CLOSED CASE SUMMARY



ISSUED DATE: SEPTEMBER 10, 2024

FROM: DEPUTY DIRECTOR BONNIE GLENN ON BEHALF OF DIRECTOR GINO BETTS, JR.

OFFICE OF POLICE ACCOUNTABILITY

CASE NUMBER: 2024OPA-0137

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Allegations of Misconduct & Director's Findings

Named Employee #1

Allegation(s):		Director's Findings
# 1	16.110 – Crisis Intervention, 16.110-PRO-1. Referring a Subject	Not Sustained - Lawful and Proper
	for an Involuntary Behavioral Health Evaluation	(Expedited)

This Closed Case Summary (CCS) represents the opinion of the OPA Director regarding the misconduct alleged and therefore sections are written in the first person.

EXECUTIVE SUMMARY:

Named Employee #1 (NE#1) responded to an assault call and detained the Complainant under the Involuntary Treatment Act (ITA).¹ The Complainant alleged that he was unlawfully detained under the ITA.

ADMINISTRATIVE NOTE:

This case was approved for Expedited Investigation. That means OPA, with the Office of Inspector General's (OIG) agreement, believed it could issue a recommended finding based solely on its intake investigation without interviewing the named employee. As such, OPA did not interview the named employee in this case.

On April 17, 2024, OIG certified OPA's investigation as thorough, timely, and objective.

SUMMARY OF INVESTIGATION:

On March 14, 2024, the Complainant called OPA, alleging that an officer unlawfully detained him.

OPA investigated the complaint, reviewing the computer-aided dispatch (CAD) call report, body-worn video (BWV), and police report. The Complainant did not respond to OPA's multiple requests for an interview.

On March 1, 2024, at 12:26 PM, CAD call remarks noted, "30 [YEAR OLD] BRO[THER] ASSAULTED [REPORTING PARTY'S] 70 [YEAR OLD] FATHER, UNK[NOWN] HOW. [REPORTING PARTY] LOCKED HIS BRO[THER] IN THE ROOM. NO [WEAPONS]. FATHER IS CRYING BUT NOT INJ[URE]D. BRO[THER] IS MENTALLY ILL, UNK[NOWN] DIAGNOSIS."

BWV captured the following:

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¹ The ITA permits an officer to take into custody and deliver a person to a facility when the officer reasonably believes that such person is suffering from a behavioral health disorder and presents an imminent likelihood of serious harm or is in imminent danger because of being gravely disabled. *See* RCW 71.05.153(2).

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NE#1 and Witness Officer #1 (WO#1)—NE#1's partner—responded to an apartment.² NE#1 knocked on the apartment door and told the occupants to stop arguing. Community Member #1 (CM#1)—the Complainant's father—appeared around the corner, told the officers that the Complainant pushed him, and led them to the apartment's rear entrance. Officers entered, and WO#1 told the Complainant that they knew each other. NE#1 was familiar with the family and the location from prior contacts. The Complainant denied doing anything and claimed he was hit. The officers handcuffed the Complainant and escorted him to their patrol vehicle. WO#1 Mirandized the Complainant in the rear of their patrol vehicle.

The officers approached Community Member #2 (CM#2)—the Complainant's brother—in the parking lot and interviewed him. CM#2 requested officers to take the Complainant away due to his behavior. CM#2 said the Complainant pushed CM#1 to create space, not to assault him. NE#1 approached CM#1 and interviewed him. CM#1 said the Complainant was "mental health sick," aggressive, and yelled at people as if he were looking for a fight. CM#1 said he was pushed, not assaulted, due to the Complainant's mental health condition. CM#1 said the Complainant's mental health condition was deteriorating and expressed concern about him being a danger to others. CM#1 said that the Complainant has beliefs that people are trying to kill him and has spoken with mental health professionals about getting him help. NE#1 determined the Complainant was a danger to others, as he was in a manic episode, and it was reported that he was looking to fight others around the apartment building. NE#1 said he would send the Complainant to a hospital for a mental health evaluation, which CM#1 supported.

The officers screened the incident with a sergeant on the phone, and the sergeant approved the ITA detention. American Medical Response services arrived and transported the Complainant to the hospital.

NE#1's police report was consistent with BWV observations.

ANALYSIS AND CONCLUSIONS:

Named Employee #1 – Allegation #1 16.110 – Crisis Intervention, 16.110-PRO-1. Referring a Subject for an Involuntary Behavioral Health Evaluation

The Complainant alleged that he was unlawfully detained under the ITA.

When referring a subject for an involuntary behavioral health evaluation, an officer must determine that the subject may be eligible for evaluation, determine that the subject meets the involuntary behavioral health evaluation criteria pursuant to RCW 71.05.153(2), and screen the incident with a sergeant. SPD Policy 16.110-PRO-1. The sergeant must review the incident and advise the officer whether to order the evaluation. *Id.*

Here, NE#1 interviewed CM#1 and CM#2, who both expressed concern about the Complainant's behavior. CM#1 described the Complainant's push as stemming from his mental health condition. CM#1 also said the Complainant was aggressive and a danger to others since he appeared to instigate a fight with them. CM#1 supported NE#1's decision to detain the Complainant under the ITA. Moreover, NE#1's prior contacts with this family informed NE#1's

² NE#1's police report noted that NE#1 was "very familiar" with the family members living in this apartment.

³ According to NE#1's police report, NE#1 observed no injuries on CM#1.

⁴ NE#1's police report noted, "I believed that [the Complainant] met ITA criteria: danger to others."



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decision to execute an ITA detention.⁵ NE#1 screened the incident with a sergeant, who approved the ITA detention. Overall, a preponderance of the evidence supports NE#1's decision to lawfully detain the Complainant under the ITA.

Accordingly, OPA recommends this allegation be Not Sustained – Lawful and Proper (Expedited).

Recommended Finding: Not Sustained - Lawful and Proper (Expedited)

⁵ OPA found over 90 prior SPD contacts involving the Complainant—many of which resulted in a behavioral crisis report.