

Proposed Recommendations of the SB 882 Advisory Council

Guiding Principles

(not yet adopted)

The California Legislature and local policymakers have a critical opportunity to strengthen and expand coordinated systems of care for individuals with mental health conditions and intellectual and developmental disabilities—including individuals experiencing crises. By building upon existing frameworks and championing the following priorities, lawmakers can deliver lasting benefits to Californians, improve public safety, and ensure the state leads the nation in compassionate, effective care. The following priorities will be essential to realizing these outcomes:

- **Prioritize person-centered planning** so individuals receive care tailored to their unique needs.
- **Consider the needs of people with multiple disabilities** in care systems and policy planning.
- **Ensure access to lifelong services** to reduce gaps that lead to instability and crisis.
- **Improve coordination across agencies** to ensure individuals consistently receive the right services at the right time.
- **Encourage innovative resources** that address complex needs and improve service delivery.
- **Engage research and program evaluation** in an ongoing way to ensure resources are used on the interventions that have the most helpful impacts for the community.
- **Reduce reliance on peace officers to intervene in crises** to improve outcomes and promote safety for individuals and communities.

By investing in these improvements, legislators will drive a more responsive, equitable, and effective system of care—one that delivers measurable health outcomes, strengthens families, enhances public safety, and reduces costly emergency interventions. These actions will demonstrate legislative leadership, fiscal responsibility, and a commitment to the well-being of all Californians.

Proposed Promising Practices

The following, while not formal recommendations, are promising practices and ideas for lawmakers, law enforcement agencies, POST, and trainers to consider to increase the efficacy of peace officer trainings on interacting with the SB 882 population and the delivery of services to the SB 882 population.

Crisis Response Models and Other Systems Interventions

- 1 Law enforcement agencies should collaborate with community/non-law enforcement entities to allow for more natural, regular, non-emergency interactions between community members and peace officers. Examples:
 - Host community events with peace officers present to build trust, reduce fear, and allow families to practice positive interactions in a safe environment. For example, agencies can invite members of the SB 882 community to visit police stations and chat with peace officers (e.g., “Meet the Police” days, sensory-friendly safety fairs) or have officers visit community members at various locations such as day programs, regional centers, or regional center vendors.
 - Organize community events where natural conversations can occur, such as at a community park, and encourage officers and individuals to do activities together (such as assigning buddies and playing games together).
 - Establish a working group of stakeholders to establish the most appropriate data collection and analysis to measure possible effects of increased collaboration on interactions between law enforcement and the SB 882 community.
- 2 Law enforcement agencies should create programs or focus existing community outreach programs on community members in the SB 882 population to encourage more natural, regular, non-emergency interactions.
- 3 Foster law enforcement awareness of/connection with regional centers and county departments of behavioral health. Establish and maintain a library of sample memoranda of understanding between law enforcement, regional centers, and county departments of behavioral health.
- 4 Consider adopting a Blue Envelope system or lanyard system (a voluntary system where people with IDD can self-identify so officers are aware of an individual’s status). Then translate the system materials to common community languages.
 - Establish a working group of stakeholders to establish the most appropriate data collection, analysis, and reporting requirements for adopting a Blue Envelope (or similar) system.
 - Include a research/analysis component of data collection and reporting to determine potential effects of a Blue Envelope (or similar) system. Research team members should have experience in and an understanding of the

complexities of establishing benchmarks across diverse populations and locations.

Training

- 5 Consider including complete disengagement as an option for decision-making in law enforcement trainings. Study agencies that have adopted complete disengagement policies, such as the San Francisco Police Department, which has protocols for disengaging from a barricaded/isolated individual.¹
- 6 Encourage trainings that cover culture and local history of interactions and how those can lead to escalation. For example, invite peace officers to share information on family members who are in the SB 882 Population in order to build trust and understanding among officers.
- 7 Develop field-ready resources and make them accessible via QR codes, mobile apps, and patrol vehicle desktops. For example, this could include: (1) training bulletins on black letter law; (2) best practices for different situations; (3) if/then guides; and (4) relevant protocols.
- 8 Create a centralized training hub/library.
 - Target audiences: law enforcement, medical professionals, non-profits, facilities such as group homes and Regional Center vendors.
 - Library to include: trainings, recommendations, and sample policy language agencies can access.
 - Access: include mobile training units that can be “checked out,” especially for smaller and rural agencies.
- 9 Encourage all agencies to learn how to maximize the POST training portal for standardized access.
- 10 Suggest POST continue to review third-party trainings/products and link any updated trainings to the POST training portal where appropriate.
- 11 Introduce micro-learning at briefings: integrate short video reviews (e.g., YouTube body-cam footage) to discuss real scenarios, what went well, and what could be improved. (For example, third-party videos, scenes on the news through third-party sources, in-house videos, or other agencies’ incidents of community concern, and other agencies’ posting of events.)

¹ See San Francisco Police Department General Order 5.24: Disengagement Procedures, available at https://www.sanfranciscopolice.org/sites/default/files/2023-06/SFPDDGO_5_24_20230606.pdf.

- 12 Provide self-paced, interactive training modules featuring scenario-based decision trees, accessible through a secure online portal. Officers can complete these modules asynchronously, making it convenient for rural departments and those with varying schedules. To keep engagement high, the training should include realistic decision-tree scenarios where officers make choices and receive immediate feedback on outcomes. These branching pathways adapt to responses—providing additional resources for incorrect choices and unlocking advanced content for correct ones. Combined with interactive quizzes and knowledge checks, this approach ensures officers are actively engaged while reinforcing best practices through real-world decision-making. Consider hosting these on the POST portal for easy access.
- 13 Leverage technology, including simulation technology.
 - Expand Virtual Reality (VR) Training. VR training provides immersive, scenario-based experiences that enhance decision-making, de-escalation skills, situational awareness, and knowledge retention . Early research and pilot programs demonstrate improved engagement and knowledge retention among officers, particularly in high-stress or complex scenarios.
 - Expand the use of virtual reality. Encourage/explore use of virtual reality to enhance training (e.g., goggles or participation in a video game simulated setting). Develop statewide mobile training units available to smaller agencies, and bodycam-based platforms like Pro-Forma to simulate real-world encounters involving the SB 882 population.

Adopted Recommendations

Crisis Response Models and Other Systems

- 14** Investigate and identify data-driven strategies to help address workforce shortages among law enforcement agencies, regional centers, and county departments of behavioral health, and their vendors. Invest in creating educational, licensure, and recruitment pathways to becoming a behavioral health crisis responder. For example, loan repayment, scholarship, and internship programs developed through the California Department of Health Care Access and Information for students and graduates working in health and behavioral health professions.
- 15²** Require IDD-competent behavioral health treatment capacity in all new Proposition 1 (2024) (Prop 1) and Behavioral Health Continuum Infrastructure Program (BHCIP) funded facilities. California should require that all behavioral health treatment facilities funded under Prop 1 and the BHCIP, which together represent a historic \$13 billion state investment, demonstrate the ability to serve individuals with IDD who have co-occurring behavioral health needs. Prop 1 and BHCIP are projected to create at least 6,800–11,150 new residential treatment beds statewide, marking the largest expansion of behavioral health capacity in California’s history. To ensure these investments are equitable and accessible, the State should establish IDD-competent treatment standards for all grantees and licensed operators. These standards should require facilities to:
- Accept individuals with co-occurring Autism/IDD and mental health conditions and prohibit exclusion based solely on disability, consistent with federal and state civil rights laws.
 - Demonstrate operational capacity to serve individuals with Autism/IDD, including staff trained in communication supports, sensory aware crisis response, positive behavioral strategies, and de-escalation techniques.
 - Incorporate physical and environmental design features that support sensory regulation and behavioral stabilization.
 - Coordinate with Regional Centers, county behavioral health departments, and other disability-serving entities to ensure continuity of care.
 - Embed IDD-competent requirements directly into funding agreements, licensing conditions, and California Department of Health Care Services (DHCS) operational standards, ensuring California’s behavioral health expansion—funded through Prop 1 and strengthened by BHCIP—finally includes individuals with Autism and IDD, who have historically been among the most frequently excluded from crisis, inpatient, and residential care.

² Note highlighted numbers indicate approved recommendations that may need clerical or substantive amendments. The language in this document is the proposed new language.

- 16 Implement the Manny Alert Act per the recommendations of the November 2020 Manny Alert Act (AB 911) Feasibility Study of a Self-Registration Database for 911 Calls Final Report, including a funded voluntary statewide registry that is made available for real-time access to all Public Safety Answering Points (PSAP), Computer Aided Dispatch Systems (CAD), and field first responders.
- Fund and require local law enforcement agencies and 911 dispatchers to utilize wireless emergency alerts to notify the public to be on the lookout for missing persons with IDD (including notice to check pools and bodies of water, or freeways). Such funding could come from a modest increase in the Emergency Telephone Users Surcharge from the State Emergency Telephone Number Account (SETNA) for wireless phone plans.
 - Ensure CAD reports that are distributed to the public, including researchers, appropriately differentiate officer-initiated interactions with members of the SB 882 population from dispatched calls for service.
- 17 Consider the following funding streams to support these recommendations:
- Priorities or special grants for smaller departments especially in rural areas, including opportunities for joint regional trainings;
 - An increase in the SETNA surcharge for wireless phone plans;
 - Proposition 63/Mental Health Services Act funds.

Training

- 18 Provide special grants for each county to operate 24/7 mental health crisis teams to respond to non-crime related 911 and 988 calls.
- Require IDD training for these county mental health crisis teams.
 - Require IDD as a topic in Medi-Cal Mobile Crisis Training and Technical Assistance Center (M-TAC) required core trainings.
- 19 Provide a one-time allocation to the California Department of Developmental Services to fund regional centers that do not yet have one to develop an ongoing service that provides safety training for individuals and direct support professionals specific to interacting with peace officers and emergency services (including local law enforcement agencies where possible). These skills may include: wandering prevention, emergency response, seeking help, and communication tools for high-stress situations. The Department of Developmental Services should develop guidance to regional centers about which billing codes to use for these services for uniform reporting.
- 20 Develop legislation requiring the California Department of Education as the lead agency to develop a statewide, evidence-informed safety curriculum—requesting

collaboration from the California-based University Centers for Excellence in Developmental Disabilities Education, Research, and Service; Regional Centers; Special Education Local Plan Areas; disability advocacy organizations/self-advocates; communication/behavior experts; POST; and law enforcement agencies—to support special educators in teaching functional safety skills through developmentally appropriate communication.

- These skills may include wandering prevention, emergency response, seeking help, and communication tools for high-stress situations.
- The curriculum should be voluntary, rights-affirming, culturally responsive, and accessible for students with diverse disabilities.
- The curriculum should encourage the engagement of school resource officers or local peace officers where feasible.
- Once developed, the California Department of Education and Special Education Local Plan Areas should disseminate the curriculum and professional development statewide.
- The legislation should require Individual Education Program teams to discuss the availability of support, resources, and information on how to interact with peace officers and how to address wandering/eloping.

Recommendations for Further Consideration

Data

- 21 Identify a mechanism to assess the efficacy of any new ideas or programs using research. As the current Council disbands in April 2026, it recommends that the Legislature create some structure or position to perform ongoing assessment of program success. Program success includes studying whether training for peace officers related to interactions with the SB 882 population is effective in improving the population's experience in those interactions, and studying any other interventions recommended above.

This structure or position should include adequate funding for ongoing staffing and expense requirements and a clear plan for who is responsible for gathering and analyzing data and reporting results. The Council recommends this structure or position be housed in a state agency or university (e.g., Department of Justice, Department of Health Care Services/Department of Public Health).³

- This structure/position can oversee pilot projects for future mandated requirements, have researchers assess the efficacy of the pilot project, and make decisions about whether to institute the project more broadly (statewide, or otherwise) based on the results of that research. Alternative project development models may prove equally cost effective, however, so the Council recommends an individual assessment for each program.
- Pilot or other research projects should include a working group of stakeholders to establish the most appropriate data collection, analysis, and reporting requirements. Working groups should be tailored to each project so that the right collection of expertise is brought to bear on each issue.
- Data collection plans should be tested in challenging real-world conditions to identify potential failure points or unintended consequences.

Pilot projects should include a research/analysis component of the data collection and reporting to determine potential effects including unintended consequences of the pilot. Research team members should have experience in and an understanding of the complexities with establishing benchmarks across diverse populations and locations.

The Council recommends that the Legislature fund research, to be overseen by this structure/position, including but not limited to the following areas:

³ For example, one successful model exists in the Ohio Criminal Justice Coordinating Center of Excellence, which is funded by the Ohio Department of Mental Health and Addiction Services and is housed in Northeast Ohio Medical University. This Center of Excellence has been able to coordinate learning statewide, and issues regular reports on implementation and evolution of CIT programs throughout the state. Northeast Ohio Medical University, *Coordinating Centers of Excellence*, <https://www.neomed.edu/cjccoe/about/>.

- Study response models that have been implemented by agencies that triage calls. For example, in the Sacramento County Sheriff's Department response model, dispatchers determine which calls require a law enforcement response and which ones require a service-provider response (e.g., mental health provider) instead of law enforcement. A dispatcher determines, for example, whether to call fire department, California Highway Patrol, local government (e.g., traffic light not working), mental health providers, etc.
 - Study training options for decision-making that includes complete disengagement, and study law enforcement agencies that have implemented such policies (see Proposed Promising Practice 5).
 - Study efficacy of community training programs and community outreach activities (see Proposed Promising Practice 1 and Recommendation for Future Consideration 30).
- 22 Identify a central repository for data about these interactions, more likely in a public health-related agency as opposed to the California Department of Justice. This repository may be connected to the structure/position for ongoing research described above.
- 23 Require the California Department of Justice report annually on cases reviewed pursuant to AB 1506 (officer-involved shootings that result in death of an unarmed civilian) involving a person with IDD or a mental health condition.
- 24 Fund ongoing research into the following priority markers of success to ensure that the goal of any proposed change in policy, training, or practices is measurable:
- Reduction in use of force in law enforcement encounters with SB 882 population
 - Evaluate annual Racial and Identity Profiling Act of 2015 data to ensure the SB 882 population is included.
 - Require agencies to collect perceived or reported SB 882 population encounters in their use of force reporting practices.
 - Include a research/analysis component of the data collection and reporting to determine potential correlation or causation on uses of force following any changes from training, policy, or practices. Research team members should have experience in and an understanding of the complexities of establishing benchmarks across diverse populations and locations.
 - Increase in referrals to supportive services resulting from interactions with law enforcement agencies.
 - Establish a working group of stakeholders to establish the most appropriate data collection methods and reporting requirements. This may be best explored through independent research in the community about experiences with law enforcement.

- Include a research/analysis component of the data collection and reporting to determine potential effects of referrals. Research team members should have experience in and an understanding of the available services in the region and the complexities of establishing benchmarks across diverse populations and locations.
- Building trust and relationships between law enforcement and the SB 882 population, and improving knowledge among the SB 882 population, and their family members and providers, about interventions available that are alternatives to law enforcement response.
 - Establish a working group of stakeholders to establish the most appropriate data collection and analysis in measuring trust to predetermine knowledge within the SB 882 population and identify gaps. This may be best explored through independent research in the community about prevalence of this knowledge.
 - Include a research/analysis component of the data collection and reporting to determine potential effects of the changes that may affect trust between law enforcement and the SB 882 population. Research team members should have experience in and an understanding of the complexities with establishing benchmarks across diverse populations and locations.

- 25 Engage researchers to assess whether the current data collection system is accurate or whether an alternate would improve data quality. The Council has concerns regarding whether the data about officer perception that someone has a disability is accurate. Obtaining accurate data is a crucial baseline to measure markers of success as described above.

Since officers often manage multiple tasks, data collection plans should be tested in challenging real-world conditions to identify potential failure points or unintended consequences.

Crisis Response Models and Other Systems Interventions

- 26 Encourage inclusion of people with mental health conditions and IDD on civilian oversight boards regarding use of force.
- 27 Systemically integrate calls for service with Computer-Aided Dispatch (CAD) for officer-initiated stops so that law enforcement is aware whether a given interaction was initiated by a family member who has called for help for a relative or whether an officer comes across the scene by other means. *[Pending further discussion: Member Brazier reports the two are already distinguished in reporting.]*

Training

- 28 Ensure that training for peace officers includes the range of the SB 882 population's diagnoses including people with multiple conditions.
- 29 Encourage POST to:
 - Review and strengthen the content of Learning Domains 20 and 37, as well as other courses related to skills that must be refreshed and practiced ("perishable skills"), in consultation with subject matter experts, including, but not limited to, staff with clinical expertise from the Department of Developmental Services, staff with clinical expertise in serving the SB 882 population from the Department of Health Care Services, organizations with expertise in the SB 882 populations, and people with lived experience as a person in the SB 882 population or a family member or caregiver of such a person. Review required hours of training related to Learning Domains 20 and 37 and adjust as necessary to meet the review findings.
 - Review and integrate IDD and mental health conditions across learning domains where appropriate with special attention given to de-escalation training. Review and incorporate IDD and mental health-specific scenarios and considerations into POST learning domains, emphasizing time, distance, and family involvement. Additionally, embed information and strategies for differentiating causation of certain behaviors requiring law enforcement response, and how different causations may impact intervention strategy, where helpful and appropriate. Trainings should include how to identify potential physical or mental conditions.
 - Train for different settings with potentially different responses, e.g., if call for service (CFS) is at a residence as opposed to in the street. Responses may be different.
 - Review minimum requirements for POST-certified trainers who provide courses in Learning Domains 20 and 37 as well as perishable skills related to the SB 882 population, in particular people with IDD. For example, the Legislature could provide the California Department of Developmental Services and/or DHCS/California Mental Health Services Authority (Cal MHSA) an annual allocation to provide train-the-trainer courses for POST-certified trainers related to IDD and law enforcement. Such an allocation to Department of Developmental Services and/or DHCS/ Cal MHSA should include one full-time staff and funds for limited-term, intermittent consultants to serve as co-trainers/panelists to provide a lived-experience component.
 - Set a minimum number of hours for perishable skills training related to the SB 882 population for officers.
 - Ensure law enforcement personnel are familiar with potential behaviors regarding "wandering"/lost adults and children who are members of the SB 882 population. POST should be encouraged to include "wandering" behaviors

across learning domains that involve or could potentially involve the response to and investigation of missing persons.

- Review and ensure appropriate training for dispatch on handling calls that may involve an individual or caregiver of a person in the SB 882 population or bystander—what to screen for, prompts they can present, criteria for sending out law enforcement and how to code it. This could cover, for example, missing person reports and persons experiencing crises. This guidance should be developed in consultation with subject matter experts, including, but not limited to, staff with clinical expertise from the Department of Developmental Services, staff with clinical expertise from the Department of Health Care Services, organizations with expertise in the SB 882 populations, and people with lived experience as a person in the SB 882 population or a family member or caregiver of such a person.

30 Develop and promote community training programs as the “flip side” of officer training, ensuring that the SB 882 population and their families learn how to respond effectively to stressful law enforcement interactions.

- Ensure training includes lived experiences of people with mental health conditions and IDD.
- Have law enforcement train people in the SB 882 population how to interact with law enforcement. Develop and implement safety trainings for (1) youth/adults in the SB 882 population and their families; and (2) direct support staff specific to interacting with law enforcement and emergency services.
- Key components:
 - Teach how to self-identify (e.g., Blue Envelope or lanyard systems).
 - Explain what to do during a traffic stop or peace officer interaction. Emphasize safety steps, such as not automatically reaching into a wallet—instead, ask the officer when it is safe to move your hands.
 - Offer guidance on managing your own stress signals and staying calm during high-pressure situations.
 - Encourage role-play and scenario-based practice for individuals and families to build confidence.