City of Albuquerque

Community Safety Department

FY26 Q4 Report

July 2026

Jodie Esquibel, Director

(This page left intentionally blank)

Contents

(This page left intentionally blank)

Programmatic Updates and Insights

In Fiscal Year 2026 (FY26) Q4 Albuquerque Community Safety Department (ACS) has continued demonstrating growth and increasing capacity. Through FY26 Q4, ACS responded to 51,217 calls for service (CFS), a 54.6% (or 5,982 calls) increase compared to FY25. These are calls primarily focusing on mental health, homelessness, and addiction that do not require a police response.

Figure 1: Total ACS Calls for Service over the Life of the Department

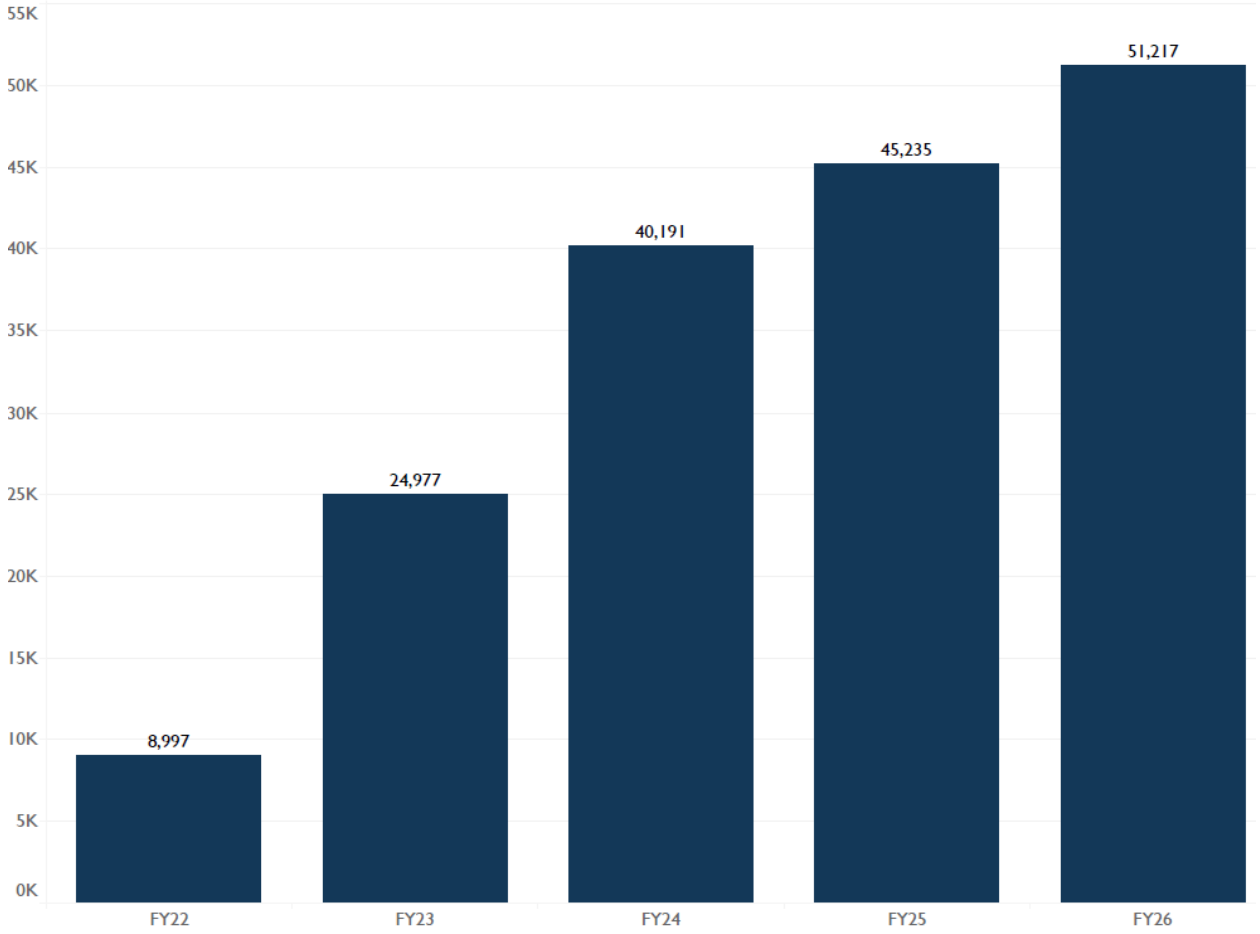


Table 1 and Table 2: Comparison of Call Types by Shift (Created Time and Dispatch Time)

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 91% 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 FY2026-Q4 there were 5,977 calls for this call type.

Table 1: ACS CAD Events by Call Create Time – FY26 Q4

ACS CAD Events by Call Create Time FY26-Q4

Call Type	Days	Swing	Graves	Total	Percentage
UNSHELTERED INDIVIDUAL	1,810	2,166	2,001	5,977	50.91%
WELLNESS CHECK	757	977	384	2,118	18.04%
WELFARE CHECK	379	572	263	1,214	10.34%
ROUTINE PASS-BY	426	297	165	888	7.56%
BEHAVIORAL HEALTH	209	293	273	775	6.60%
SUICIDAL IDEATION	127	170	185	482	4.11%
DISTURBANCE	60	48	30	138	1.18%
PANHANDLER	31	41	5	77	0.66%
SUSPICIOUS PERSON	9	26	16	51	0.43%
GOLDEN OPPORTUNITY		7	4	11	0.09%
NEEDLES	1	2	3	6	0.05%
COMMUNITY ENGAGEMENT	4			4	0.03%
Grand Total	3,813	4,599	3,329	11,741	100.00%

Table 2: ACS CAD Events by Call Dispatch Time – FY26 Q4

CAD Events by Dispatch FY26-Q4

Call Type	Days	Swing	Graves	Total	Percentage
UNSHELTERED INDIVIDUAL	1,725	2,073	1,945	5,743	53.75%
WELLNESS CHECK	751	967	377	2,095	19.61%
WELFARE CHECK	364	566	259	1,189	11.13%
BEHAVIORAL HEALTH	208	293	272	773	7.23%
SUICIDAL IDEATION	124	169	183	476	4.45%
DISTURBANCE	60	49	30	139	1.30%
ROUTINE PASS-BY	42	73	15	130	0.73%
PANHANDLER	32	41	5	78	0.44%
SUSPICIOUS PERSON	9	25	13	47	1.22%
NEEDLES	1	2	3	6	0.06%
GOLDEN OPPORTUNITY		5	4	9	0.08%
Total	3,316	4,263	3,106	10,685	100.00%

ACS'S SBVIP CELEBRATES 13 GRADUATES

In June, ACS celebrated 13 graduating seniors who successfully completed the School-Based Violence Intervention Program (SBVIP), recognizing their resilience and academic achievement. Throughout high school, SBVIP Intervention Specialists provided mentorship, conflict resolution, and individualized support to help students overcome barriers related to violence, trauma, and substance use. The program continues to strengthen partnerships with Albuquerque schools by connecting youth with resources that promote safety, well-being, and long-term success. In 2024 the program saw one graduate, in 2025 six, and in 2026 13. This success helps illustrate the positive impact of prevention-focused, community-based interventions on student outcomes.

ACS CONNECT TO CARE REACHES RECORD NUMBER OF INDIVIDUALS

In May, ACS Connect to Care event reached a record 169 individuals experiencing homelessness, providing direct access to housing, healthcare, identification services, food assistance, transportation, and other essential resources. The bi-weekly initiative continues to reduce barriers by bringing multiple service providers together in one location, connecting residents with immediate support and pathways toward long-term stability.

Seasons of Nonviolence Kicks Off Summer Programming

In June, ACS's Seasons of Nonviolence campaign welcomed more than 7,000 attendees during its first month, nearly doubling participation from the previous year. Through free, family-friendly events, the initiative connected youth and families with community resources while promoting positive engagement and nonviolence. The campaign will continue throughout the summer with additional events designed to strengthen community connections and support safer neighborhoods.

ACS PARTNERS WITH YDI ON TWO NEW INITIATIVES

This Summer, ACS and Youth Development Inc. launched two new initiatives to expand support for youth and families impacted by violence and trauma. Through a new partnership, YDI will provide youth cognitive behavioral health therapy and case management services at the ACS Trauma Recovery Center. ACS is also partnering with YDI and the Office of Equity and Inclusion on a Guaranteed Basic Income program that will provide eligible youth with monthly financial assistance alongside mentoring, education, and behavioral health services. Together, these initiatives strengthen prevention efforts, promote healing, and create new pathways to long-term stability for Albuquerque's youth.

ACS LEADERSHIP HONORED IN STATEWIDE INITIATIVE

ACS Director Jodie Esquibel and Deputy Director Walter Adams were honored as part of New Mexico's 250 Flags initiative, recognizing individuals whose leadership and service strengthen communities across the state. Their recognition highlights ACS's continued commitment to innovative, compassionate, and people-centered public safety.

Key Takeaways – Programmatic Updates

- Department responded to 51,117 calls for service in FY2026
- ACS's SBVIP team helps 13 seniors graduate their respective high schools
- Connect to Care event sets record supporting nearly 170 unhoused individuals
- ACS partnered with YDI on two major at-risk youth initiatives

Call Volume

FY26-Q4 total call volume was 16.8% higher compared to FY25-Q4. A significant factor is a 10.3% increase in 9-1-1 calls, and a 75.3 % increase in 3-1-1 calls (see Figure 3), and the team is continuing to field thousands of 9-1-1 calls.

Figure 2: Q4 CFS Yearly Comparison - FY25 Q4 vs. FY26 Q4

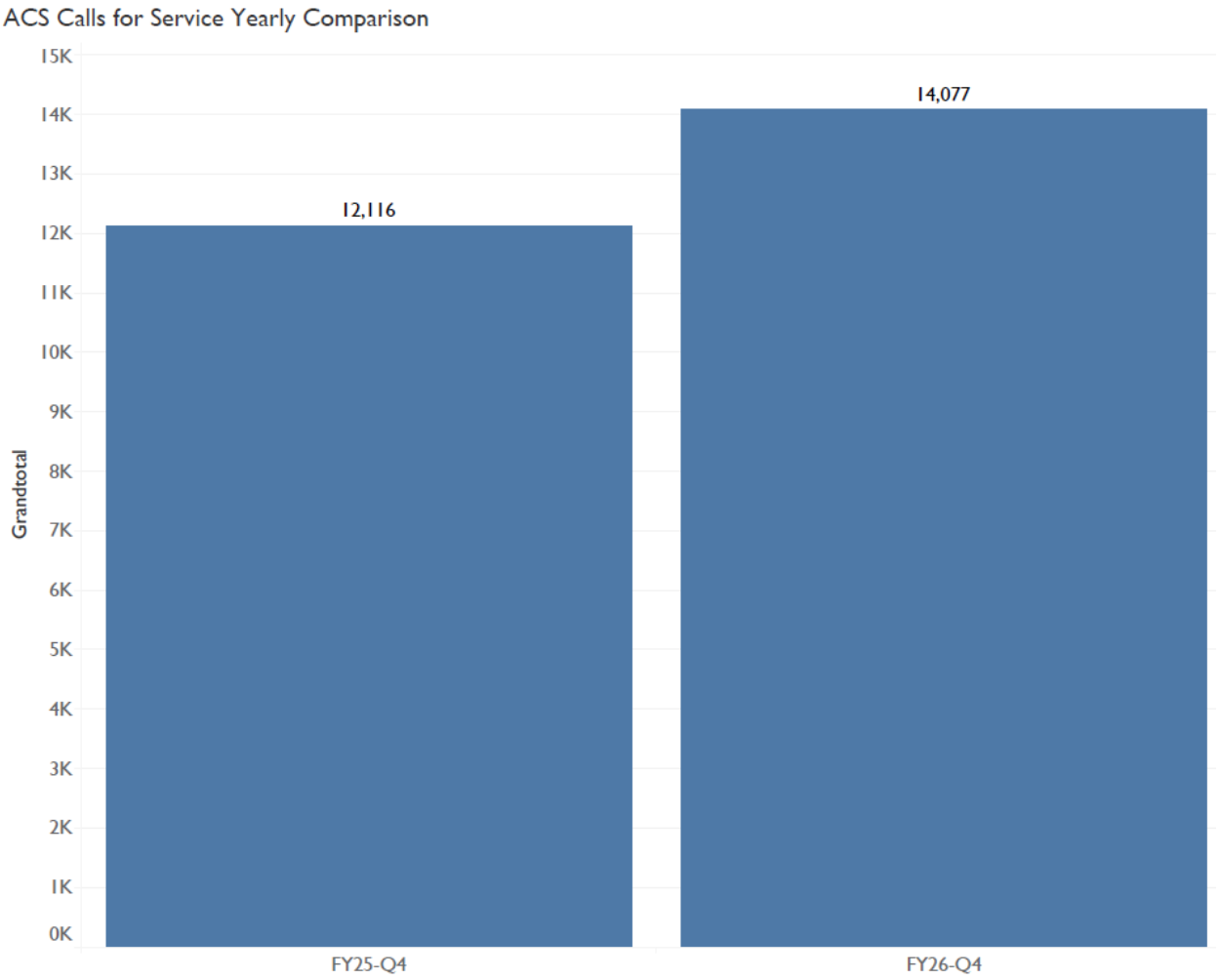
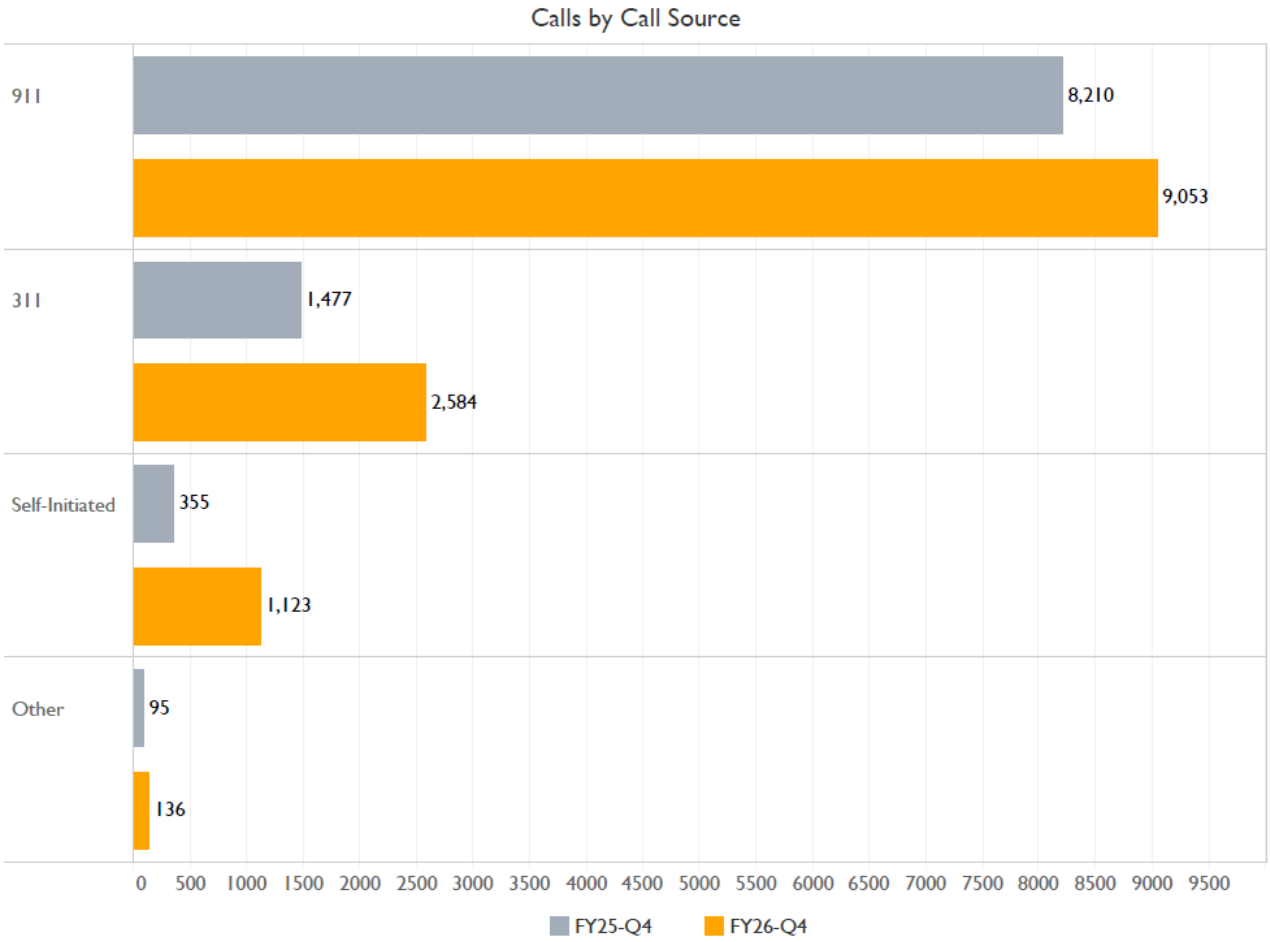


Figure 3: FY26 Q4 vs FY26 Q4 Call Sources Quarterly Comparison

Figure 3, 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.



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 1 being the highest priority on the call while Priority 5 is considered the lowest).

Two notable figures include: Responders were en route to Priority 1 calls in FY26 Q3 in about 16 minutes of a call being created, an improvement of more than 2 minutes from FY26 Q3, and an average of 19 minutes and 14 seconds for them to arrive on scene for these calls.

Table 3: Average Response Times by priority for Behavioral Health Responders – FY26 Q4

Average Response Times FY26-Q4

		BHR
Priority 1	Create to Entry	00:03:00
	Entry to Dispatch	00:16:08
	Dispatch to On-Scene	00:17:56
	On-Scene to Clear	01:02:10
	Create to Clear	01:36:49
	Total Calls	254
	% Total Calls	2.21%
Priority 2	Create to Entry	00:03:37
	Entry to Dispatch	00:24:56
	Dispatch to On-Scene	00:16:43
	On-Scene to Clear	00:31:44
	Create to Clear	01:15:42
	Total Calls	696
	% Total Calls	6.04%
Priority 3	Create to Entry	00:04:42
	Entry to Dispatch	00:54:44
	Dispatch to On-Scene	00:20:48
	On-Scene to Clear	00:27:44
	Create to Clear	01:46:01
	Total Calls	824
	% Total Calls	7.16%
Priority 4	Create to Entry	00:03:24
	Entry to Dispatch	01:18:13
	Dispatch to On-Scene	00:19:52
	On-Scene to Clear	00:22:18
	Create to Clear	02:00:57
	Total Calls	377
	% Total Calls	3.27%
Priority 5	Create to Entry	00:02:33
	Entry to Dispatch	03:41:43
	Dispatch to On-Scene	00:22:08
	On-Scene to Clear	00:24:37
	Create to Clear	03:54:22
	Total Calls	781
	% Total Calls	6.78%
Grand Total	Create to Entry	00:03:33
	Entry to Dispatch	01:26:32
	Dispatch to On-Scene	00:19:43
	On-Scene to Clear	00:30:06
	Create to Clear	02:14:05
	Total Calls	2,932
	% Total Calls	25.46%

311 Call Outcomes

3-1-1 is the city's non-emergency call center. Calls that originate from 311 are typically prioritized lower than 9-1-1 calls. The average time to close an ACS 3-1-1 service request was 14 hours and 42 minutes in FY2026-Q4 while the previous quarter, FY2026-Q3, saw 3-1-1 calls closing at an average of 19 hours and 38 minutes. FY26-Q4 saw a 75% increase in service requests (or 1,107 more requests). 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 addressing multiple needs. Table 4 below breaks down how often certain outcomes occur on ACS responses. Notably, in FY26 Q4, about 10.8% calls resulted in transport to a service provider (2.9% higher than last quarter), and 23.2% of calls resulted in no person being found.

In regards to safety, ACS Responders called out APD for assistance 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 – FY26 Q4

Frequency of Outcomes All

Call Outcomes	2025 Q4	2026 Q4	2026 Q4 % of Calls
No Person Found	4,099	4,484	23.2%
Performed Welfare Check	2,670	2,116	10.9%
Provided Information	2,221	3,284	17.0%
Declined Services or Walked Away	2,021	2,731	14.1%
Directly Met Need	1,279	2,093	10.8%
Transported	1,028	1,844	9.5%
Connected to a Service / Resource	499	1,436	7.4%
No Action Required	265	342	1.8%
AFR Call-out	195	229	1.2%
Attempted Referral	127	249	1.3%
Other	182	165	0.9%
APD Call-out	140	206	1.1%
Responder Canceled for Safety Concerns	17	31	0.2%
Repeat Consumer - No Additional Action	18	9	0.0%
Canceled En Route	55	92	0.5%
Used Lifesaving Technique	5	7	0.0%
Used Language Access Line	3	8	0.0%

Table 5: Service Provider Transport Outcomes – FY26 Q4

Service Provider Transports FY26-Q4

Service Providers	# of Transports to this location
Gateway First Responder Receiving Area (FRRA)	390
Gateway West	318
University of New Mexico (UNM) Adult Psychiatric Center	127
Presbyterian Kaseman Hospital	122
Gateway Sobering	118
Other	79
Greyhound Station	47
Albuquerque Community Safety	40
University of New Mexico Hospital (UNMH)	39
HopeWorks	39
CARE Campus Detox (Formerly MATS)	37
Lovelace Medical Center Downtown	33
Presbyterian Hospital	28
The Rock at Noon Day	24
Joy Junction	23
Albuquerque Opportunity Center (AOC)	23
Gateway Women's	21
Veterans Affairs (VA) Hospital	15
UNMH Crisis Triage Center	13
Gateway Men's	11
Safehouse	9
First Nations Community Healthsource	9
Albuquerque Health Care for the Homeless (AHCH)	9
Lovelace Women's Hospital	7
University of New Mexico (UNM) Children's Psychiatric Center	5
State of the Heart	5
Transgender Resource Center	3
Haven House	3
Good Shepard Fresh Start	3
West Mesa Community Center	2
The Compassion Services Center	2
Steelbridge	2
Gateway Young Adult	2
Alvarado Transit Center	2
Wings for Life International	1
Vizionz-Sankofa	1
Storehouse	1
New Mexico Legal Aid	1
Johnny Tapia Community Center at Wells Park	1
Haven Behavioral Hospital	1
Gateway Shelter Shuttle Pickup Location	1
Gateway Medical Respite	1
Crime Victims Reparation Commission (CVRC)	1
CABQ Library	1
Bernalillo County Housing Department	1
Adult Protective Services (APS)	1
Abq StreetConnect (Heading Home)	1
A Child's Voice	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 holds a 95.7% 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: Q4 VIP/HBVIP Custom Notifications Yearly Comparison

VIP/HBVIP	FY25 Q4	FY26 Q4
Candidates for Customs Attempted	75	82
Custom Notifications Delivered	50	47
Clients Engaged in Services	37	31

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	FY26 Q4
OEP Referrals	352
Candidates Engaged	195
Candidates Seeking Tx	44
Narcan Doses Given	63
Connections to Transitional Living	125

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, RFK High School, Atrisco Heritage High School, and Del Norte 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 **Youth VIP** team focuses on at-risk youth who are not in school, not currently working, and do not have a support system. This group of youth receive similar services to that of SBVIP students

The number of students both referred to and enrolled in the programs has grown tremendously. This can be attributed to the increased support of the program at the four Albuquerque-area high schools.

Table 8: FY26 Q4 SBVIP/Youth VIP Insights

SBVIP/YOUTH VIP	FY25 Q4	FY26 Q4
Students Referred based on (intake/referral)	27	45
Actively Engaged (based on case notes)	66	175

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 – FY26 Q4

VIP Referred Service	FY26-Q4
Peer Support	27
Resource Navigation	27
Other External Service	17
GED	6
Rental/Utility Assistance	6
CVRC	5
Job Placement	5
Job Training	4
Temporary/Emergency Shelter	3
Behavioral/Mental Health Services	2
Personal Identifying Docs	1
Family Counseling/Intervention	0
Medical Services	0
Trauma Recovery	0

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: Q4 CORA Referrals by Incident Type Yearly Comparison

CORA REFERRED SERVICE	FY25 Q4	FY26 Q4
Resource Navigation	69	136
Temporary/Emergency Shelter	40	55
Legal Intervention	4	37
Transportation	14	28
Basic Needs	15	19
Other External Service	27	19
CVRC	10	16
Behavioral/Mental Health Services	23	13
Family Counseling/Intervention	4	11
Substance Use Treatment	3	9
Rental/Utility Assistance	5	8
Peer Support	4	7
Trauma Recovery	5	5
Higher Education	0	4
Job Placement	1	4
Medical Services	1	4
Child Care	0	3
Other In-House Service	1	3
Funeral and burial assistance	4	2
Job Training	1	1
Personal Identifying Docs	4	1
GED	1	0
Medicated Assisted Treatment	1	0

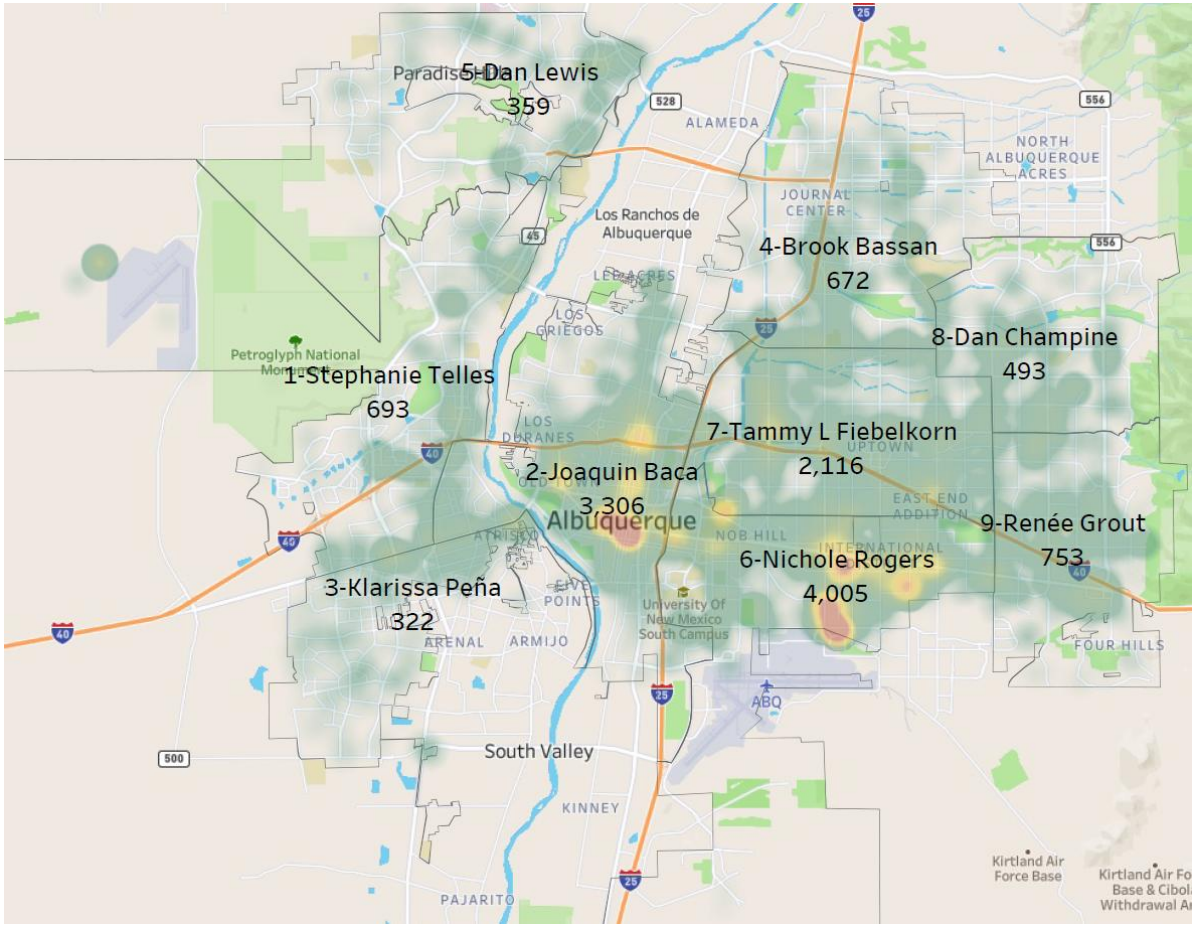
Key Takeaways – Quarterly Metrics

- Department responded to record 9,053 9-1-1 calls
- ACS FY 2026 Q4 surpassed FY 2025 Q3's calls for service number by 1,961
- 3-1-1 tickets on average closed under a 15-hour window
- A total of 1,614 ACS responses in FY2026 Q3 resulted in a transport to service providers or shelter
- CORA Responders referred 385 individuals to services

Appendix A: Citywide Map of ACS Responses

Figure 4: Citywide ACS Responses during FY26-Q4

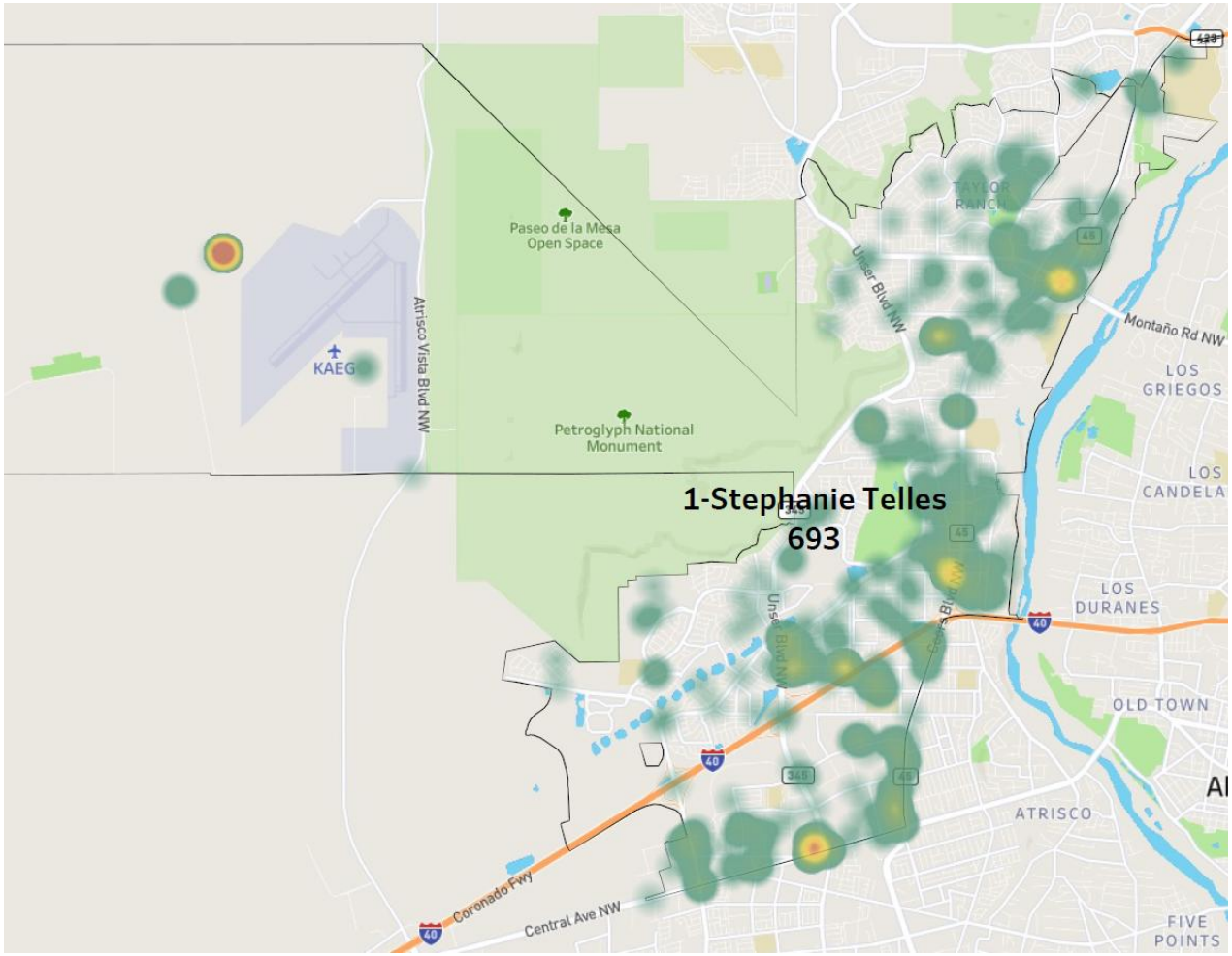
In FY26-Q4, ACS created 12,709 calls for service reports, and increase of 18.7%.



Appendix B: Council District 1 CFS Map

Figure 5: ACS Responses in CD1 during FY26-Q4

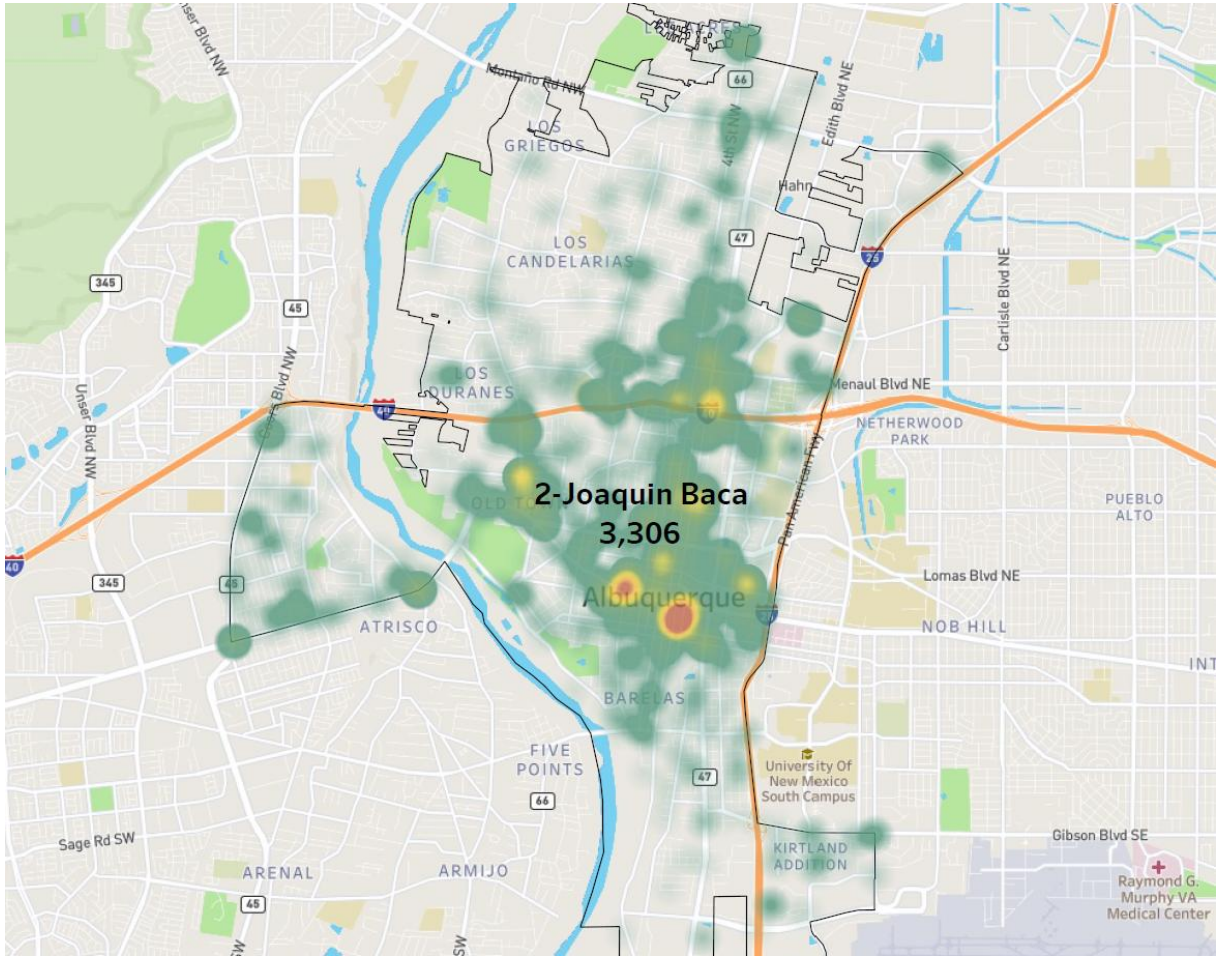
In FY26-Q4, ACS created 693 reports in Council District 1, a 34.3% decrease from FY26-Q3.



Appendix C: Council District 2 CFS Map

Figure 6: ACS Responses in CD2 during FY26-Q4

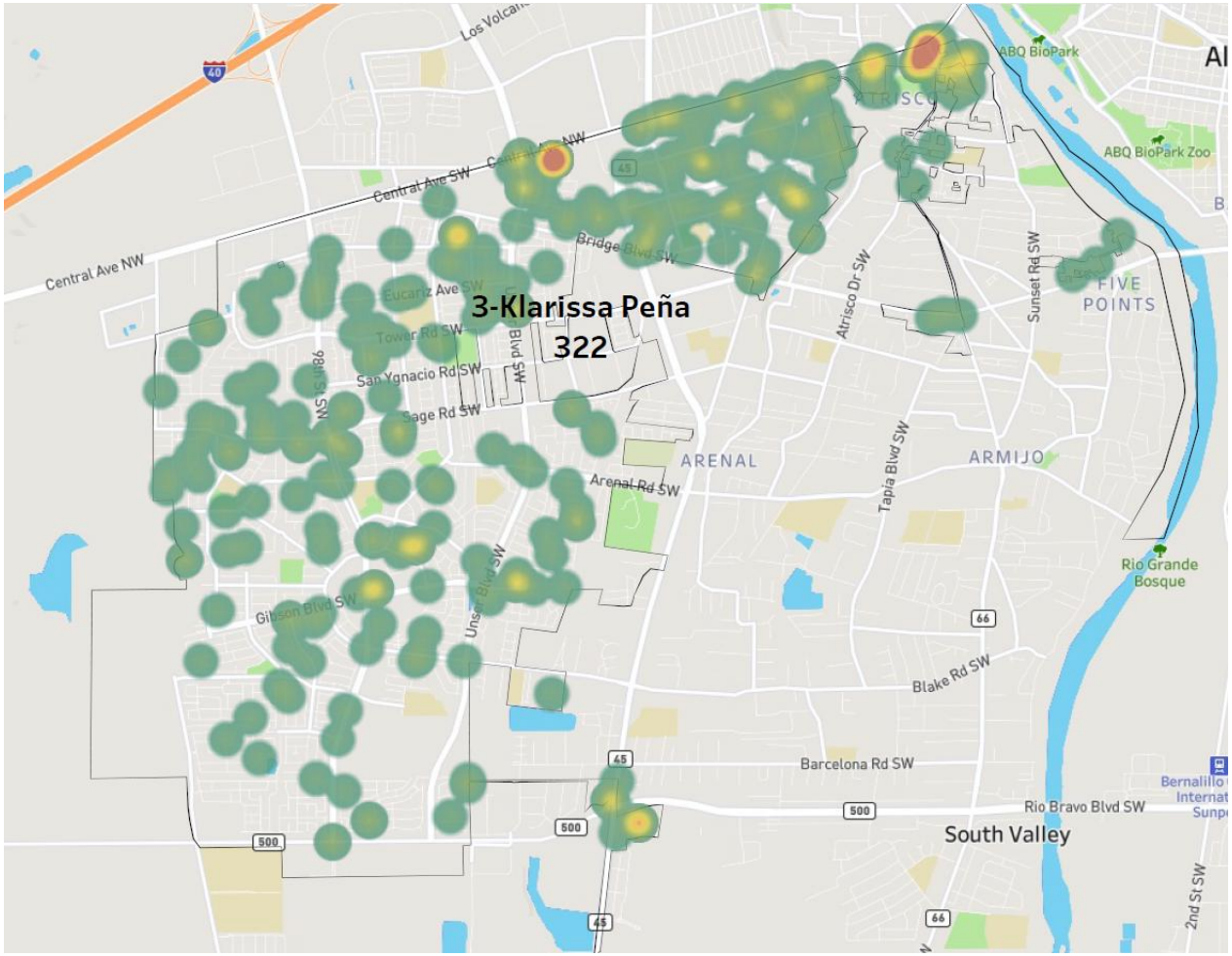
In FY26-Q4, ACS created 3,306 reports in Council District 2, a 33.7% increase from FY26-Q3.



Appendix D: Council District 3 CFS Map

Figure 7: ACS Responses in CD3 during FY26-Q4

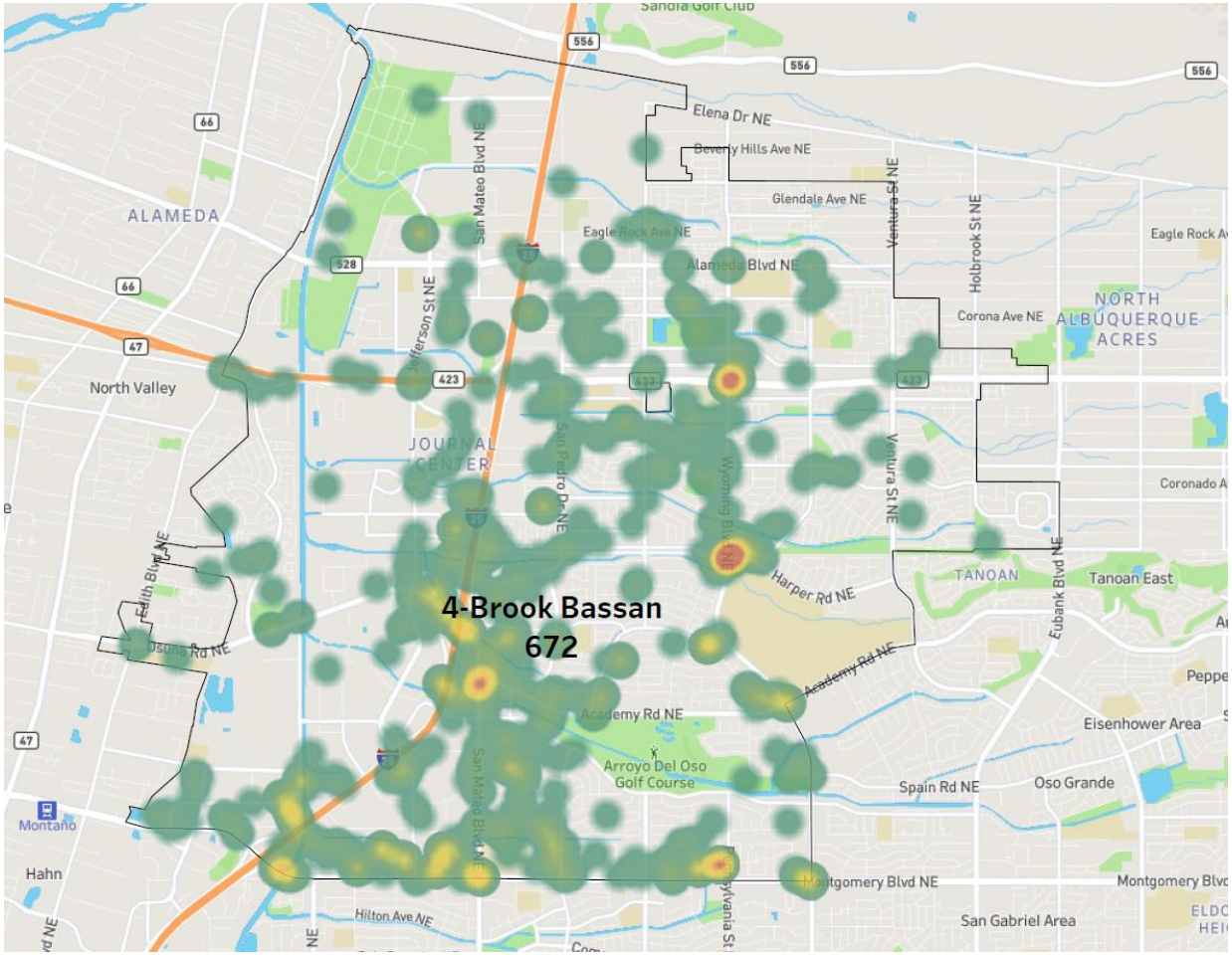
In FY26-Q4, ACS created 322 reports in Council District 3, a 4.2% increase from FY26-Q3.



Appendix E: Council District 4 CFS Map

Figure 8: ACS Responses in CD4 during FY26-Q4

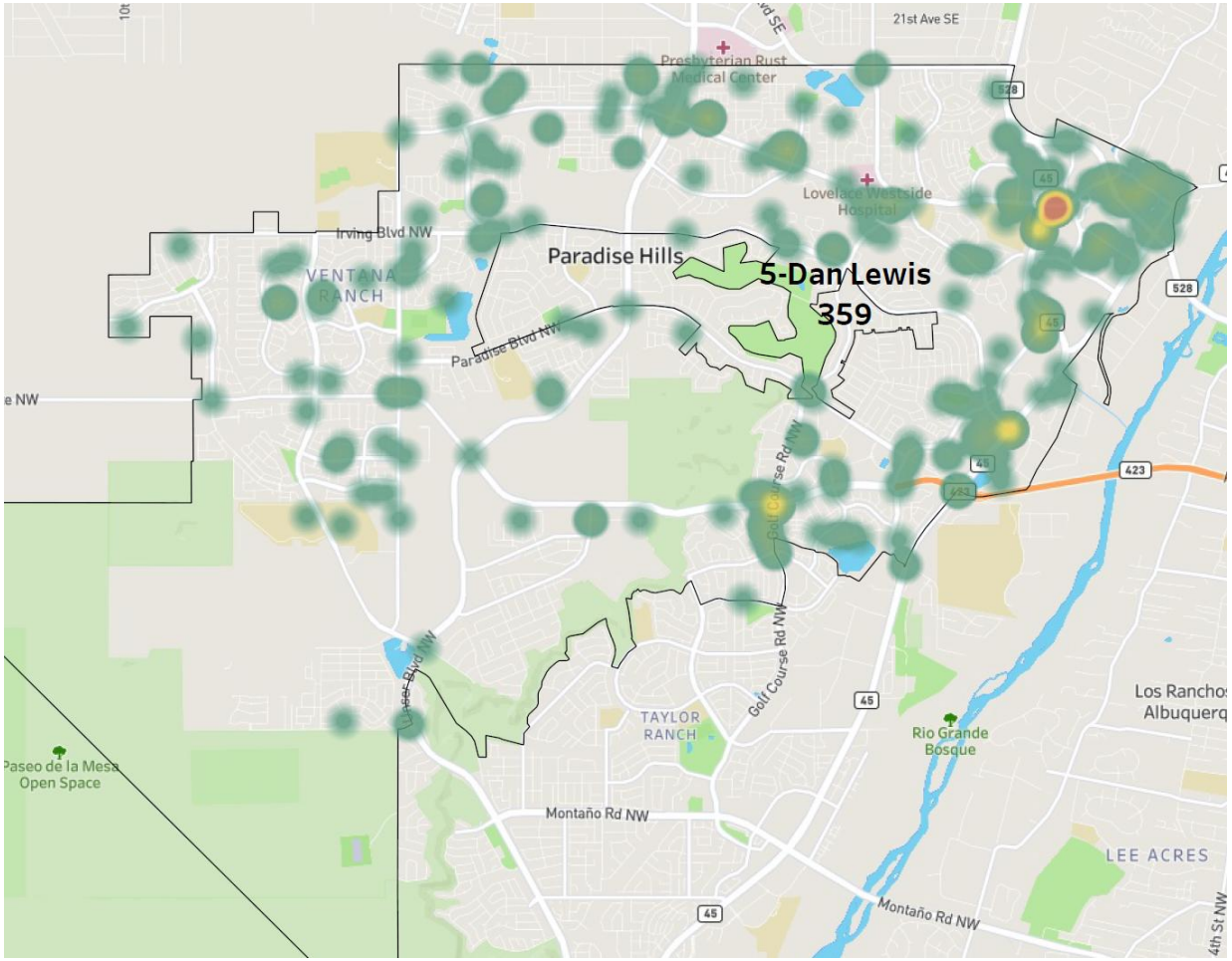
In FY26-Q4, ACS created 672 reports in Council District 4, a -13.2% increase from FY26-Q3.



Appendix E: Council District 5 CFS Map

Figure 9: ACS Responses in CD5 during FY26-Q4

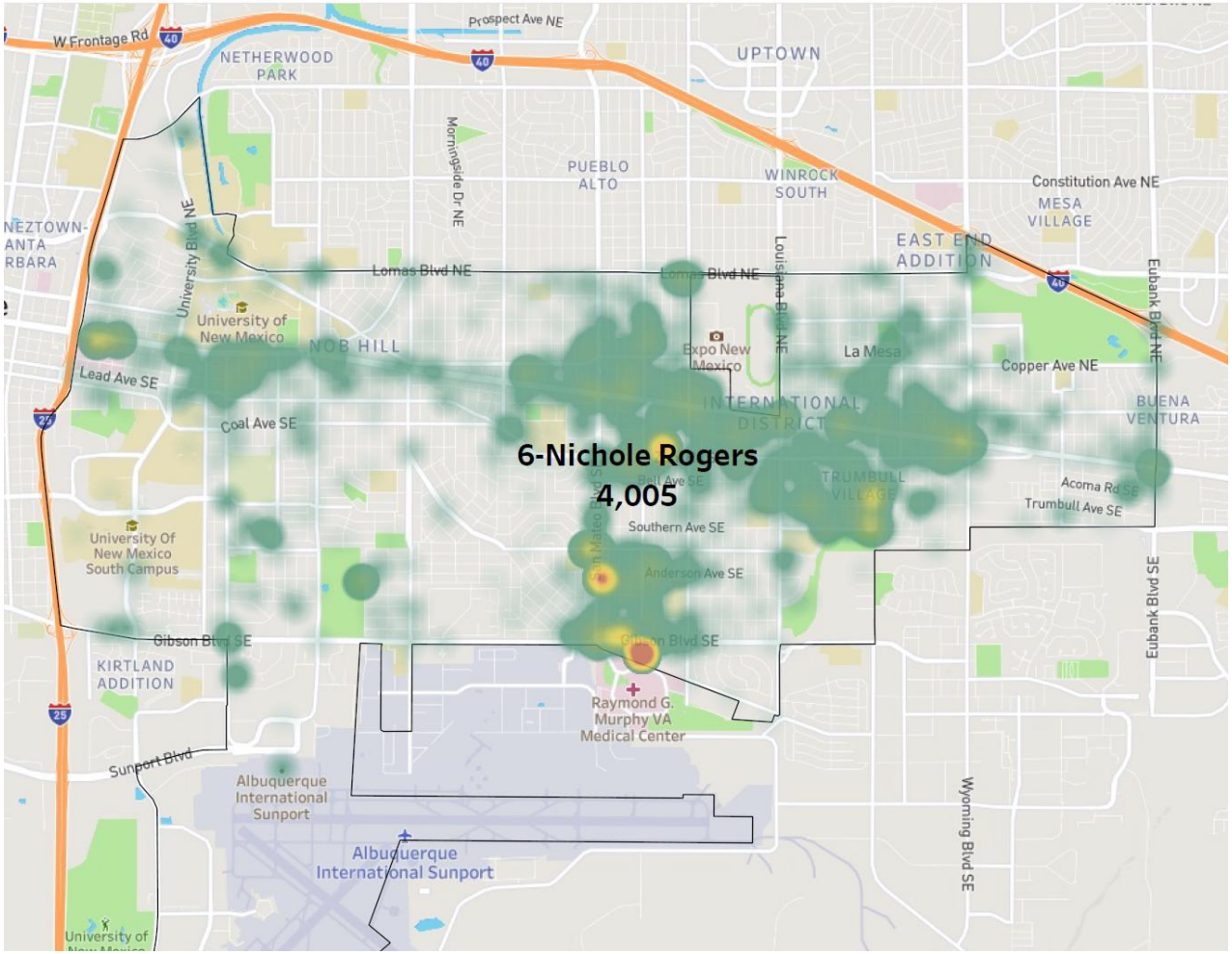
FY26-Q4, ACS created 359 reports in Council District 5, a 0% increase from FY26-Q3.



Appendix G: Council District 6 CFS Map

Figure 10: ACS Responses in CD6 during FY26-Q4

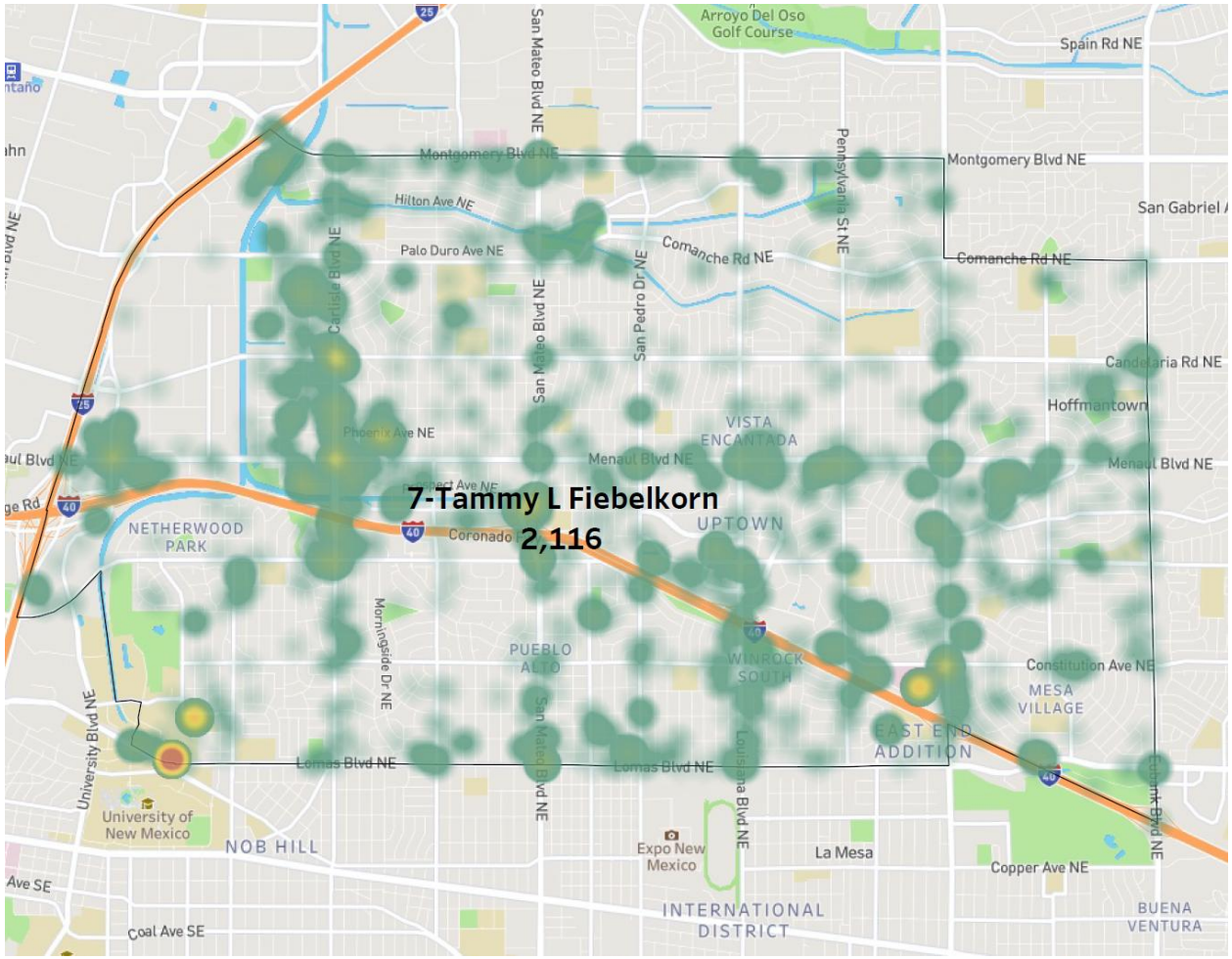
In FY26-Q4, ACS created 4,005 reports in Council District 6, a 26.3% increase from FY26-Q3.



Appendix H: Council District 7 CFS Map

Figure 11: ACS Responses in CD7 during FY26-Q4

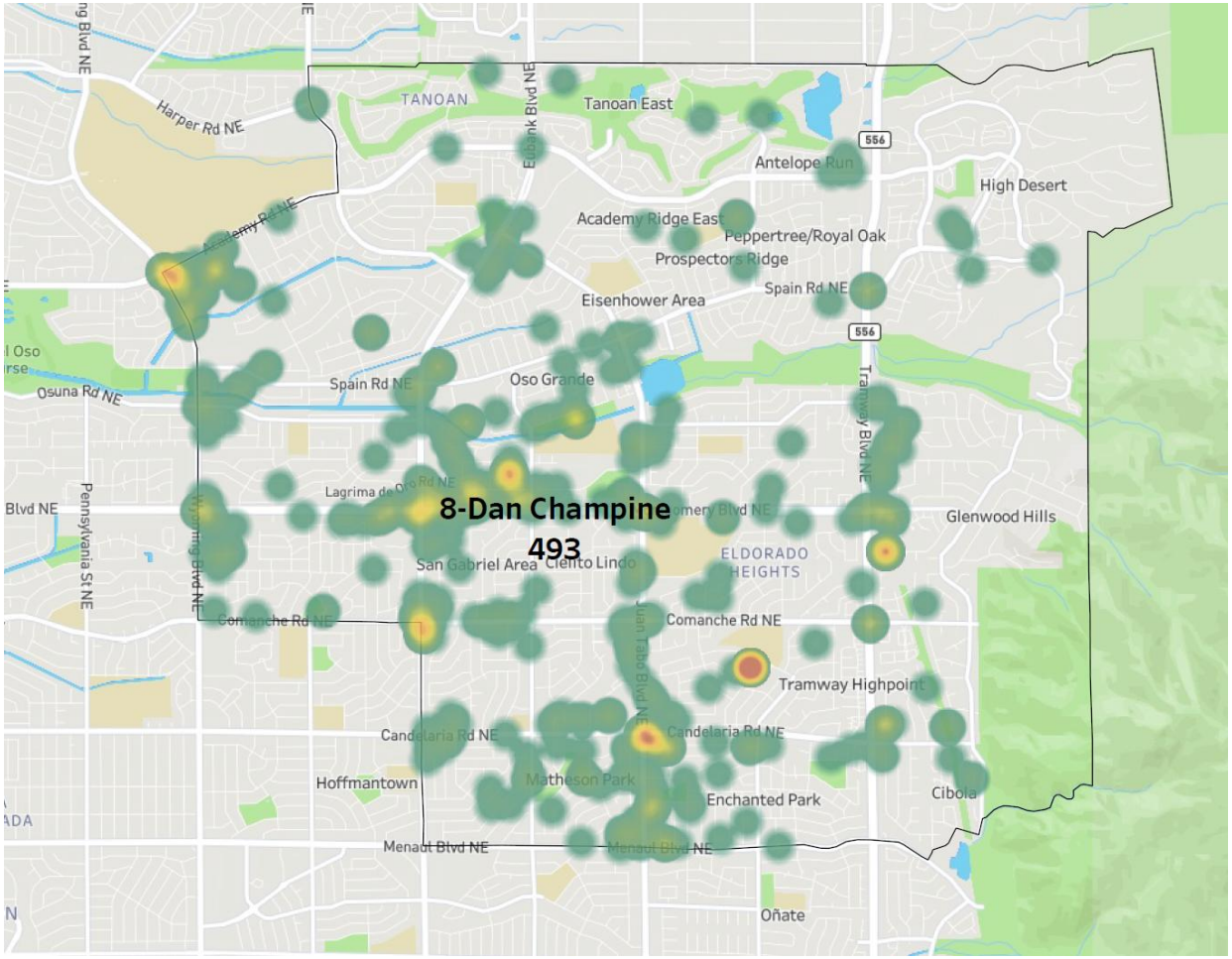
In FY26-Q4, ACS created 2,116 reports in Council District 7, a 14.2% increase from FY26-Q3.



Appendix I: Council District 8 CFS Map

Figure 12: ACS Responses in CD8 during FY26-Q4

In FY26-Q4, ACS created 493 reports in Council District 8, a 15.5% increase from FY26-Q3.



Appendix J: Council District 9 CFS Map

Figure 13: ACS Responses in CD9 during FY26-Q4

In FY26-Q4, ACS created 753 reports in Council District 9, an 13.4% increase from FY26-Q3.