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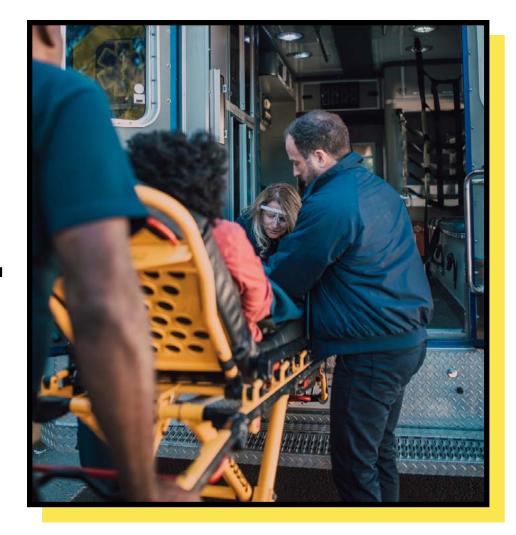
# INTRODUCTION

Prior to the advent of paramedics, police put injured people into squad cars and drove them to the hospital; in some cases, they still do.

Paramedics developed as a profession relatively recently, in the 1970s and 1980s. Now, they are a permanent part of our local government and medical infrastructure. This development over the last fifty years demonstrates what's possible: local governments can establish a new emergency response that provides a better answer to specific emergency calls for service.

Now, another new emergency response is taking root. Localities are establishing community responder programs for the same reason that paramedics took root fifty years ago: police officers are the default response to many calls for service that they are not trained or equipped to handle appropriately, including categories like mental health crises and homelessness. Multiple analyses of 911 call data from different jurisdictions show that the vast majority of calls are not lifethreatening and do not merit an armed law enforcement response.<sup>1</sup>

Multiple analyses of 911 call data from different jurisdictions show that the vast majority of calls are not life-threatening



1. A September 2020 report by Vera, "<u>Understanding Police Enforcement: A Multicity 911 Analysis</u>," found that in five different jurisdictions, "The most frequent incident type was non-criminal in nature. In four of the five sites, the most frequent incident type was some variation of a complaint or request for an officer to perform a welfare check. Across all sites, the most common priority types were nonemergency."

An analysis of the data in Vera's report by the University of Chicago Health Lab in their June 2022 report, "<u>Transform911: A Blueprint for Change</u>," found that "more than 75% of 911 calls for service dispatched to the police are not related to public safety threats that obviously merit a law enforcement response".

In October 2020, the Center for American Progress (CAP) published "The Community Responder Model: How Cities Can Send the Right Responder to Every 911 Call." This report included original analysis conducted by CAP and the Law Enforcement Action Partnership (LEAP) that in "911 police calls for service from eight cities ... 23 to 39 percent of calls were low priority or nonurgent, while only 18 to 34 percent of calls were life-threatening emergencies."

This trend has been exacerbated by <u>disinvestment in public health</u> and human services over multiple decades. In the absence of better upstream strategies, local governments are intervening. Community responder programs can:

- ▶ **Provide a better, more effective response** to several different types of calls for service that are more appropriately met by a social service intervention than a law enforcement intervention.
- ▶ Reduce exposure to armed police, potential use of force, and entanglement with the criminal legal system, thereby reducing harm for, in particular, low-income people and communities of color that are historically overpoliced and overexposed to these dangers.
- ▶ Allow police to focus on responding to, investigating, and solving violent crime and other emergencies that more appropriately call for an armed response by freeing up time previously spent on these calls.
- ▶ Reduce reported crime and thus criminalization in the categories of calls that they respond to.
- ▶ Divert calls from Fire, EMS, and/or emergency rooms; and respond to calls in a more cost-effective manner.

Local governments are taking this step with broad support from the public, with polls and surveys consistently showing that roughly three-quarters of respondents support an alternative, non-police response to mental health calls and for people experiencing homelessness.<sup>2</sup>

As public interest in alternative responses has increased, so too has interest by local elected officials. And, as noted below, several robust resources have been published on this topic in the last two years (see: Historical Context & Recent Research). Rather than replicate that work, it is our intent with this resource to build upon and supplement this alreadyrich literature for our specific audience of local elected officials.

This resource will focus on the unique role that you, as elected leaders, can play in the development and establishment of these programs; the key trade-offs that localities may face in that process; and recommendations for these programs' long-term budgetary and political durability.

As public interest in alternative responses has increased, so too has interest by local elected officials.

2. A 2021-2022 poll from the National Alliance on Mental Illness (NAMI) found that 76% of voters prefer a response led by mental health professionals (as opposed to police officers) when someone is having a mental health or suicide crisis. 64% of voters agreed with the statement, "I would be afraid the police may hurt my loved one or me while responding to a mental health crisis." 86% of voters agreed with the statement, "By building and providing mental health services across the country, we can prevent people from cycling in and out of emergency rooms, arrests, incarceration, and homelessness."

<u>A 2021 poll by Safer Cities</u> found that "73% of voters support creating a new agency of first responders...to reroute some 911 calls away from armed police officers to medical professionals who are better situated to respond to mental health and homelessness related situations than armed police officers."

In a 2020-2021 survey conducted by the City of Minneapolis with over 5,400 responses, 85% of respondents said they believe someone other than the Minneapolis Police Department (MPD) should respond; 79% for mental health crises; 65% for drug use and overdose; and 62% for child abuse and neglect.

In a separate 2020 survey conducted by the City of Minneapolis Office of Performance and Innovation, the staff group responsible for developing the city's Behavioral Health Crisis Response teams, 70% of respondents said they were "not at all comfortable" with a police response to mental health calls. Only 3.5% of respondents preferred that status quo, while over 94% of respondents said they would like a mental health professional or social worker to respond.

This resource is based on the works cited; on the author's own experience working on the development of community responder programs for elected officials in Minneapolis and Brooklyn Center, MN; and on research interviews with the following individuals:

Nikki Fortunato Bas, Oakland City Council President (CA)

Jackson Beck and Jason Tan de Bibiana, Vera Institute of Justice

Rachel Bromberg, International Crisis Response Association

Vanessa Fuentes, Austin City Council Member (TX)

Jo Ann Hardesty, Portland City Commissioner (OR)

**Amos Irwin,** Law Enforcement Action Partnership (LEAP)

**Jillian Johnson, Durham At-Large Council Member (NC)** 

**Anne Larsen,** Council of State Governments (CSG) and former Outreach Services Coordinator in Olympia (WA)

Tony McCright, National League of Cities

**Mariela Ruiz-Angel,** Director, Albuquerque Community Safety Department (NM)

### A note about terminology

Since this is still a relatively new type of emergency response, it has yet to be standardized in form or name. As this guide will discuss, different localities have developed similar (yet often distinct) responses using different terminology to name and describe the same or similar activities that all qualify as non-police emergency responses. Many localities refer to crisis response or intervention; this guide uses the term "community response" and will focus on fully non-police community responder programs (as compared to co-response programs) initiated by local governments.



Caption: Portland Street Response shift members in training before hitting the street. Photo courtesy of Portland Street Response and Dan Hawk Photography.

## HISTORICAL CONTEXT & RECENT RESEARCH

Prior to 2019, the <u>only</u> alternative community response program operating in the United States was <u>CAHOOTS</u> (Crisis Assistance Helping Out On The Streets) in Eugene, OR. CAHOOTS was founded as a formal program in 1989 and is a partnership between the Eugene Police Department and White Bird Clinic. They provide 24/7 mobile crisis intervention in the Eugene-Springfield area by dispatching – via 911 and a non-emergency number – teams consisting of a medic (either a nurse or an Emergency Medical Technician (EMT)) and a crisis worker with experience in the mental health field.

**CAHOOTS** "provides immediate stabilization in case of urgent medical need or psychological crisis, assessment, information, referral, advocacy and (in some cases) transportation to the next step in treatment. Any person who reports a crime in progress, violence, or a life-threatening emergency may receive a response from the police or emergency medical services instead of or in addition to CAHOOTS."

In 2019, Olympia, WA launched their own <u>Crisis Response Unit</u>, and other cities (including Minneapolis, MN, Oakland, CA, and Portland, OR) began the process of exploring and making recommendations for their own alternative response programs.

Following the police murder of George Floyd in Minneapolis on May 25, 2020, <u>hundreds of cities across the country reached out to CAHOOTS</u> for information about their program and <u>dozens of cities</u> have established such programs as part of a broad push to reimagine public safety.<sup>3</sup>



Photo courtesy of CAHOOT Team.

<sup>3.</sup> For example, in October 2021, the National League of Cities' Reimagining Public Safety Task Force published a report, "A Path Toward Safe and Equitable Cities: Recommendations from the NLC Reimagining Public Safety Task Force", and a companion toolkit, which include a recommendation to expand civilian response to emergency and crisis calls. Following that report, in February of this year, 81% of respondents to an NLC member survey said that both Mental Health and Illness, and Substance Abuse and Addiction, were a A Moderate Amount or A Great Deal of concern in their municipality. 29% of respondents said that their municipality had or was considering implementing Alternative/Unarmed Responders.

Due to the rapid, exponential increase in interest in these programs, several reports and resources have been researched and published within the last two years:

### September 2020:

The Justice Collaborative published

"Developing a Community-Based

Emergency First Responders (EFR)

Program", which provides sample legislation for multiple levels of government and a sample process to get the ball rolling.

### October 2020:

The Center for American Progress (CAP) published a report, "The Community Responder Model: How Cities Can Send the Right Responder to Every 911 Call." It includes 911 call data analysis, proposes the establishment of a community response model for both behavioral health / social service calls and "quality-of-life" and conflict calls, and identifies the key steps needed to do so.

### November 2020:

The Vera Institute for Justice published

"Behavioral Health Crisis Alternatives:

Shifting from Police to Community

Responses", which provides a
typology of alternative responses and
considerations for program development.

Within the last year, two additional toolkits have been published that add both depth and breadth to this body of work:

### **December 2021:**

The Council of State Governments Justice Center published "Expanding First Response: A Toolkit for Community Responder Programs," a robust, comprehensive guide to developing a Community Responder program from start to finish.

### **April 2022:**

Vera published "Civilian Crisis Response: A Toolkit for Equitable Alternatives to Police" – this toolkit zeros in on a key question: "What does an antiracist and equitable crisis response program look like?"

These two toolkits form an indispensable guide for local governments seeking to develop and establish a community responder program. This resource seeks to build on the foundation of those resources by offering additional analysis and consideration for the specific perspective and role of elected decision-makers.

## USING YOUR POWER

### The Three Legs of the "Inside-Outside" Stool:

### **Elected Officials, Community Advocacy,**

### and Government Staff

As a network of local elected officials advancing a racial and economic justice agenda through all levels of local government in genuine collaboration with community-based organizations, labor, and advocates, Local Progress' theory of change is predicated on an "inside/outside" strategy.

Transformative change requires the governing power of elected officials willing to take risks and drive innovation and the political power of community-based organizations, including unions, that will organize in support of these changes and in support of the elected officials who risk political backlash to enact them.

It also requires the work and cooperation of government staff who must carry out the work of policy and program development, legal drafting, budgeting and contracting, hiring and management, and more.

Each of these "legs of the stool" are critical when it comes to the development of successful community responder programs, which require significant administrative resources for planning, development, execution, and evaluation; the support of elected officials in both an executive (administrative) and legislative (and budgetary) capacity; and the support of community members.

### **Understanding Your Local Context: Charter,**

### **Structure, and Powers**

Since community responder programs require both administrative and budgetary action (and may require policy action), it is important to consider the powers of your office and the structure of your government. As executives, mayors and city managers generally have complete administrative authority over the delivery of services and execution of policy. Elected officials in a legislative and budgetary capacity – such as, city council members and county board members – generally pass laws, amend and pass the budget, and set the overall policy direction for the government, often with additional ancillary regulatory powers. In a council-manager form of government, these bodies also have the ability to further steer the administration through their power to hire, fire, and evaluate the executive.

As noted above and in greater detail below, the development and delivery of successful community responder programs are resource-intensive in both staff time and money. It requires buy-in (or, at least, neutrality) from executive leadership so that staff are empowered to do the work required, and legislative leadership to appropriate the necessary funds and pass any needed policy changes.

As such, this toolkit assumes a baseline level of support or non-opposition to starting or exploring a community response program from legislators, the executive, and key staff. If baseline support does not yet exist for the creation of a program, you should work to build the foundational community support and relationships with internal stakeholders to advance the idea.

The successful development and launch of a community responder program depends greatly on political will from elected leaders. An actively supportive executive (mayor or manager) will make it much easier to develop and launch a program more quickly than if they are neutral or tacitly in opposition. An actively supportive council majority will make it much easier to grow a program to scale more quickly by prioritizing its budget and allocating funds accordingly.



When asked what the most important considerations are for elected officials in the development and launch of a community responder program, subject matter experts repeatedly bring up a few key roles that elected officials are best able to play: **demonstrating political will, building consensus, and leading authentic community engagement.** 

Like other new programs, community responders need the political will of strong champions, the majority or consensus support of other elected representatives, and the buy-in of the communities the program will serve. When localities have begun research and development of new programs without strong support or leadership from elected and administrative leaders, those programs have tended to take longer to develop and are at greater risk of failure since both staff and community members see, and respond to, the priorities of organizational leadership.

As reflected in Local Progress' strategic framework of collaborative governance, the best way to **demonstrate political will** is in partnership and collaboration with community organizations, community leaders, and activists pushing for change. With or without that active partnership, affirmatively demonstrating support for the development of a community responder program in the form of a resolution or executive action is how several programs have begun in the last two years, and can be helpful (or even necessary) to give staff a clear directive to begin work on program development. As noted above, The Justice Collaborative's September 2020 report, "Developing a Community-Based Emergency First Responders (EFR) Program," provides sample legislation for you to use and adapt.

Building consensus can be a slower, more painstaking process but ultimately increases the likelihood of long-term political durability. It means meeting other elected leaders, staff leaders, and community members where they are, taking their questions and concerns seriously, and ensuring that program development addresses as many of those questions and concerns as possible. Compromise for compromise's sake does not usually lead to better outcomes, but compromise that actually addresses legitimate concern can broaden the base of political support for these programs in the future.

Community responder programs can be widely accepted across the various local stakeholders in your community. While it is safe to assume that there will be opposition to this effort and some may not engage in good faith, as an elected leader you are in the best position to ensure that all interested parties within your constituency are at the table and can work together by focusing on shared goals, communicating clearly, and mediating political conflict when necessary – even if you are not formally "at the table" yourself.

It is worth noting that these two roles – demonstrating political will and building consensus – can be in tension with one another. Political advocacy for the creation of programs such as these is often initiated or accelerated in response to incidents of police violence that spark calls for change, can galvanize community support, and elevate demands that expand the window of what is possible. Those incidents and their responses can also create a politically charged and polarized environment that makes consensus-building more challenging.

Authentic **community engagement** is also critical to developing a successful community response program if it is going to successfully meet community needs and be sustainable over time. As an elected official, you are uniquely positioned to play a leading role in this work due to your position within the community, your responsibility to all residents and other interested groups, and your need to consider and mediate different points of view.

### Use your leadership to ensure that community engagement will successfully:

- ▶ Center the voices and input of those most likely to be served by this program in particular Black, Indigenous, and people of color, people with disabilities, and other historically marginalized groups.
- ▶ Ensure that all perspectives and groups can be heard by providing different spaces for specific communities and other interested groups (e.g. mental health advocates, disability advocates, seniors, or small business owners).
- Demonstrate how input and feedback are incorporated into the program plan.
- ▶ Appropriately set expectations for the speed of program development and launch, and how quickly it will be able to deliver on core goals.

While the exact order of operations in these initial stages varies, it can be helpful for staff-led program development (including internal departmental engagement) and community engagement to proceed in parallel to decrease the amount of time it takes to get from an initial resolution to the launch of a program pilot. What follows are additional considerations and recommendations for each of those parallel tracks.



Caption: Local Progress members and partners on site visit with Denver Support Team Assisted Response (STAR) Program in August 2022.

### **Program Development**

There are several structural and programmatic considerations for the development of a community response program that elected officials should be aware of and actively monitor. As an elected official, it will not be your job to answer every question or carry out every step, but you can play an important and helpful role in holding staff accountable to the work, ensuring that key considerations are not missed or forgotten, and helping to get things unstuck when necessary.

As noted above, the successful development of a community responder program is staff-intensive and it is important to ensure that it is appropriately staffed and resourced.

As an elected official, it will not be your job to answer every question or carry out every step, but you can play an important and helpful role in holding staff accountable to the work...

### Program planning and development require:

- ▶ A **project manager** or team with the time and capacity within their work plan to be the primary driver of program research and development.<sup>4</sup> It is this person's or team's responsibility to devise and execute a clear plan to get from the start of development to program launch. There is no one correct way to do this, but it is very helpful for all involved to have a shared understanding of the full, step-by-step path, including policy decision points, budgetary needs, potential bottlenecks, hiring timelines, etc. The research resources and toolkits referenced above are excellent guides for the development of this plan.
- ▶ A **program manager** who will have day-to-day management and implementation responsibility over this program, whether it is delivered by a new team of government staff or a contract with one or more partner organizations. If your locality has already identified the right person for this role, it is possible that they can be the project manager as well, especially with additional staff support.

- ▶ Dedicated or shared **community engagement staff** capacity to coordinate and conduct public engagement activities that gather input and feedback on program development.
- Skilled data analysis capacity for 911 dispatch (CAD) data. If this program will be housed outside of the police department, this data analysis should also be conducted outside of the police department to ensure community trust in the program development process.

While all of these roles are best performed by internal government staff in order to effectively navigate norms, processes, and trusted relationships, much of this work can also be performed by external consultants or technical assistants, which may be more feasible for smaller localities in particular. For example, <u>CAHOOTS</u> and <u>Law Enforcement Action</u>

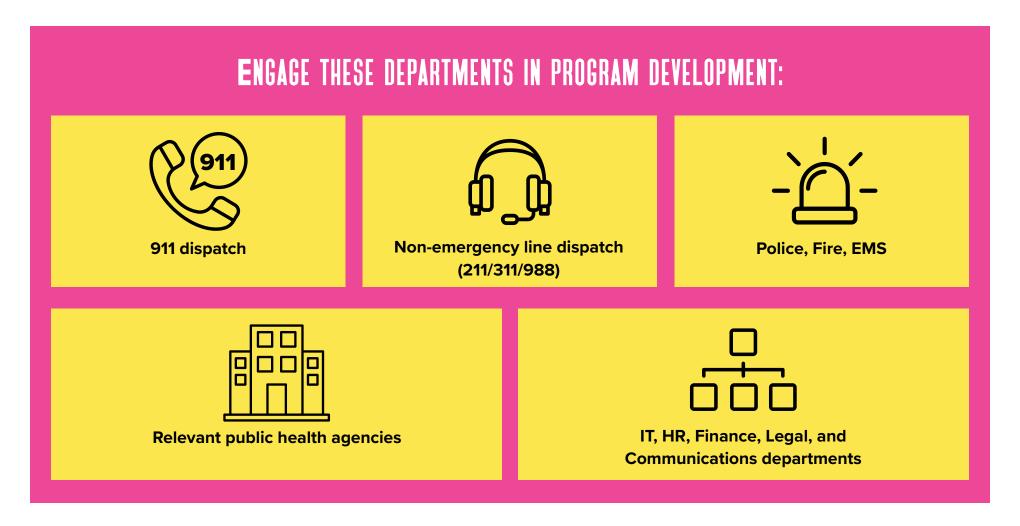
<u>Partnership (LEAP)</u> both provide contractual services to localities seeking to develop community responder programs.

<sup>4.</sup> Examples: the development of Albuquerque's Department of Community Safety and its programs was led by Mariela Ruiz-Angel and a small team; Minneapolis' Behavioral Crisis Response (BCR) teams were developed by the existing Office of Performance and Innovation.

### **Engaging Local Government Staff**

Development of a community responder program requires the expertise of staff from several different departments and/or disciplines within your local government and/or other partners - such as, other governments (e.g. your county) or community organizations. As with community engagement, the exact sequencing of this internal engagement can vary; the most important thing is that it happens.

It can be helpful for these conversations to happen in parallel with, and separate from, external community engagement so that staff are able to bring ideas, raise concerns, and speak freely in a trusted environment. At the same time, it is also important that internal engagement and external community engagement processes relate to one another; this way, community members can learn about, see, and build trust in the development work underway, and staff can hear direct feedback and concerns from community members.



### Departments that should be engaged early and continually as needed include:

- ▶ 911 dispatch, which may be under the jurisdiction of a separate governmental entity, is a critical piece of the puzzle that must be at the table. Developing a successful community responder program requires access to and analysis of 911 call data, modifications to 911 call triage decision trees, and additional training for all 911 personnel.
- ▶ Other additional dispatches, if any, including non-emergency lines like 211/311 and the new 988 Suicide & Crisis Lifeline. It's worth noting that the 988 lifeline is nascent and many questions remain, including how 911 and 988 should interact and coordinate for different types of calls; the National Association of State Mental Health Directors has published 988 implementation guidance playbooks for multiple audiences.
- ▶ Other existing public safety functions, including Police, Fire, and EMS, to understand how they currently interact with call categories that could be answered by a new community response program.
- ▶ Public Health and Violence Prevention, including governmental and community partners, to round out a complete environmental scan of available resources for crisis response.
- ▶ Structural and Administrative support functions, including:
  - IT for data analysis and dispatch system support;
  - **Human Resources** for the development and hiring of new staff positions and new job classifications;
  - Finance for contract development and management;
  - Attorneys for legal compliance and liability considerations; and
  - Communications for public awareness and marketing of the program.<sup>5</sup>

Engaging your police department in the development of your community responder program is an important, and potentially challenging, component of internal engagement. Police departments may control access to required or desired data for program planning purposes, and as the current default emergency response can provide important information and context about the challenges and needs in different situations. Even in the absence of genuine buy-in from your police department, having a shared understanding of how your community response will operate will help establish clarity for dispatchers and responders alike.

The level of support or opposition from police departments and even individual officers in the same department can vary significantly. Eugene's CAHOOTS program and Olympia's Crisis Response Unit are housed in their police departments. Police leadership and rank-and-file officers alike will often readily admit, privately if not publicly, that they are not well-equipped to respond to behavioral health calls and other crises that call for social services. However, some of those same officers — especially leadership — will resist any attempt to divert those calls away from police, and many more will do so if it means shifting financial resources away from their department.

Police departments may control access to required or desired data for program planning purposes...having a shared understanding of how your community response will operate will help establish clarity for dispatchers and responders alike.

<sup>5.</sup> Portland had a community logo contest which helped create program awareness <a href="https://portlandstreetresponse.org/we-have-winners">https://portlandstreetresponse.org/we-have-winners</a>

### **Community Engagement**

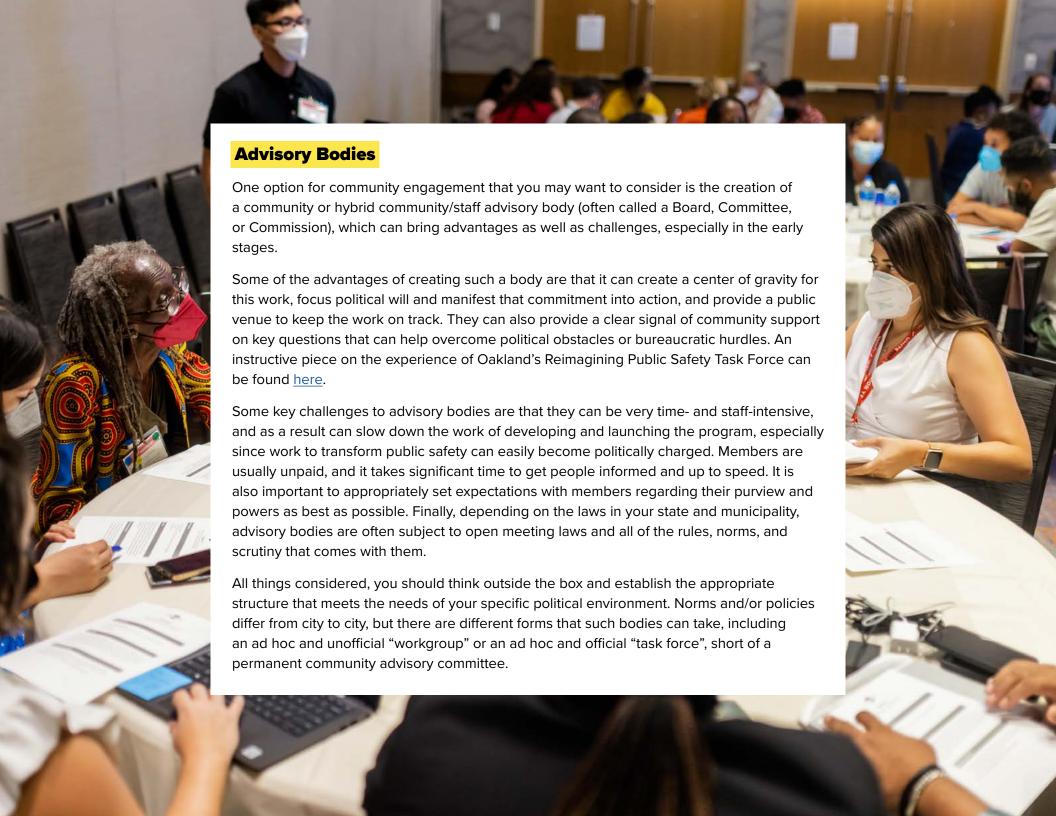
Subject matter experts and elected officials all agree that community engagement that centers the voices and input of those most likely to be served by this program is critical to developing a community responder program in order to find out what people need, design a program that will meet those needs, address concerns, and build political support.



Caption: Local Progress members and partners on site visit with Denver Support Team Assisted Response (STAR) Program in August 2022.

- ▶ The International Association for Public Participation (IAP2) spectrum of public participation and core values are an excellent guide for this work; most localities have structured their engagement at the Consult, Involve or Collaborate level.
- ▶ In many localities, these programs have been developed and launched due to community advocacy. Seek out and work with those individuals and organizations that have already established an audience and/ or subject-matter credibility in this area to play an active role in the engagement process. Ask directly-impacted communities what they want.
- Ensure that engagement tactics solicit input and feedback that will be valuable in informing programmatic decisions about program goals. For example:
  - If you have ever called for crisis support, walk through how you made that decision. How did you decide who to call?
  - What would make you call for this response?
  - What would make you trust this response?
  - What would make you refer it to friends or loved ones?
  - Which organizations and responses have you had a positive experience with? A negative one?

Ensure that all perspectives and groups can be heard by providing different spaces for specific groups. Staff will need to be able to get meaningful feedback from different groups and communities through trusted sources. If this isn't an existing government staff strength, you may need to hire or contract with a group who can do this work effectively.



Internal engagement of local government staff and external community engagement should, at a minimum, accomplish the following tasks:

- Establish a baseline understanding of current emergency responses, calls for service, and community experience with current responses. For the latter, a baseline survey, focus groups, or other guided community engagement can all be effective tools.
- 2. Establish a baseline understanding of what community responder programs are and what they are not, including the range of responses and team compositions in programs around the country.
- Using accessible call data analysis and based on community experience with current responses, ask community members:
  - Should we create a community responder program?
  - If yes, what types of calls should it respond to? A consensus best practice is to take a broad lens to this question, and not look narrowly at just mental or behavioral health calls.
  - What are the skill sets, experiences, and background that
    responders should have? Who should be on the teams? Examples
    around the country include mental health clinicians, licensed social
    workers, emergency medical technicians, peer support specialists,
    community mediators, and other professionals (licensed or not) with
    a mix of these skills.

### 4. Seek community input and consultation on key structural questions, including:

- Where in the municipal government should this program be housed? Who is a trusted messenger and leader for this work?
   Department examples include: Fire, 911, and Public Health. Should a new department or office be created? For example: Albuquerque or Durham's Community Safety Department.
- Should the staff positions for the new program be hired internally or should the local government contract with an existing organization?
   More on this below.
- 5. Establish norms for long-term community engagement and set realistic program expectations. In addition to engagement to inform initial program design and implementation, multiple cities have established steering committees or other mechanisms for long-term, two-way communication between program staff and other individuals and organizations (in- and outside of city government) to both receive valuable feedback and help others know what to expect and when. Specifically, setting expectations that:
  - It will take time to divert a significant number of calls: community responder programs need time to establish norms and scale up, and dispatch staff in 911 need time for training and culture change that cannot happen overnight.
  - Community responder programs need to be connected to a broader set of services in order to be most effective. They can and will provide a better response to people in crisis, and better connect people to the resources they need, but they cannot provide resources that are not there, such as supportive housing or other human services to the extent they are not available.

## PROGRAMMATIC PROGRAMMENT PROGR

### **Internal Hire vs. an Outside Contract**

The question of housing your program via internal hire vs. an outside contract is a key consideration.

As an organization committed to building worker power, we strongly recommend housing your program internally for the following reasons:

- City staff positions are more likely to be high quality jobs, including pay equity across departments, and are more likely to be union jobs, than those hired through an external contract.
- City staff positions are generally perceived to be harder to cut than an outside contract, making them more politically durable over time.
- Starting with an external contract may make it more difficult to bring the program in-house later on, depending on its size and scale.

If your program decides to contract for services, consider including a labor neutrality provision and/or minimum contract requirements for job quality to ensure that the contract does not undercut city labor standards.<sup>6</sup>

Other important aspects of this decision include:

▶ Administrative needs — the speed with which a program may be able to launch with an external contract vs. internal city staff positions given the steps needed to develop new job classes, negotiate with existing city staff unions, etc.

- dynamics in your locality, this could cut both ways: municipal (or specific government departments) or a community-based mental health provider may be perceived by the community as more trustworthy than the alternative. If the program is internal to your locality, regardless of the department, there may be skepticism in the community among those who believe that the program is merely an extension of law enforcement. If the program is housed in the police department, there will undoubtedly be difficulty in establishing community trust, and concerns from the community that the program will be co-opted by police and their existing departmental culture.
- ▶ Departmental home related to above, some localities may not have an existing department or structure that is a good fit for this program, and hiring internally without the right leadership and home can hinder its success.
- ▶ Recruiting and hiring a diverse workforce a consensus best practice for community responder programs is to hire responders who reflect the communities they serve by hiring for skills and experience, not credentials. Community organizations in your locality may have an easier time hiring staff that reflect the communities the program will serve than government, and there may be rules in your locality that preclude or make it more difficult to hire people impacted by the criminal legal system.

It is worth noting that the question of internal hire or an external contract does not need to be all or nothing. Depending on the mix of skills you decide to include in your teams, your program could choose to contract for some services and not others. Similarly, a response program could begin as a contracted service and transition to being municipally run (as in the case of Olympia's Crisis Response Unit).

<sup>6.</sup> Thirty years after the launch of CAHOOTS, employees at White Bird Clinic are organizing to form a union.

### **Building in Program Transparency and Evaluation**

Like any public service, the long-term success and sustainability of community responder programs will depend on how effectively the program meets community needs. In order to make that case, highlight program successes, and allow for continuous improvement, elected leaders should ensure that relevant data will be collected and evaluated from the start while maintaining the data privacy of individuals.



Photo courtesy of Portland Street Response.

Key recommendations from city leaders and subject matter experts include the following:

- Pursue a partnership with an academic research center or other evaluation partner to conduct (and seek outside financial support to fund) longitudinal research and evaluation. Engage them early in program development and engagement.
- ▶ Establish key metrics and performance indicators that clearly connect to identified program goals and program equity, such as: call volumes, response times, call diversion rate, "customer satisfaction," cost per call, etc. Ensure that there are viable data sources for these metrics.
- ▶ Solicit feedback from partners and community members on these goals and metrics and regularly share results in an accessible dashboard to promote program transparency.
- Build data collection and analysis into program planning and budgeting.

Examples of program evaluations and dashboards that provide regular access to key data include:

- <u>Albuquerque</u>, <u>NM Community Safety's Transparency page</u> publishes monthly informational reports
- <u>Eugene</u>, <u>OR Police Department Analysis of CAHOOTS Program</u> using 2019 data
- Portland, OR Street Response maintains a data dashboard updated at least weekly
- <u>San Francisco</u>, <u>CA Street Crisis Response Team</u> monthly updates include key performance indicators

### **Program Pilot**

Whether your locality's program pilot is more accurately a program launch phase or if it is a genuine pilot that will be evaluated before a determination is made regarding permanency and long-term funding, conducting a large pilot will better position your locality to collect useful data and expand into a permanent program if there is the will to do so. Therefore, it is helpful to plan for as large of a pilot as there is the political will to fund.

Multiple cities and subject matter experts underscored how challenging it can be to scale a program up to a citywide, 24/7 response – for both staffing and budgetary reasons. Whether intentionally or as a result of those challenges, several cities have started their program within one or more specific geographic areas where the identified call categories are most prevalent, and/or have started with the highest-volume shift of the day.

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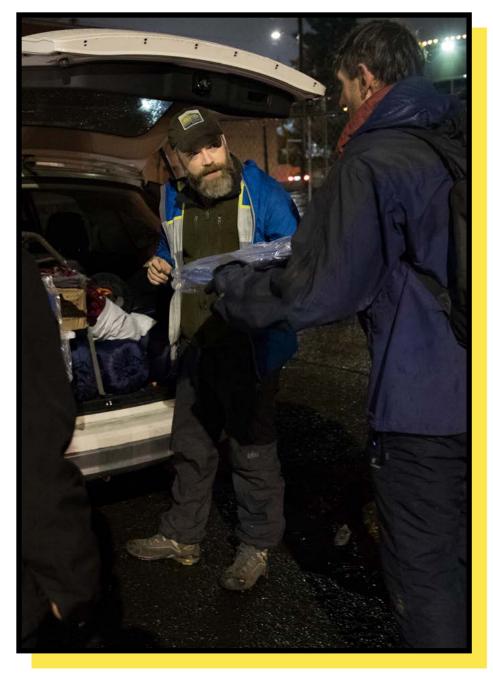


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### **Recommendations for Long-Term Success and Sustainability**

While many current community responder programs are still in their early phases of implementation and operation (with the exception of Eugene's CAHOOTS), subject matter experts and city staff identified key considerations for long-term success and sustainability:

- ▶ Staff leadership consistency. When compared to municipal departments that have historically existed for hundreds of years and are likely baked into your locality's charter, community responder programs are on fragile political and budgetary ground. In addition to (or especially in the absence of) long-term political champions, these programs need long-term staff leadership to persistently work on and fight for growth, development, evaluation, and continuous improvement.
- ▶ Departmental infrastructure. Whether or not your program is housed in an existing department or a new one, it will need its own management and staff infrastructure in addition to the frontline staff teams. While it is likely more politically expedient and financially feasible to establish a program without a full structure built out, it is important to plan for the addition of positions that support needs like training, communications, data support, human resources support, and policy analysis in future budgets.

- ▶ Related to both of the above, community responder programs need the **political and administrative support** to adjust their structure as they grow and as needs change. That could mean bringing contracted services in-house, moving from one department to another, or creating a new department or a new division.
- ▶ Client support. Client follow-up after the initial crisis is critical to connect people to the long-term support they need and will improve the effectiveness of the program at addressing chronic challenges. Some localities are building case management into their program and some are not; what is imperative is that some form of client follow-up happens.
- ▶ Staff support. Community responder staff do physically, mentally, and emotionally challenging work with people in crisis. They need and deserve both day-to-day support to sustain that work in the form of structured debrief time and other supports, and career-level support in the form of pay equity, career tracks, and promotional opportunities.

While it is likely more politically expedient and financially feasible to establish a program without a full structure built out, it is important to plan for the addition of positions that support needs like training, communications, data support, human resources support, and policy analysis in future budgets.

### FINANCING A COMMUNITY RESPONDER PROGRAM



A fundamental question that local elected officials face when considering any new program or initiative is, "how are you going to pay for it?"

Sustainably financing any municipal service is a defining responsibility and challenge for local representatives that ultimately depends on political will and community support based on how effectively the program meets community needs. In order to make that case, as noted above, elected leaders should consider from the start what data will be collected and how it will be evaluated.

When it comes to funding options, <u>this resource</u> from the Council of State Governments (CSG) is a concise summary of four common sources: the local general fund (supported by the locality's taxing authority), a dedicated tax, federal funding, and private grants. Other funding strategies could include state and county funding, or a countywide or multi-jurisdictional partnership.

Using the local general fund is ultimately a question of your own political priorities and what is possible in your locality. If reallocating funds from the existing police budget or any other department is not politically feasible, seek to use planned levy growth (if any) for this program and make clear that it is an expansion of public safety funding.

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Since publication of that CSG resource in December 2021, additional developments point towards further federal funding opportunities:

- At the end of December 2021, the Centers for Medicare & Medicaid Services (CMS) issued guidance for reimbursement of <u>qualifying</u> <u>community-based mobile crisis intervention services authorized by</u> <u>the American Rescue Plan Act</u>, which authorizes a state option to provide such services for up to five years, ending March 31, 2027, with an enhanced level of federal cost sharing. In September 2022, <u>HHS</u> <u>approved</u> Oregon as the first state to utilize this new Medicaid option. Check with your state Medicaid director to see if your state is pursuing this opportunity.
- In May 2022, President Biden issued an Executive Order ordering the
  Attorney General and the Secretary of Health & Human Services to
  issue guidance on best practices for responding to behavioral health
  calls, including consideration of alternative responder models, and
  orders a new interagency committee to implement a plan to, among
  other goals, "safely reduce unnecessary criminal justice interactions,
  including by advancing alternatives to arrest and incarceration; and
  supporting effective alternative responses."
- In June 2022, the House Appropriations Committee released their draft labor, health, human services, education, and related agencies funding bill for fiscal year 2023, which includes \$60 million in Mental Health Crisis Response Grants to help communities continue to create mobile crisis response teams; if passed into law, this would represent a \$50 million increase.

Additionally, as noted in further detail above, a common recommendation is for localities to partner with an academic research center in the area to conduct longitudinal research and evaluation. They may have the funding and/or existing capacity to do so at little or no additional monetary cost to your municipality, or may be able to help identify grant funding available for this specific aspect of a community responder program.

Some considerations regarding private grant funding:

- Localities will need to consider the political impact of competing for funding with community organizations that don't have dedicated funding in the way that governments do.
- Localities need to be accountable to outside funders in a way that
  is different from the political accountability to their residents and
  voters. Foundations will have their own reporting requirements and
  communications needs.

...a common recommendation is for localities to partner with an academic research center in the area to conduct longitudinal research and evaluation.

## **OPPORTUNITIES** FOR LOCAL INNOVATION

As a common model begins to emerge across the country for alternative response to behavioral health crisis calls, the prospect of national standards becomes increasingly likely. The inclusion of guidance on best practices in President Biden's executive order, as noted in the previous section, indicates as much. Even as that happens, there will continue to be opportunity for local innovation and experimentation in community responder programs. A few key areas of opportunity include:

▶ Expanding call categories beyond behavioral health. Beyond the consensus on behavioral health, there are several additional call categories that many, though not all, community responder programs are taking, including calls arising from unhoused people, inebriation or addiction, welfare checks, "quality of life" calls like noise complaints, "suspicious person" or "suspicious vehicle" complaints, and other categories that call for community mediation.

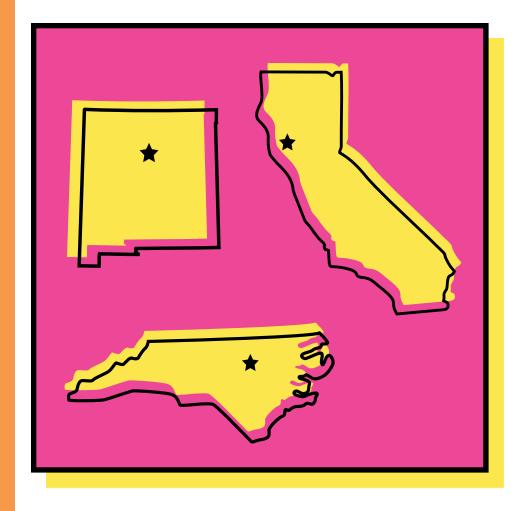
Your program can be tailored to best meet local needs depending on your call volume in each of these areas.

response team. Localities are making different choices regarding which skill sets, and especially which professions, their responder teams will have. As noted earlier, there are several different areas of professional and non-traditional expertise being included on community responder programs around the country: mental health clinicians, licensed social workers, emergency medical technicians, peer support specialists, community mediators, or other professionals (licensed or not) with a mix of these skills. Last year, CSG published this resource on the different types of workers and team structures in community responder programs.

- ▶ Exploring opportunities to integrate these programs into broader infrastructure. Community responder programs can and should coordinate with violence prevention programs, and with health and human services infrastructure in your county or state.
  - Community responder programs can do follow-up and some case management work if your locality chooses to do so in order to address underlying conditions that led to the incident. However, some localities are deliberately choosing not to offer this service in order to focus on the core mission of an emergency crisis response.
  - The long-term success of community responder programs may rely on, and at a minimum will be augmented by, success in helping community members navigate to needed in-patient and out-patient treatment, recovery housing (not only low-barrier shelters), and other resources.
  - Community responders should be in relationship with Violence Interrupters and other violence prevention frontline staff, and can learn from and hire people who have lived experience. Since both of these programmatic areas are still emerging, so too are best practices in their collaboration and cross-pollination.



# LESSONS FROM THE FIELD



In addition to the case studies in this section, there has been a wealth of media coverage of several of these programs, especially in the last two years; here are two additional resources that highlight specific programs:

- LEAP <u>published a report</u> on their program development work in Amherst, MA for a community responder program that is gearing up for launch as of the publication of this resource.
- CSG<u>included several program highlights</u> in their Expanding First Response toolkit.

### Albuquerque, NM

The City of Albuquerque started planning their <u>Community Safety</u>
<u>Department</u> in June 2020. Over the following year, the city spent about six months <u>conducting community engagement</u> and another six months creating job descriptions and laying the administrative groundwork for the department. The Department launched in September 2021, and has responded to over 12,000 calls in less than a year.



**Albuquerque Community Safety (ACS)** has <u>four different divisions</u> or types of response, three of which are community responses as defined in this resource.

- A co-responder team of Mobile Crisis Team (MCT) clinicians paired with law enforcement; and three non-police responses:
- Behavioral Health Responders with education and experience in fields including social work, counseling, social services, health, and peer support;
- Community Responders to provide support to community members in need of assistance; and
- Street Outreach and Resource Responders.

### **Key Takeaways**

- The mayor, city council, and community were all broadly aligned, providing the political will for the city staff to move quickly.
- The City had a staff leader uniquely positioned to lead not just the program development but the department itself in Mariela Ruiz-Angel. Ruiz-Angel holds a Master of Business Administration in Human Resources and a Master of Social Work in Leadership and Administration, and prior to her appointment as Director of ACS, Ruiz-Angel was the City Coordinator for the Office of Immigrant and Refugee Affairs (OIRA).
- Establishing a separate department helped in the creation of a recognizable brand for community response separate from police and fire.

### How Engagement Shaped the Program

The top issues and underlying call categories for the city to address came from the community engagement report.

The city was urged not to compete for grant funds with community providers.

The city created a <u>steering committee</u> (see page 13 of the linked resource) that is ongoing.

"In Albuquerque, we were fortunate – the community, the city council, and the mayor were all aligned and our administration was in a place to move quickly. With a new department and program like this, it's important to do what you can when you can."

### Mariela Ruiz-Angel,

Director, Community Safety Department Albuquerque, NM

### **Budget**

Albuquerque community safety department budget <sup>7</sup>	FY21	FY22
Wages	\$1,201,206	\$5,128,973
	18 positions <sup>8</sup>	61 positions <sup>9</sup>
Utilities: Telephone	\$4,400	\$17,985
Operating: Contractual, Outside Vehicle Maintenance, Training, Equipment, and Supplies	\$1,265,394	\$2,020,642
Capital: Vehicles and other Capital Items	N/A	\$570,000
Maintenance: City Provided Vehicle Maintenance	N/A	\$4,400
General Fund Total	\$2,471,000	\$7,742,000
Grand Total	\$2,471,000	\$7,742,000

<sup>7.</sup> Note: this includes all four ACS divisions, including co-response, which is at least 4 FTE

<sup>8. \$66,733.67</sup> per position

<sup>9. \$84,081.52</sup> per position

### **Durham, NC**

While the experience of Albuquerque is notable for how much has happened in a relatively short amount of time, the experience of Durham is perhaps more common. In spite of hurdles and setbacks over several years, the city launched their new crisis response pilots at the end of June 2022. They are housed in a Community Safety Department that was created in June 2021, and are branded as **HEART: Holistic Empathetic Assistance Response Teams.** 

Durham has four new crisis response pilots, including one community response as defined in this resource:

- Community Response Teams, which consist of licensed mental health clinicians, peer support specialists, and EMTs;
- a Co-Response pilot that will launch later this year;
- · Crisis Call Diversion that embeds mental health clinicians in 911; and
- Care Navigation to follow up with people within 48 hours of crisis response to help connect them to community-based services they need and want.

Although the city initially planned to launch the pilots in early 2021, planning work in 2020 was pushed back due to the COVID-19 pandemic. Community engagement regarding program design was consequently almost entirely remote. And, as with other localities, Durham faced challenges in hiring and retention for some of the program's positions.

### **Key Takeaways**

- Community push and political support for this work have ebbed and flowed, in part due to local elections and new elected leaders.
- It was important that there were staff in key positions who were excited about making the program happen, holding the work, and moving it forward; their Innovation Team Director, Ryan Smith, was assigned to research programs and put together a plan, and is now Director of the Community Safety Department.
- It was difficult but important to fund pilots at a large enough scale to be meaningful.



### How Engagement Shaped the Program

In-depth discussion with organizations and individuals working in the field helped shape the program and the structure of the community response teams: for example, peer support groups, social workers, and nurses.

Community engagement has been ongoing during the pilot phase to share information and gather feedback.

"It's important to work with community groups that have public safety reform as part of their broad agenda to make sure they are engaged and at the table. Skeptics and opponents will come on their own, but we need to mobilize our supporters to show support and counter the opposition."

Jillian Johnson,

Durham At-Large Council Member North Carolina

### **Budget**

<u>Durham community safety department budget</u> 10	Estimated fy21-22	Adopted fy21-22	Adopted fy22-23
Personnel	\$376,789	\$1,114,263	\$1,825,117
			20 FTEs <sup>11</sup>
Operating	\$1,848,813	\$1,601,202	\$2,062,737
Operating grants	\$40,000	\$100,000	\$139,000
Capital and Other	\$233,500	\$1,300,000	\$900,000
General Fund Total	\$2,499,102	\$4,115,465	\$4,926,854
Grants Total	N/A	N/A	\$139,000
Grand Total	\$2,499,102	\$4,115,465	\$5,065,854

<sup>10.</sup> Note: this includes all four pilots described above, including co-response, which is at least 2 FTE

<sup>11. \$91,255.85</sup> per position

### Oakland, CA

The Mobile Assistance Community Responders of Oakland (MACRO)

Program launched in April 2022, but the work started in 2019 and public debate about public safety and policing in Oakland is far from new. The city has a very active police accountability movement, an independent police commission, and the Oakland Police Department has been under a negotiated settlement agreement for almost 20 years with the federal government due to high profile use-of-force cases.

Oakland had early contact with CAHOOTS, contracted with a local organization called <u>Urban Strategies Council</u> to do a <u>feasibility study</u>, and took steps towards a pilot program. The city initially planned to contract for these services as a pilot, but after labor unions and other community members pushed for internal city jobs and city oversight, <u>pivoted quickly in March 2021</u> to create this new program in the Fire Department with job specifications to make them permanent employees with competitive living-wage salaries.

MACRO teams, which pair EMTs and a Community Intervention Specialist, are currently operating in the city's most impacted neighborhoods and are operating from 7:00 A.M. – 11:00 P.M. during an 18-month pilot period. After launching in April 2022, the program has responded to 2,400 calls in 3 months, primarily to conduct on-view wellness checks, and began taking 911 calls this summer.

### **Key Takeaways**

- The city decided to hire community responders as unionized city staff in the Fire Department in response to community and union organizing, which matched the city's labor values: Oakland had been trying to phase out temporary positions and contract work.
- An additional impact of the decision to hire community responders in-house for program implementation is that the city currently lacks adequate space for the staff.



### **How Engagement Shaped the Program**

The city's labor unions and community advocates pushed for the program positions to be created and hired in house instead of through an external contract.

The city was able to successfully negotiate with labor representatives over the initial classification of the positions so that the program could be implemented more quickly.

Community engagement happened through multiple channels including via the Urban Strategies feasibility study.

The city created a Community Advisory Board to ensure that community members and organizations, including labor, would have a formal venue for input and feedback, and potentially some level of program oversight.

"Oakland is a union city, and we've been working to phase out temporary positions and contracts for public services to ensure our city workers can really thrive, so it made sense for us to create our program with internal city staff positions. We wanted to make sure that these were good jobs that were integrated into the city structure, providing living wages and quality benefits to also attract excellent candidates with deep roots in Oakland. We also knew that as our program grew over time, it would get harder to bring it inside. It's easier to do early on and set the foundation for success, including evaluation, improvement, and oversight."

### Nikki Fortunato Bas,

Oakland City Council PresidentCalifornia

### **Budget**

Oakland macro budget	FY 2021-22 (prorated)	FY22-23 (full year)
Personnel	\$5,005,386	\$8,533,705
	57 FTEs	57 FTEs
Operations & Maintenance	\$1,152,245	\$448,000
Year 2 Contingency Funding	N/A	\$426,202
Total Anticipated Costs	\$6,157,631	\$9,407,907
General Fund Total	\$1,157,631	\$4,407,907
State Grant Total	\$5,000,000	\$5,000,000
Grand Total	\$6,157,631	\$9,407,907

### ABOUT

**The Local Progress Impact Lab** brings together local leaders, partners, and issue experts to build the knowledge, skills, and leadership needed to advance racial and economic justice at the local level.

**Reform/Transform: A Policing Policy Toolkit** is a framework and policy roadmap supporting local elected officials to make structural changes to their public safety systems. The toolkit provides a simple, user-friendly framework for cities to evaluate policies across a dozen metrics ranging from oversight of and change to department policies to limiting ICE collaboration.

This resource was authored by David Zaffrann. David is a public affairs project manager with over fifteen years of experience in policy, communications, and political strategy. He served as Public Safety Implementation Committee Manager in Brooklyn Center, MN, and as Senior Policy Aide to former Minneapolis City Council Member Steve Fletcher. In Minneapolis, he led the development of numerous policies, ordinances, and programmatic budget initiatives, including the city's Behavioral Crisis Response teams and funding for the city's Office of Violence Prevention. Prior to working in government, David served as a Program Manager for TakeAction Minnesota and as a Strategic Campaigns Specialist for the Service Employees International Union. He is a graduate of the University of Minnesota.

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