.21) all 10 District Stations throughout San Francisco are required to have designated “CIT Liaisons” who specialize in matters pertaining to Crisis Intervention in their respective district.

In 2021 the CIT Liaisons identified CIT related issues and concerns at their district stations. The Liaisons operate as a conduit to the CIT Field unit so crisis subjects who are most concerning are appropriately identified, engaged, and/or connected effectively with programs and services as effectively as possible. In turn, other city services and civilian crisis specialists may be notified should there be subjects who require further consideration and connection.

Each designated CIT Liaison takes on the roles and responsibilities established by the CIT Unit. This designated group of 20+ CIT Liaison Officers operates as a built-in auxiliary CIT unit that functions as patrol but also supports and effectuates the larger goals of Crisis Intervention throughout the city.

Because this program is rooted in patrol, it provides a strong core of principled policing, while also serving as a built-in “safety net” to the most vulnerable subjects in our communities who require substantial CIT engagement.
2021: THE CIT WORKING GROUP EXEMPLIFIES COLLABORATION
CIT Builds Resilient Community Partnerships

The CIT Program works towards the highest standards of crisis intervention by listening to the needs and experiences of the communities we serve, mental health professionals, and advocacy groups which comprise the CIT Working Group. During the many constraints imposed by COVID-19 throughout 2020 and 2021, the CIT Working Group continued to meet regularly via Zoom platform to identify issues, concerns, and goals for the CIT program.

Because SFPD officers serve and protect many diverse communities, we strive to understand the needs, expectations, and concerns of our City. The CIT Working Group is a civilian advisory board comprised of civilian Community Stakeholders with both personal and professional commitment to Crisis Intervention. Together they work with SFPD CIT Unit towards clarifying important issues, recognizing CIT goals, and improving the practice of crisis intervention. We deeply value their commitment and effort to this field.
MENTAL HEALTH DETENTIONS

While Mental Health Detentions represent a very important scope of Crisis Intervention work that officers are requested to respond to, these encounters represent only a smaller fraction of the larger volume of calls during which police deal with people in crisis. Mental Health Detentions are very significant and important because the subject involved has demonstrated behavior that presents as one or more of the following: Danger to Self (DTS), Danger to Others (DTO), and/or conveys the subject may be suffering from a Grave Disability (GD). These categories are significant as both danger to self and/or others present significant danger components that are “out of scope” for civilian responders as there may be associated acts and/or threats of violence, weapons, and other public safety concerns requiring a police response.

2021- SFPD Mental Health Detentions by Person Type (with quarterly breakdown) It should be noted that there our dashboard has a 2,642 Mental Health incidents with a discrepancy of 33 individuals based on body counts which can be the result of Aided Cases where subject was 5150’d by other agencies bur we wrote the report

<table>
<thead>
<tr>
<th>Count of Mental Health Detention by Person Type</th>
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<tbody>
<tr>
<td>2021</td>
</tr>
<tr>
<td>BOOKED</td>
</tr>
<tr>
<td>CITED</td>
</tr>
<tr>
<td>DETAINED</td>
</tr>
<tr>
<td>Total</td>
</tr>
</tbody>
</table>

*Blue circles indicate locations within San Francisco where incidents resulting in mental health detentions occurred in 2021. These incidents occurred in significant concentration in the downtown districts (Central, Northern, Mission, Tenderloin, and Southern) and also with frequent regularity in districts that are more residential (Taraval, Richmond, Park, Ingleside, Bayview.) It should be noted that while some subjects are detained in an open public setting or on the street, most mental health detentions are reported within residences and structures requiring law enforcement response.*
A CONTINUALLY SIGNIFICANT VOLUME OF CRISIS CALLS

Statistically, the SFPD is well-attuned to dealing with subjects in crisis. In 2021 the SFPD respond to 19,830 CIT-related calls consisting of Mentally Disturbed Person (Radio Code 800), Suicidal Person (Radio Code 801), requested Mental Health Detention (Radio Code 5150), Juvenile Beyond Control (Radio Code 806), Mentally Disturbed Crisis Response (Radio Code 800CR) and Suicidal Person/Crisis Response (Radio Code 801CR). Additionally, SFPD officer responded to 27,412 requested Well Being Checks (Radio Code 910). Wellbeing Checks are a broad designation which may be called in by family or friends of subjects, or observers, witnesses who are concerned about the wellbeing of a subject based on their behaviors, statements, and/or history.

In 2021 SFPD responded to 19,830 Mental Health Calls for Service and 27,412 Check on Well Being calls for a total of 47,242 Mental Health Related incidents. We experienced a reduction of 2,336 calls since other alternative programs were implemented.

<table>
<thead>
<tr>
<th>CIT-Related Call Codes</th>
<th>Call Description</th>
<th>2021</th>
</tr>
</thead>
<tbody>
<tr>
<td>800</td>
<td>Mentally Disturbed Person</td>
<td>15,337</td>
</tr>
<tr>
<td>801</td>
<td>Person Attempting Suicide</td>
<td>3,860</td>
</tr>
<tr>
<td>806</td>
<td>Juvenile Beyond Parental Control</td>
<td>148</td>
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<tr>
<td>5150</td>
<td>Mental Health Detention</td>
<td>369</td>
</tr>
<tr>
<td>800CR</td>
<td>Mentally Disturbed Person/ Weapon or Potential for Violence (Crisis Intervention Team Response)</td>
<td>102</td>
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<tr>
<td>801CR</td>
<td>Person Attempting Suicide/ Weapon or Potential for Violence (Crisis Intervention Team Response)</td>
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CIT-RELATED CALL TOTALS  19,830

910  Check on Well being  27,412

GRAND TOTAL  47,242

2021 TOTAL CRISIS CALLS: 47,242

In 2021, San Francisco Police Officers responded to 19,830 CIT-related calls, combined with the 27,412 Well-Being Checks, yielding a total of 47,242 calls that required officers to utilize a wide variety of crisis intervention skills. This is a very conservative estimate, as officers use CIT skills to de-escalate violent incidents, accidents, and to empathically soothe victims of crime. The 2021 number, accumulated from data provided by DEM, is not in stark contrast to the number of 2020, which yielded an estimated 49,750 crisis-related calls. Generally speaking, the volume is of crisis calls from 2019, 2020, and 2021 are generally similar and there has not been a radical reduction. Further explorations in this report will discuss how these crisis calls are handled by SFPD with an exceptionally low percentage of encounters resulting in use of force applications.

RADIO CODES: CRISIS CALLS

5150 - mental health detention
800 – mentally disturbed person
801- suicidal person
806 – juvenile beyond control
5150 – mental health detention
800 CR – mentally disturbed person (requiring Crisis Response)
801 CR – suicidal person (requiring Crisis Response)
CIT 2021: MENTAL HEALTH INCIDENT: TIME AND DAY OF WEEK

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<th>TIME</th>
<th>MONDAY</th>
<th>TUESDAY</th>
<th>WEDNESDAY</th>
<th>THURSDAY</th>
<th>FRIDAY</th>
<th>SATURDAY</th>
<th>SUNDAY</th>
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<td>596</td>
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<td>1600-1959</td>
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<td>352</td>
<td>387</td>
<td>355</td>
<td>352</td>
<td>2642</td>
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</table>

MENTAL HEALTH INCIDENT: TIME

MENTAL HEALTH INCIDENT: DAY OF WEEK
Mental Health Detentions are not associated at a person level on an incident report. They are captured at the header level of the incident report. Not all persons involved in incidents categorized as Mental Health Detention were subject to involuntary 72-hour psychiatric hospitalization.

These associated graphs are filtered on Mental Health Detentions and are based on Incident Count: Mental Health Incident by Time of Day & Day of Week
Mental Health Incidents by Time
Mental Health Incidents by Day of Week
Time is based on Occurrence From Time, those that are blank were left blank on the Incident Report.
The following graphs are filtered on Mental Health Detentions and are based on Person Count, these totals will not match the Incident Count:
Mental Health by Race
Mental Health by Gender
Persons are those that were either Admonished, Booked, Cited, Detained, Diverted, Missing or Suspect.
MENTAL HEALTH-RELATED INCIDENTS AND REPORTED USE OF FORCE
Substantive Data Analysis and Considerations

Introduction

Given that The San Francisco Police Department’s highest priority is safeguarding the life, dignity and liberty of all persons -- all such applications of use of force and the circumstances therein are reviewed with serious rigor, critical thought, and consideration.

With every reported Mental Health related incident, the SFPD Crisis Intervention Team accumulates relevant data and generates fact-based interpretations of the information. These interpretations and subsequent visual representations of quantitative information can help us understand the complexities and dynamics of use of force applications in mental health related incidents. Throughout the course of this report graphs are incorporated to show a range of important topics such as:

- USE OF FORCE WITH MENTAL HEALTH RELATED INCIDENTS
- MENTAL HEALTH TYPE OF FORCE
- INJURED/UNINJURED PERSONS: Officers, Subjects
- PRESENCE OF WEAPONS (Subject)
- TYPE OF WEAPONS (Subject)
- INCIDENT TYPES: Well-Being Checks, Self-Harming, Public Safety/Reports of Violence
- USE OF FORCE: OFFICER’S CIT TRAINING
- USE OF FORCE: OFFICER’S RACE
- USE OF FORCE: SUBJECT RACE
- USE OF FORCE: SUBJECT GENDER
- USE OF FORCE: Calls by District
- SUBJECT LEVEL OF RESISTANCE
- INJURIES
- Suicide By Cop Warning Behaviors
- DE-ESCALATION Strategies employed
- DISCRETIONARY TIME: Pre-Incident Planning

Use of Force Case Summaries and Critical Factors

The Crisis Intervention Team presents the following case summaries which span the reported use of force (UOF) incidents related to mental-health related incidents, throughout 2021.

The Crisis Intervention Team considers the review of these complex incidents a vital and ongoing opportunity to critically assess engagement strategies, the application of use of force when appropriate, and the constant, unwavering commitment to the improvement and efficacy of crisis intervention tactics to ensure public and personal safety.
Reported Mental Health Detentions vs. Reported Applications of Use of Force

In 2021, the SFPD reported a current total of 2,642 mental health detentions. In 2021, the SFPD reported 44 incidents of Use of Force which involved mental health related incidents. 43 of these 44 incidents included different subject, with one subject being involved in 2 separate incidents. It is important to recognize that the vast majority of mental health detentions occur without the inclusion or application of use of force from responding officers.

Summary Criteria

The CIT unit forensically audited the 44 mental health related incidents of 2021 that reported a use of force and considered all the following information to gain insight and understanding of the situations. This research project was conducted to critically analyze the actions and abilities of the officers as well as interpret the actions, abilities, and behavior of the involved subjects. The following information was included in each report summary analysis.

- Nature of the incident
- Whether de-escalation was used by officers
- The behaviors of the subject
- The actions of the officers, and/or use of force
- The subject’s possession/use of weapons
- Reported injury of the subjects /officers
- Race & Gender of subject
- Possible ‘Suicide by Cop’ dynamic
- Discretionary time:
- “TEB” profile (Thoughts/Emotions/Behaviors)

The SFPD CIT unit then tabulated the specific information from each report and analyzed the data as a whole, to determine patterns, and issues pertaining to Use of Force in mental health related incidents during 2021.

USE OF FORCE INCIDENTS: MENTAL HEALTH RELATED 2021

SFPD officers respond to thousands of calls for service every year and engage subjects who may be in some type of crisis. SFPD officers are dispatched to a myriad of incidents, many of which require some type of Crisis Intervention training to ensure the most positive outcomes whenever feasible. In 2021 SFPD officers responded to combined total of 47,242 crisis-related Calls.

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<td>CIT-RELATED CALL TOTALS</td>
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Categories considered as crisis calls are:
5150 - mental health detention
800 – mentally disturbed person
800 CR – mentally disturbed person (requiring Crisis Response)
801- suicidal person
806 – juvenile beyond control
910- well-being check

2021 TOTAL CRISIS CALLS: 47,242
**SFPD RARELY APPLIES USE OF FORCE DURING CRISIS RELATED CALLS**

In 2021 there were 44 Mental Health Related incidents that included some type of Use of Force application. In the larger context of the 47,642, incidents recognized in 2021 CIT-related calls, this means that officers applied force in less than one tenth of a percent of crisis calls. Conversely, and perhaps more dramatically illustrative of this remarkable number is that **SFPD officers did not use force in over 99.9 % of mental health related incidents in 2021.**

As such, this miniscule fraction of UOF incidents is barely discernible other than a sliver in a common pie graph. This visual representation of data conveys a profound fact; that San Francisco Police Officers engage crisis subjects with the greatest discernment, restraint, and compassion and rarely resort to applications of force whenever feasible. It is clear from this graph that San Francisco Police Officers are wholeheartedly invested in the *Department’s* highest priority -- which is safeguarding the life, dignity, and liberty of all persons.

The following visual depiction of information is intended to be used as a tool for understanding larger issues, trends and concerns associated with use of force as it applies to law enforcement.

It should be noted that incidents resulting in an Officer Involved Shooting are not categorized in this accounting because these incidents are investigated by other bureaus and independent agencies to safeguard the integrity of the investigation.
MENTAL HEALTH UOF INCIDENTS: TYPE OF FORCE
This graphs shows the type of use of force applications employed by law enforcement
During mental-health related incidents in San Francisco in 2021. It should be noted that the Pointing of the firearm is a direct correlation with ERIW Policy deployment.

<table>
<thead>
<tr>
<th>TYPE OF FORCE</th>
<th>INCIDENT COUNT</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Total</td>
<td>44</td>
<td>100.0%</td>
</tr>
<tr>
<td>Physical Control</td>
<td>28</td>
<td>63.6%</td>
</tr>
<tr>
<td>ERIW</td>
<td>7</td>
<td>15.9%</td>
</tr>
<tr>
<td>OC</td>
<td>7</td>
<td>15.9%</td>
</tr>
<tr>
<td>Pointing of Firearms</td>
<td>7</td>
<td>15.9%</td>
</tr>
<tr>
<td>Other</td>
<td>3</td>
<td>6.8%</td>
</tr>
<tr>
<td>Strike by Object/Fist</td>
<td>2</td>
<td>4.5%</td>
</tr>
<tr>
<td>Impact Weapon</td>
<td>1</td>
<td>2.3%</td>
</tr>
</tbody>
</table>

MENTAL HEALTH UOF INCIDENTS: Person Count Injured/Uninjured when Force Used
(This will not count those Subjects that have unrelated Complaint of Pain/Injured)
This grand total of injuries is a combination of persons involved in the incidents, including Multiple responding officers, subjects.

<table>
<thead>
<tr>
<th>INJURED/UNINJURED PARTY</th>
<th>PERSON COUNT</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Total</td>
<td>118</td>
<td>100.0%</td>
</tr>
<tr>
<td>Officer Injured</td>
<td>15</td>
<td>12.7%</td>
</tr>
<tr>
<td>Officer Not Injured</td>
<td>61</td>
<td>51.7%</td>
</tr>
<tr>
<td>Subject Injured</td>
<td>28</td>
<td>23.7%</td>
</tr>
<tr>
<td>Subject Not Injured</td>
<td>14</td>
<td>11.9%</td>
</tr>
</tbody>
</table>
WEAPONS: MENTAL HEALTH SUBJECT

<table>
<thead>
<tr>
<th>WEAPON TYPE</th>
<th>TYPE OF WEAPON(OTHER)</th>
<th>INCIDENT COUNT</th>
<th>%</th>
</tr>
</thead>
<tbody>
<tr>
<td>Grand Total</td>
<td></td>
<td>44</td>
<td>100.0%</td>
</tr>
<tr>
<td>NO</td>
<td></td>
<td>32</td>
<td>72.7%</td>
</tr>
<tr>
<td>NO Total</td>
<td></td>
<td>32</td>
<td>72.7%</td>
</tr>
<tr>
<td>YES</td>
<td>Blunt Object</td>
<td>2</td>
<td>4.5%</td>
</tr>
<tr>
<td></td>
<td>Firearm</td>
<td>2</td>
<td>4.5%</td>
</tr>
<tr>
<td></td>
<td>Knife or Edged Weapon</td>
<td>2</td>
<td>4.5%</td>
</tr>
<tr>
<td>Other</td>
<td>Fists</td>
<td>1</td>
<td>2.3%</td>
</tr>
<tr>
<td></td>
<td>Hammer</td>
<td>1</td>
<td>2.3%</td>
</tr>
<tr>
<td></td>
<td>Metal Chain</td>
<td>1</td>
<td>2.3%</td>
</tr>
<tr>
<td></td>
<td>Metal Object, large rock</td>
<td></td>
<td>2.3%</td>
</tr>
<tr>
<td></td>
<td>Metal Pipe</td>
<td>1</td>
<td>2.3%</td>
</tr>
<tr>
<td></td>
<td>Stick</td>
<td>1</td>
<td>2.3%</td>
</tr>
<tr>
<td>YES Total</td>
<td></td>
<td>12</td>
<td>27.3%</td>
</tr>
</tbody>
</table>

This graph depicts the range of weapons officers encountered when they responded to mental health related incidents that resulted in a use of force.

It should be noted that 4 incidents included subjects in vehicles, some of whom were in the possible commission of suspected criminal activity. This data does include the vehicle as a ‘weapon’ although it most certainly, could be used as a weapon, especially in circumstances when the subject is willfully resisting, and/or evading.

INCIDENT TYPES

This graph depicts the range of behaviors and activities an officer is responding to that require immediate engagement and intervention from police officers. Most of these calls are reported because the subject is behaving in a manner that presents an immediate Public Safety Concern, possibly involving violence or danger to persons on scene. It should be considered that self-harming subjects may be apparently suicidal, however they may also be additionally motivated to turn outwardly violent to others under various circumstances. As such, self-harming subjects may present a potential danger to others for a myriad of reasons and require significant officer safety consideration when being engaged by officers. Officers are also frequently dispatched to Well-being Checks, which can also evolve into dynamic incidents. It will be evident while reviewing the 2021
UOF Case Summaries that several incidents dispatched as ‘well-being checks’ were determined to be subjects in the commission of suspected crimes.

44 UOF Incidents/ Mental Health Related: Incident Types

- Well-being Check: 7 (16%)
- Violence/Public Safety: 29 (66%)
- Self-Harming: 8 (16%)

OFFICER DEMOGRAPHICS: TRAINING and RACE

Use of Force - Officers CIT Status

This graph above shows the number of officers who have Certification in the 40-hr Crisis Intervention Team course.

Use of Force - Officer’s Race

Note: Officer’s Race only counted once even if officer is involved in more than one use of force.

Practically 99% of all officers are trained in the 20 hrs CIT Field Tactics/ De-escalation Course.

SUBJECT DEMOGRAPHICS: Mental Health Incidents and Use of Force
**RACE and GENDER**

Use of Force - Subject's Race

<table>
<thead>
<tr>
<th>Race</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Asian or Pacific Islander</td>
<td>3</td>
</tr>
<tr>
<td>Black</td>
<td>13</td>
</tr>
<tr>
<td>Hispanic</td>
<td>11</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
</tr>
<tr>
<td>White</td>
<td>15</td>
</tr>
</tbody>
</table>

**Notes:**
- Subject based on Person not on Incident Count.
- All data is being pulled from the Use of Force logs from AIMS and loaded nightly into the Use of Force Model.

All Use of Force Call Types are pulled from the Use of Force Model, this data is not coming directly from Department of Emergency Management Computer Aided Dispatch system.

Use of Force Related to Mental Health Calls are 4 specific call types: Check on wellbeing (910), Mental Health Detention (5150), Mentally Disturbed Person (800) and Suicidal Person (801). These Call Types are also a part of the "All Use of Force Call Types" Report.

Created by the Business Intelligence Team, any questions or concerns please email us at sfpd.busintell@sfgov.org.

Use of Force - Subjects by Gender

<table>
<thead>
<tr>
<th>Gender</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Male</td>
<td>37</td>
</tr>
<tr>
<td>Female</td>
<td>5</td>
</tr>
<tr>
<td>Unknown</td>
<td>1</td>
</tr>
</tbody>
</table>

**USE OF FORCE**
Mental Health Incidents:

GEOGRAPHIC REPRESENTATION THROUGHOUT SFPD DISTRICTS

44 UOF Incidents/ Mental Health Related: Incident by District

- Central: 4 (9.9%)
- Southern: 5 (11.36%)
- Bayview: 4 (9%)
- Mission: 7 (15.9%)
- Northern: 4 (9%)
- Park: 2 (4.5%)
- Richmond: 2 (4.5%)
- Ingleside: 7 (15.9 %)
- Taraval: 1 (2.2%)
- Tenderloin: 7 (15.9%)
- Airport: 1 (2.2%)
MENTAL HEALTH SUBJECT: LEVELS OF RESISTANCE

DEPARTMENT NOTICE A 18-171
10/03/2018

Levels of resistance — Sequenced
When a subject resists arrest they can go through various types of resistance. A subject may be compliant with the member before becoming assaultive. A supervisor should mark numerically the levels of resistance in the order the subject resisted arrest. For example, if a subject strikes a member with their fist and then pulls out a knife, a supervisor would enter a "1" next to "Assaultive" and then a "2" next to "Life Threatening" to show the sequence and escalation of resistance against the member.

Per General Order 5.01
LEVELS OF RESISTANCE
A. COMPLIANT. Subject offers no resistance.
B. PASSIVE NON-COMPLIANCE. Does not respond to verbal commands but also offers no physical form of resistance.
C. ACTIVE RESISTANCE. Physically evasive movements to defeat an officer's attempt at control including bracing, tensing, running away, verbally or physically signaling an intention to avoid or prevent being taken into or retained in custody.
D. ASSAULTIVE. Aggressive or combative; attempting to assault the officer or another person, verbally or physically displays an intention to assault the officer or another person.
E. LIFE-THREATENING. Any action likely to result in serious bodily injury or death of the officer or another person.

INJURY - Subject

2021 USE OF FORCE - MENTAL HEALTH CALLS: NO INJURY OBSERVED, NO COMPLAINT OF PAIN

44 UOF Incidents/ Mental Health Related: NO INJURY/COMPLAINT OF PAIN
- No Injury/No Complaint of Pain (Subject): 10 (22.7%)
- Injury/Complaint of Pain (Subject) 77.3%
TYPES OF SUBJECT INJURIES: UOF Incidents - Mental Health Related

- No Injury/No Complaint of Pain: 10 (23%)
- Complaint of Pain: 12 (27%)
- Abrasion, Cut, Bruise, Swelling: 22 (50%)
- Fracture/ Major Trauma: 0 (0%)

Injury may have occurred prior to police engagement and/or as a result of subject’s own actions 8 (19%)

CAUSALITY OF INJURY

2021 USE OF FORCE - MENTAL HEALTH CALLS: INJURY OCCURRED PRIOR TO INCIDENT

- Injury may have occurred prior to incident: 19%
DE-ESCALATION UTILIZED:

2021 USE OF FORCE - MENTAL HEALTH CALLS:
DE-ESCALATION STRATEGIES EMPLOYED AND REPORTED BY OFFICERS

- De-escalation Strategies Employed and Reported: 42 (95.5%)
- De-escalation not Feasible: 2 (4.5%)

“SUICIDE BY COP” WARNING BEHAVIORS

2021 USE OF FORCE - MENTAL HEALTH:
Suicide By Cop Warning Behaviors

- Possible 'Suicide by Cop' Warning Behaviors: 30%
- Unknown: 70%

Possible Suicide by Cop Warning Behaviors
- SBC Warning Behaviors evident (based on narrative of incident): 13 of 44 incidents (30%)
- Unknown: 29 (70%)
**SUICIDE BY COP WARNING BEHAVIORS: Considerations**

The *Crisis Intervention Team* reviewed the circumstances of the reported 2021 Use of Force incidents and considered components that conveyed possible attempted Suicide by Cop behavior. While these incidents did not result in death, it is extremely important to review the provocative statements made by subjects, provocative behavior of the subject, and excessively combative actions of the subject toward the officer. In some cases, comments such as “shoot me now” and “let’s end this’ and “Good, I want you to kill me” should be considered as indicators of possible suicidal ideation.

In the review of 2021, 13 of 40 reported Use of Force Incidents (Mental Health Calls) showed clear behavioral elements from the subject that foreshadowed possible suicidal intent and or ideation, which could culminate in a lethal police encounter. The *Crisis Intervention Team* review of this material indicates that **30% of 2021 Use of Force incidents demonstrate behavior and actions from the subject that are consistent with Suicide by Cop predictors.**

**DISCRETIONARY TIME and PRE-INCIDENT PLANNING:**
**A Critical Factor in Use of Force**

**2021 USE OF FORCE - MENTAL HEALTH CALLS: DISCRETIONARY TIME FOR PRE-INCIDENT PLANNING**

- **No Discretionary Time**: 22 (50%)
- **Limited Discretionary Time**: 22 (50%)
- **Time Available**: 0 (0%)

* TIME FOR EXTENSIVE PRE-INCIDENT PLANNING 0%*

**44 UOF Incidents/ Mental Health Related: DISCRETIONARY TIME**
- No Discretionary Time: 22 (50%)
- Limited Discretionary Time: 22 (50%)
- Discretionary Time Available for Extensive Planning: 0 (0%)
**Time & Distance: The Role of ‘Discretionary Time’ in De-escalation**

‘Discretionary Time’ refers to the reasonable opportunity that a responding officer has to responsibly conduct pre-incident planning, and/or facilitate optimal field tactics, de-escalation techniques and engagement strategies with the subject in order to reasonably ensure safety for personnel, the subject in crisis, and the public.

Incidents that incorporate imminent and immediate acts of violence do not afford the officer any discretionary time, but rather require the officer to respond, interpret, and act with a minimum of planning and coordination. An incident that does not include ongoing violent felonies or impending safety threats affords responding officers an opportunity to possibly review information, conduct record checks, and formulate optimal engagement strategies and tactics for the incident.

**DISCRETIONARY TIME IS INVERSELY PROPORTIONAL TO EXIGENCY:**

*Imminent Danger Radically Limits Planning*

When officers have discretionary time to prepare for an informed engagement with a subject, they are at a great advantage in terms of ensuring officer safety, scene safety, public safety, and the well-being of the subject. In emergency circumstances, when incidents are unfurling rapidly and there is an immediate or imminent safety concern, officers may have limited or no discretionary time to prepare. As such, officers are compelled to act immediately to stop danger, prevent a violent crime, or to deter further negative consequences. Given that officers responding to dynamic-incidents must adjust to many potentially volatile aspects present at a crisis-related call, the concept of effective Pre-Incident Planning is directly proportional to the discretionary time available to the officers. Discretionary Time is highly valuable if available, and when it is not available, officers must still act to prevent or stop activity that poses imminent danger to subjects.

A review of the 2021 Use of Force Incidents indicates that during all the 44 reported incidents officers did not have or had very limited discretionary time prior to response. Discretionary time is a crucial consideration when forensically auditing the officer’s decision-making process, officer’s perceptions, and subsequent actions.

This 2021 analysis of Discretionary Time is important because it shows that in 50% of Use of Force incidents there was **NO Discretionary Time** for officers to engage in pre-incident planning or tactics, based on an imminent danger present at the scene. Additionally in another 50% of reported mental health-related Use of Force Incidents there was only **Limited Discretionary Time**, either based on escalating public safety concerns, and scene safety issues, or highly problematic behavior demonstrated by the subject.

Limited time indicates that the officers were able to partially create and implement some expanded engagement strategies which may include: verbal and physical de-escalation, tactical re-positioning, expanded field tactics and team concepts, and the implementation of time-and-distance A such, these calculations of available Discretionary Time mean that 100% of the Use of Force incidents in 2021 pertaining to mental health calls afforded either **NO** or **LIMITED** discretionary time to the responding officers to conduct extensive pre-incident planning.

Emergency engagement with non-compliant subjects often resulted in use of force in order to effect compliance, arguably to ensure public safety, scene safety, and/or wellbeing for the subject.
**SUBJECT’S DEMEANOR: THOUGHT/ EMOTION /BEHAVIOR**

The SFPD Crisis Intervention Team accumulates data and generates interpretations of the information that can help assess the ways in which crisis incidents are handled and managed by officers. The CIT Unit reviews numbers, training, and all associated data – but we also consider context, which includes the subject’s demeanor at the time of the incident. The CIT Unit incorporates the THOUGHT/EMOTION/BEHAVIOR (TEB) MODEL, when analyzing incidents. This concept was implemented by Dr. Azar Dickens of the Force Science Institute.

**The Force Science Institute**

The Force Science Institute is a nationally recognized model for empirical analysis and the cultivation of best practices in law enforcement as it applies to the practical science of use of force and De-escalation. The Force Science Institute is dedicated to promoting the value of knowledge through empirical research in behavioral science and human dynamics. The Force Science Institute develops and disseminates high quality scientifically grounded education, training, and consultation to support fact-based investigations, inform decision processes, enhance public safety, and improve peace officer performance in critical situations. In 2019 the Crisis Intervention Unit attended a 20 hr training on De-escalation as presented by Force Science Institute.

These SFPD Use of Force/ Mental-Health related incident summaries also include additional factors as recognized by Force Science Institute Ltd, as specified in their De-Escalation Training for Law Enforcement, such as ‘discretionary time’, and the ‘Thought, Emotion, Behavior’ model/profile as designed by John Azar-Dickens PhD, of The Force Science Institute. [https://www.forcescience.org/](https://www.forcescience.org/)

**SUBJECT DEMEANOR VS. REALISTIC DE-ESCALATION SKILLS**

The “TEB” Model (Thought/Emotion/Behavior) - John Azar-Dickens PhD.

The general arc of the TEB Model operates under the general assertion that the perceived Thoughts, Emotions, and Behaviors of the subject in crisis directly impact and inform the officer’s abilities to offer the subject reasonable de-escalation opportunities which can help peacefully resolve the incident. Dr. Azar-Dickens of Force Science Institute asserts:
Perceived THOUGHT of SUBJECT at time of incident:

Dr. Azar-Dickens posits that the subject’s ‘thinking’ modality is very important at the time of the incident, connoting whether the subject is capable of logical thought, or incapable of rational thought. He considers LOGICAL/ RATIONAL/CLEAR THOUGHT vs. ‘CONTAMINATED’ THOUGHT

**CLEAR Thought:**

Clear thinking indicates that the subject appears reasonably capable of logical and rational thought. Clear thinking may indicate that the subject may be more reasonably persuaded to understand cause and effect, reasons to comply, and safely follow orders and directions from officers.

“**CONTAMINATED” (Impaired) Thought:** A condition of thinking in which a person has lost the ability (either temporarily or permanently) to clearly, logically, and/or rationally understand their environment. - Azar-Dickens, 2017

*Force Science Inst.* further states that:
Perceived EMOTION of Subject at time of incident:
The perceived Emotional range of the subject varies between LOW and HIGH.
Perceived LOW emotion may convey minimal effect, ambivalence, or perceived non-
emotionality, depression, dissociative behavior, a possible inability, or willful refusal to partake
in conversations and negotiations.
Perceived HIGH emotion may convey more passionate emotions: Anger, Sadness, Desperation,
Excitability, Grief, Resentment, etc.
Force Science elaborates that while ‘high’ emotion is more often demonstrated along with high
re-activity and volatility, that perceived low emotion can also foreshadow significant danger,
especially within the context of possible Suicide by Cop, perhaps foreshadowing that the subject
has ‘come to terms’ with an end-of-life consequence and suicide.

BEHAVIORS: COMPLIANT vs. NON-COMPLIANT
The observed behaviors of the subject substantially impact the ability of the officer to reasonably de-
escalate the situation, with respect to officer safety and scene safety.
Compliance may provide an opportunity for officers to build rapport and effect de-escalation
and influence behavioral change of the subject.
Non-compliance may amplify the reasonable likelihood that an officer may be required to use
force in order to subdue the non-compliant officer into a state of eventual compliance.

"TEB” Model Example:
How TEB Variables indicate possible approach, subject’s psychological status, volatility risk,
and volatility type, behavioral factors

<table>
<thead>
<tr>
<th>Thought</th>
<th>Contaminated</th>
<th>Contaminated</th>
<th>Contaminated</th>
<th>Contaminated</th>
<th>Clear</th>
<th>Clear</th>
<th>Clear</th>
<th>Clear</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotion</td>
<td>High</td>
<td>High</td>
<td>Low</td>
<td>Low</td>
<td>High</td>
<td>High</td>
<td>High</td>
<td>Low</td>
</tr>
<tr>
<td>Behavior</td>
<td>Compliant</td>
<td>Non-compliant</td>
<td>Compliant</td>
<td>Non-compliant</td>
<td>Compliant</td>
<td>Non-compliant</td>
<td>Compliant</td>
<td>Non-compliant</td>
</tr>
<tr>
<td>Approach Style</td>
<td>Crisis comm</td>
<td>Crisis comm</td>
<td>Crisis comm</td>
<td>Crisis comm</td>
<td>Crisis comm to reduce emotion, then problem solving strategies</td>
<td>Crisis comm to reduce emotion, then problem solving strategies</td>
<td>Crisis comm to reduce emotion, then problem solving strategies</td>
<td>Task focused communication</td>
</tr>
<tr>
<td>Psychological Status</td>
<td>Likely mental health or drug</td>
<td>Likely mental health or drug</td>
<td>Likely mental health or drug</td>
<td>Likely mental health or drug</td>
<td>Likely a mood problem or angry</td>
<td>Likely a mood problem or angry</td>
<td>Likely a mood problem or angry</td>
<td>Likely not mentally ill, Purposeful behavior</td>
</tr>
<tr>
<td>Volatility Risk</td>
<td>Moderate risk but be alert</td>
<td>High risk</td>
<td>Low risk but be alert</td>
<td>Moderate risk but be alert</td>
<td>Moderate risk but be alert</td>
<td>High risk</td>
<td>Low risk but be alert</td>
<td>High risk</td>
</tr>
<tr>
<td>Volatility Type</td>
<td>Primal</td>
<td>Primal</td>
<td>Primal</td>
<td>Primal</td>
<td>Cognitive or Primal</td>
<td>Cognitive or Primal</td>
<td>Cognitive or Primal</td>
<td>Cognitive</td>
</tr>
<tr>
<td>Other behavioral factors to consider</td>
<td>Behavior difficult to predict / Watch for quick changes to non-compliant</td>
<td>Non-compliant likely due to confusion / Suicide by cop often shows this profile</td>
<td>Non-compliant likely due to confusion / Suicide by cop often shows this profile</td>
<td>Non-compliance likely due to confusion / Any violence is likely due to confusion</td>
<td>Watch for compliance to change quickly</td>
<td>High emotion driving non-compliance</td>
<td>Potential compliant citizen / Watch for over-compliance as a pre-aggression cue</td>
<td>Non-compliance is purposeful / Often anti-police / Likely criminal minded and antisocial</td>
</tr>
</tbody>
</table>
CRITICAL OVERVIEW OF ISSUES AND PATTERNS:
USE OF FORCE/ MENTAL-HEALTH-RELATED INCIDENTS

When considering the circumstances, officer response, time constraints, and behavioral dimensions of the 2021 Use of Force incidents, there are certain patterns and issues that provoke further inquiry, comparison, and review.

There is always extensive review of an officer’s behaviors, training, and experience when Use of Force incidents and/or Officer Involved Shootings occur. Oftentimes an officer’s decision-making process with regard to use of force is considered primarily as influenced by the officer critical abilities, skills, tactics, and ethics. However, it is also imperative to consider and review the behavioral dimensions of the involved subject, and how an officer’s attempts at de-escalation may or may not be feasible given the subject’s state of mind or thought process. When examining applications of use of force, it is of critical importance to consider the crisis subject’s demeanor at the time of the incident, as this demeanor will impact, inform, and influence the efficacy of the officer’s ability to offer potential de-escalation strategies to the subject. The crisis subjects’ behavior can provide clear indicators as to whether de-escalation, which is mandatory, will be feasible and/or successful.

SUBJECT DEMEANOR AND ABILITY: Thinking, Emotion, Behavior (TEB Model, Force Science Institute)

The Crisis Intervention Team has applied the Force Science Institute “TEB” model (Thought, Emotions, Behavior) to our general review of the Use of Force Incidents of 2021. As a part of this forensic audit of UOF incidents, it is apparent that Behavior and Emotion are more readily predictable as elements. For instance, 100% of subjects involved in a use of force incident demonstrates “noncompliance” as a opposed to “compliant” behavior. Similarly, most subjects demonstrate “high” versus “low” emotion, which indicates an excited demeanor and a lack of emotional restraint. These behavioral and emotional factors of a subject are basic components that require de-escalation attempts when feasible, and officers readily do so.

However, the state of mind of the subject, or the ‘Thought Process’ of the subject (TEB) presents an additional and more nuanced concern, which may delineate whether or not de-escalation strategies may work or not work. The Force Science Institute posits that some subjects are ‘clear’ thinking and able to readily process information rationally and critically. As such, “clear” thinking subjects are therefore more able to participate successfully in de-escalation strategies largely because they can perceive cause and effect, are receptive to changing information, and are also able to recognize rational arguments and instructions presented by officers who are attempting to de-escalate situations. Conversely, Force Science Institute identifies an alternate category of thinking, which is referred to as ‘Contaminated’ Thinking. Contaminated Thinking may be evident in a subject who is either under the influence of a chemical substance or has organic mental health issues that create a distorted worldview which prevents the subject from participating effectively in de-escalation strategies offered by police. Signs and signals of Contaminated thinking may include delusions, non-reality-based statements, rigid conspiracies, hyperbolic goals (suicidal/ homicidal intent), etc.

With regard to the 2021 Use of Force incidents it should be noted that of 44 reported incidents that 42 incidents involved a subject who demonstrated a “Contaminated” or impaired thought process. This is important as it signifies that 95% of Subjects involved in a reportable Use of Force in 2021 showed a diminished capacity to successfully participate in any de-escalation strategies because their worldview
was/is so distorted or impaired at the time of the encounter with officers, possibly as a result of substance use and/or organic chemical issues. This pattern further indicates that a significant amount of police encounters with disturbed subjects will not yield compliance with de-escalation alone, as de-escalation may not be entirely feasible. Use of Force may be an unavoidable component of encounters with non-compliant subjects exhibiting a ‘contaminated’ thought process.

<table>
<thead>
<tr>
<th>Thought</th>
<th>Contaminated</th>
</tr>
</thead>
<tbody>
<tr>
<td>Emotion</td>
<td>High</td>
</tr>
<tr>
<td>Behavior</td>
<td>Non-compliant</td>
</tr>
</tbody>
</table>

Contaminated Thought + HIGH emotion + Non-Compliance = High likelihood of ineffective de-escalation.

THOUGHT, EMOTION & BEHAVIOR: VARIABLES INDICATE OUTCOME

The “TEB” factors CONTAMINATED THOUGHT, HIGH EMOTION, NON-COMPLIANCE are incredibly important variables because together they point to a greater likelihood of volatility AND exponentially diminish an officer’s ability to successfully engage in de-escalation strategies. De-escalation may not work optimally largely because the subject’s thought process when ‘contaminated’ is not capable of logical and or rational thought processes, possibly as a result of substance use, organic mental health condition, and/or medical issues. An additional concern is the inclusion of ‘HIGH’ emotion, as this also impacts the subject’s ability to objectively engage with emergency responders in a calm manner. Furthering this extreme dynamic for volatility is physical non-compliance, which also requires some measure of physical engagement from the officer.

PATTERN OF SUBJECT DEMEANOR: CONTAMINATED THOUGHT (Impaired Thinking) + HIGH EMOTION + NON-COMPLIANCE presents a ‘trifecta of indicators’ that suggest de-escalation may not be feasible and may also convey that volatility risk will be high. As such this pattern of CONTAMINATED THOUGHT + HIGH EMOTION + NON-COMPLIANCE indicates that Use of Force applications may be involved to resolve the incident.
APPLICATION OF DE-ESCALATION WHEN FEASIBLE

DE-ESCALATION. Officers shall, when feasible, employ de-escalation techniques to decrease the likelihood of the need to use force during an incident and to increase the likelihood of voluntary compliance. Officers shall when feasible, attempt to understand and consider the possible reasons why a subject may be noncompliant or resisting arrest. A subject may not be capable of understanding the situation because of a medical condition; mental, physical, or hearing impairment; language barrier; drug interaction; or emotional crisis and have no criminal intent.

These situations may not make the subject any less dangerous but understanding a subject’s situation may enable officers to calm the subject and allow officers to use de-escalation techniques while maintaining public and officer safety. Officers who act to de-escalate an incident, which can delay taking a subject into custody, while keeping the public and officers safe, will not be found to have neglected their duty. They will be found to have fulfilled it.

REPORT WRITING & DOCUMENTATION:

Officers need to continue improve their understanding of and descriptions of De-Escalation and Discretionary Time

There has been significant improvement from 2020 to 2021 in the way officers are describing their attempts to de-escalate subjects. Similarly, officers are more readily describing the lack of discretionary time in their encounters. Officers are expected to use de-escalation in the field and if use of force is reported they are required to acknowledge whether de-escalation was used. As such the reporting officer often formulaically acknowledges ‘de-escalation’ but the officer should elaborate on what de-escalation strategies work and what doesn’t. This is important because as previously indicated in the TEB findings, which indicate that the predominate number of crisis subjects in UOF incidents demonstrate CONTAMINATED THOUGHT, HIGH EMOTION, NON-COMPLIANCE and that de-escalation may not actually be feasible. In these circumstances it is especially important for the reporting officer to describe why de-escalation did not work, or whether the subject was unable to accept de-escalation. The officers should avoid boiler-plate language but rather speak plainly about what they tried to use as de-escalation, and whether discretionary time was feasible, and whether it was possible to create time and distance.

REPORT WRITING: Officers need to thoroughly describe the subject’s demeanor (Thought, Emotion, Behavior) in the narrative.

Officers continue to improve in their descriptions the behavior of the subject in the respective narratives of their reports. These accurate behavioral descriptions are essential because the subject’s demeanor may significantly impact the efficacy of the de-escalation strategies employed by officers. When feasible officers should include descriptions of the subject’s behavior, statements, reactions -- especially when subjects are not responding to de-escalation.
REPORT WRITING: Officers need to describe if there was limited discretionary time and how that informed their abilities and decisions.
In the event that an incident requires officers to make split-second decisions, it is important to describe how a lack of discretionary time, and/ or exigency required immediate engagement.

NOTIFICATIONS:

Concerning Subjects
Should officers engage subjects with significant frequency based on the subject’s concerning behaviors, and/ or should the subject present ongoing concerns for public safety or personal well-being, officers should notify the appointed CIT Liaison Officer at their district station and/or Crisis Intervention Unit. These notifications are important because it can help establish who presents ongoing risks to themselves and others, and who requires expanded engagement from CIT (SFPD) and/or Comprehensive Crisis Services (DPH.) This notifications and strategic engagement can help minimize dramatic and/or unsafe encounters with the subject while also connecting the subject to appropriate services when applicable.

Potential ‘Suicide by Cop’
Officers, based on their training and experience, should note in their respective reports whether the subject demonstrated an attempted suicide by cop, or a propensity for potential suicide by cop. Even if a crisis incident is resolved peaceably with a legal detention, medical treatment, and/or without use of force, it is important for the CIT Unit to be aware of subjects who may initiate, provoke, and/ or demonstrate suicidal behaviors that rely on a lethal use of force application from police. Officers should notify the CIT unit regarding encounters with subjects that included elements that indicate potential use of force:

Suicide by Cop Indicators in report, examples:

*The subject’s behavior, reaching in waistband and refusing to obey commands to show me his hands coupled with subject’s language, “just shoot me. I want to die.” Conveyed to me that the subject was suicidal and willing to provoke a lethal force option from police in a manner potentially consistent with Suicide by Cop. Based on my training and experience I know that some suicidal subjects may provoke a lethal law enforcement response as a lethal means so as to affect their own suicide.*

The notification process is important because is underscored the need for follow-up and engagement, possibly from crisis services outside of law enforcement. It is also important for cops to be familiar with subjects whose histories may include Suicide by Cop behavior as this will help cops engage the subject as safely and effectively as possible. The Crisis Intervention Team should be notified should a subject indicate Suicide by Cop behaviors.

DEBRIEFING:

Officers and their First Line Supervisors should engage informal and informal debriefs whenever possible regarding complex and tense encounters pertaining to crisis incidents. Debriefs are an excellent way to provide both positive criticism and identify problematic strategies. Debriefs also foster a CIT Team Concept and encourage each individual officer to build upon their training and experience.
CONSTANT SCENARIO-BASED TRAINING & LEARNING:
CASE LAW AND DISCUSSION

As the Law Enforcement professional must constantly adapt and master the concepts and regulations of shifting legal obligations and ramifications, it is essential that all San Francisco Police Officers must readily understand how to do their jobs effectively in accordance with legal updates. The Crisis Intervention Team knows that for officers to operate confidently in the field they must have an excellent working knowledge of policy and procedure AND current applications of the Law. This is never more crucial with the implementation of AB 392 and its bearing on Use of Force and the ‘objective reasonableness’ of an officer. There have been numerous changes in recent laws which can be confusing for officers to understand, especially in the areas of search and seizure and reasonable use of force. Officers must be able to articulate and recognize imminent dangers and the appropriateness of their response in terms of proportionality, use of force policy, 4th Amendment Intrusions, the feasibility of de-escalation, creating time and distance when allowed, and the opportunity to conduct pre-incident planning when discretionary time is available. The CIT Unit continues to address these important legal issues in the CIT Training.

DATA COLLECTION:

Hospitals and Treatment Facilities: Recommended that Hospital Transports be automatically tracked via report (via box) so that audit does not require manual collection of data

“Medical-Only” Transports Tracked: Currently subjects who are transported for ‘medical only’ are not tracked by LE although they may be high users of medical services and/or require continual CIT engagement for mental health issues. Should a subject be a high user of medical only transports reported by police it is important because they may need to be more adequately referred to DPH and/or Behavioral Health Services.

‘CIT/De-escalation Used’ Tracking: A separate tracking mechanism in reports for mental health related or crisis related calls may yield a more substantive quantitative overview of the type of qualitative work officers are doing in the field. The current system is compartmentalized to call-type only, which is extremely ‘black and white’ and does not recognize the myriad of CIT skills officers use at a wide variety of calls for service, beyond those calls specifically designated at ‘mental health related’ prior to engagement. Should a mental health component be involved in the reported incident officers should be able to flag a CIT box so that it is more clearly recognized when officers are applying CIT skills and techniques even during criminal investigations, de-escalation of subjects, and accident investigations when compassionate engagement may be highly applied

INTERAGENCY ACCOUNTABILITY:

The San Francisco Police Department is held to an extremely high levels both internally and externally regarding its documented activity, data collection, and adherence to protocols and general operating practices. In the realm of Crisis Intervention where other agencies must be adequately involved when the issues are no longer the singular domain of Law Enforcement and/or Public Safety alone, these entities should be held responsible for their scopes of work
and required to produce accounting and rigorous data to support their work product.

**AWARDS AND CITATIONS:**

**ANNUAL CIT AWARD:**
Supervisors should continue to recognize CIT excellence in those who work in the field, helping to defuse crisis incidents and resolving tense encounters with the highest regard for human dignity and the preservation of life. Supervisors should submit names of officers for CIT Awards so that they can be recognized, and their work can be promoted as exemplary.

**SUGGESTION – ISSUE DEPARTMENT UNIT CITATION: COVID 19**

The CIT Unit proposes that the Department should issue a COVID-19 Unit Citation Ribbon and pin for all those working in the field throughout the pandemic. It will recognize the hard work, sacrifice and courage of our first responders who put the safety and wellbeing of the public before their own.

**MEDIA AND RAISING PUBLIC AWARENESS:**

**Suggestion: “Positive Outcome Summaries – Weekly Top 10”**

District Stations prepare daily accounting of the most serious incidents occurring in their districts, violent crimes, fatal accidents, significant arrests. District Stations should also make a habit out of summarizing and notifying commanding officers when excellent work in crisis intervention and de-escalation and community service is being conducted in the field. As such, Command Staff and Media Personnel will have greater access to share and highlight positive outcomes to be released with great regularity to the media and in public forums. This is a highly important goal to share positive outcomes as oftentimes police-related incidents only garner attention when circumstances are dire and/or traumatic to the persons involved. Without a doubt there are hundreds of positive encounters that SFPD officers have daily and these encounters, big and small, should be celebrated and shared with the public so our communities can learn about the excellent, thoughtful, and compassionate work our officers are doing.
CRISIS INTERVENTION TEAM:
PROACTIVE AND PREVENTITIVE POLICING

PUBLIC SAFETY & PUBLIC HEALTH:
COMBINED EXPERTISE THROUGHOUT MULTIPLE SYSTEMS
The CIT Unit wants to connect subjects with the most effective realm of resources and ensure public safety. Often the Crisis Intervention Team applies elements of Law Enforcement, Mental Health Crisis Interventions, Medical Interventions, and Outreach in order to create effective engagement strategies that help to resolve problems.

When crimes are committed by subjects in crisis, they may become Justice Involved persons. Oftentimes Justice Involved crisis subjects may be referred to Behavioral Court (Diversion) where elements of supportive treatment and services may be factored into conditions of their release.

Additionally, subjects in crisis may be referred by clinicians for more strict supportive programs such as Conservatorship, Assisted Outpatient Treatment, and Intensive Case Management. These special programs must be requested by Clinicians and DPH for the referrals to be accepted and admitted. Law Enforcement personnel cannot write referrals about crisis subjects to be admitted into formal medically and psychiatrically supportive programs.

TIMELY INTERVENTIONS: ENSURING PUBLIC SAFETY AND DETERRING VIOLENT CRIME
The San Francisco Police Department Crisis Intervention Team is committed to excellence within the realm of Proactive and Preventative Policing. It is our goal to engage subjects efficiently and sensitively to foster trust, wellbeing, and safe interactions. While outreach is a central concept to the CIT Program, we are also committed to the prevention of serious crime and risks to all public safety whenever feasible. Law Enforcement and Mental Health Professionals can work together effectively to assess, intervene, and prevent tragedy and violence. It is a fundamental consideration of the CIT Field Unit to balance Threat Assessment concepts and crisis engagement strategies to intercept more highly disturbed subjects who may be on a pathway to violence.

CIT THREAT ASSESSMENT & INTEGRATIVE ENGAGEMENT
When applicable, the CIT Unit conducts critical and nuanced threat assessments to determine whether a subject in crisis may also present a public safety concern based on demonstrated acts of violence, history of crime, threats of future harm, and other concerning behaviors/statements which may indicate the subject may be on a pathway to violence. It is one of the goals of the Crisis Intervention Team to proactively interpret and interrupt potentially violent and destructive behaviors that may be predicated by crisis.

The Crisis Intervention Team seeks to thoughtfully identify subjects who require engagement and substantive crisis intervention to avert negative outcomes and to prevent violent crime and public safety risks. In turn, the CIT Unit may also alert SFPD members, and or other agencies or departments, to issues pertaining to subjects in crisis who pose a risk to themselves and/or others, and or present an ongoing public safety risk. This integrated engagement strategy serves to appropriately inform and enlist the services and resources that can help build a solid and safe plan for crisis intervention.
CIT RESOLUTIONS & VIOLENCE PREVENTION: Real Case Studies

Please review some of the recent case study summaries of real incidents that demonstrate the highly effective and proactive work of the Crisis Intervention Team. It is our goal to effectively engage subjects in crisis and mitigate the harm they may have caused themselves or others, AND to also prevent further acts of violence.

This presentation is only a brief synopsis of the complex, thorough, sensitive, respectful, and highly proactive work that the Crisis Intervention Team is doing to keep people safe, and to intercept and prevent violent crime. The issues are described as simply as possibly although they may be extremely complex and time-consuming, requiring days and months of repeated engagements and consideration. These real examples of Crisis Intervention convey the deep humanitarian value of the work the Crisis Intervention Team is doing to help people, protect communities, and ensure public safety.

Please note that the featured subjects’ names, personal information, and medical history have not been disclosed. These summaries are intended to give shape and volume to the incredible work that the crisis intervention team has been doing recently. Actual recovered and seized weapons are featured in accompanying images.

Oftentimes the effectiveness of law enforcement is measured in hard data. But the realm of crisis intervention is extremely challenging to interpret, to quantify the unquantifiable.

How does one effectively gauge the value of a life saved – a suicide deterred, a mass-casualty event prevented, a recovery supported, a family reunited, and tragedy averted? These are positive resolutions that are hard to measure...and this is the quantitative puzzle of Crisis Intervention.

THE VALUE OF CRISIS INTERVENTION LIES IN VIOLENCE PREVENTION & ENGAGEMENT

Case 1 – Subject with History of Workplace Violence: CIT Threat Assessment

The Crisis Intervention Field Unit was notified about a highly concerning subject who was harassing former employers. The subject repeatedly voiced very provocative opinions about mass shootings and frequently discussed this topic with people over the years causing anxiety and an atmosphere of fear. The CIT Unit conducted an comprehensive Threat Assessment of the subject, noting he demonstrated extremely concerning pathway to violence behavior in the context of his prior history of workplace violence, harassing behaviors, current behavior and statements, and related convictions. The CIT Unit assisted assigned investigators and the subject was arrested for criminal threats. The CIT unit also alerted patrol with important information about this subject should he be encountered in an effort to ensure public safety.
Case 2 - Elderly Female with Severe Agoraphobia, unable to leave her home based on severe anxiety: CIT Engagement and Referral to Services

The CIT Unit was contacted regarding an elderly and possibly disabled female who was unable to leave her home for unknown reasons. Her concerned neighbor stated that this lady had not left her house since 2017 (4 years) and she was entirely dependent on her neighbor depositing weekly rations of food through her small mail slot on her front door. The CIT unit responded to her residence and knocked. She refused to open the door of her dilapidated house with drawn curtains and broken garage windows. With some persistence the CIT unit learned that by passing notes into her mail slot that the elderly and frightened woman would respond with long letters and notes. This form of communication helped CIT officers understand more about her life and her anxieties. Despite the apparent meagre state of her current situation, this crisis subject was a highly educated woman who had owned her own business at one point and appeared to have been highly successful. However, a set of traumatic and stressful personal circumstances may possibly have contributed to her extreme anxiety about leaving her house and as years progressed her life deteriorated. She was very paranoid about ‘organized crime’ and Covid-19. Her house had been burglarized and all her bank accounts had been frozen due to identity theft, and she had not access to funds because her fear was so great that she could not even open her front door to speak with anyone, let alone go to the bank to resolve her financial situation.

Over several months the CIT Unit worked towards building her trust and advocating for her with Adult Protective Services. Several months of ‘note passing’, filing reports on her behalf, and visits to her doorstep by CIT resulted in her finally opening the door, smiling and waving. It was a heartwarming moment for those involved as this frail woman opened the door and greeted the officers although her voice was to weak to speak after years of not talking. She was clearly such a kind and appreciative person, who could have easily withered away in her home without food or care. She finally accepted some assistance that were agreeable to her terms from appropriate agencies. She continues to receive assistance from Meals on Wheels and representatives from Adult Protective Services who are aware of her complex and sensitive issues.

Case 3 – Suicidal Subjects with Access to Firearms: CIT Unit Seizes Firearms from Prohibited Subjects

The CIT Unit was contacted by Hospital personnel regarding a subject who was admitted for a mental health hospitalization and who had reported to staff that she had “a safe full of rifles” in their home. A record check determined that this subject and a relative both were Prohibited Persons. With great concern for public safety and the future safety of these subjects, the CIT Unit obtained permission to search for and seize the significant cache of firearms, which they booked as property for safekeeping as the residents of this location were both prohibited subjects who should not have access to firearms based on their mental health histories.
Case 4 – Violent Crisis Subject Demonstrating Suicide By Cop Warning Behaviors
CIT conducts Threat Assessment and prioritizes Information Sharing

The CIT Unit was notified regarding a highly volatile subject, allegedly proficient in mixed martial arts, whose violent and threatening behaviors in a public resulted in a Hostage Negotiations Callout. During this tense crisis negotiations this subject clearly demonstrated some type of mental disturbance and repeatedly engaged in Suicide By Cop warning behaviors, such as "counting down " and attempting to bait cops into a force response by making threats and attempting to provoke a violent encounter. The Crisis Specialists from DPH also worked with the CIT Unit during this incident to learn more about this subject's history and possible 'triggers' for this violent episode. After the subject was detained and arrested during this incident, he was later released and instantly began to terrorize other locales and reportedly was seen at shopping center brandishing a sword. The subject also later stated he was going to the Taraval Station in San Francisco to “kill cops” and was last seen riding a motorcycle with no helmet, carrying a samurai-style sword. The CIT Unit prepared a Threat Assessment and prepared a multi-agency alert regarding this dangerous subject who was potential Suicide by Cop subject and also had an active felony warrant out of county for weapons violations. Based on high profile information disseminated by CIT, other agencies were aware of this dangerous subject, and he was taken into custody with no incident.

Case 5 -- Disturbed Juvenile on Pathway to Violence:
CIT Threat Assessment & Crisis Engagement

The Crisis Intervention Team was notified by regarding a disturbed juvenile subject who had caused concern at his local school by demonstrating behavioral issues. The subject had a significant mental health history and was garnering extreme negative attention at school based on provocative social media posts and rumors. The CIT Unit conducted a Threat Assessment of the individual and also brought Crisis Specialists from Comprehensive Crisis to meet with the troubled juvenile and parent. Together CIT and CCS established a safety plan and implemented a way to connect the subject with resources as needed. CIT has been a resource for educational institutions regarding subjects who may present a public safety concern requiring consideration and engagement.
CRISIS INTERVENTION TEAM 2021:
A DEDICATION TO THE LEGACY OF OTHERS’ SACRIFICE

The San Francisco Police Department Crisis Intervention Team aspires to rise to the complex needs and challenges of the communities we serve and protect. Our work is forged by the invaluable efforts of Law Enforcement personnel who serve San Francisco with integrity, honor, and selfless commitment. While San Francisco Police Officers have shouldered the unique burdens of this year with courage and resilience, this Crisis Intervention End of Year Report is further dedicated to the 458 Law Enforcement Officers nationwide who died in the Line of Duty throughout 2021.

It is important to recognize that 2021 represents a very sobering milestone, as last year closed out as the deadliest year in nearly a century for active law enforcement personnel. According to a preliminary report from the National Law Enforcement Memorial and Museum, a total of 458 local, state, tribal and federal officers died in the line of duty in 2021. This report also cited preliminary data indicating that 301 officer fatalities may have been caused be COVID-19, which was the leading cause of death for the second consecutive year. This staggering number is a sharp 55% increase from 2020’s total of 295 deaths. As a result, this total of in the line of duty deaths is the highest tally since the year 1930, when there were 312 reported fatalities. 2021’s stark statistics show that America’s first responder Law Enforcement Officers continue to bravely battle on the frontline of the Covid-19 pandemic.

It is also chilling to note that these high numbers are also driven by willful acts of violence towards officers. According to preliminary year-end data provided by the FBI, 2021 also saw the highest number of law enforcement officers who were intentionally killed in the line of duty since the 9/11 terrorist attacks of Sept. 11, 2001. This disturbing increase mirrors the rise in gun-related violence and homicides nationwide. A total of 73 officers died in felonious killings in the line of duty in 2021.

The entire Crisis Intervention Team wishes to acknowledge these fallen officers. Their enormous sacrifice for the communities they served is a deeply profound legacy that forges our values and commitment with even greater purpose.

SFPD Officer Memorial Wall, San Francisco Police Headquarters, 1245 Third Street, San Francisco
Commemorating the 103 San Francisco Police Officers who have died in the Line of Duty
SAN FRANCISCO POLICE DEPARTMENT  
CRISIS INTERVENTION TEAM (CIT)

The Crisis Intervention Team is supervised by Lieutenant Mario Molina and consists of a CIT Field Unit and a CIT Training Unit. The CIT Unit is part of the Field Operations Bureau and is overseen by Commander Rachel Moran (Golden Gate Division) and Deputy Chief David Lazar of Field Operations Bureau.

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