In the matter of	)	
GABRIEL GAXIOLA	)	
SERGEANT	)	BF NO. 31586
Serial No. 35056	)	CF NO. 22-001392

REHABILITATION AGREEMENT

I, GABRIEL GAXIOLA, Serial No. 35056 hereby admit that I have engaged in misconduct that warrants the imposition of discipline. I understand that after reviewing my personnel complaint, the Board in this Board of Rights is willing to hold my penalty in abeyance while I participate in a rehabilitation program. I also understand that at the successful conclusion of such program, the Board will then determine an appropriate penalty.

I further understand that should I fail to comply with any of the conditions of this Rehabilitation Agreement (this "Agreement"), the Board will immediately impose discipline that could include my termination. I have been apprised of my right to an immediate penalty recommendation and of the reasons for holding the penalty recommendation in abeyance. Additionally, I agree to accept the penalty as determined by the Board upon my successful completion of the terms of this Agreement.

I hereby agree that I will:

1. Involve myself in an alcoholic rehabilitation program advised by the Alcohol and Substance Prevention Unit, resume therapy through Behavioral Sciences Services Section ("BSSS") no later than one week following my signing of this Agreement. Such Program shall in no way limit but expand, the conditions set forth in this Agreement.

2. Enroll in and attend an Alcoholics Anonymous 12-Step Program, attending 90 sessions in 90 days.

3. Upon completion of the program identified in item 2 above, while off-duty attend for the duration of the one year from the date of this Agreement, AA meetings three times each week for the first six months and at least two times each week for the next six months.

4. Involve myself in a post-traumatic stress rehabilitation program as directed by BSSS. Enrollment shall be no later than one week following signing of this Agreement. Such program shall in no way limit, but may expand, the conditions set forth in this Agreement.

5. Maintain records of attendance and provide proof of attendance at the above programs and meetings as well as certification of completion thereof, upon

completion, to my designated supervisor and commanding officer on a quarterly basis no later than two weeks prior to a scheduled appearance before the board of rights. Such records shall be promptly provided to the Board by the Department Advocate.

6. Identify and maintain regular contact with an Alcoholics Anonymous sponsor for one year from the date of this Agreement.

7. Provide proof of contact with an Alcoholics Anonymous sponsor to my designated supervisor and commanding officer on a quarterly basis no later than two weeks prior to a scheduled appearance before the board of rights. Such proof of contact shall be promptly provided to the Board by the Department Advocate.

8. Abstain from use of any and all alcoholic beverages, regardless the percentage alcohol content, for the period of one year from the date of this Agreement.

9. While off-duty not frequent any establishment, whose primary business is selling alcoholic beverages.

10. Submit to a breath substance test a minimum of twice a month, at random. Officer acknowledges and agrees that such testing, as directed by a supervisor, may take place either at work or at home.

11. Submit to a special rating report on my duty performance prior to the scheduled quarterly follow-up telephonic meetings of this Board, set for 9 a.m. April 18, 2024 (1st Qtr), July 25, 2024 (2nd Qtr), and October 24, 2024 (3rd Qtr).

12. The final meeting in-person on January 24, 2025, at 9:00 am. The rating report will provide information on the following:

    a. Timeliness in reporting to work;
    b. Sick days;
    c. Appearance; and
    d. Attitude toward public, peers and supervisors

    A copy of each rating report will be provided to the Employee Assistance Unit and to the Board via the Internal Affairs Group.

13. Participate in any *additional counseling or rehabilitation group* as directed by BSSS or other psychological service from which I have sought counseling. I understand I have to pay a fee for any counseling provided by an outside service.

14. By signing the attached waiver, authorize the release of the results of the counseling program or programs to my commanding officer.

15. Agree to obtain special days off, sick days, or IOD days only through my immediate supervisor or commanding officer.

    A copy of each rating report will be provided to Employee Assistance Unit and to the Board via the Internal Affairs Group.

16. At the Discretion of the Addiction Prevention Unit, participate in roll call training or other training programs concerning alcoholism, prost-traumatic stress disorder and /or anger management.

17. Agree to my command officer submitting a report to the Board of Rights at least once each quarter for one year from the date of this Agreement, via Internal Affairs Group, on my duty performance and adherence to this Agreement. The first such report shall be provided two days before each quarterly review meetings as referenced in paragraph 11, above.

18. At the conclusion of this Agreement, I agree that the Department shall have the right to seek an additional period of monitoring not to exceed two years. I agree to cooperate with whatever extension is proposed, if any.

I understand that the Board of Rights has requested the Chief of Police to direct my commanding officer to monitor my compliance to the conditions of this Agreement and to notify the Department Advocate, Internal Affairs Group, should I fail to comply with any of the above conditions. I further understand that the Advocate will cause the Board of Rights and the Chief of Police to be notified of such failure to comply with any of the above conditions.

Finally, understand that my failure to comply with the conditions of this Rehabilitation Agreement may be deemed by the Board of Rights to be insubordination and will lead to termination from the Department.

SGT 35056 — 1/26/24
Rank GABRIEL GAXIOLA, Serial No. 35056 — Date

Approved as to form: — 1/26/2024
BILL SEKI, Attorney for ACCUSED — Date

ANGELA OH, Board Chair — 1/26/24 Date

JENNIFER LEVINE, Associate Board Member — Date: 1/26/24

PATRICIA STRONG FARGAS, Associate Board Member — Date: 1/26/24

Department Advocate
Lieutenant Javier Sanchez — Date: 1/29/24

Department Associate Advocate
Sergeant Peter Pak — Date: 01-26-2024

WAIVER
CF NO. 22-001392

I, ACCUSED, GABRIEL GAXIOLA, Serial No. 35056, hereby authorize the release of information about the results of my participation in counseling to my commanding officer and the commanding officer of any division to which I may be loaned, pursuant to my participation in a rehabilitation program. I further authorize my designated supervisor, commanding officer, and Behavioral Science Services or other psychological service to retain a copy of my rehabilitation agreement for the purpose of monitoring my compliance with the stated conditions. I hereby waive my right of privacy and confidentiality as to the rehabilitation agreement and the investigation from which it arose for the purpose of assisting me in completing this agreement.

35056 1/26/24

GABRIOLA GAXIOLA , Serial No. 35056 Date

PAC 32478 1/26/24

Witness