

Alternate Response Models





Alternate Response Models

- The practice of sending a Paramedic, Mental Health or Crisis Specialist with or instead of an Officer on non-emergency calls
- Can include mental health, substance addiction, homelessness related, or medical calls
- To connect the client to the most appropriate services, keeping them safe, and out of the justice system
- Can lessen the strain on emergency services
- Reduce return calls for service on same individuals

Alternate Response Programs

- Support Team Assisted Response (STAR)
- Anchorage Safety Patrol and Center
- Crisis Preparation and Recovery (CPR)
- Crisis Assessment and Response to Emergencies (CARE)
- Crisis Assistance Helping Out On The Streets (CAHOOTS)





Support Team Assisted Response (STAR)



- Denver, Colorado
- STAR is being operated by Mental Health Centers of Denver and Denver Health Paramedics in partnership with Denver's 911 Dispatch Center and Police Department
- Six-month pilot program funded by a voter approved grant of \$208,141



Support Team Assisted Response (STAR)



- Started with a mobile co-response with a Social Worker and Officer
- Now only a Paramedic and Social Worker respond if non-emergency
- Take calls via 911 on substance abuse, mental health crisis or people who just need help connecting to services
- Service provided from 10 a.m. to 6 p.m., Monday through Friday



Anchorage Safety Patrol and Center

- Anchorage, Alaska
- Managed by the Anchorage Health Department
- Includes the Anchorage Safety Patrol and the Anchorage Safety Center (detox)
- Fully funded by tax dollars
- Active patrol or dispatched to those who appear incapacitated by alcohol or drugs in a public place



Anchorage Safety Patrol and Center

- Vans operate 24/7 with Security Officers cross trained as EMT's
- Clients are placed in protective custody for transport
- Intakes to the Safety Center for detox monitoring
- Clients can only stay for 24 hours
- Responds to 1,200-1,800 calls per month
- 800-1,000 monthly intakes to Safety Center
- If combative Police are called



Crisis Preparation and Recovery (CPR)

- Mesa, Arizona
- Police and Fire each have their own program with a licensed clinician assigned
- City staff funded by base budget
- Originally funded by a \$5.2 million grant
- Tiered response depending on the need
- Primarily mental health calls



Crisis Preparation and Recovery (CPR)

- Non-emergency mental health crisis calls handled by the crisis hotline
- Mobile crisis (two Mental Health Crisis Workers) are dispatched if the situation cannot be stabilized by crisis line
- Police and Fire make scene safe then Crisis Response Team (CRT) takes over
- CRT includes a Behavioral Health Technician and a Licensed Mental Health Clinician
- 12-hour shift, runs daily, averages three (3) calls per day
- Follow up transitional care team



Crisis Assessment and Response to Emergencies

- Memphis, Tennessee
- Partnership between Memphis Police, Fire and Alliance Healthcare Services, which operates a crisis assessment center
- Alliance Health Care is full service Behavioral Health provider





Crisis Assessment and Response to Emergencies

- Crisis trained Officer, Paramedic, and Social Worker
- 80% of the calls they handle without ambulance transport or jail entry
- Focus on behavioral health emergencies
- Responds from 7 a.m. to 10 p.m., Monday through Friday



CAHOOTS



Crisis Assistance Helping Out On The Streets

- Eugene, Oregon
- Run by White Bird Clinic (non-profit)
- Contracted by the Cities of Eugene and Springfield
- Operating budget \$2.1 million annually





CAHOOTS



Crisis Assistance Helping Out On The Streets

- Responds 24/7, 911 dispatch
- Calls that are related to addiction, mental health crisis, homelessness, and non-emergent medical issues
- Mental Health Crisis worker and a Paramedic
- 17-20% of Eugene calls (2018)
- Responded to 24,000 behavioral health calls in 2019
- Estimated savings to Police and Medical was \$8.5 million
- Responds to calls that don't pose a danger to others

Best-practices for Flagstaff

- White Bird Clinic
- Native American Connections
- Friendship House

Transitional and Long-
Term





White Bird Clinic/CAHOOTS

- Federally qualified Health Clinic
- Opened in 1969 as a grassroots free clinic organized by student activists and concerned practitioners
- A medical clinic, 24-hour crisis service, counseling, outpatient drug and alcohol treatment, a human services information and referral center, homeless case management, CAHOOTS mobile crisis intervention, dental clinic, benefits enrollment, and mental health outreach in schools



Native American Connections

- Central Phoenix
- 21 sites offering affordable housing, behavioral health, and recovery assistance
- Native American Healing
- Residential and outpatient services
- Counseling and case management
- Youth services
- No mobile response



Friendship House

- Oldest social service organization in the U. S. run by and for Native Americans
- Clients in an 80-bed residential facility in San Francisco for up to 6 months
- They are immersed in both traditional cultural practices and Western approaches for substance recovery and prevention
- Over the last 50 years, helped more than 4,800 residential clients overcome substance abuse
- 90% of clients were sober 6 months later
- “These are not simply ‘clients’ – these are our relatives, our relations.”
—*Steve Darden, Traditional Counselor*

Data and Models

- Police and Fire Data
- Police Department
- Fire Department





Data



- FPD: 43,401 total calls for service in 2019
 - 2,491 mental health related calls (6%)
 - 2,828 lowest priority alcohol related calls (7%)
 - These cohorts are likely responsible for 20-30% of our total call load (assaults, disturbances, domestic violence, robberies, etc.)
 - FPD spent 480 hours at hospital with 346 arrestees 2019 cost: \$24,000
- FFD: 14,750 911 calls for service in 2019
 - 2,618 public intoxicant (man down responses) (18%)
 - 383 behavioral health type responses (2.5%)



Police Department



- Utilize crisis line for non-emergency mental health calls
- Utilize Terros response if crisis line is unable to help
- Dispatch Alternate Response Team from Fire
- Create a hybrid Police/Fire team



Fire Department



CART Unit with options (all are 7 days a week)

- 24 hour – FF/EMT & a Social/Behavioral Health (SBH) worker
- 8am-8pm – FF/EMT & SBH worker
- 8am-8pm – FF/EMT, SBH worker & FPD member
- 8am-8pm – FF/EMT & FPD member
- Outsource to a private company to handle these calls



Closing



- An alternative response model for both alcohol and mental health related calls would greatly benefit our citizens and our most vulnerable
- Addressing the substance abuse issue alone would have the greatest impact on Police and Fire calls
- Mental health, homelessness, and poverty all impact our emergency services
- Additional resources post triage (detox center, day shelter, Native based long-term programs and housing) would ensure the success of any alternate response model

Council Questions & Discussion

