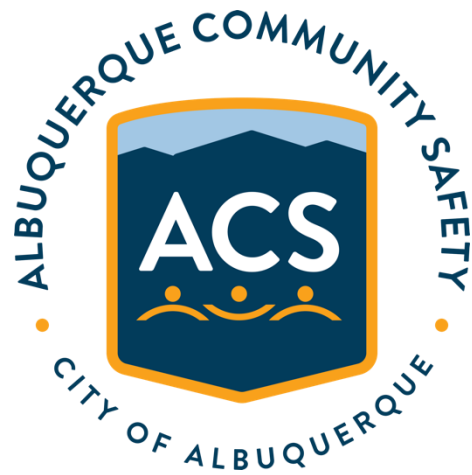# City of Albuquerque
## Community Safety Department

## FY25 Q3 Report

April 2025

**Jodie Esquibel**, Director

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# Contents

# Programmatic Updates and Insights

Three quarters through the 2025 fiscal year, the Albuquerque Community Safety Department (ACS) has demonstrated continued growth and increasing capacity. FYTD, ACS has responded to 33,119 calls for service (CFS), on pace to surpass FY2024 by 9%. These are calls primarily focusing on mental health, homelessness, and addiction that do not require a police response. ACS takes on a portion of 911 calls that can be handled by trained behavioral health responders instead of police officers. Continuing at this pace, ACS is projected to respond to almost 44,159 CFS.

**Figure 1: Total ACS Calls for Service over the Life of the Department**
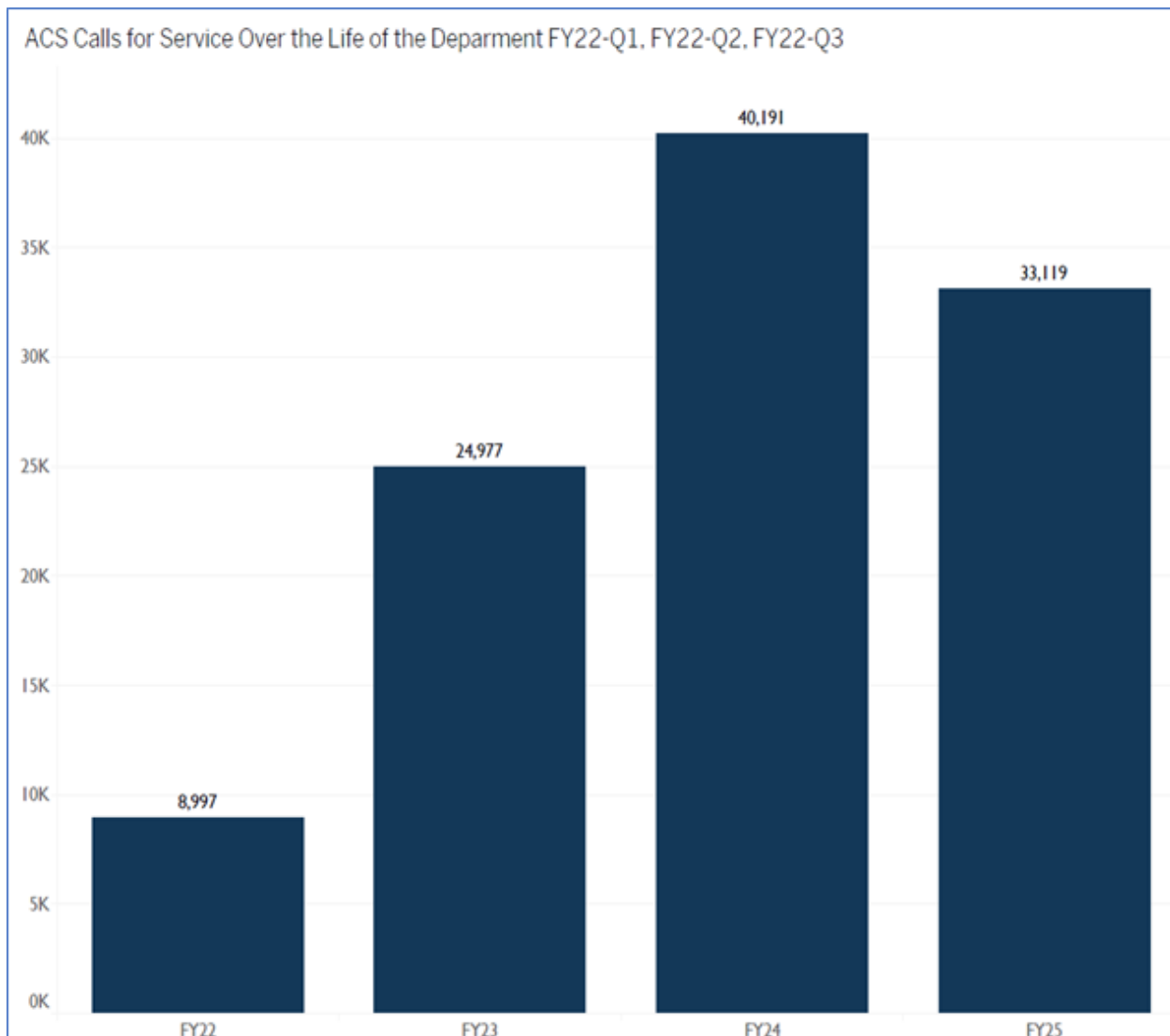
### Table 1 and Table 2: Comparison of Call Types by Shift (Created Time and Dispatch Time)

Table 1 provides insight on ACS Call Types by shift that represent when (day, swing, graveyard) the call type was created while Table 2 demonstrates ACS Call Type by shift of when an ACS Responder team is dispatched (sent to respond to the call).

On average, about 97.9% of calls created within a respective shift are dispatched to the for service during that same shift. The highest call type for ACS is Unsheltered Individual. In FY2025-Q3 there were 3,462 calls for this call type.

**Table 1: ACS CAD Events by Call Create Time – FY25 Q3**

| Call Type | Days | Swing | Graves | Total | Percentage |
|---|---|---|---|---|---|
| UNSHELTERED INDIVIDUAL | 1,416 | 1,278 | 769 | 3,463 | 45.68% |
| WELLNESS CHECK | 504 | 611 | 303 | 1,418 | 18.70% |
| WELFARE CHECK | 338 | 487 | 246 | 1,071 | 14.13% |
| BEHAVIORAL HEALTH | 217 | 347 | 298 | 862 | 11.37% |
| SUICIDAL IDEATION | 107 | 221 | 186 | 514 | 6.78% |
| DISTURBANCE | 50 | 59 | 30 | 139 | 1.83% |
| SUSPICIOUS PERSON | 14 | 26 | 12 | 52 | 0.69% |
| PANHANDLER | 15 | 24 | 6 | 45 | 0.59% |
| NEEDLES | 3 | 2 | 2 | 7 | 0.09% |
| COMMUNITY ENGAGEMENT | 5 | | | 5 | 0.07% |
| GOLDEN OPPORTUNITY | 1 | 3 | | 4 | 0.05% |
| EMERGENCY MANAGEMENT | 1 | | | 1 | 0.01% |
| **Grand Total** | 2,671 | 3,058 | 1,852 | 7,581 | 100.00% |

**Table 2: ACS CAD Events by Call Dispatch Time – FY25 Q3**

| Call Type | Days | Swing | Graves | Total | Percentage |
|---|---|---|---|---|---|
| UNSHELTERED INDIVIDUAL | 1,353 | 1,228 | 753 | 3,334 | 44.88% |
| WELLNESS CHECK | 501 | 613 | 302 | 1,416 | 19.06% |
| WELFARE CHECK | 328 | 485 | 245 | 1,058 | 14.24% |
| BEHAVIORAL HEALTH | 216 | 347 | 297 | 860 | 11.58% |
| SUICIDAL IDEATION | 107 | 221 | 184 | 512 | 6.89% |
| DISTURBANCE | 50 | 59 | 30 | 139 | 1.87% |
| PANHANDLER | 15 | 23 | 6 | 44 | 0.70% |
| SUSPICIOUS PERSON | 14 | 26 | 12 | 52 | 0.59% |
| NEEDLES | 3 | 2 | 2 | 7 | 0.09% |
| GOLDEN OPPORTUNITY | 1 | 3 | | 4 | 0.05% |
| EMERGENCY MANAGEMENT | 1 | | | 1 | 0.01% |
| COMMUNITY ENGAGEMENT | 1 | | | 1 | 0.01% |
| **Total** | 2,590 | 3,007 | 1,831 | 7,428 | 100.00% |

## 100,000 Call Celebration

ACS recently celebrated its 100,000th call for service with Mayor Tim Keller and over 300 community members. The event was hosted at Albuquerque Community Safety headquarters where attendees heard from local and national leaders, play games, access to resources and a cakewalk.

Since its launch in 2021, ACS has grown from handling 900 to over 3,000 calls per month, expanded to 24/7 service, and opened the nation's first standalone alternative response headquarters.

At the event, a community member shared how ACS helped her move from homelessness to recovery, highlighting the program's real-life impact. Recognized nationally, ACS continues to lead a holistic and empathetic innovative approach to public safety that other cities are now looking to adopt.

## ACS ACADEMY EXPANDS TO THREE MONTHS

In January, ACS launched an expanded 12-week training academy for new recruits, focusing on mental health, crisis intervention, and community support. The enhanced program includes hands-on instruction in behavioral health, cultural sensitivity, and scenario-based training to better prepare responders for complex public safety challenges.

Some of the additional training includes an 8-hour mental health first aid class provided by CNM Ingenuity, a 3-hour deaf cultural sensitivity training geared toward First Responders provided by Deaf Culture Center of New Mexico, and an Alzheimer's First Responder Training provided the Alzheimer's Association. Notably, the 40-hour WE CARE training, which uses actors to simulate real-life scenarios Responders may face, has been expanded to 80 hours to provide even more in-depth, hands-on learning experience.

This effort boosts ACS's capacity to serve the community with compassionate, trauma-informed care in non-emergency situations across Albuquerque.

## COMMUNITY COLLABORATIVE

In March, Albuquerque Community Safety (ACS) proudly relaunched its monthly Community Collaborative meetings—an essential platform for meaningful dialogue between ACS leadership and community leaders. These gatherings represent far more than a routine engagement; they are a vital mechanism for building trust, fostering transparency, and co-creating solutions that reflect the lived experiences and insights of Albuquerque residents. By bringing together a diverse cross-section of voice including neighborhood associations, advocacy organizations, service providers, and local residents, these collaborative sessions help ensure that ACS policies and practices are responsive, equitable, and grounded in community needs.

This model of ongoing engagement significantly strengthens the City's broader commitment to a public safety system that prioritizes care over enforcement. Through these quarterly meetings, community members not only gain a clearer understanding of ACS's evolving role and impact, but also have a direct hand in shaping how the department addresses issues such as mental and behavioral health crises, homelessness, substance use, and other non-violent emergencies. The

feedback collected in these forums directly informs ACS's strategies, training approaches, and deployment models, creating a feedback loop that enhances both accountability and service effectiveness.

For the City of Albuquerque, this collaborative process reinforces the value of participatory governance, ensuring that public institutions are not just serving the community, but serving with the community. As the department continues to grow and refine its operations, these meetings serve as a cornerstone of sustainable, community-informed progress. The result is a more resilient, compassionate, and inclusive approach to public safety positioning Albuquerque as a national leader in alternative emergency response.

## EMERGENCY OVERNIGHT SHELTERTRANSPORTATION

The department's Emergency Overnight Shelter Transportation Service launched on November 1 and was essential in helping people find refuge during extreme cold weather. The services operated between the hours of 8 p.m. to 7 a.m.. Joining the transportees on every ride would be the driver and a navigator who would inquire around additional support services the individual may The 4,528 rides to resources between November 1 – March 31 highlighted the continuous need for this essential service during the winter months.

## COFFEE WITH COMMUNITY SAFETY

In an effort to broaden engagement with the community, ACS continued to partner with local Starbucks to host Coffee with Community Safety events. The series is a community engagement initiative designed to build communication between our department and the community. These events are open to all and focus on discussing concerns, asking questions, and learning more about the department. In FY25-Q4 ACS will also be working with local coffee shops, stores and providers to host Community Meet and Greets similar to these coffee events.

## Violence Intervention Program Division

This ACS division consists of six different specialized teams that work collaboratively with specialty units such as APD's Threat Assessment Unit, Crisis Intervention Unit, Violent Crimes Unit and AFR's HEART Team and Golden Opportunity Program.

The six specialty teams include:

- Violence Intervention Program (VIP)
- School Based VIP (SBVIP)
- Opioid Education & Prevention (OEP)
- Hospital Based VIP (HBVIP)
- Youth VIP
- Community Oriented Response & Assistance (CORA)

The division's goal is to interrupt the cycles of violence through a holistic approach, tailoring the trauma informed response to individuals impacted by violence, substance abuse, crime or societal challenges.

## Key Takeaways – Programmatic Updates

- ACS reaches 100,000 calls for service milestone
- Department expands training academy to 3-months
- Community Collaborative meetings made its return
- ACS Emergency Overnight Transportation service helps over 4,500
- SBVIP to develop Youth VIP team

# Quarterly Metrics

## Call Volume

FY25-Q3 total call volume was 6.37% higher compared to FY24-Q3. A significant factor is a 25.4% increase in 3-1-1 calls (see Figure 2), and the team is continuing to field thousands of 9-1-1 calls.

Responders are also self-initiating less often due the high volume of both 9-1-1, and 3-1-1 calls for which the ACS has a dedicated team of responders assigned to in order to respond to as quickly as possible

**Figure 1: Q3 CFS Yearly Comparison - FY24 Q3 vs. FY25 Q3**



ACS Calls for Service Yearly Comparison
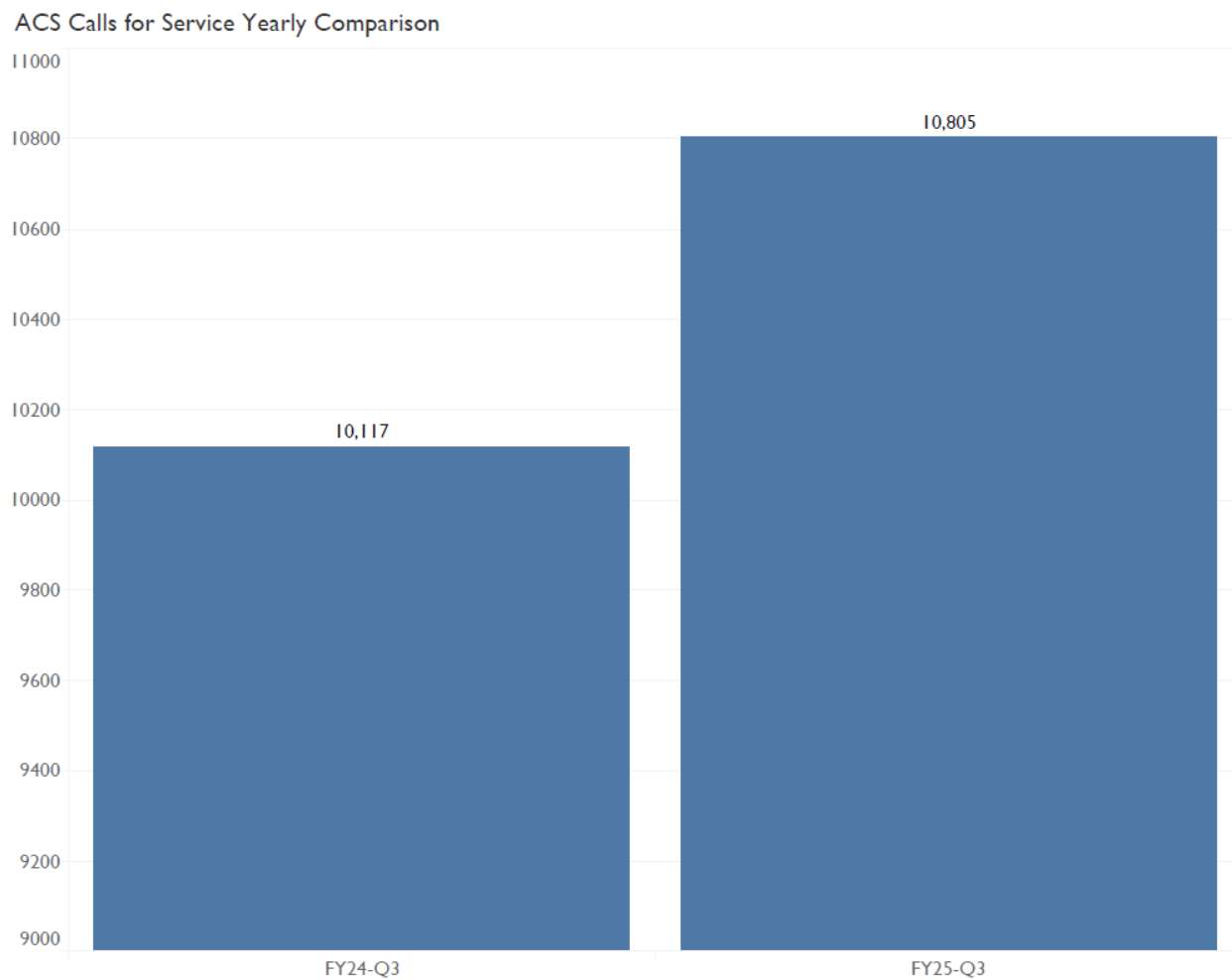
**Figure 2: FY24 Q3 vs FY25 Q3 Call Sources Quarterly Comparison**

Calls by Call Source

| Call Source | FY24-Q3 | FY25-Q3 |
|---|---|---|
| 911 | 7,441 | 6,910 |
| 311 | 1,071 | 1,437 |
| Self-Initiated | 212 | 114 |
| Other | 191 | 94 |
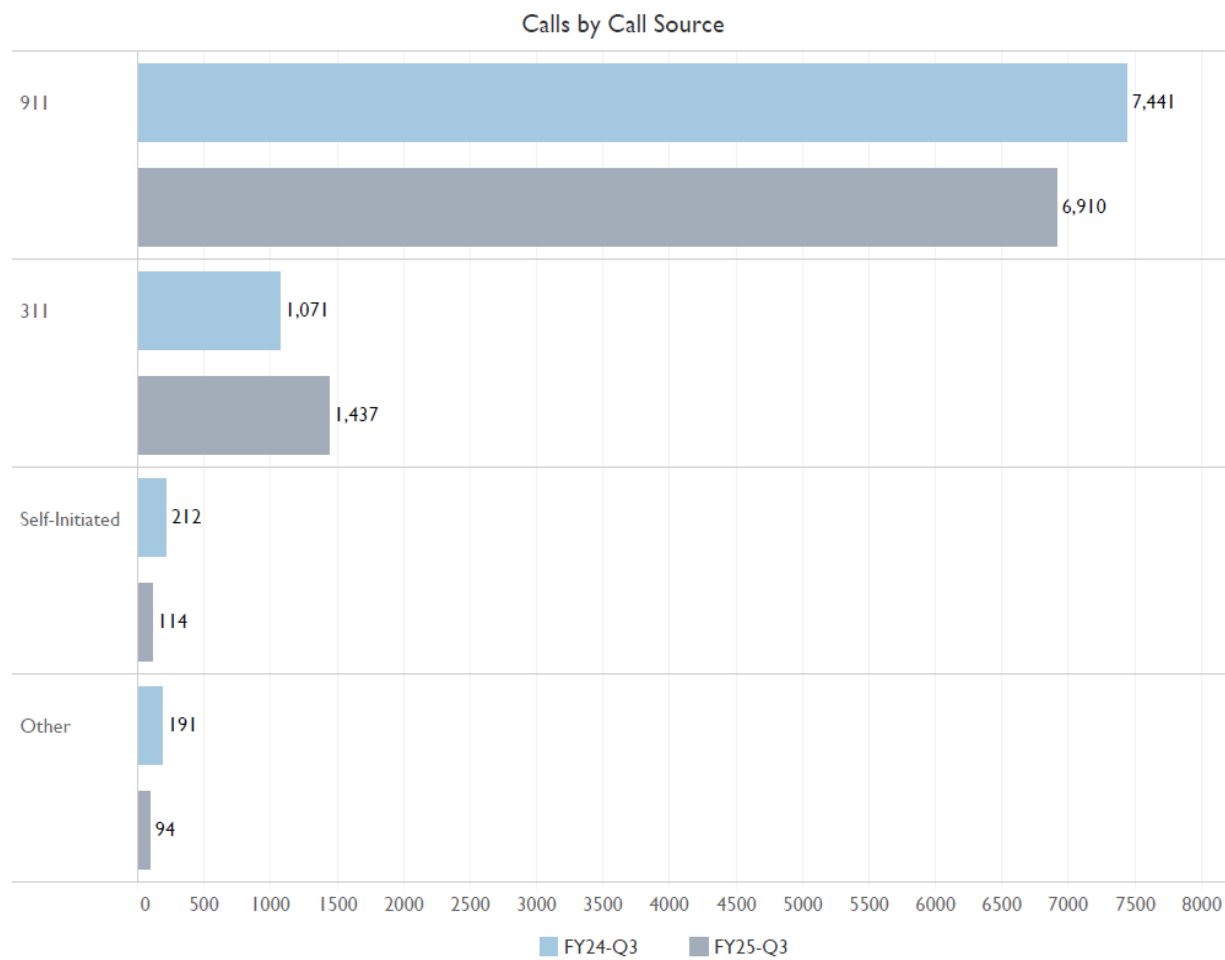
## Response Times

ACS Responders prioritize higher acuity calls such as behavioral health and suicide-related issues. Each call is designated a priority level in our system. Table 3 below breaks down the average response times to respective priority levels (Priority 2 being the highest priority on the call while Priority 5 is considered the lowest).

A notable figure is the 18 minutes and 20 second response that Responders averaged in arriving on scene to Priority 2 calls. This was an improvement from the 19 minutes and 8 second average response time to the same priority call in the last quarter

**Table 3: Average Response Times by priority for Behavioral Health Responders  – FY25 Q3**

Average Response Times FY25-Q3

| | | BHR |
|---|---|---|
| **Priority 2** | Create to Entry | 00:03:56 |
| | Entry to Dispatch | 00:39:33 |
| | Dispatch to On-Scene | 00:18:20 |
| | On-Scene to Clear | 00:29:39 |
| | Create to Clear | 01:28:55 |
| | Total Calls | 2,337 |
| | % Total Calls | 25.98% |
| **Priority 3** | Create to Entry | 00:04:24 |
| | Entry to Dispatch | 02:50:01 |
| | Dispatch to On-Scene | 00:24:40 |
| | On-Scene to Clear | 00:19:45 |
| | Create to Clear | 03:38:07 |
| | Total Calls | 2,140 |
| | % Total Calls | 23.79% |
| **Priority 4** | Create to Entry | 00:05:12 |
| | Entry to Dispatch | 07:32:41 |
| | Dispatch to On-Scene | 00:29:39 |
| | On-Scene to Clear | 00:13:34 |
| | Create to Clear | 08:20:48 |
| | Total Calls | 1,088 |
| | % Total Calls | 12.09% |
| **Priority 5** | Create to Entry | 00:03:28 |
| | Entry to Dispatch | 09:52:49 |
| | Dispatch to On-Scene | 00:17:27 |
| | On-Scene to Clear | 00:12:25 |
| | Create to Clear | 10:25:52 |
| | Total Calls | 189 |
| | % Total Calls | 2.10% |
| **Grand Total** | Create to Entry | 00:04:20 |
| | Entry to Dispatch | 03:06:00 |
| | Dispatch to On-Scene | 00:22:54 |
| | On-Scene to Clear | 00:22:18 |
| | Create to Clear | 03:52:34 |
| | Total Calls | 5,754 |
| | % Total Calls | 63.95% |

## 311 Call Outcomes

3-1-1 is the City's non-emergency call center. Calls that originate from 3-1-1 are typically prioritized as lower priority than 9-1-1 calls. The department is starting to see an increase in 9-1-1 high priority calls. The average time to close an ACS 3-1-1 service request in FY2025-Q3 was 21 hours and 15 minutes. While FY2025-Q2 saw 3-1-1 calls closing at an average of 5 hours and 18 minutes, FY25Q3 saw a 34.2% increase in service requests, or 409 more requests, compared to the same quarter last year. ACS continues to perform well within a 72-hour window for 3-1-1 tickets. The department continues to meet the growing demand for our services.

## Call Outcomes

ACS responses often have more than one outcome. This can be due to assisting multiple people on a call or addressing multiple needs. Table 4 below breaks down how often certain outcomes occur on ACS responses. Notably, in FY24 Q3, about 6.2% calls resulted in transport to a service provider and 24.1% of calls resulted in no person being found; this is an improvement of nearly 2.5% from the previous quarter.

In regards to safety, ACS Responders called out APD for assistance on 1.1% of calls when they determine law enforcement is more appropriate before they engage in a response.

**Table 4: Frequency of Outcomes during ACS Responses – FY25 Q3**

### Frequency of Outcomes FY25-Q3

| Call Outcomes | % of Calls w/this Outcomes |
|---|---|
| No Person Found | 24.1% |
| Performed Welfare Check | 17.7% |
| Provided Information | 15.2% |
| Declined Services or Walked Away | 15.6% |
| Directly Met Need | 9.1% |
| Transported | 6.2% |
| Connected to a Service / Resource | 4.3% |
| No Action Required | 2.1% |
| AFR Call-out | 1.6% |
| Attempted Referral | 1.0% |
| Other | 1.3% |
| APD Call-out | 1.1% |
| Responder Canceled for Safety Concerns | 0.2% |
| Repeat Consumer - No Additional Action | 0.2% |
| Canceled En Route | 0.4% |
| Used Lifesaving Technique | 0.0% |
| Used Language Access Line | 0.0% |

**Table 5: Service Provider Transport Outcomes – FY25 Q3**

## Service Provider Transports FY25-Q3

| Service Providers | # of Transports to this location |
|---|---|
| University of New Mexico (UNM) Adult Psychiatric Center | 129 |
| Presbyterian Kaseman Hospital | 114 |
| Gateway West | 78 |
| Other | 61 |
| Gateway Center First Responder Drop Off | 59 |
| University of New Mexico Hospital (UNMH) | 32 |
| Lovelace Medical Center Downtown | 25 |
| Presbyterian Hospital | 22 |
| Joy Junction | 21 |
| HopeWorks | 13 |
| CARE Campus Detox (Formerly MATS) | 13 |
| Veterans Affairs (VA) Hospital | 12 |
| Albuquerque Community Safety | 11 |
| UNMH Crisis Triage Center | 8 |
| The Rock at Noon Day | 8 |
| Albuquerque Opportunity Center (AOC) | 5 |
| University of New Mexico (UNM) Children's Psychiatric Center | 4 |
| Lovelace Women's Hospital | 4 |
| Good Shepard Fresh Start | 3 |
| First Nations Community Healthsource | 3 |
| Albuquerque Health Care for the Homeless (AHCH) | 3 |
| Veteran Intergation Center (VIC) | 1 |
| The Peer Living Room (Bernalillo County) | 1 |
| Safehouse | 1 |
| New Day Youth & Family Services | 1 |
| Haven House | 1 |
| God's Warehouse | 1 |
| Gateway Women's | 1 |
| Albuquerque Sexual Assault Nurse Examiners (SANE) | 1 |
| Abq StreetConnect (Heading Home) | 1 |

## Violence Prevention & Intervention Data

The Violence Prevention & Intervention Division houses multiple programs that address violence in the community.

### VIP Custom Notifications

ACS's Violence Intervention Program (VIP), which it runs in collaboration with APD, defines success as helping participants exit the cycle of violence. This is defined through recidivism, or recurrent involvement in further violent crime. VIP maintains a 94% two-year running success rate of participants not recidivating in further violent crime.

VIP Peer Support Workers and APD officers identify and intervene with the individuals most likely to engage in gun violence. This intervention is called a Custom Notification. The tables below compare the outputs of the program to this time last year.

**Table 6: Q3 VIP/HBVIP Custom Notifications Yearly Comparison**

|                                   | FY24 Q3 | FY25 Q3 |
|-----------------------------------|---------|---------|
| Candidates for Customs Attempted  | 89      | 82      |
| Custom Notifications Delivered    | 70      | 38      |
| Clients Engaged in Services       | 16      | 22      |

The Opioid Education & Prevention (OEP) team interrupts cycles of addiction by providing education and resources to individuals and families after an overdose. The team focuses on substance abuse with opioids. ACS OEP team receives referrals from partnered departments on individuals caught in cycles of opioid abuse and reaches out to them to offer services. When successful contact is made an engagement begins.

**Table 7 OEP Insights**

| OEP                 | FY25 Q3 |
|---------------------|---------|
| OEP Referrals       | 191     |
| Candidates Engaged  | 111     |
| Candidates Seeking Tx | 32    |

With the **School Based Violence Intervention Program (SBVIP),** students are referred by teachers and staff based on history and risk to be involved in gun violence. Upon choosing to participate in the program, they are connected with a SBVIP specialist and other participating peers to share experiences, build connections, and improve academic performance.  By providing direct intervention the program aims to reduce incidents of violence, improve student well-being, and create safer school environments, ultimately benefiting the broader Albuquerque community. The program is currently in West Mesa High School, and Atrisco Heritage High School.

SBVIP receives referrals by partnering with APS and utilizing their early warning indicator system. Perspective students are evaluated for fitness to the program and if the fit makes sense, the team will begin their wrap around services.

The number of students both referred to and enrolled in the program has grown tremendously. This can be attributed to the increased support of the program at West Mesa High School, and the implementation of the program at Atrisco Heritage Academy High School.

**Table 8 Q3 SBVIP Insights**

| SBVIP | FY24 Q3 | FY25 Q3 |
|---|---|---|
| Students Referred based on (intake/referral) dt | | 25 |
| Actively Engaged (based on case notes) | | 57 |

### Connection to Services

A significant part of what VIP does is get participants to engage with services that meet their underlying needs. Table 9 breaks down the various types of services VIP have connected participants to this quarter.

**Table 9: Types of Services VIP Referred Participants to during – FY25 Q3**

| Service | FY25-Q3 |
|---|---|
| Peer Support | 14 |
| Temporary/Emergency Shelter/Housing | 6 |
| CVRC | 4 |
| Basic Needs | 4 |
| Other External Services | 3 |
| Medicated Assisted Treatment - MAT | 2 |
| Behavioral/Mental Health Services | 2 |
| Job Placement | 2 |
| Resources Navigation | 2 |
| GED | 1 |
| Higher Education | 1 |
| Other- In-house Service | 1 |

## Community-Oriented Response & Assistance (CORA) Program

CORA Responders work with individuals, families, and communities to heal and move forward after traumatic events including shootings, deaths, and domestic violence. The table below shows the types of incidents CORA has received referrals for compared to this time last year. Notably CORA has seen a significant increase in referrals to support victims of domestic violence

**Table 10: Q3 CORA Referrals by Incident Type Yearly Comparison**

| Incident Type | FY24 Q3 | FY25 Q3 |
|---|---|---|
| DV/Sexual Assault | 77 | 34 |
| Other | 11 | **23** |
| Homicide | 9 | 23 |
| Gun/Other Violence | 103 | 8 |
| Suicide | 17 | 3 |
| Other Deaths | 42 | 2 |

## Key Takeaways – Quarterly Metrics

- ACS is on pace in FY 2025 to surpass FY 2024's call for service number by 9.9%.
- 3-1-1 tickets continue to close well within 24-hour window.
- Response times to Priority 2 calls are almost 1 minute quicker than previous quarter.
- A total of 700 ACS responses in FY2025 Q2 resulted in a transport to service providers or shelter.
- CORA Responders assisted 93 individuals.

## Appendix A: Citywide Map of ACS Responses

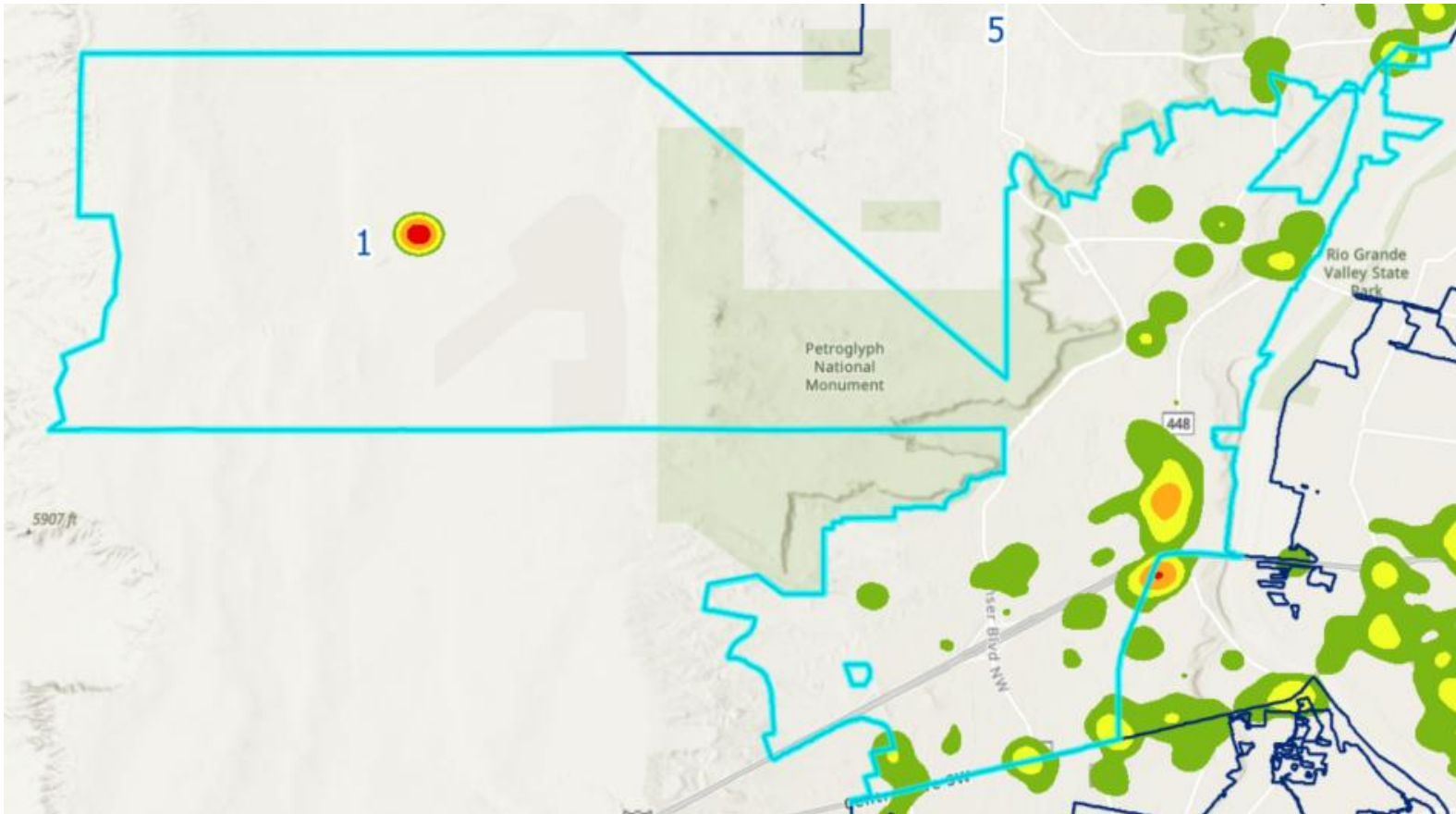**Figure 3: Citywide ACS Responses during FY25-Q3**

In FY25-Q3, ACS created 8,465 reports citywide, a 0.5% increase from FY25-Q2.
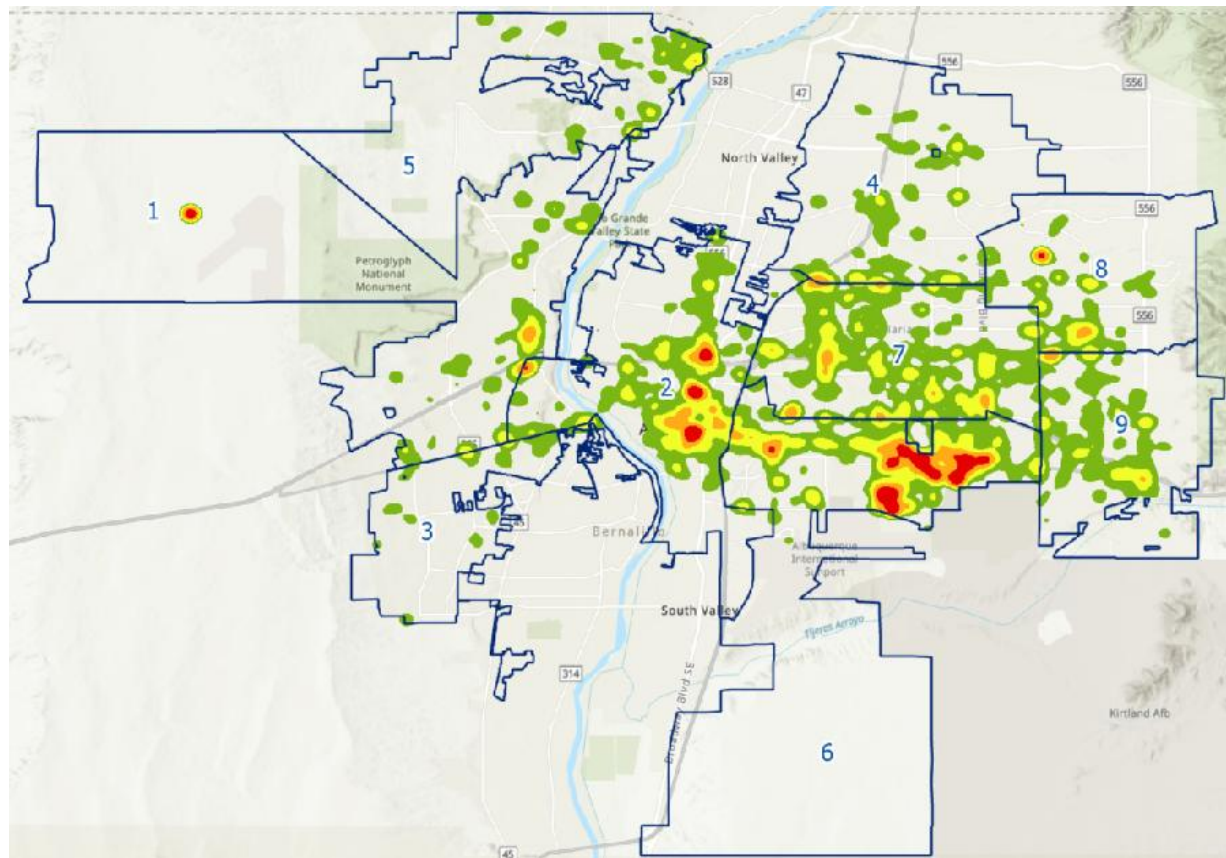
## Appendix B: Council District 1 CFS Map
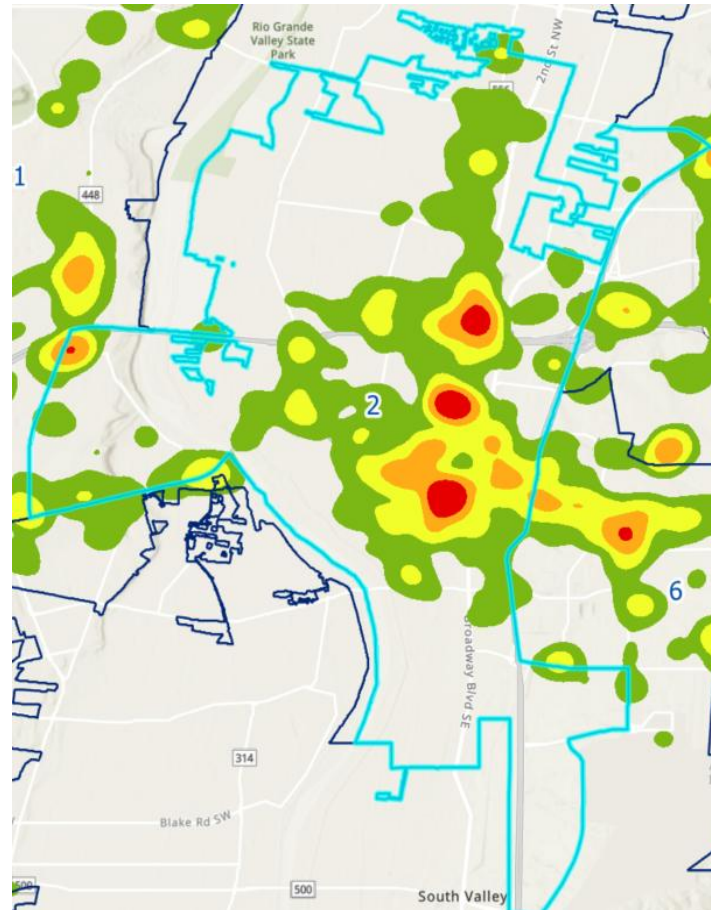
**Figure 4: ACS Responses in CD1 during FY25-Q3**

In FY25-Q3, ACS created 603 reports in Council District 1, a 12.3% increase from FY25-Q2.

# Appendix C: Council District 2 CFS Map
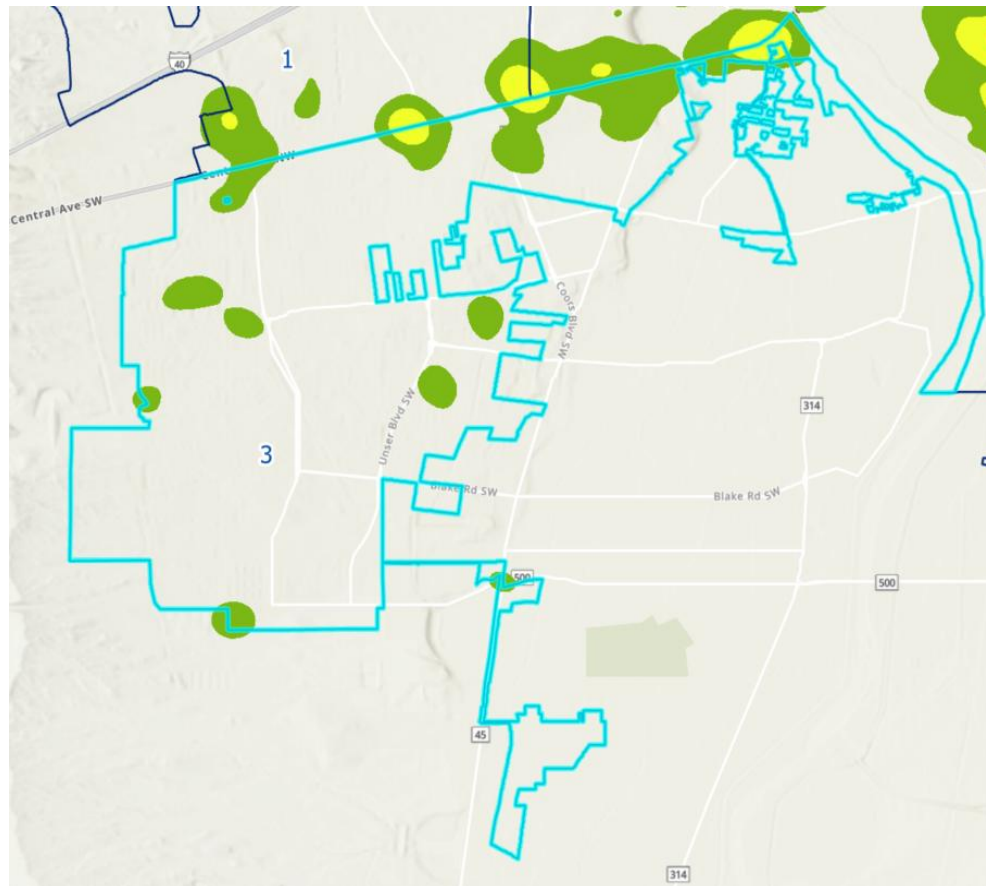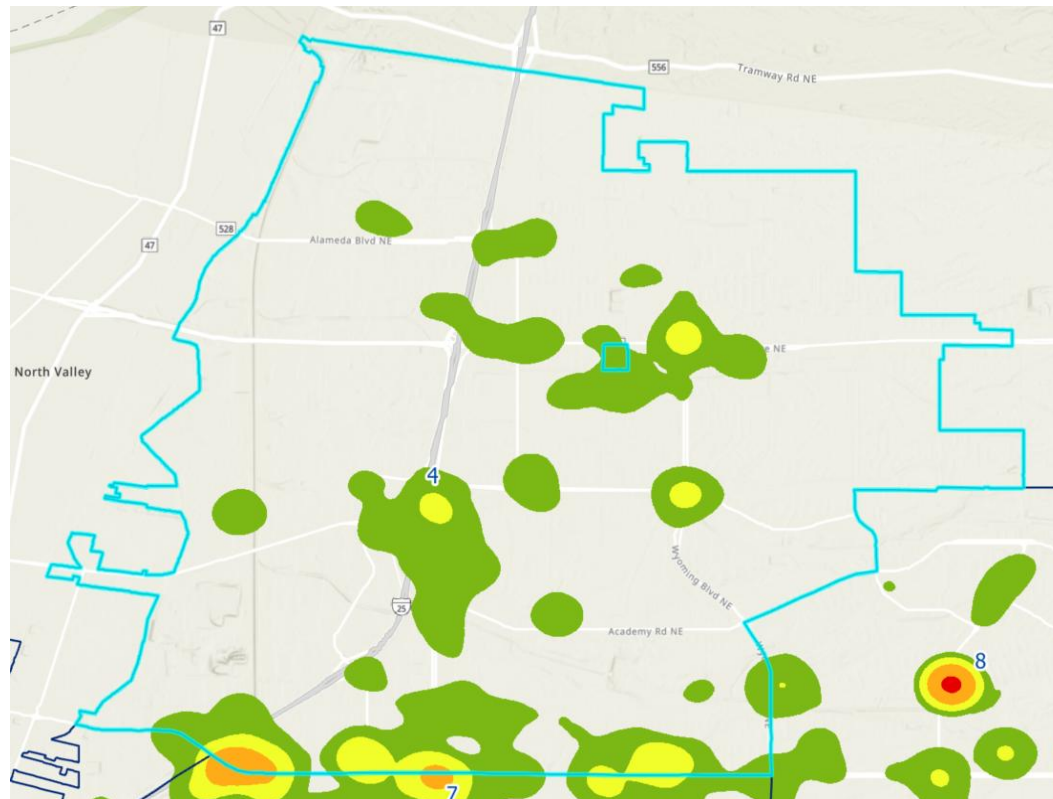
**Figure 5: ACS Responses in CD2 during FY25-Q3**

In FY25-Q3, ACS created 1,694 reports in Council District 2, a 5.3% decrease from FY25-Q2.

# Appendix D: Council District 3 CFS Map
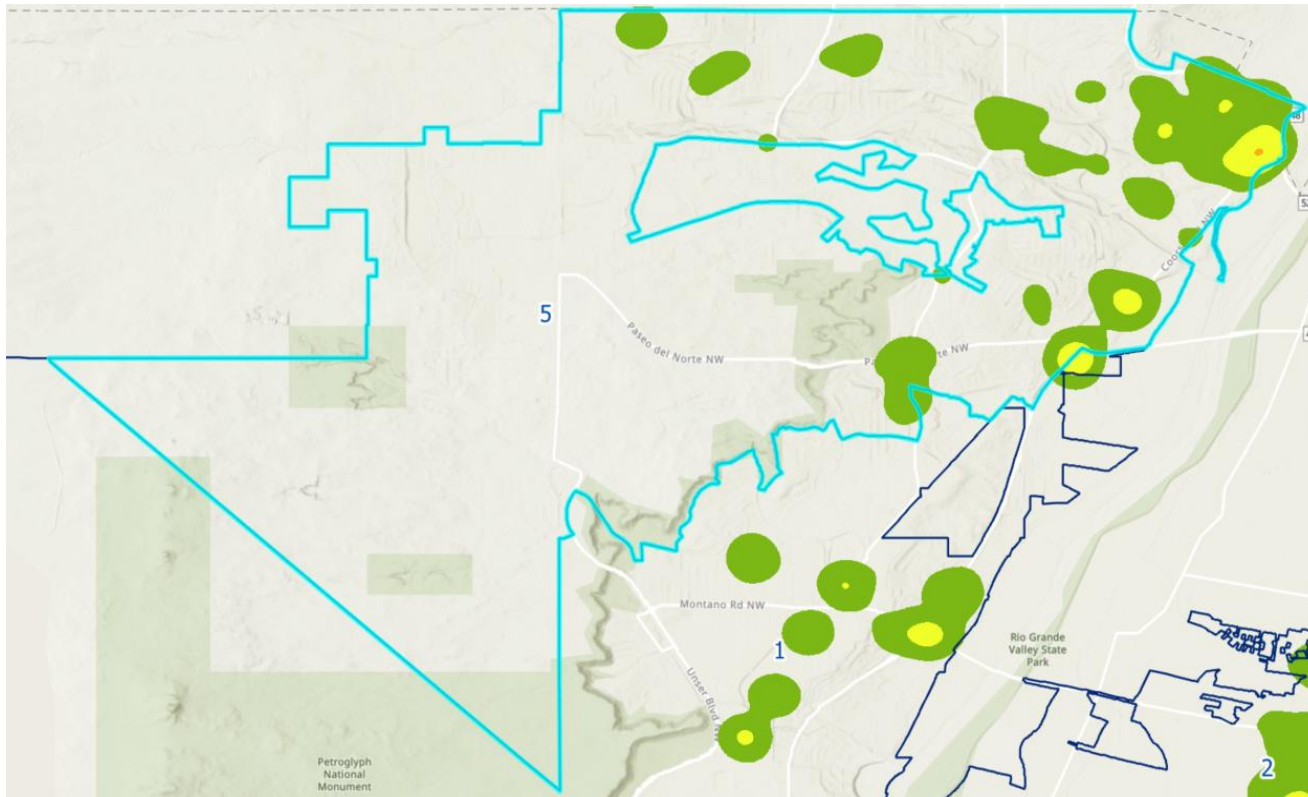
**Figure 6: ACS Responses in CD3 during FY25-Q3**

In FY25-Q3, ACS created 212 reports in Council District 3, a 9.8% decrease from FY25-Q2.

# Appendix E: Council District 4 CFS Map

**Figure 7: ACS Responses in CD4 during FY25-Q3**

In FY25-Q3, ACS created 505 reports in Council District 4, a 3.2% decrease from FY25-Q2.

## Appendix F: Council District 5 CFS Map

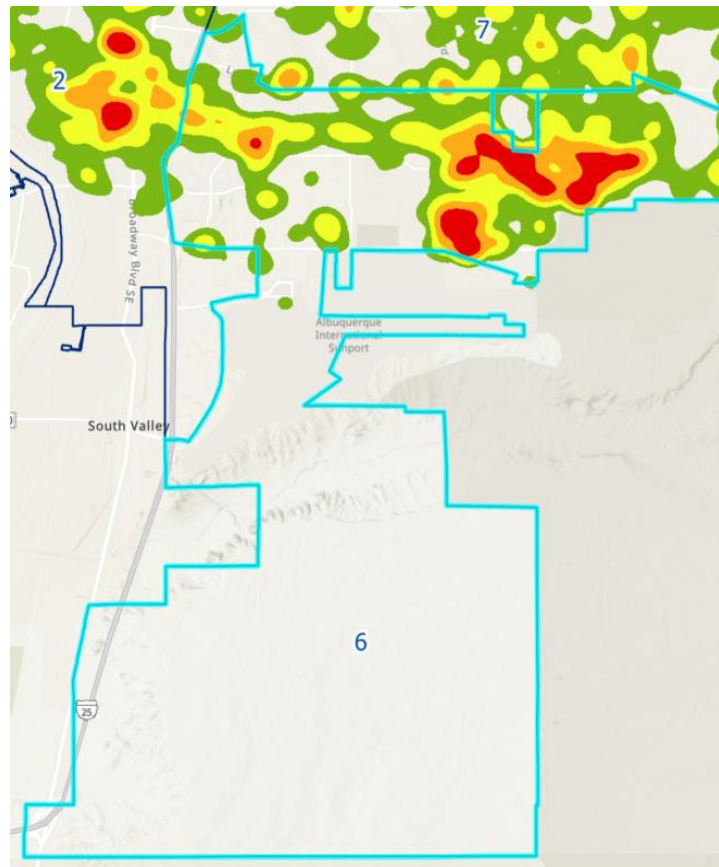**Figure 8: ACS Responses in CD5 during FY25-Q3**

In FY25-Q3, ACS created 332 reports in Council District 5, a 17.7% increase from FY25-Q2.

## Appendix G: Council District 6 CFS Map

**Figure 9: ACS Responses in CD6 during FY25-Q3**

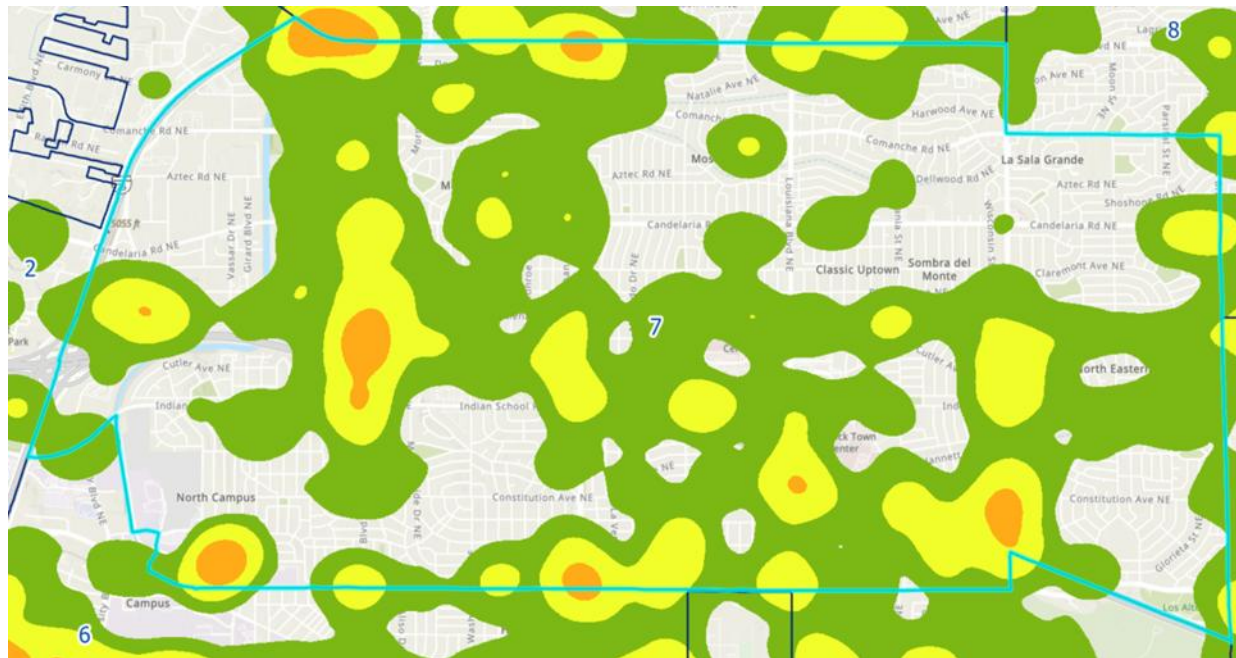In FY25-Q3, ACS created 2,485 reports in Council District 6, a 3.5% increase from FY25-Q2.

# Appendix H: Council District 7 CFS Map

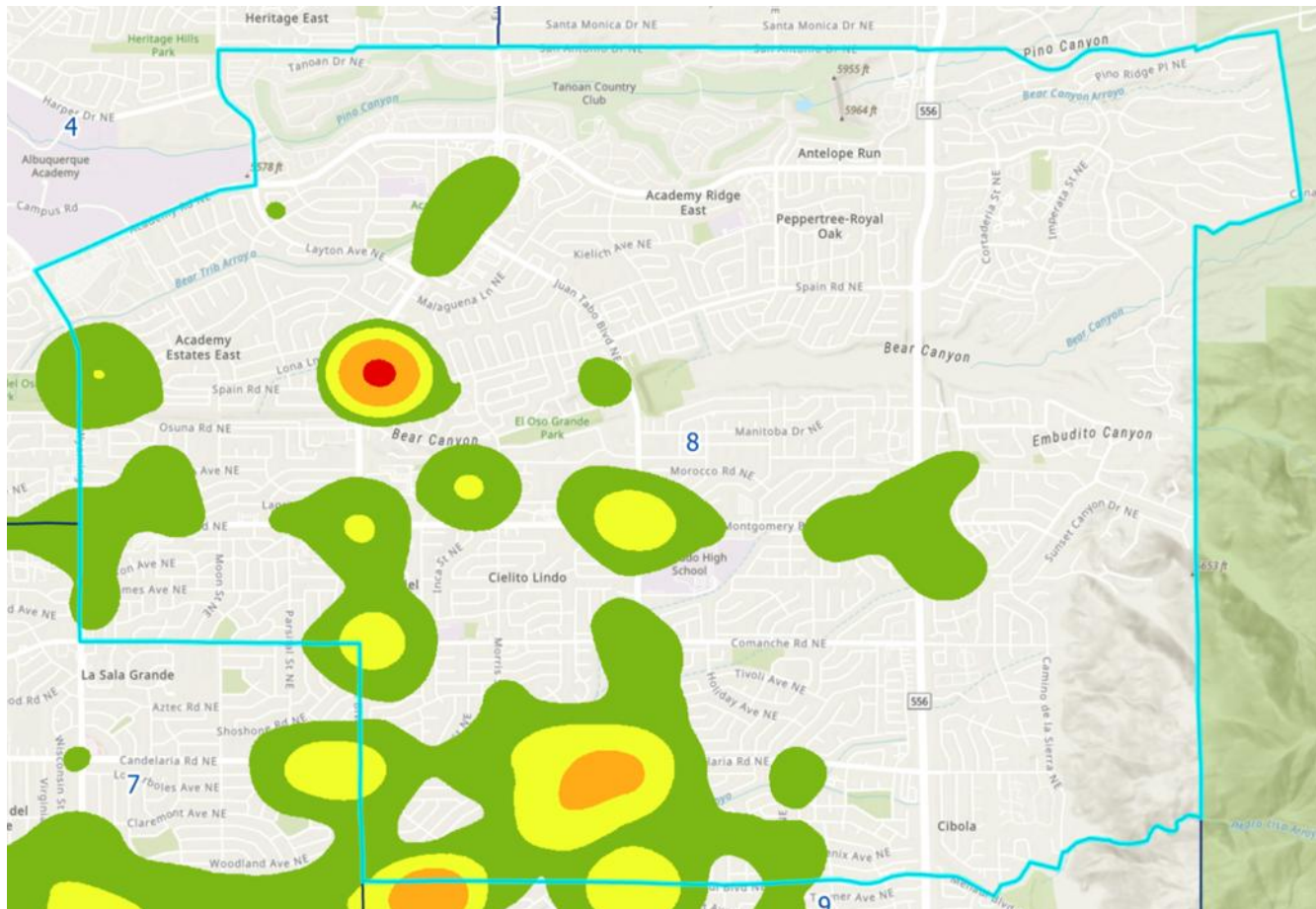**Figure 10: ACS Responses in CD7 during FY25-Q3**

In FY25-Q3, ACS created 1,518 reports in Council District 7, a 1.9% increase from FY25-Q2.

## Appendix I: Council District 8 CFS Map

**Figure 11: ACS Responses in CD8 during FY25-Q3**

In FY25-Q3, ACS created 476 reports in Council District 8, a 1.3% increase from FY25-Q2.

# Appendix J: Council District 9 CFS Map

**Figure 12: ACS Responses in CD9 during FY25-Q3**

In FY25-Q3, ACS created 640 reports in Council District 9, an 8.3% decrease from FY25-Q2.