

**MEMORANDUM OF UNDERSTANDING  
BETWEEN COUNTY OF YOLO AND  
YOLO COUNTY LAW ENFORCEMENT AGENCIES**

This Memorandum of Understanding ("Agreement") is made on 8/27/18 between the COUNTY of Yolo, a political subdivision of the State of California ("COUNTY"), for the benefit of and behalf of the Yolo County Health and Human Services Agency (HHSA), and Yolo County LAW Enforcement Agencies ('LAW'): City of Davis Police Department, City of West Sacramento Police Department, City of Winters Police Department, City of Woodland Police Department, UC Davis Police Department, Yolo County Sheriff's Office regarding: policy for Detention and/or Transportation Decisions of behavioral health persons.

- I. Section 5150 of the California Welfare and Institutions Code authorizes peace officers to take custody of "mentally disordered persons" and to bring them to certain designated facilities to be evaluated for involuntary treatment.

Frequently, these persons present with obvious medical conditions which must be assessed. Any acute care hospital which operates with an emergency department is authorized by its license to provide medical evaluation, treatment and/or clearance.

It is the policy of LAW that persons placed under "5150" detention and who need immediate medical treatment, will be transported by LAW or ambulance to the nearest Acute Care Hospital, Emergency Department for medical evaluation/stabilization. COUNTY ambulance protocols will be followed.

LAW may also use ambulances to transport non-violent persons who have been placed on a "5150" to the nearest Acute Care Hospital, Emergency Department for medical evaluation/treatment.

- II. It shall be the policy of LAW that officers will either trail the ambulance or transport via law enforcement vehicle, individuals who are being taken to an Acute Care Hospital, Emergency Department. Officers will ensure that the individual is free of weapons or devices that may cause harm prior to transport of any kind and will communicate all pertinent information regarding the circumstances of the incident. A "5150" form written in **INK** will be provided to the receiving Acute Care Hospital, Emergency Department.
- III. LAW agree to have the escorting officer(s) remain in attendance at the treatment facility as follows:

For **ADULTS** being taken to an Acute Care Hospital, Emergency Department, officers should remain long enough for the facility to establish safe physical control of the individual. Safe physical control is defined as an individual being placed in appropriate restraints or medicated sufficiently to control behavior. The maximum time for this transfer should be 20 minutes unless extenuating or extraordinary circumstances exist.

For **MINORS** being taken to an Acute Care Hospital, Emergency Department, officers should remain until a parent/guardian takes custody and long enough for the facility to establish safe physical control of the minor as described above. An officer shall be

relieved of responsibility for the care and custody of the minor when a parent/guardian takes custody or the minor is in protective custody or is on a 5150 hold.

- IV. In the field, if LAW or other first responders (FR) determine an individual is in need of assistance, but does not meet the criteria for a 5150 hold, the following options are available:
  - a. LAW and/or FR may contact mobile crisis at (888) 965-6647 to request a voluntary evaluation of the individual.
  - b. During the hours of 12pm to 9pm daily (except on County-observed holidays) LAW may, with the individual's consent, transport, or request mobile crisis staff transport, the individual to HHSA's First Responders' Mental Health Urgent Care location for an evaluation alternative to a hospital Emergency Department.
- V. In the event that the policy and procedures outlined in this Agreement are not followed, designated representatives (e.g. LAW on duty Watch Commander or Acute Care Hospital Emergency Department Chief) will be contacted, for problem-solving/resolution of individual episodes.

**IN WITNESS WHEREOF**, the parties hereto have executed this Agreement on the date first written above by affixing their signatures hereafter.

COUNTY:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name: Karen Larsen

Title: Director, Health & Human Services Agency

Approved as to Form:

Philip J. Pogledich

Yolo County Counsel

By:  \_\_\_\_\_

Carrie Scarlata

Asst. County Counsel

YOLO COUNTY LAW ENFORCEMENT AGENCIES:

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title:

Agency: City of Davis, Police Department

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title:

Agency: City of West Sacramento, Police Department

Signature: John P. Miller Date: 8/27/18

Name & Title: JOHN P. MILLER, CHIEF OF POLICE

Agency: City of Winters, Police Department

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title:

Agency: City of Woodland, Police Department

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title:

Agency: UC Davis Police Department

Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Name & Title:

Agency: Yolo County Sheriff's Office