

ALBUQUERQUE COMMUNITY SAFETY

ONE ALBUQUERQUE

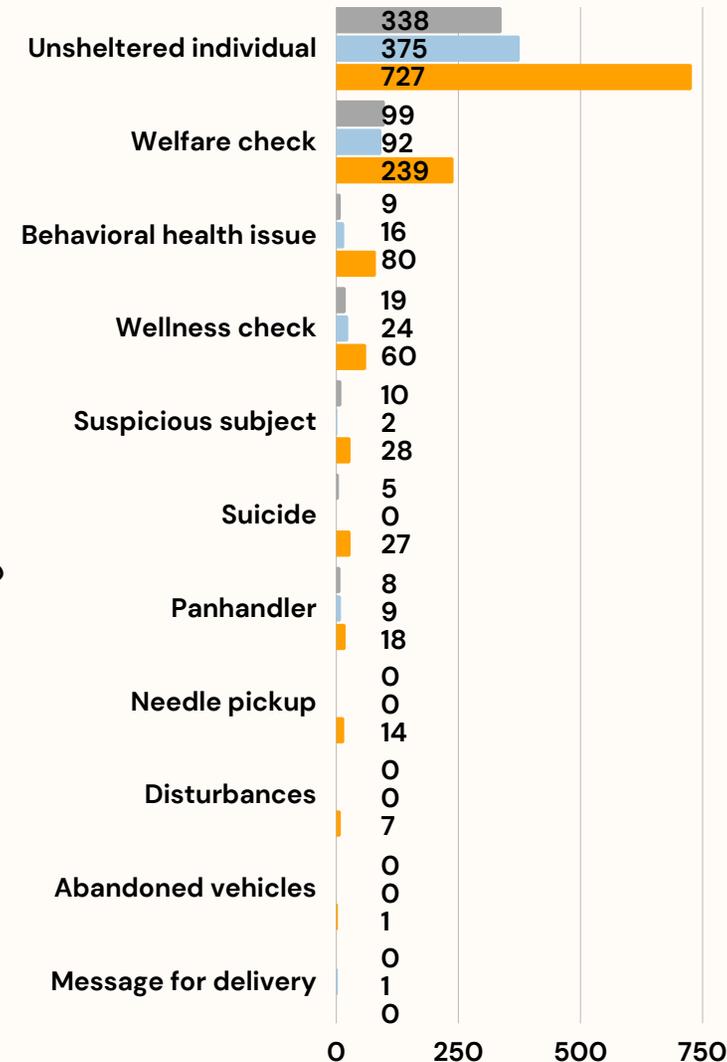
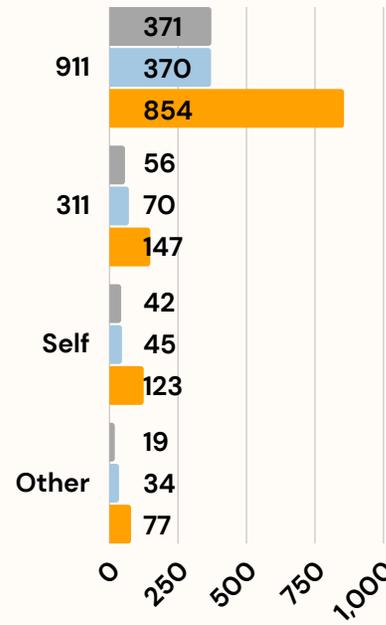
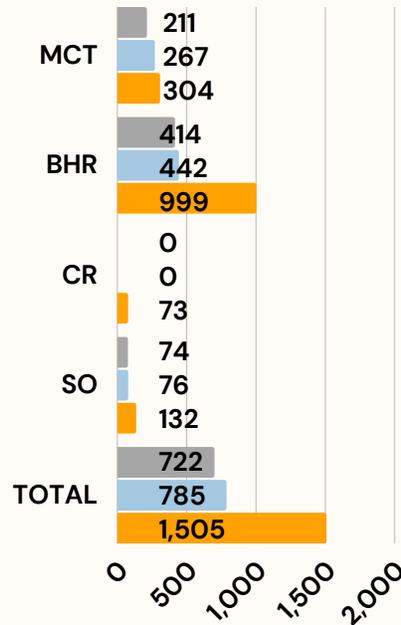
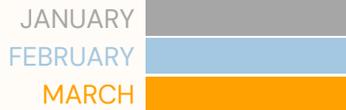
MONTHLY INFORMATIONAL REPORT

MARCH 2022

CFS BY PROGRAM

CFS BY REFERRAL SOURCE*

CFS BY CALL TYPE*



FISCAL YEAR TO DATE CALLS FOR SERVICE

| | |
|------------------------------|--------------|
| Mobile Crisis Team | 2,151 |
| Behavioral Health Responders | 3,263 |
| Community Responders | 73 |
| Street Outreach Responders | 422 |
| TOTAL CFS | 5,929 |

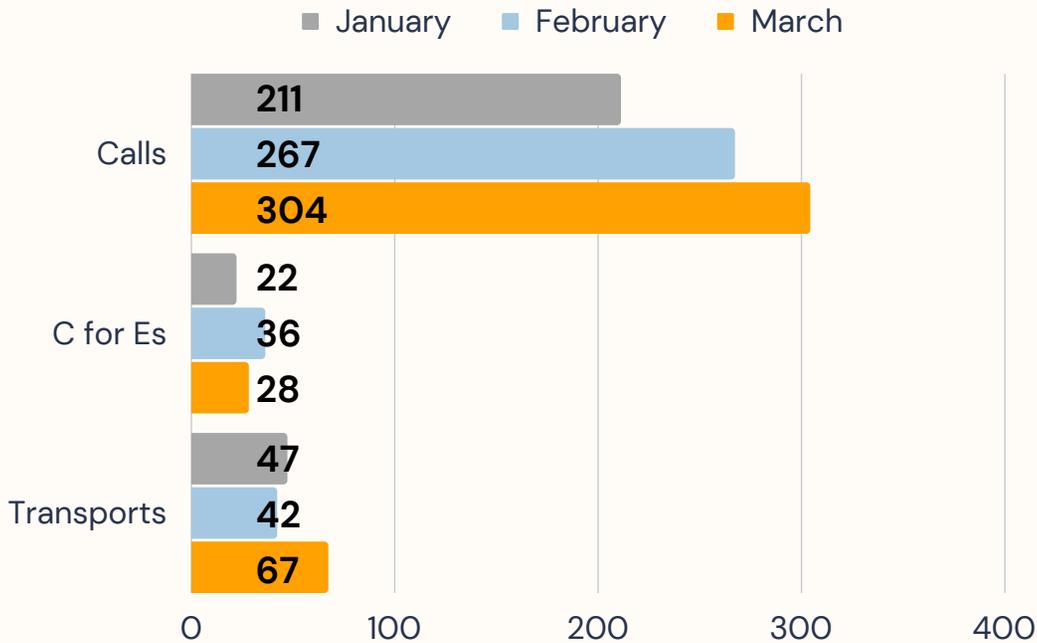
*Does not include MCT data, which is currently tracked by APD



| MARCH OUTCOMES | BHR | CR | TOTAL YTD |
|-------------------|-----|----|-----------|
| Resources offered | 408 | 28 | 1,420 |
| No person found | 378 | 32 | 1,127 |
| Declined services | 126 | 6 | 515 |
| AFR co-response | 59 | 2 | 135 |
| Transport | 18 | 2 | 93 |
| APD co-response | 10 | 0 | 46 |



MCT CALLS, CERTIFICATES FOR EVALUATION, AND TRANSPORTS



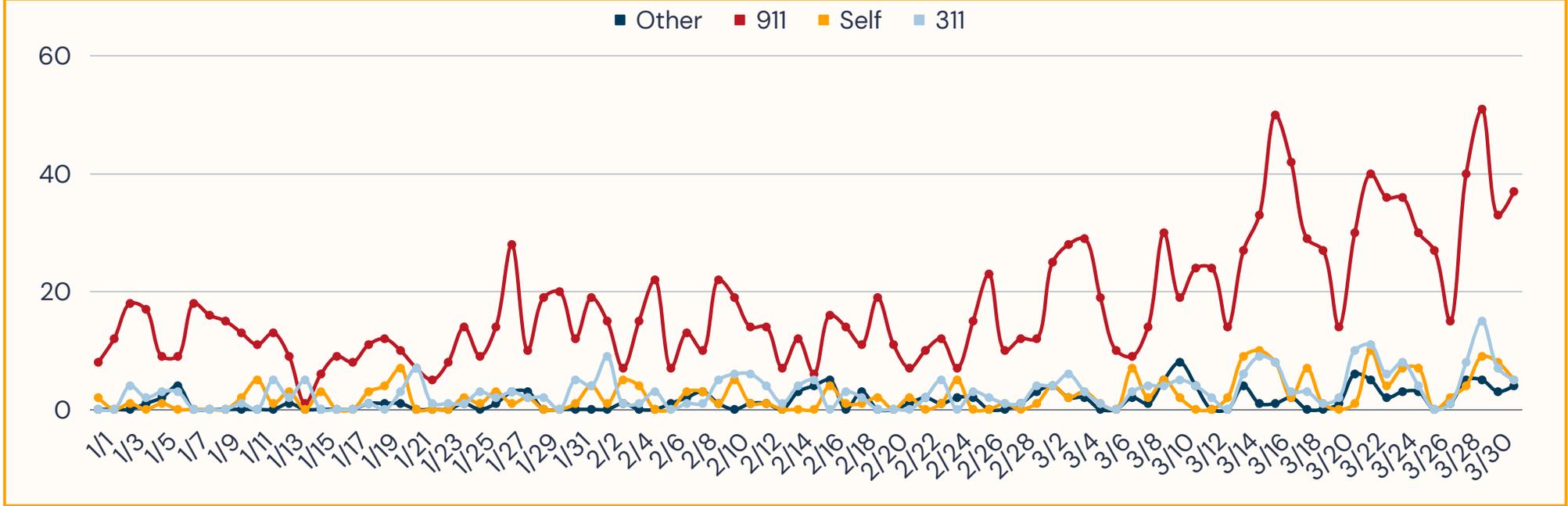
STREET OUTREACH RESPONDER REACH | MARCH



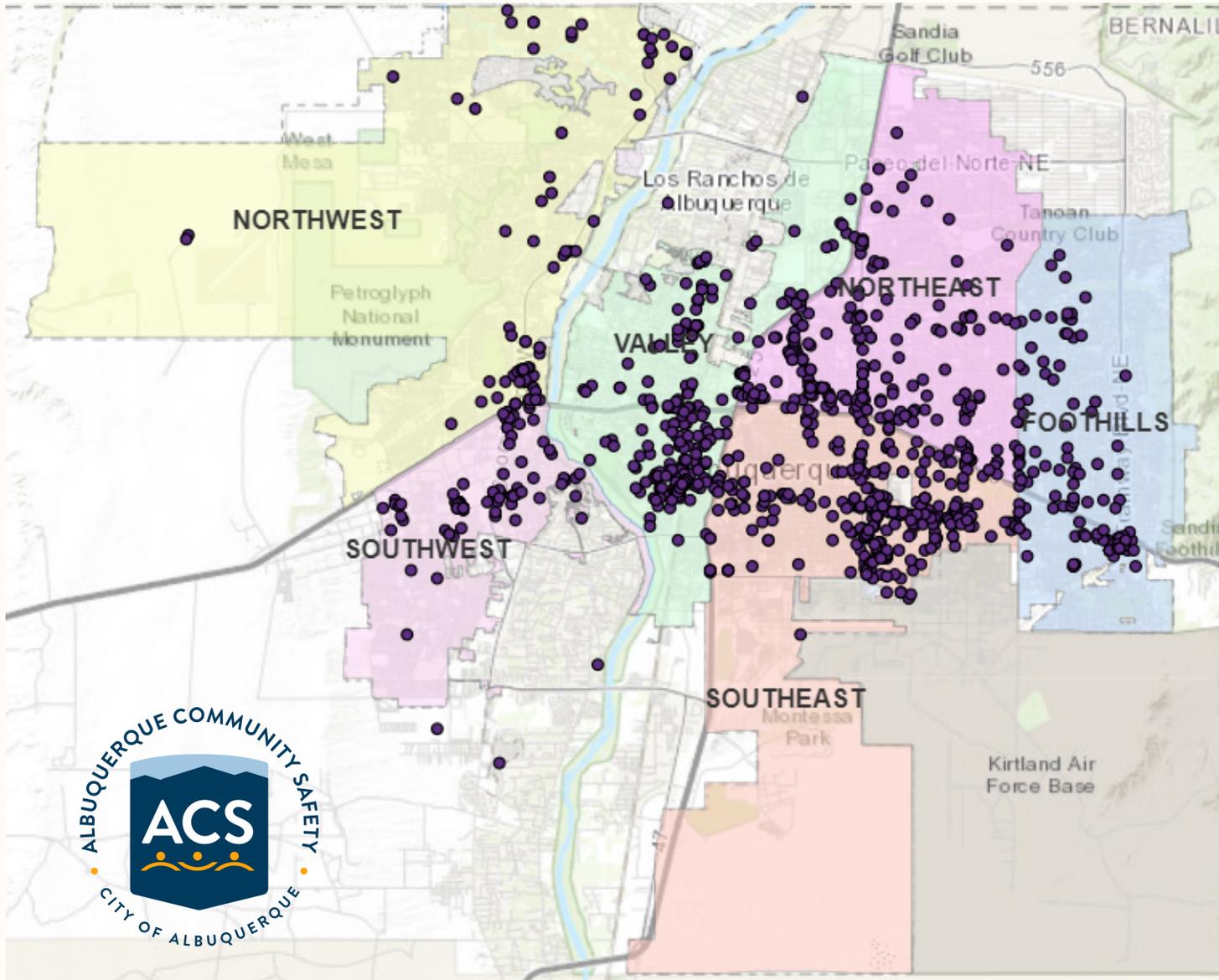
| BHR CALL TIMEFRAME | JAN | FEB | MAR | YTD |
|--|---------|---------|---------|---------|
| Entry to Dispatch (in the queue) | 0:32:54 | 0:33:06 | 0:34:41 | 0:32:26 |
| Dispatch to On-scene (travel time) | 0:10:52 | 0:11:14 | 0:13:05 | 0:12:42 |
| On-scene to Clear (time on the call) | 0:22:50 | 0:21:56 | 0:23:20 | 0:23:18 |
| Create to Clear (total time to address call) | 1:07:50 | 1:08:18 | 1:11:16 | 1:09:40 |



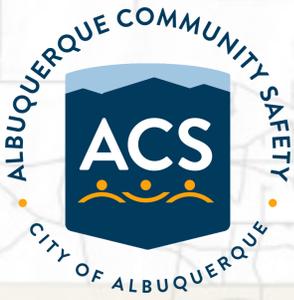
ACS CALL VOLUME BY REFERRAL SOURCE | MARCH



ACS CALLS FOR SERVICE BY AREA COMMAND | MARCH



| AREA COMMAND | RANK BY DEMAND |
|--------------|----------------|
| Northeast | 1 |
| Valley | 2 |
| Southeast | 3 |
| Northwest | 4 |
| Foothills | 5 |
| Southwest | 6 |



| INCIDENT TYPE | MARCH | YTD* |
|-------------------|-------|------|
| Homicide | 9 | 30 |
| Other | 3 | 5 |
| DV/Sexual Assault | 2 | 10 |
| Gun Violence | 0 | 3 |
| Child Death | 0 | 2 |
| Suicide | 0 | 1 |

| AREA COMMAND | MARCH | YTD* |
|--------------|-------|------|
| Valley | 9 | 20 |
| Southeast | 2 | 16 |
| Foothills | 1 | 2 |
| Northeast | 1 | 6 |
| Northwest | 1 | 1 |
| Southwest | 0 | 7 |

YTD IMPACT BY THE NUMBERS



MAJOR RESPONSE ACTIVITIES

- CORA responded to several homicides offering the victims, families, and communities impacted support and resources.
- Following the active shooter incident resulting in a tragic homicide and multiple injuries of the Glenwood Hills Neighborhood resident, CORA attended a neighborhood meeting offering support and resources to the community.
- CORA connected with the families of a fatal car accident involving teenagers. CORA was able to offer support and resources to the families.
- Partnering with HopeWorks, CORA was able to help a sexual assault victim get into a safe environment with food assistance.
- Following the stabbings that took place on the Rail Runner, CORA conducted outreach, speaking with the office manager about the support and resources available to their staff.

PROACTIVE AND ONGOING COMMUNITY ENGAGEMENT ACTIVITIES

- In collaboration with APD, Solid Waste, and Councilor Pat Davis, CORA and other ACS responders took part in the Southeast clean-up day. CORA assisted in trash clean-up while offering support resources and food to unsheltered individuals they came in contact with.
- CORA attended a Southeast business meeting with business owners in the Fair Plaza shopping center with the APD Crime Prevention Liaison and the Proactive Response Team. CORA informed the business owners about the different responses ACS offers and how we can support them and their community.
- CORA is a proud member of the Gun Violence Prevention and Intervention Task Force.
- Conducting bi-weekly meetings between CORA, Violence Intervention Program (VIP), and APD's homicide and domestic violence victim advocate programs to align services.

*ACS's CORA Responders did not begin taking cases until 11.14.21

ACS WIN BOARD

Behavioral Health Responders (BHRs)

3.12.22 – Welfare check: BHRs responded to a welfare check at an apartment complex near the university. Upon arrival, they found a young woman unconscious at the doorstep of an apartment unit. BHRs woke her and found that she was extremely intoxicated, disoriented, and upset. She had gotten turned around and ended up on a stranger's doorstep. She informed them that her grandfather, with whom she was close, had recently died, and she was grieving. BHRs gave her food and water and spoke with her about her life, her relationship to the deceased, and her issues related to her family. They managed to calm her down significantly, and in the process discovered that a friend lived close by. BHRs managed to get a working number for the friend and called him. The friend agreed to come by to pick her up. BHRs brought her downstairs, gave her more food and water, and waited with her until the friend came. When he arrived, BHRs advised him on recovery/addiction services in Albuquerque before sending them on their way.

3.15.22 – Unsheltered individual: BHRs jumped a pending call in APD's queue. They made contact with a woman and her one-year old baby who were unsheltered. The woman stated she broke up with her boyfriend who is also unsheltered. BHRs contacted SAFE House and had the woman complete an intake via phone; she was accepted into the shelter. BHRs were able to obtain a baby car seat from the ACS offices. They transported her and the baby safely to the shelter.

3.18.22 – Wellness check: BHRs received a call for a man in Martineztown Park. They found a man on the ground next to his wheelchair with one leg amputated above the knee and the other leg wrapped in a cast. They helped him into his chair, talked with him, and found out he had a caseworker through Bridge to Success. They called her and discovered she had been able to arrange a 2-3 month stay in a hotel, but they would need to help him get into another hotel until that stay could begin. They were told there was a handicap-accessible room at a hotel on Central and I-25. They were unable to identify an available transport service, and ACS does not yet have wheelchair-accessible transportation.* So, the BHRs decided to walk him there themselves. When they got there, the owner informed them that she had just given the room away. After calling every hotel within a mile radius, they widened their search and found a hotel on University and I-40 that had availability. BHRs then walked him to the Alvarado bus terminal and drove to the bus stop to wait for him. After he arrived, they walked him up the hill to the hotel to get checked in. They got him to his room and contacted his caseworker to update her before they left.

3.20.22 – Wellness check: BHRs responded to a call for an intoxicated individual at a hotel. When they arrived, he was face down on the ground and hotel staff were around him. BHRs immediately recognized the situation as an emergency medical situation; staff had not realized how serious the man's condition was. BHRs got the man into the rescue position and called dispatch for EMS backup. BHRs noticed the man turning blue; he was struggling to breathe. They repositioned him and assisted his breathing until EMS arrived.

**ACS has since purchased a wheelchair-accessible vehicle that will be available in the coming weeks.*

ACS WIN BOARD

Behavioral Health Responders (BHRs) cont'd

3.21.22 – Unsheltered individual: BHRs responded to an unsheltered man who only spoke Spanish, and it was starting to get extremely cold. They offered to take him to the westside shelter. One BHR was able to communicate that well enough in Spanish that the man very willingly jumped into the car to be taken. Utilizing our language access line to communicate with him, BHRs spent around an hour at the shelter getting him checked in and settled. He only had on a t-shirt and was under a blanket; he would have frozen that night.

3.23.22 – Suicide: BHRs were called out to CYFD's children's treatment center for an adolescent having thoughts of suicide. They talked with the child and learned of their mental health history as well as their past experiencing housing instability. Staff had also reported precautions that had to be taken beyond their capabilities at the center. Accordingly, it was determined best to take the child to UNM Children's Psychiatric Center. A BHR rode with the child in the back seat of their vehicle with the child's therapist following behind. After getting them checked in, BHRs left them in the care of UNM and their therapist.

3.31.22 – Disturbance: BHRs were requested as backup to a call at the Social Security office. Albuquerque Ambulance EMTs explained that there was an elderly woman inside who was agitated and had caused a disturbance. Another woman had given her a ride there but was unwilling to take her home because of her behavior. The woman's caseworker raised the concern that she might have dementia. BHRs waited for her to come out of the bathroom to talk with her. She was calm but irritated, using a walker. The woman said she had struggled with the Social Security office for several days, that she had come to get a document and she had received it, but she still wanted it signed or verified it was the correct document. BHRs talked with the office manager who explained they could not sign anything but could stamp the document to make her feel better. BHRs walked the woman to the desk and had the document stamped, then walked the consumer outside to wait for her son to pick her up. She did not show any clear signs of dementia or mood instability to BHRs throughout the call; ultimately, she was pleasant and grateful for the help. BHRs debriefed with woman's friend, EMS, and security before leaving the scene.

Mobile Crisis Team (MCT)

3.10.22 – Welfare check: MCT took a call regarding a man walking down the road with his pants falling down. MCT located the man and recognized him as a well-known unsheltered individual. His pants were falling down because they were too large and he did not have a belt or another way to secure them. MCT was near a shopping center, so they transported him there to buy him some necessities. While clinicians were in a discount clothing store buying the man a belt, socks, a blanket, and a duffel bag, the officer took him to get a meal. After the meal, he was given the items, and MCT made sure he was in a safe location.

3.12.22 – Behavioral health issue: Officers requested MCT for a call where a juvenile ran away from his mother and ran into traffic. The clinician spoke with the mother and educated her on the process for mental health evaluations at the local hospital. The mother was in agreement that transport to the hospital would be in the child's best interest. MCTs transported the child to the hospital.

ACS WIN BOARD

Mobile Crisis Team (MCT) cont'd

3.26.22 – Behavioral health issue: A caller requested MCT respond to her home regarding her husband experiencing a mental health crisis. MCT responded and the clinician spoke to the couple. The man had multiple medical issues in addition to his mental health diagnosis. The clinician wrote a Certificate for Evaluation and EMS was contacted for hospital transport. Upon follow up, the wife explained that additional medical concerns were identified at the hospital; the man is continuing to receive medical care and the wife is maintaining contact with the hospital to ensure continuity of care.

Street Outreach & Resource Responders (SOs)

3.3.22 – Encampment outreach: SOs collaboratively performed outreach with First Nations and HopeWorks. They contacted 10 unsheltered individuals giving them hot meals and discussing services. An SO Responder recognized a man from previous interactions and asked where his dog was. It had been taken to an animal shelter, and he was upset that it had been put up for adoption. They called the shelter and got it taken off the adoption list. The HopeWorks case manager was able to take the man to their center to obtain a temporary ID and transport him to the shelter to retrieve his dog.

3.9.22 – Unsheltered individual: While responding to a 311 ticket for campsites in an alleyway, SOs encountered a man who said he was staying there. He told them he was not doing okay and began to cry, explaining that he found his friend dead that morning. SOs gave him snacks and water while listening to his story. After assessing his needs, they offered resources for grief support. They contacted ACES and got his housing application and voucher reactivated. While on the phone with the Coalition to End Homelessness, they found out he qualifies for the permanent supportive housing program at Southwest Cares and connected him there. They also referred him to St. Timothy's for assistance and verification for documentation. He thanked the SOs for their help in his time of loss.

Community Responders (CRs)

Training: ACS's first cohort of Community Responders completed on the job training, having spent two weeks in the field with BHRs and SOs. They started taking calls independently on March 14th.

CORA Responders

New Responder: ACS has hired a second CORA Responder to expand capacity and further support communities impacted by tragedy and violence.

Homicide Outreach: CORA responded to the scene following the homicide near Siembra Leadership High School. CORA Responders offered support and resources to students and staff in distress. CORA connected one teacher to Centro Savila for counseling services. At the request of the principal, CORA returned on Friday, 3.11, to speak at the all-staff meeting and offer further support.