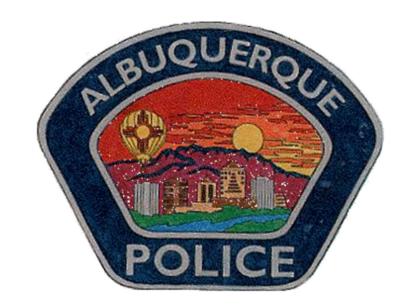
The Albuquerque Police Department Crisis Intervention Unit Data Book: A Working Compendium



Version Date: September 15, 2017

Dr. Peter Winograd, Policy Analyst, CIU, APD pwinograd@cabq.gov

Kylynn Brown, Data Analyst, CIU, APD kylynnbrown@cabq.gov

Background

In 2014, the City Of Albuquerque and the U.S. Department of Justice entered into an agreement often referred to as the CASA (Court Appointed Settlement Agreement) which identified a number of actions to be completed by the Albuquerque Police Department (APD).

The CASA paragraphs #129 and #137 direct APD to collect data on the use of crisis intervention certified responders for management purposes and to demonstrate the impact of and inform modifications to crisis prevention services. These data include:

- date, shift, and area command of the incident;
- subject's age, race/ethnicity, and gender;
- whether the subject was armed and the type of weapon;
- whether the subject claims to be a U.S. military veteran;
- name and badge number of crisis intervention certified responder or CIU detective on the scene;
- whether a supervisor responded to the scene;

- techniques or equipment used;
- any injuries to officers, subjects, or others;
- disposition of the encounter (e.g., arrest, citation, referral); and
- a brief narrative of the event (if not included in any other document).
- number of individuals in the COAST and CIU case loads;
- number of individuals receiving crisis prevention services

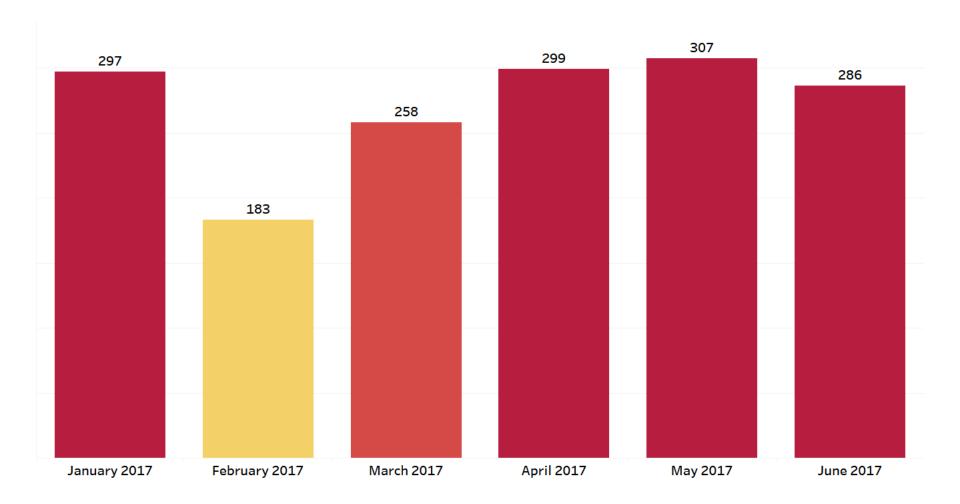
CASA paragraph #130 also directs APD to these data to continually improve police training; practices and polices; and to identify systemic issues that impede the Department's ability to provide an appropriate responses individuals experiencing a mental health crisis.

The APD Crisis Intervention Unit Data Book is one way APD provides information about these data and our efforts to use this information to continually strengthen our ability to protect and serve our community.

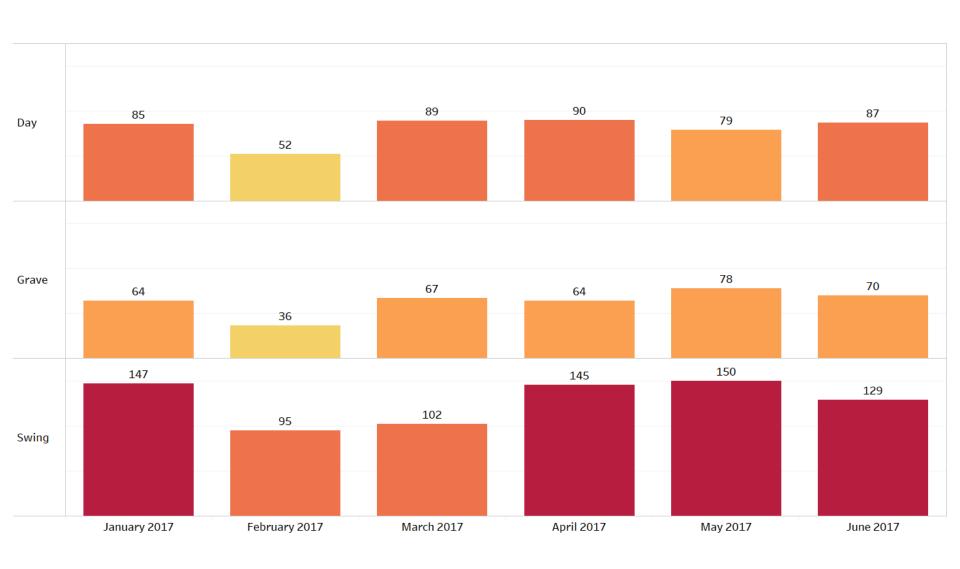
Data Definitions

- 1. Throughout this report we refer to behavioral health related computer aided dispatch (CAD) incidents and police reports. Computer Aided Dispatches are 911 calls that are categorized as suicide or behavioral health in CAD descriptions. If CAD calls turn into incidents that required police reports, these reports may be categorized as suicide, behavioral health, mental commit, mental patient, or psychiatric evaluation depending on which record system is used and what year the report was filed.
- 2. The data come from Tiburon and other dynamic data bases and are continually updated as reports are completed and revised.
- 3. We fully understand that our data is based on behavioral health related incidents which are known to be behavioral health related by law enforcement at the time of occurrence. There are probably many incidents which are classified in other ways which have a behavioral health components and are missed in our analyses.
- 4. We are committed to improving our data collection and analyses and we have made some important strides so far. But clearly, complete and accurate data in law enforcement is a journey rather than a destination.

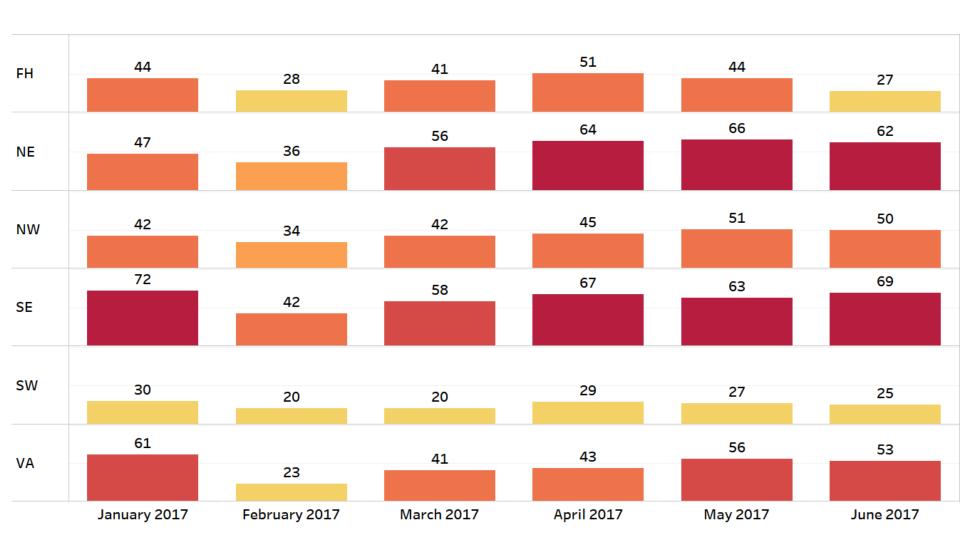
The Number Of Behavioral Health Related Police Reports January, 2017 To June, 2017



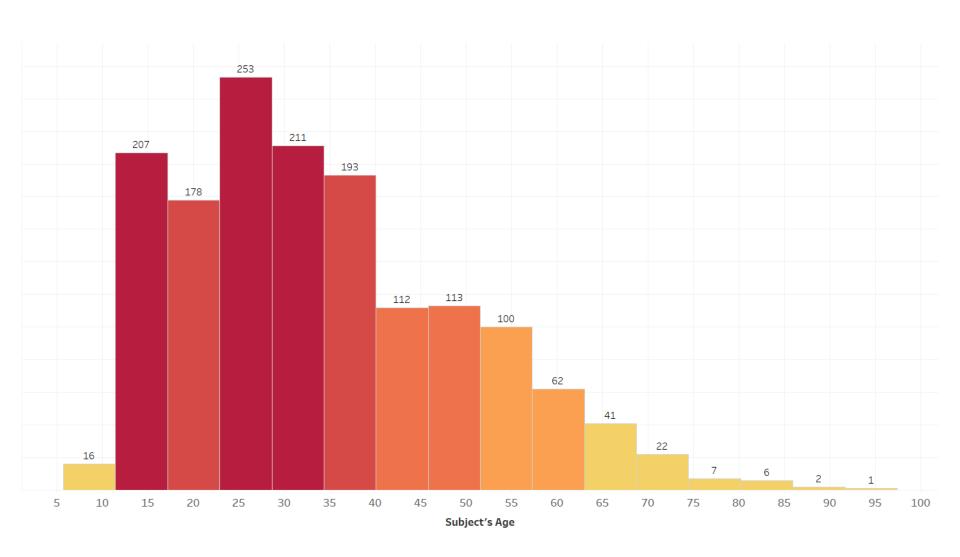
The Number Of Behavioral Health Related Police Reports By Shift January, 2017 To June, 2017



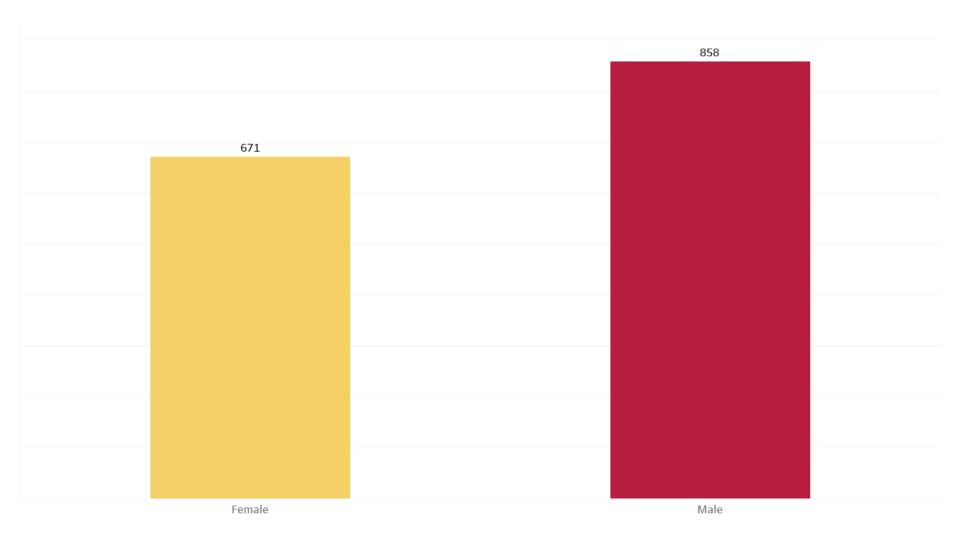
The Number Of Behavioral Health Related Police Reports By Area Command January, 2017 To June, 2017



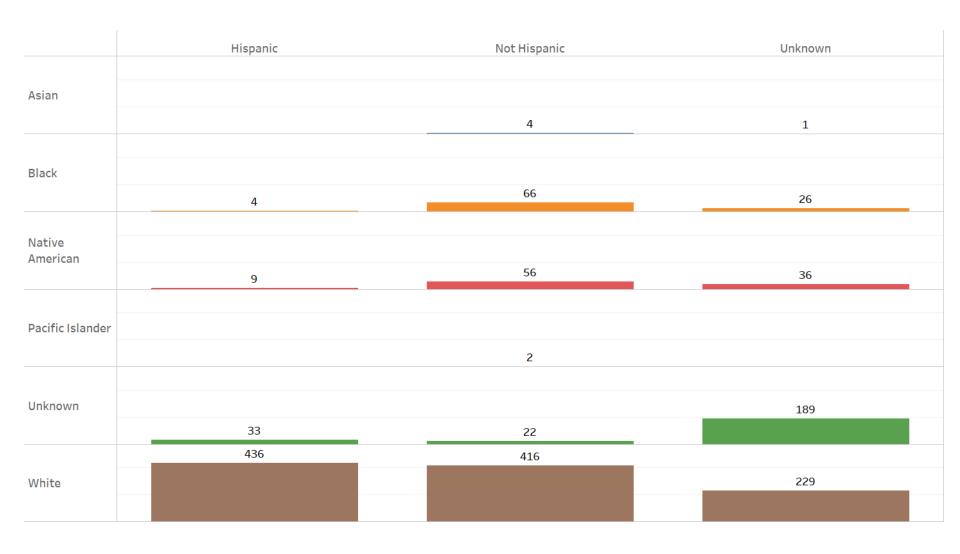
The Age Of Individuals In Behavioral Health Related Police Reports January, 2017 To June, 2017



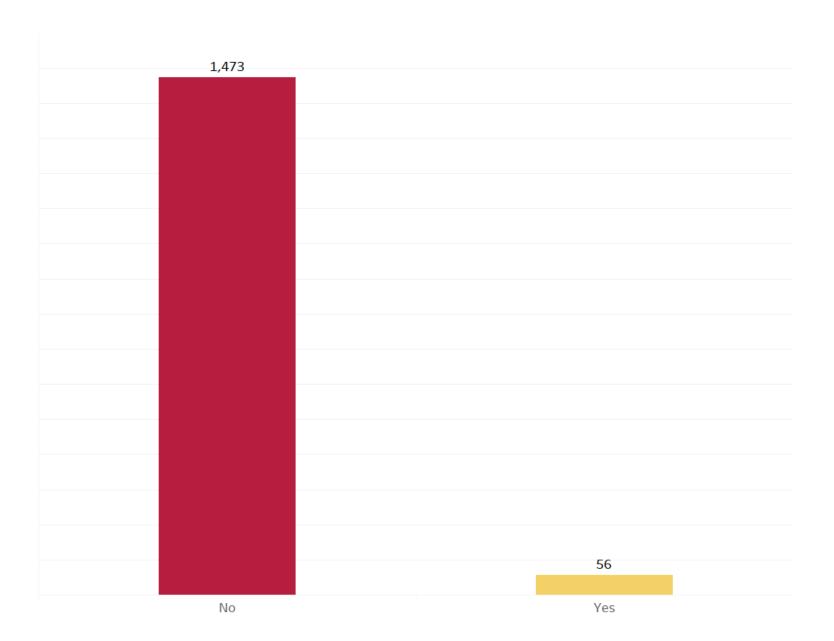
The Gender Of Individuals In Behavioral Health Related Police Reports January, 2017 To June, 2017



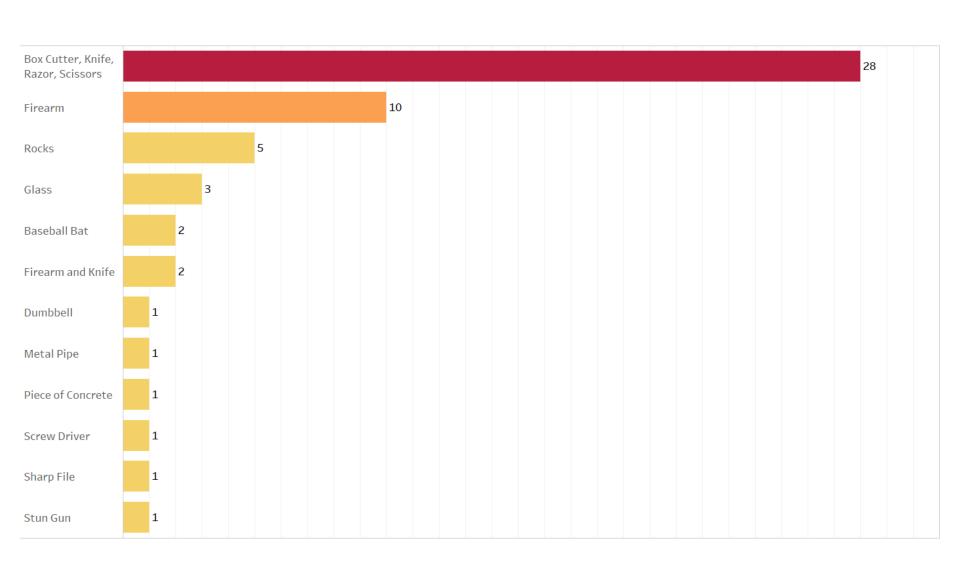
The Race/Ethnicity Of Individuals In Behavioral Health Related Police Reports January, 2017 To June, 2017



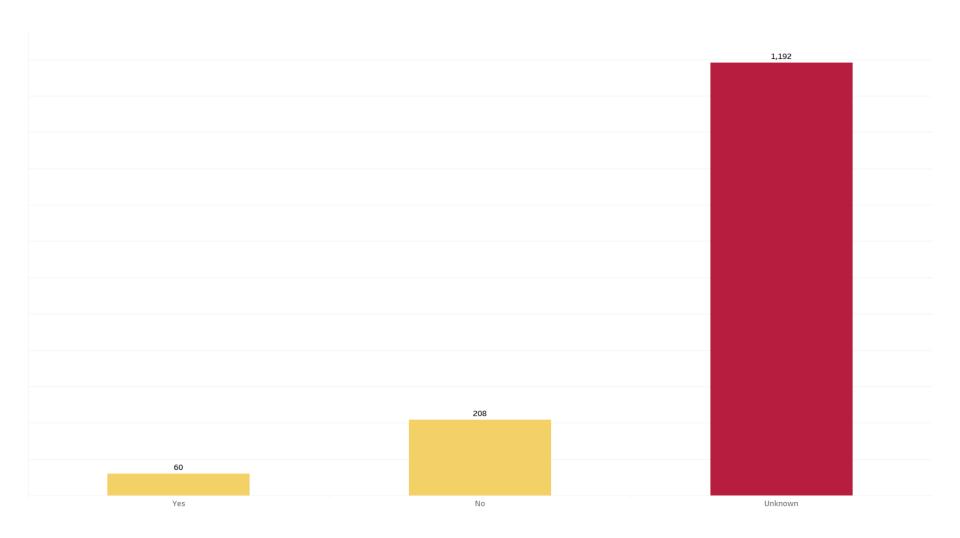
Was The Subject Armed In The Behavioral Health Related Police Reports? January, 2017 To June, 2017



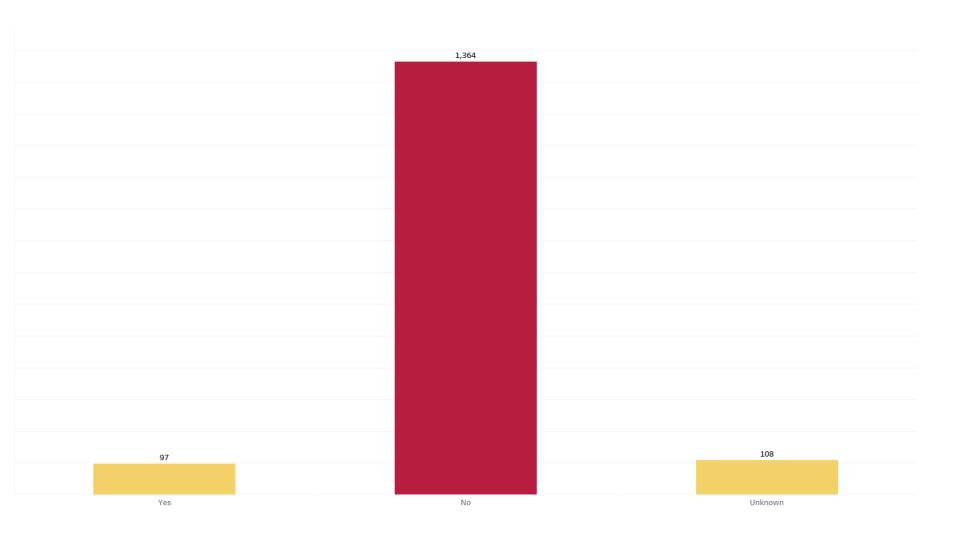
What Type Of Weapon Was Used When Subject Was Armed? January, 2017 To June, 2017



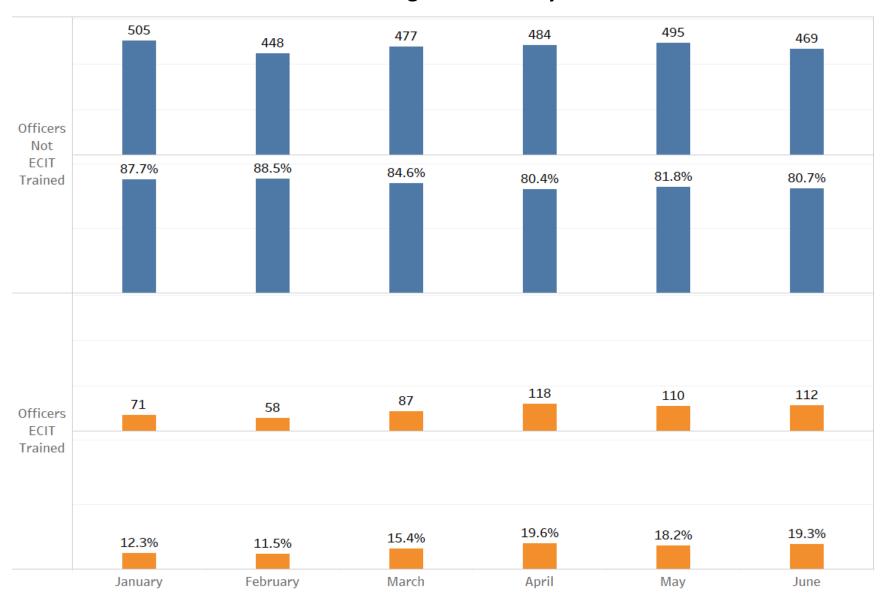
Was The Subject A Veteran In The Behavioral Health Related Police Reports? January, 2017 To June, 2017



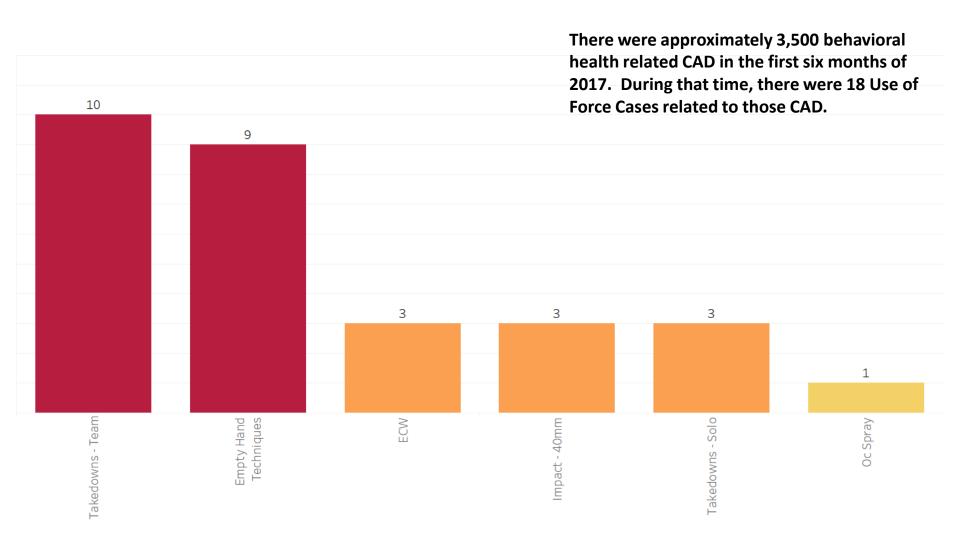
Did A Supervisor Respond To The Scene? January, 2017 To June, 2017



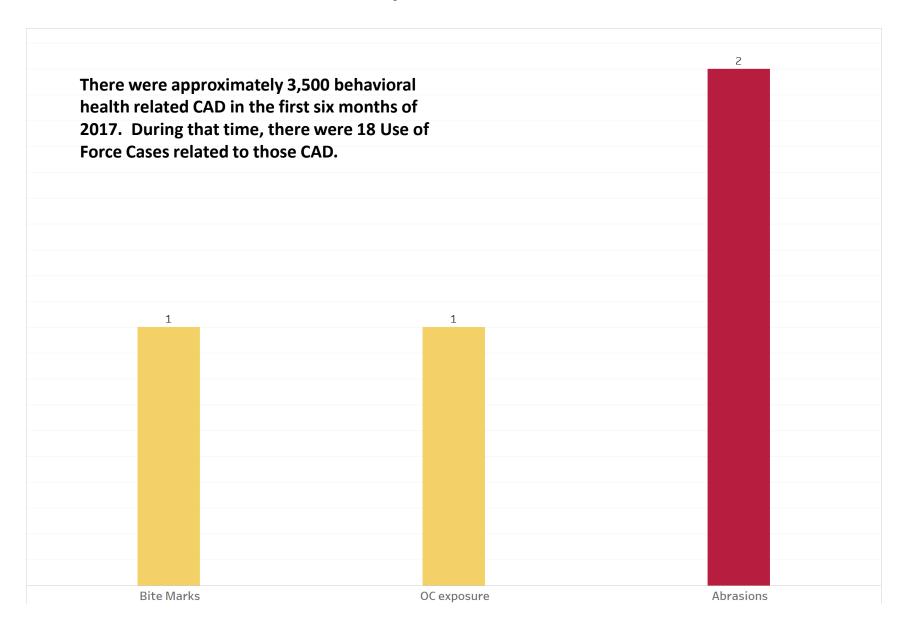
The Number And Percentage Of Behavioral Health Related CAD That Were Covered By Field Officers With ECIT Training From January 2017 To June 2017



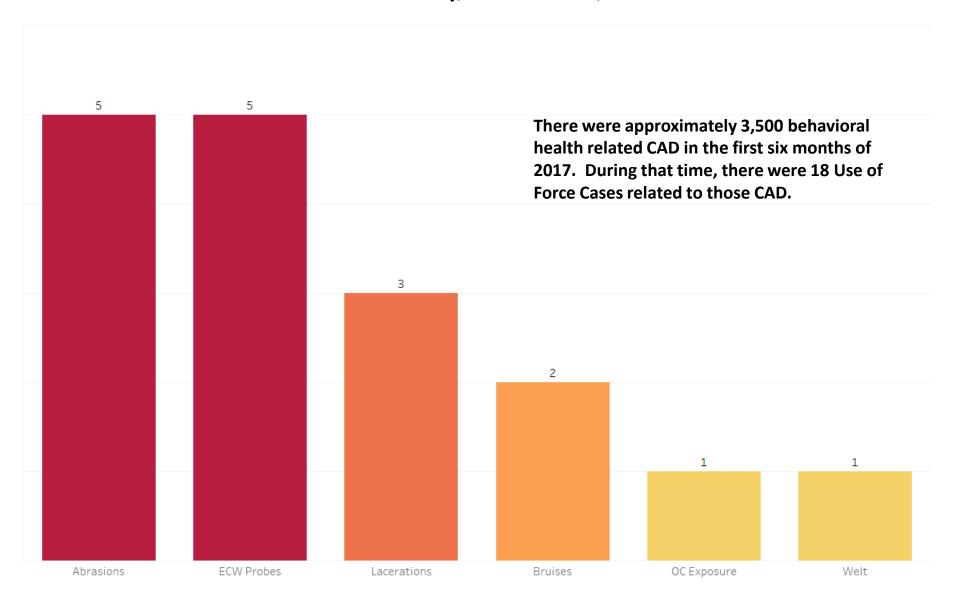
What Techniques Or Equipment Was Used In Incidents Which Involved Use Of Force? January, 2017 To June, 2017



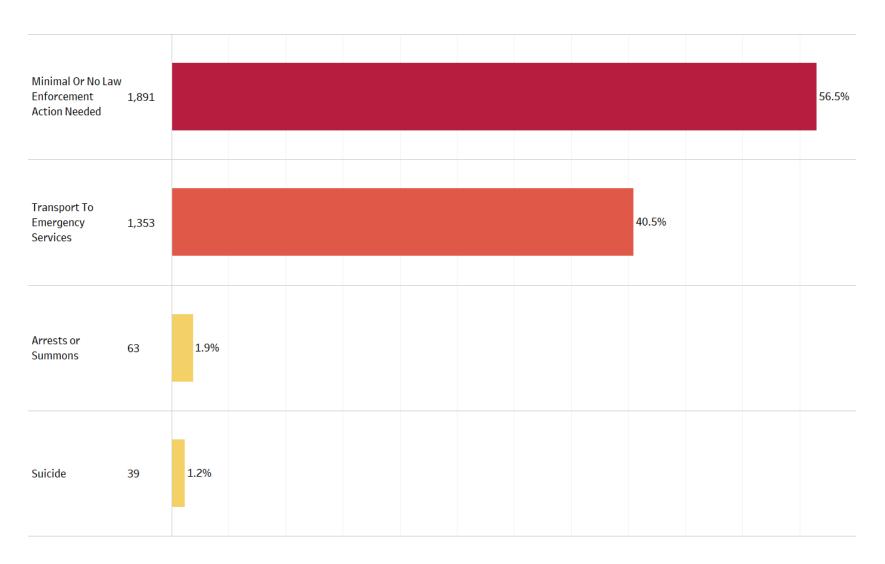
What Injuries Occurred To Officers In Incidents Which Involved Use Of Force? January, 2017 To June, 2017



What Injuries Occurred To Subjects Or Others In Incidents Which Involved Use Of Force? January, 2017 To June, 2017



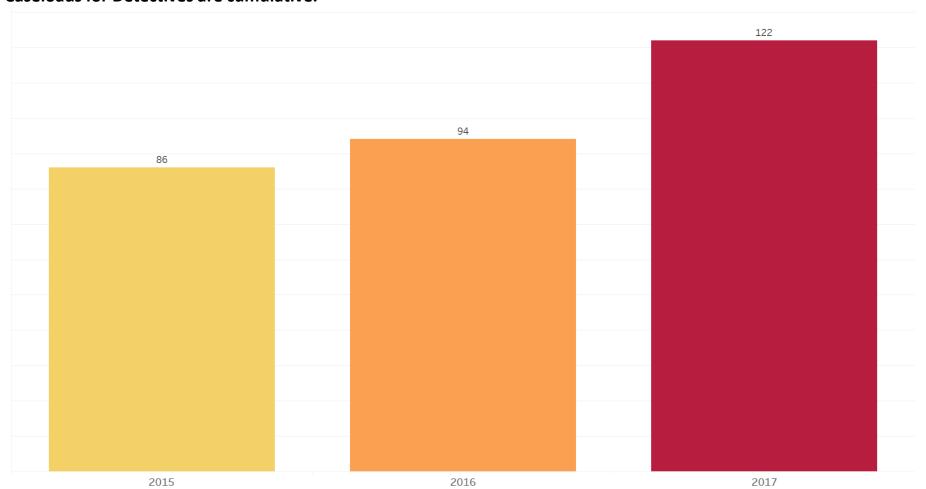
The Number And Percentage Of The Dispositions Of Behavioral Heath Related CAD From January To June 2017



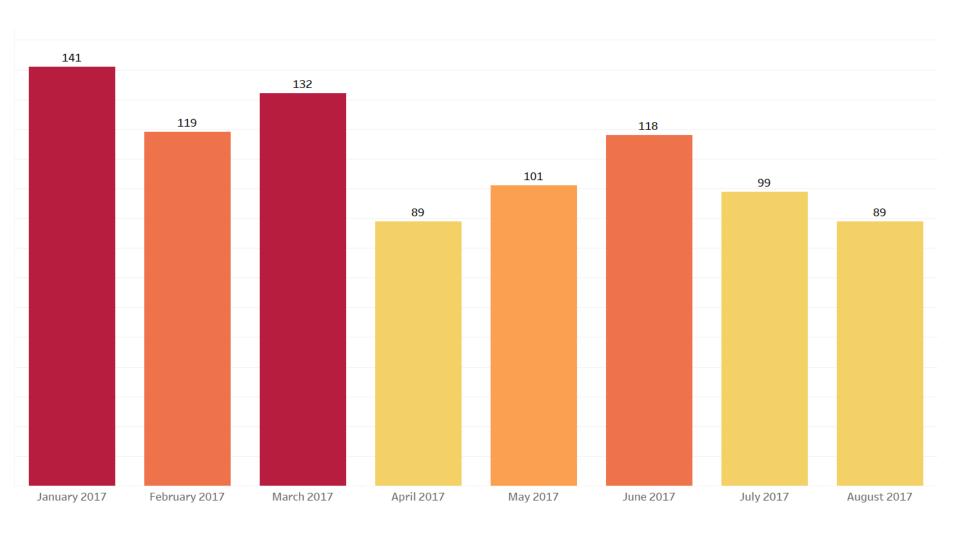
Data in this chart was compiled from all behavioral health and suicide calls that came into dispatch and compared to reports that were filed from those calls to determine the final outcome. No law enforcement action needed are calls in which officers responded but did not take any report or action. Some individuals may have been involved in multiple incidents.

Number of Individuals Assigned To CIU Detectives From January, 2015 To August, 2017

These are the number of individuals assigned to CIU Detectives by year. Caseloads for Detectives are cumulative.

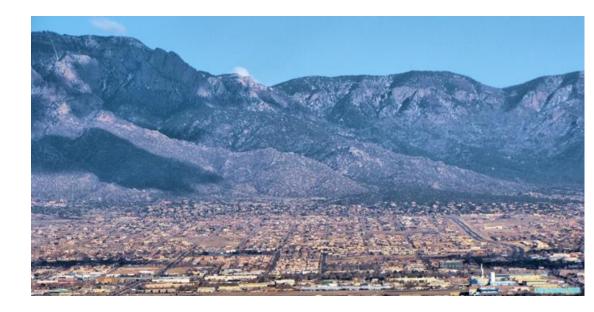


The Number Of Individuals Assisted By COAST January, 2017 To August, 2017



Example Data Reports That Illustrate How APD Uses Data For Continual Improvement

An Overview Of CIT Incidents In Albuquerque



Prepared For:

Albuquerque Police Department Enhanced Crisis Intervention Training Fall, 2017

Prepared By
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Introduction

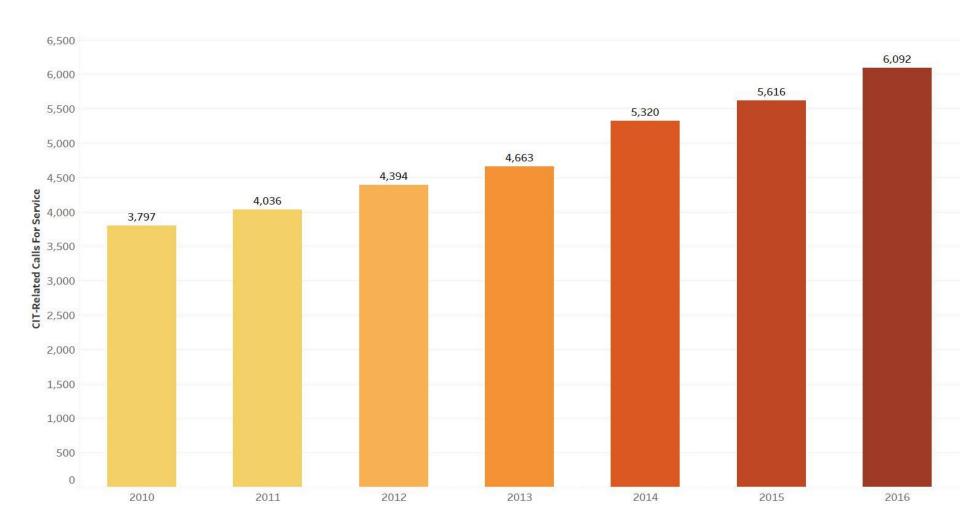
Effective CIT programs are built on core elements including partnerships among law enforcement, advocacy groups, and mental health providers; community ownership; policies and procedures; highly-trained professionals in law enforcement and mental health advocacy; a rich curriculum; mental health emergency services and other support services. Assembling all of these elements into a coherent program is clearly a challenge in itself.

Once these elements are in place, it is essential to measure the impact of the CIT Program on the quality of life for individuals dealing with mental illness; on the perceptions and confidence of police officers; on the effectiveness of community supports; and on the sense of vibrancy of the community at large. A number of communities, including Albuquerque, have many of the CIT program elements in place. Now we face the challenge of really understanding if we are making a difference and if anyone is better off.

How Might We Think About CIT Core Elements And Outcomes?

Core Elements	Outcome Questions
Highly Trained Professionals in Law Enforcement & Mental Health Advocacy; A Rich curriculum; Policies and Procedures	1. How do we evaluate the reduction of use of force with individuals dealing with mental health issues?
	2. How do we evaluate the effectiveness of jail diversion efforts?
	3. How do we evaluate the impact of repeat encounters with the same individuals?
	4. How do we evaluate the quality of the ECIT Training for officers particularly in the quality of interactions these officers have with individuals dealing with mental health issues?
Mental Health Emergency Services and Other Support Services	5. How do we evaluate the impact of our relationships with mental health emergency services and other support services?
Partnerships Among Law Enforcement, Advocacy Groups, and Mental Health Providers; Community Ownership	6. How do we evaluate the impact of our partnerships with other law enforcement agencies, advocacy groups, and the community?

The Number Of APD's BH-Related CAD Calls Has Increased 60.4% Since 2010. It Is Very Likely Those Calls Will Continue To Increase

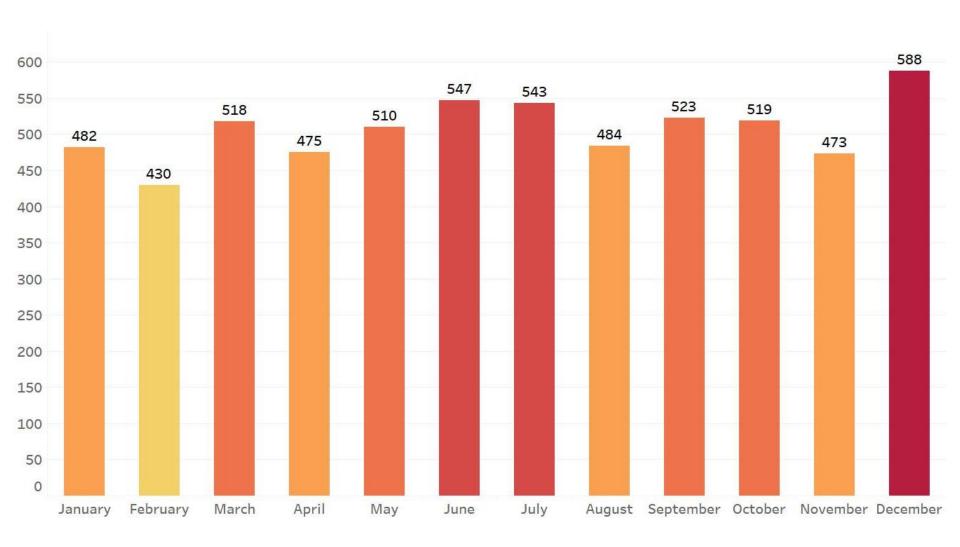


APD CAD Calls All Priorities

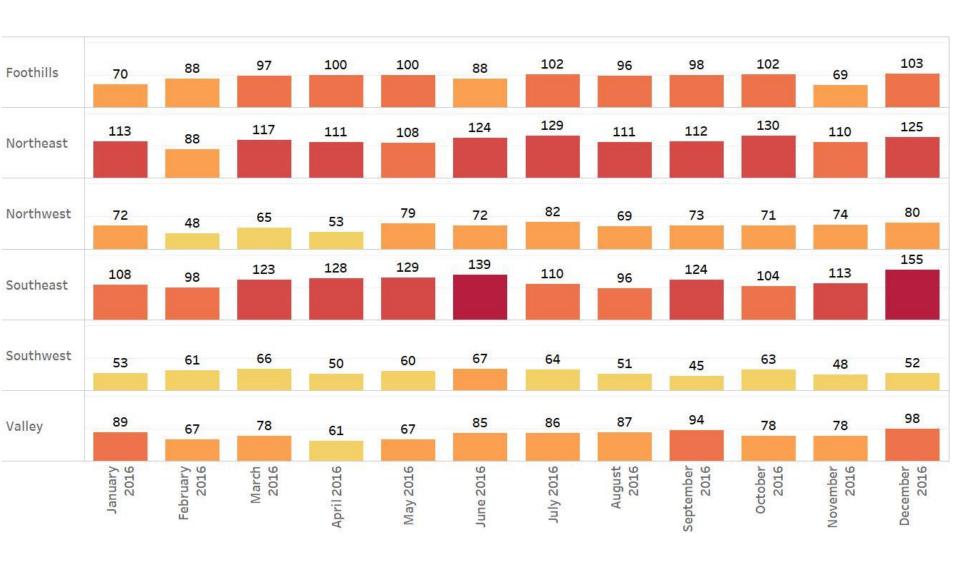
Source: APD CIU 3.10.17

25

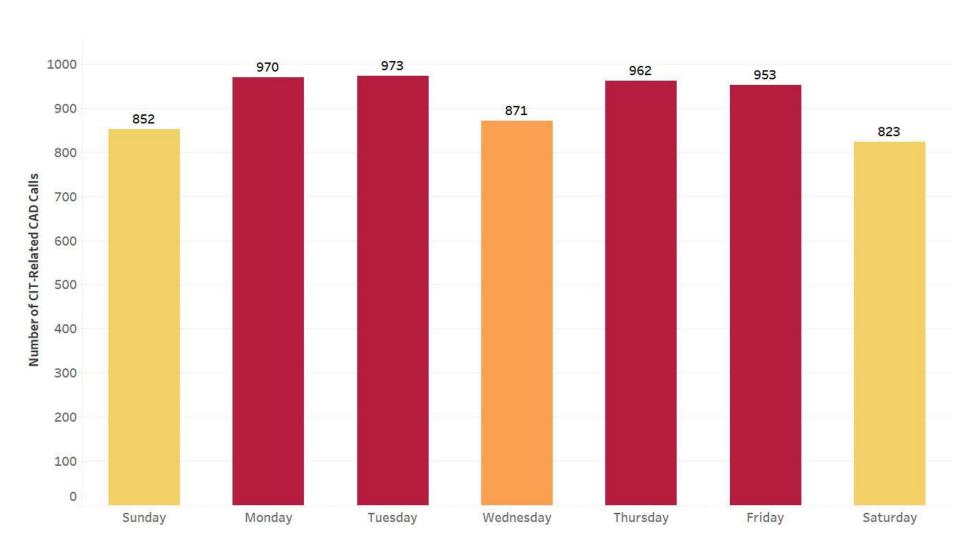
In 2016, APD Field Officers Responded To 6,092 CIT-Related CAD Calls



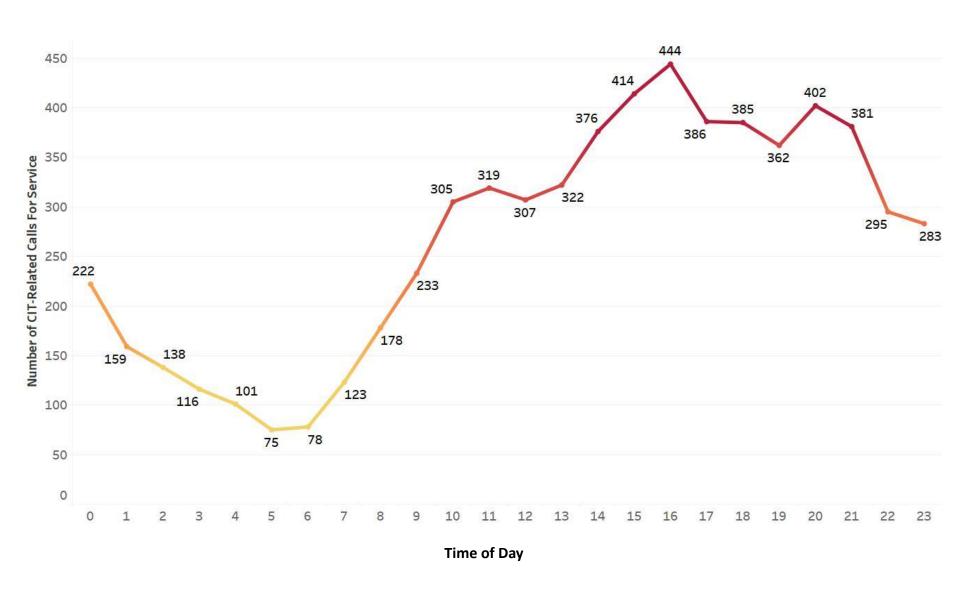
How CIT-Related CAD Calls In 2016 Varied By Area Command And By Month



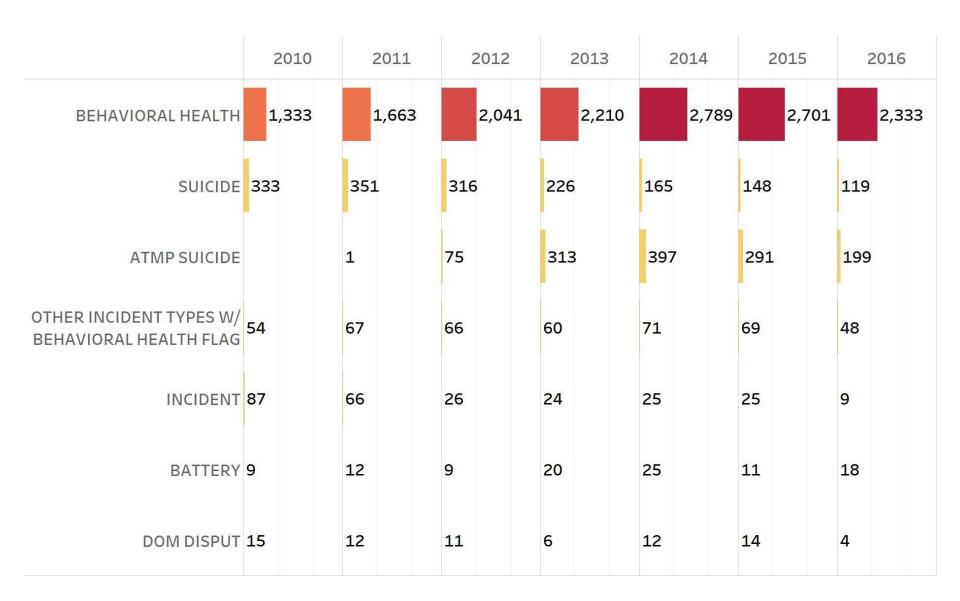
How CIT-Related CAD Calls In 2016 Changed By Day Of The Week



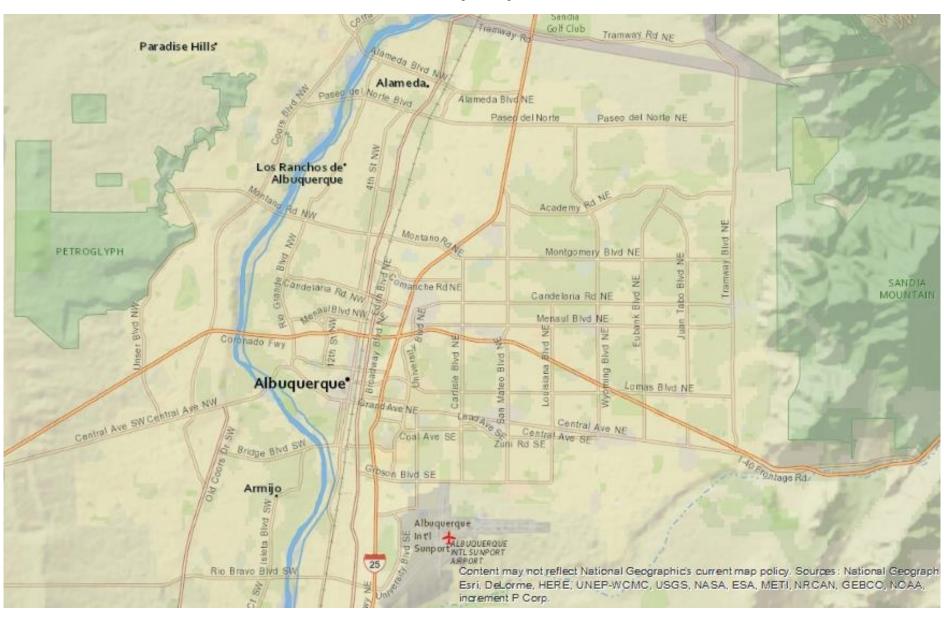
How CIT-Related CAD Calls In 2016 Changed By Time Of Day



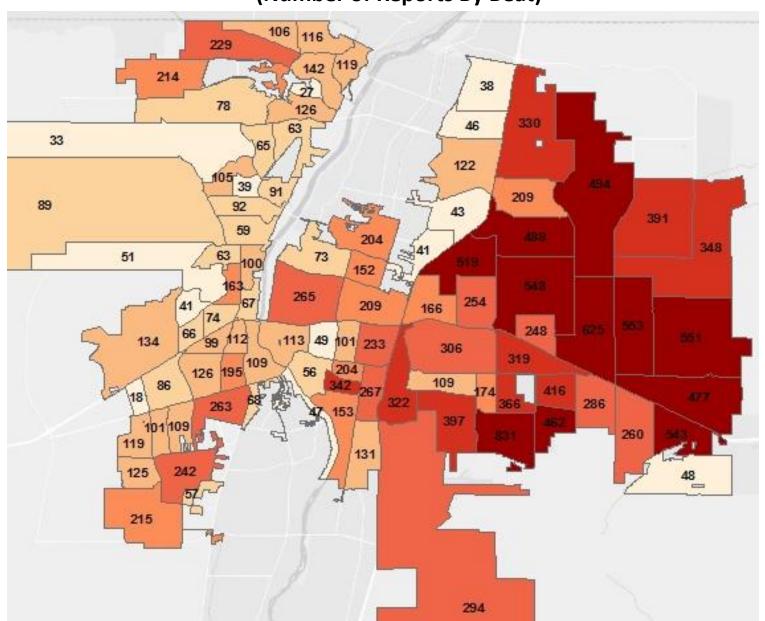
How APD Field Officers' CIT-Related ARS Reports Have Changed Over Time



Albuquerque

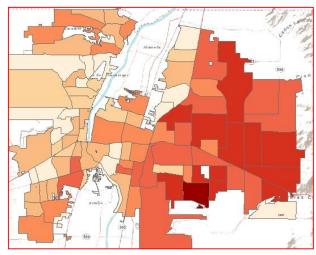


APD Field Officers Filed Almost 19,000 BH-Related ARS Reports Between 2010 and 2016 (Number of Reports By Beat)

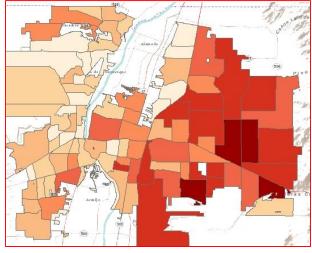


How APD Field Officers' BH-Related ARS Reports Have Changed By Beat Over Time From 2014 To 2016

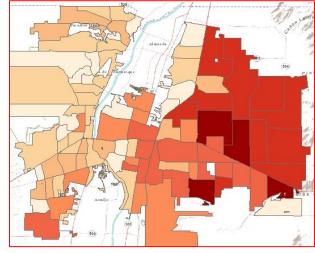
3,484 BH-Related Field Reports In 2014



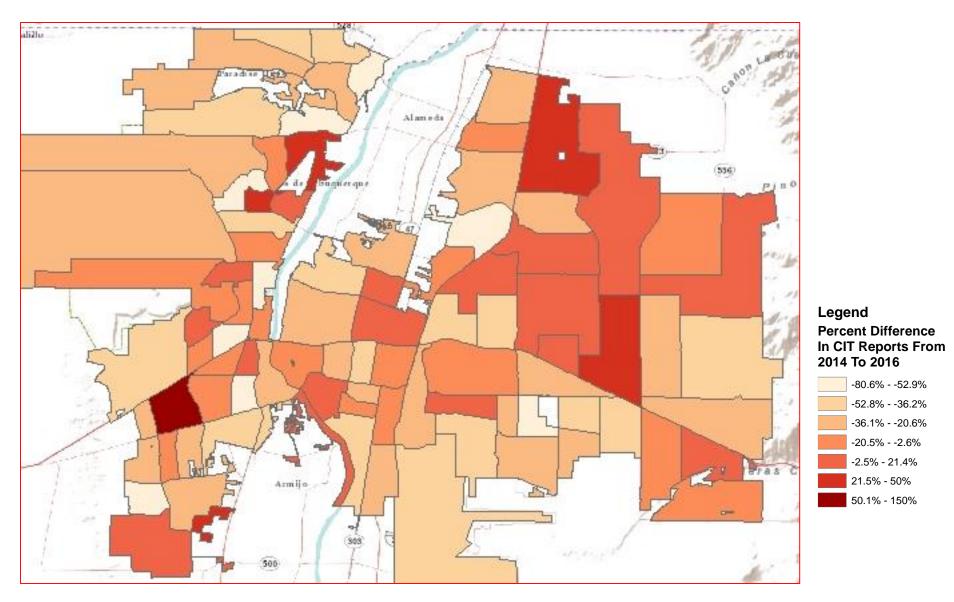
3,259 BH-Related Field Reports In 2015



2,730 BH-Related Field Reports In 2016

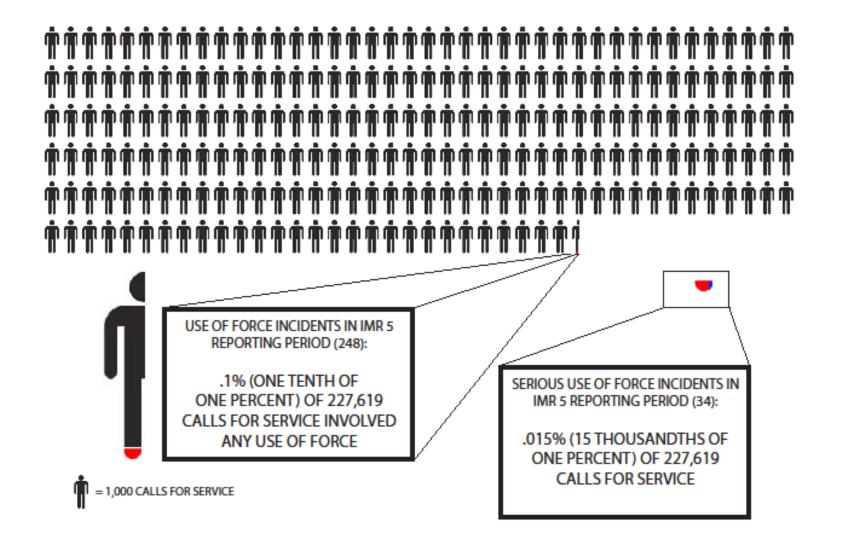


The Change In BH Reports By Beat From 2014 To 2016

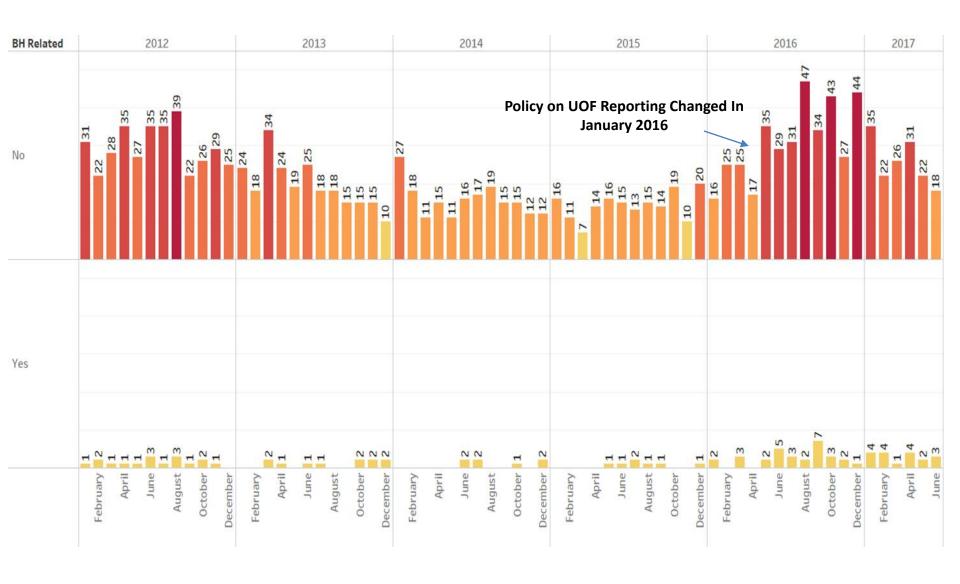


How do we evaluate the reduction of use of force with individuals dealing with mental health issues?

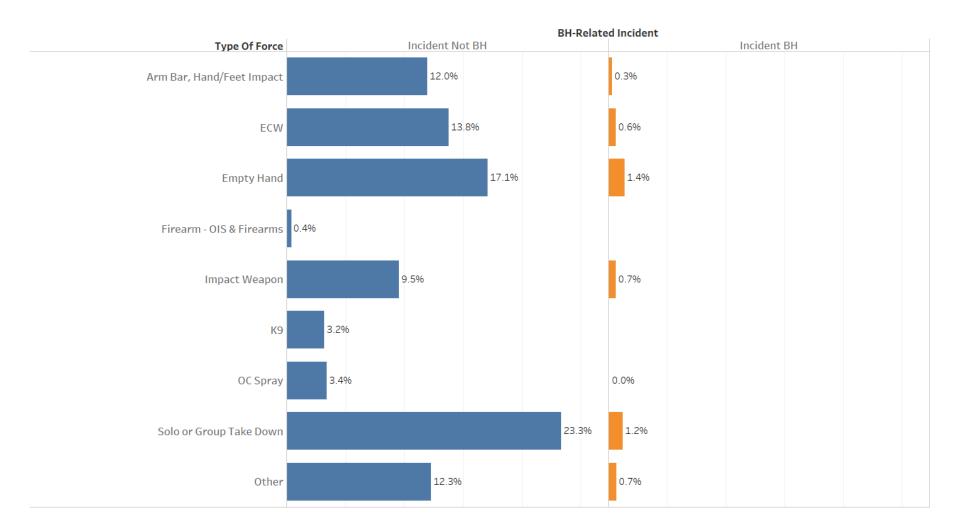
All Calls For Service Vs. Use Of Force Incidents August 2016 To January 2017



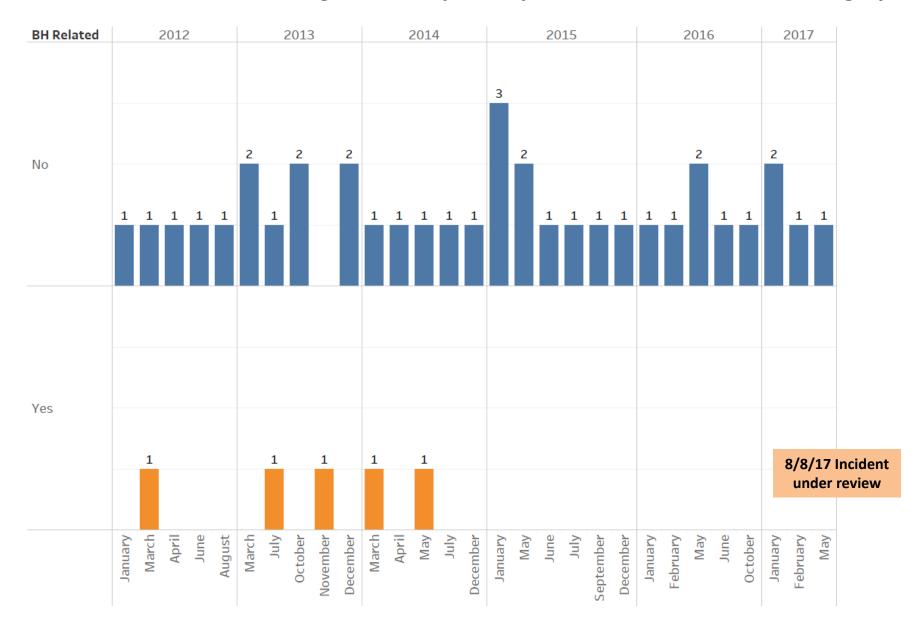
Use Of Force Cases By Year By Behavioral Health Related Category



The Types Of Use Of Force By Officer Reports By Year Behavioral Health Related Category



The 41 Use Of Force Cases Involving Firearms By Year By Behavioral Health Related Category

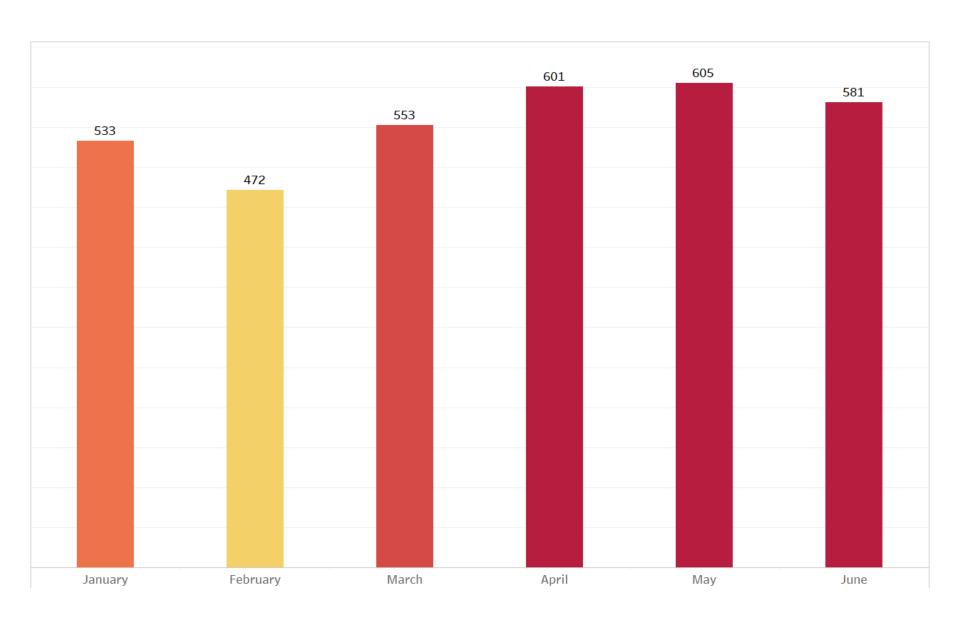


Thoughts To Consider

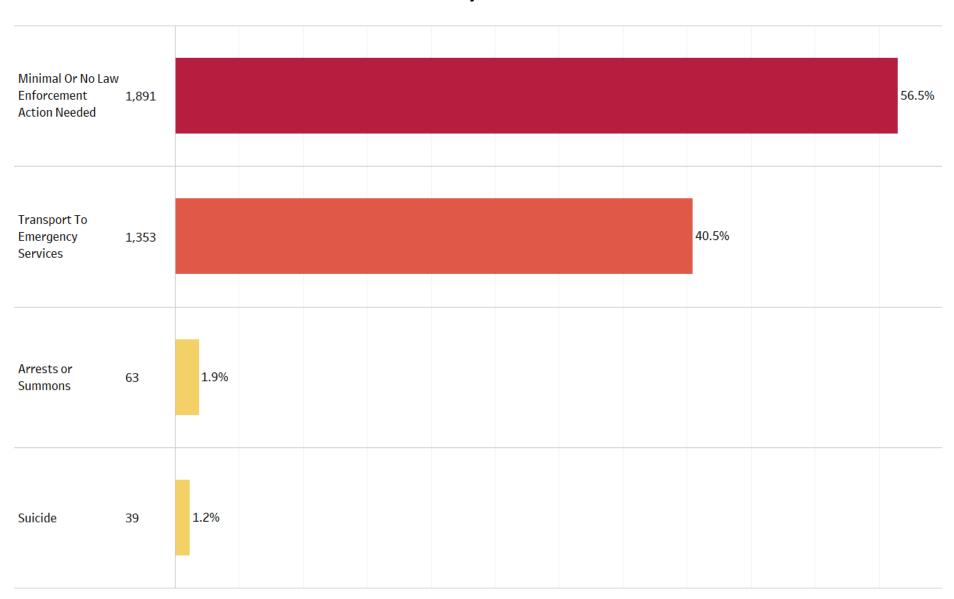
- Each use of force or firearm discharge is important. Numbers are not the only story.
- Identifying all types of use of force and whether incidents are behavioral health related is complex. Both of these factors requires careful vetting.
- The UOF reports in behavioral health related incidents has been a consistently low percentage of the overall uses of force. In addition, the types of force used in these incidents have been on the lower level of force types. Please note that one inappropriate use of force is too many, but the overall pattern argues that APD is minimizing the use of force with individuals suffering from behavioral health crisis.
- The FAD reports in behavioral health related incidents indicates that the incident on August 8, 2017 was the first firearm discharge to have occurred since May of 2014. That incident is under review.

How do we evaluate the effectiveness of jail diversion efforts?

The Number of Behavioral Health Related CAD From January To June 2017

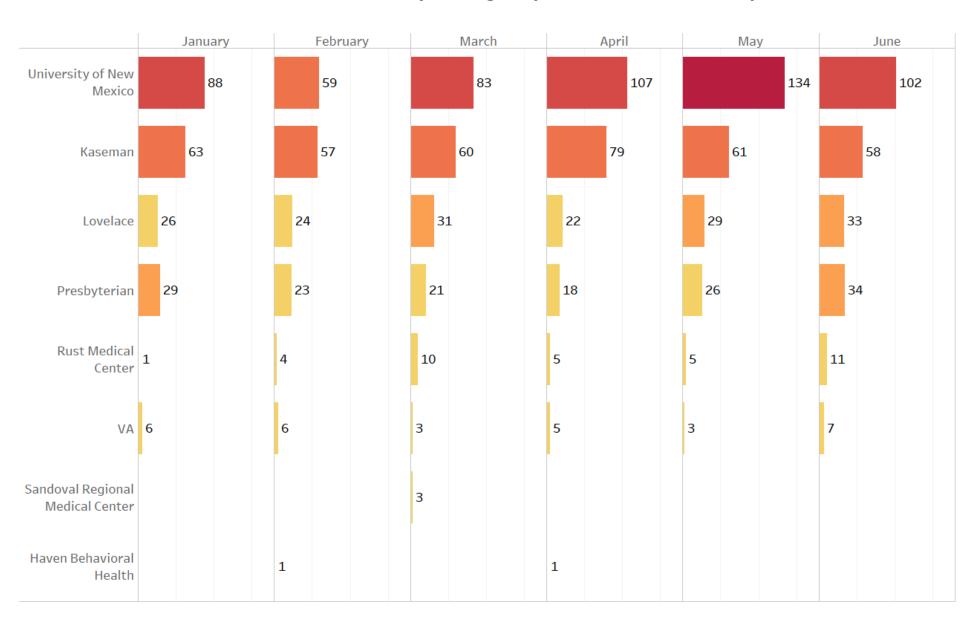


The Number And Percentage Of The Dispositions Of BH Related CAD From January To June 2017



How do we evaluate the impact of our relationships with mental health emergency services and other support services?

The Number Of BH Related CAD By Emergency Service From January To June 2017



Thoughts To Consider

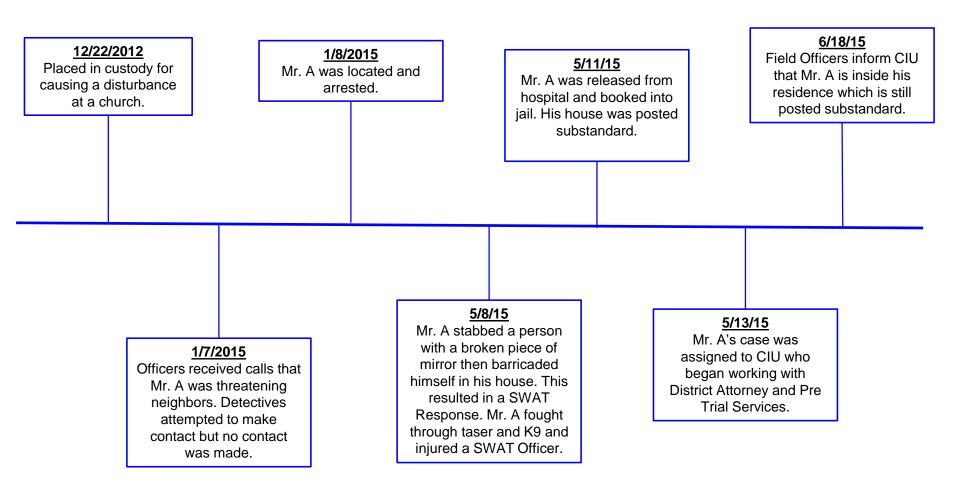
- CIU has built strong relationships with emergency room doctors.
- Hospitals are the most expensive option.
- Hospitals have limited resources.
- How do we track the individuals who repeatedly use emergency services and intervene in ways that are more effective?
- Jail diversion can sometimes be treatment diversion.
- The issues of behavior health and drug use.

How do we evaluate the impact of repeat encounters with the same individuals?

The Story Of Mr. A

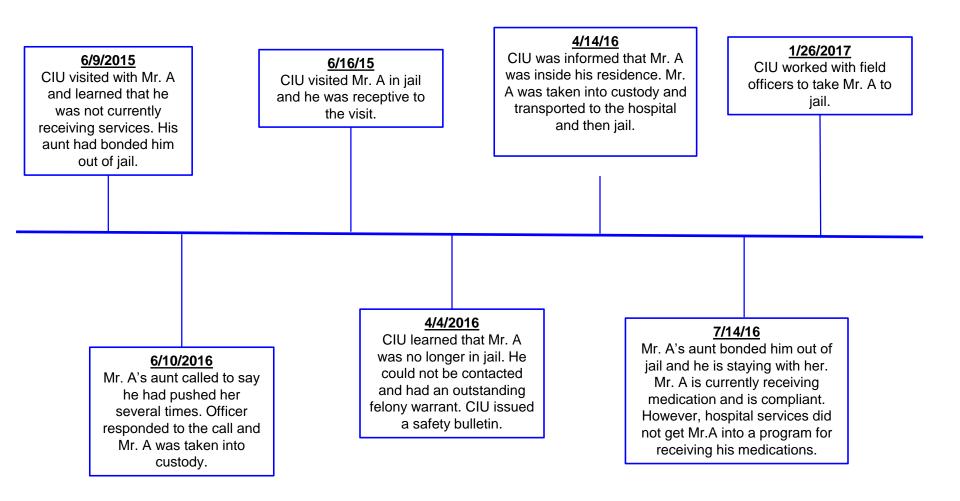
- Mr. A is in his mid-30's and living with schizophrenia and serious substance abuse.
- Mr. A has had several violent encounters with police.
- Mr. A has felony warrants including False Imprisonment,
 Battery upon a Household Member, Resisting and Evading An
 Officer, Aggravated Battery With A Deadly Weapon Resulting
 in Great Bodily Harm.
- Mr. A has a history of using methamphetamines and other narcotics.
- Mr. A has numerous documented contacts with police officers between 2012 and 2017.

Mr. A



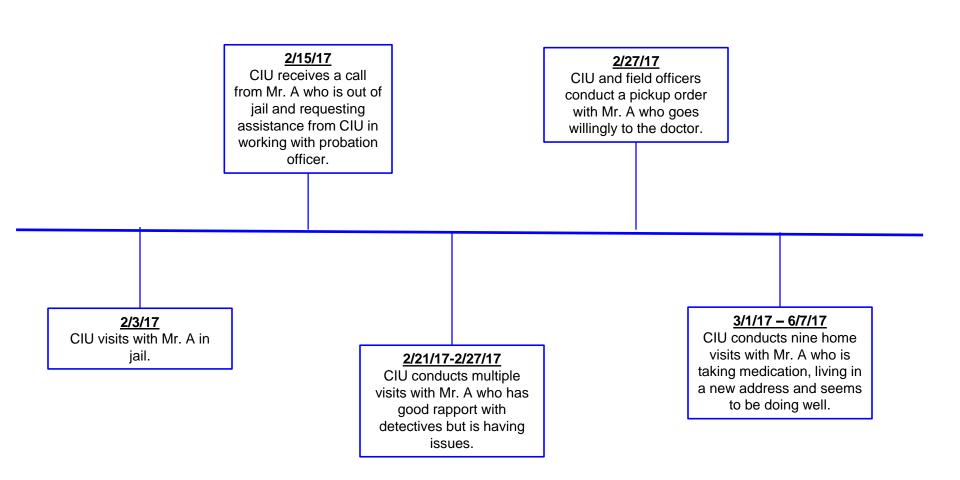
What Seems To Be Working And Not Working?

Mr. A (Continued)



What Seems To Be Working And Not Working?

Mr. A (Continued)



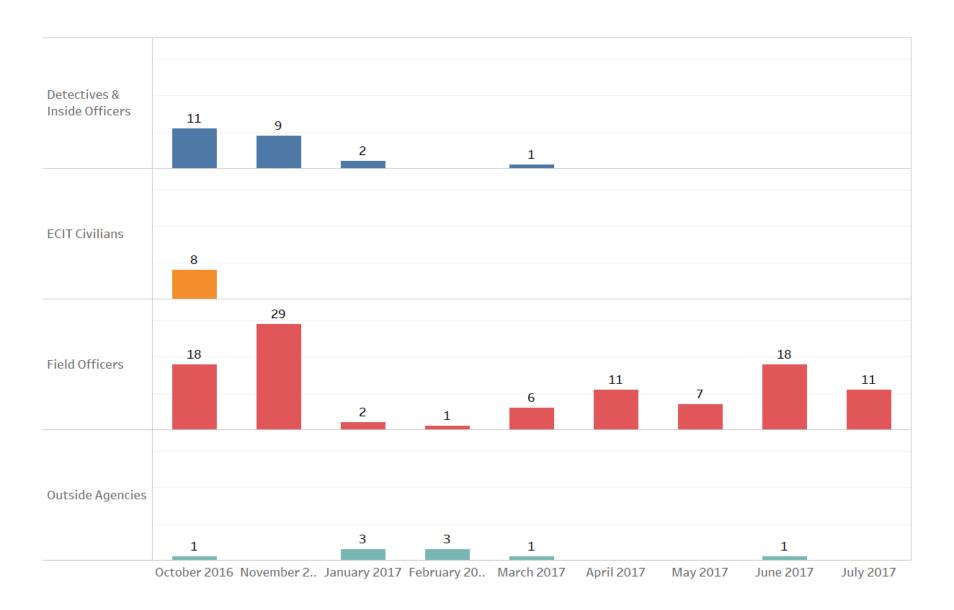
What Seems To Be Working And Not Working?

Thoughts To Consider

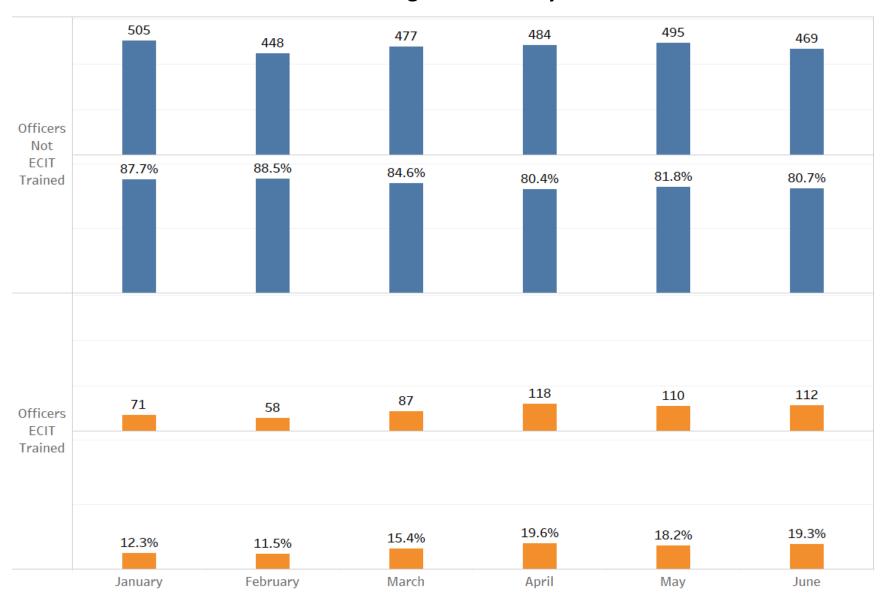
- The amount of time and effort that CIU detectives and clinicians put into building relationships with individuals is impressive.
- When possible, the importance of slowing down the interaction between individuals and officers.
- Helping individuals who face both drug addiction and mental health issues requires specialized systems of support.
- Every part of the behavioral health system has to be working in order to have a long term impact on individuals.
- Careful analysis of case studies is important both for the field and for individual agencies.

How do we evaluate the quality of the ECIT training for officers?

The Number Of Officers And Others Receiving ECIT Training From October 2016 To July 2017



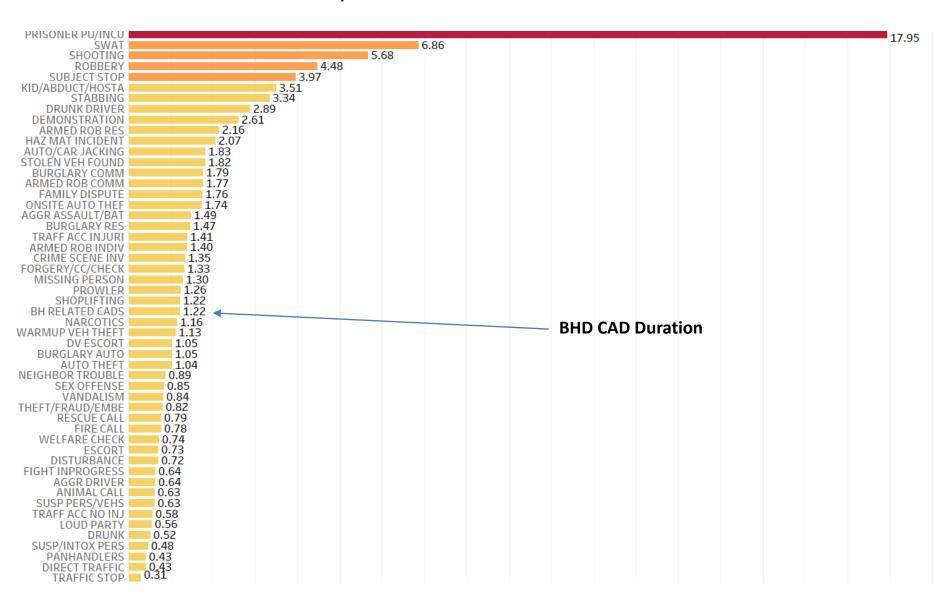
The Number And Percentage Of Behavioral Health Related CAD That Were Covered By Field Officers With ECIT Training From January 2017 To June 2017



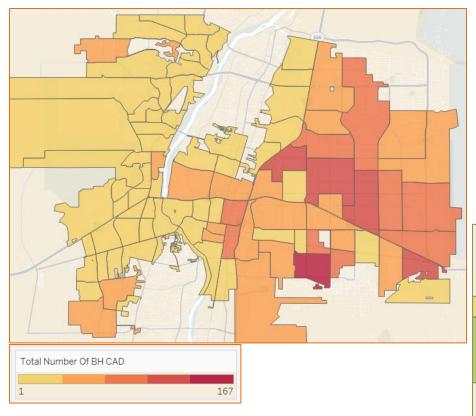
The Number Behavioral Health Related CAD Compared To Other CAD From January 2017 To June 2017

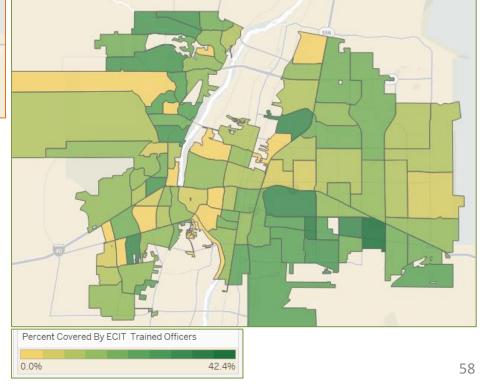


Duration For Selected CAD Calls, In Hours, From When The Officer Is Dispatched To The Time The CAD Is Closed

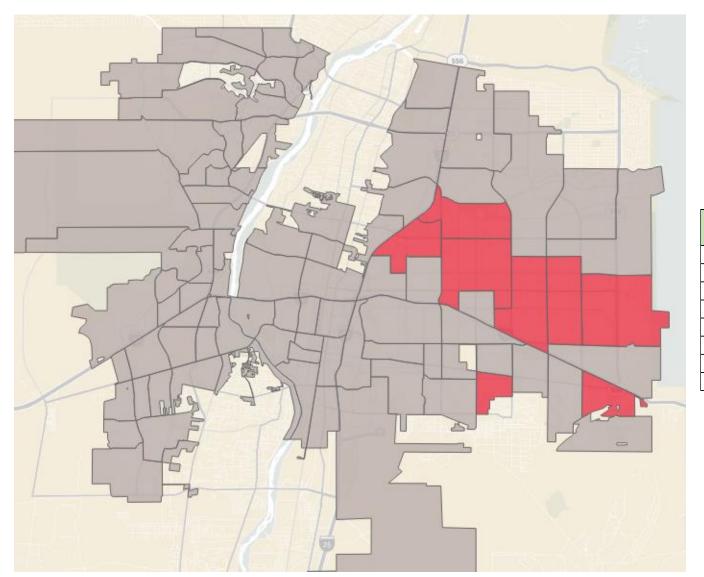


The Number Of Behavioral Health Related CAD By Beat And The Percent Of Those Calls That Were Covered By Field Officers With ECIT Training From January 2017 To June 2017





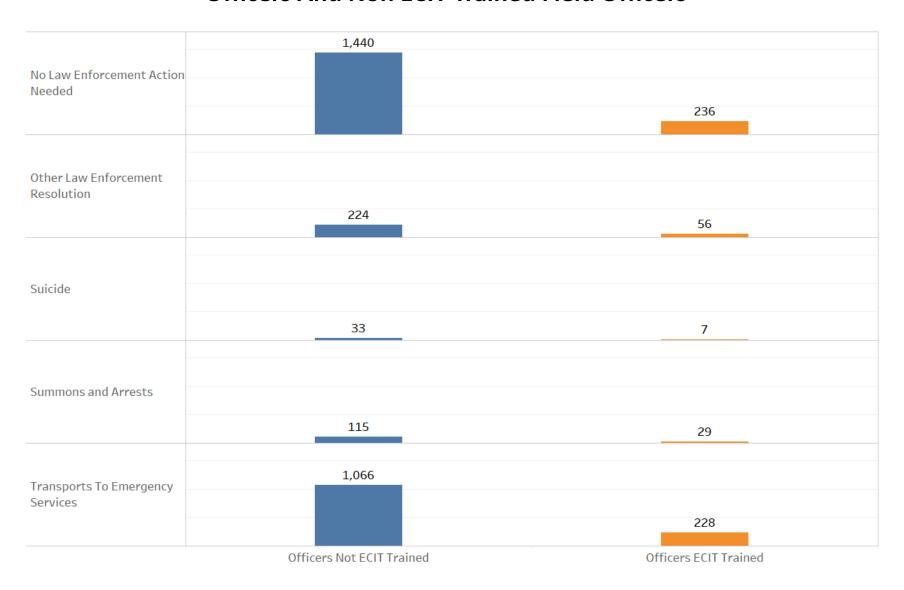
Beats With High Numbers Of Behavioral Health Related CADS And Low Percentages Of Those CADS Covered By Field Officers With ECIT Training From January 2017 To June 2017



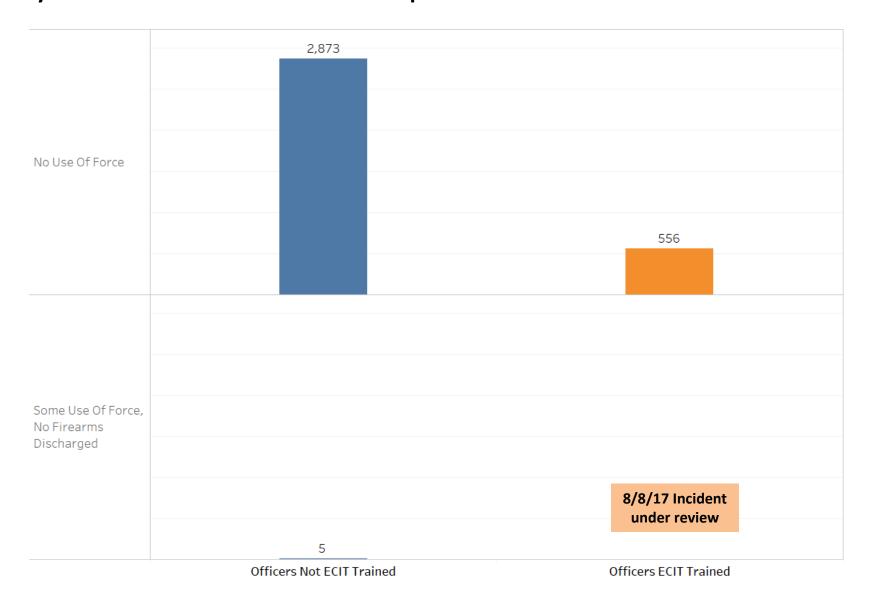
How Might We Think About How To Deploy Our Limited Resources?

Beat	Total BH	Percent Covered
	CAD	By ECIT
413	130	10.0%
423	114	13.2%
422	107	10.3%
523	102	18.6%
532	95	5.3%
531	93	11.8%
336	83	18.1%
431	81	18.5%

The Disposition Of Behavioral Health Related CAD By ECIT Trained Field Officers And Non ECIT Trained Field Officers



Use Of Force In Behavioral Health Related CAD From January 1, 2017 To June 30, 2017 By Officer Who Were ECIT Trained Compared To Officers Who Were Not ECIT Trained



Thoughts To Consider

- How Does APD Determine Which CIT Calls Need To Be Covered By ECIT?
 - All CIT CADs including both original and final call type?
 - Determination by Emergency Communications 911 and Dispatch Operators?
 - By Priority, Location and History?
- How Does APD Determine How Officers Are Deployed?
 - By Shift?
 - By Area Command?
 - By Days?
- When Do CIU Detectives Get Deployed?
- What Changes Need To Be Made To SOP and Telecommunicator Training?
 - What is the process for an ECIT officer to be pulled from an active dispatch to a high priority CIT CAD?

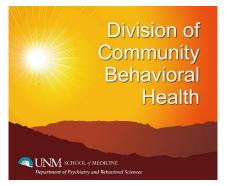
How do we evaluate the impact of our partnerships with other law enforcement agencies, advocacy groups, and the community?

Some Of Our Partners



Mental Health
Response Advisory
Committee















City Of Albuquerque Family & Community Services



How Partners Can Help Each Other Improve Their Effectiveness

HOUSE OFFICER AFFILIATION AGREEMENT

The Regents of the University of New Mexico, for its public operation known as the Health Sciences Center, specifically for the School of Medicine (the "University"), and Albuquerque Police Department, Crisis Intervention Unit (the "Institution"), agree:

RECITALS

- A. The caseload at the Institution is adequate to provide an opportunity for University resident physicians ("House Officers") to obtain practical and didactic exposure to patient management under the supervision of the medical staff of the Institution.
- B. The purposes of this Agreement are:
 - To establish a training and educational program for House Officers while on rotation at the Institution;
 - To ensure a close working relationship between the University and the Institution;
 - To benefit both the University and the Institution through provision of quality medical education and training by allowing participation by House Officers in the delivery of health care services by the medical staff of the Institution;
 - To provide House Officers with opportunities to acquire specific skills and knowledge in designated specialty areas through experience in patient care delivery by qualified physicians; and
 - To enable House Officers to become knowledgeable about operational aspects of various types of health delivery systems.

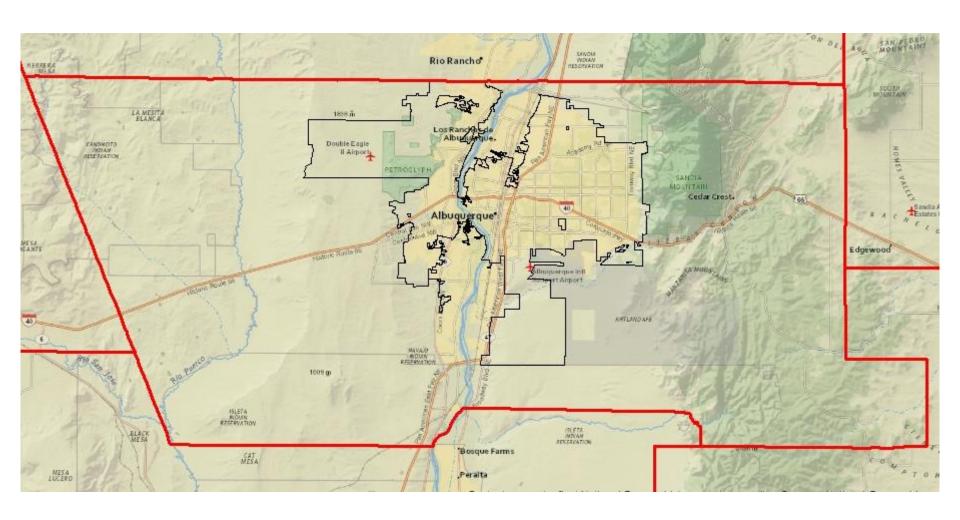
I. RESPONSIBILITIES OF THE INSTITUTION

- A. The Institution will:
 - Accept for training the number of House Officers to be determined jointly by the Institution and the University.
 - Make available its clinical and related facilities and its personnel to provide quality learning experiences for House Officers during their educational rotation at the Institution under the supervision of qualified Institution personnel.

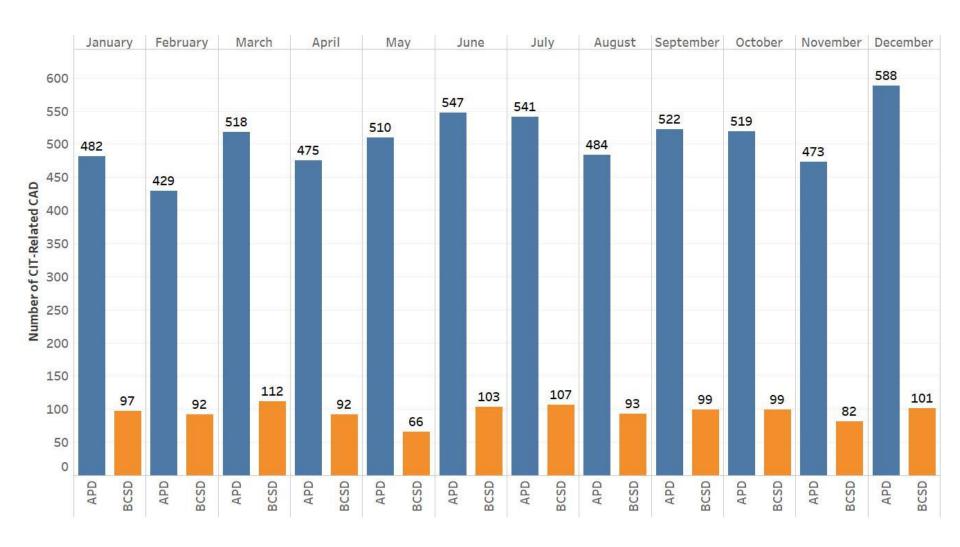
APD And The University
Have Signed An Agreement
That Enables Resident
Physicians To Get
Education Credit When
Working With APD

65

Bernalillo County and City Of Albuquerque Boundaries



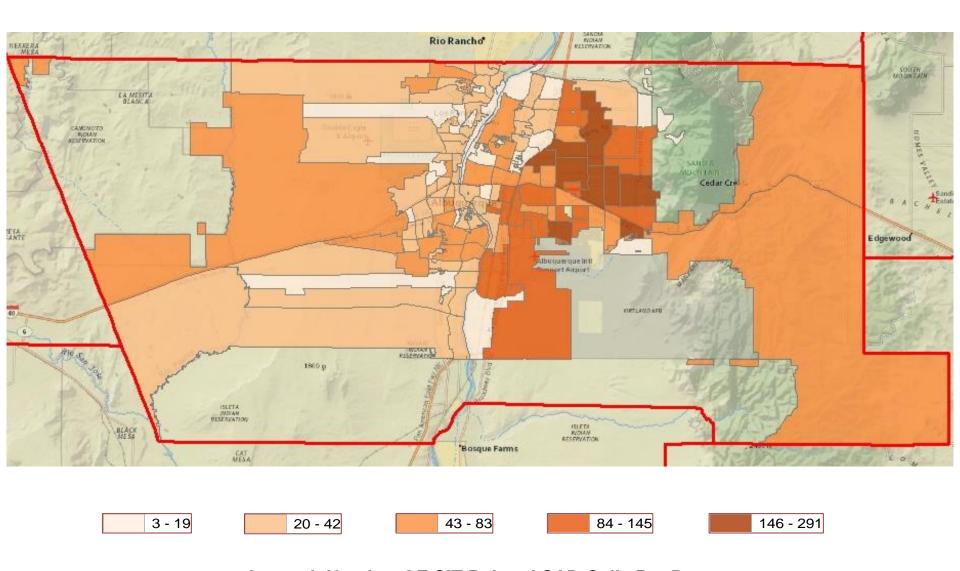
2016 CAD Calls For Albuquerque Police Department And Bernalillo County Sheriff's Department Priority 1 & 2 Calls By Month



Combined, APD And BCSD Responded To 7,235 Priority 1 & 2 CIT-Related CAD Calls In 2016



2016 CIT-Related CAD Calls For APD And BCSD Combined By Beat Priority 1 & 2 Calls Only



Legend: Number OF CIT-Related CAD Calls Per Beat

69



COMMISSIONERS

Debbie O'Malley, Chair District 1

Steven Michael Quezada, Vice Chair District 2

Maggie Hart Stebbins, Member District 3

Lonnie C. Talbert, Member District 4

Wayne A. Johnson, Member District 5

COUNTY MANAGER

Julie M. Baca

ELECTED OFFICIALS

Tanya R. Giddings Assessor

> Linda Stover Clerk

Willow Misty Parks
Probate Judge

Manuel Gonzales Sheriff

Nancy Bearce Treasurer

County of Bernalillo State of New Mexico

Procurement & Business Services Purchasing Section

One Civic Plaza, NW, 10th Floor Albuquerque, New Mexico 87102 Office: (505) 468-7013 Fax: (505) 468-7067 www.bernco.gov/purchasing/

DATE: May 12, 2017

TO: All Prospective Offeror's

FROM: James Zamora, Purchasing Administrator, Purchasing Department

RE: Request for Proposal RFP 40-17-JZ

Behavioral Health Clinicians for Mobile Crisis Teams

Bernalillo County Purchasing Department is seeking competitive solicitations from Offerors for Behavioral Health Clinicians for Mobile Crisis Teams.

A Non-Mandatory, Pre-Proposal conference will be held on May 24, 2017, starting at 10 a..m. Mountain Daylight Time (MDT) at the Albuquerque/Bernalillo County Government Center, Bernalillo County, One Civic Plaza NW, 10th floor, Purchasing Conference Room C, Albuquerque, New Mexico, 87102.

For registered vendors, pertinent RFP documents, including the specifications and the proposed contract documents can be downloaded through the purchasing website at no cost. For firms not registered, interested parties are encouraged to register at no cost through the County's purchasing website, www.bernco.gov/purchasing. Vendors are also welcome to contact James Zamora, Purchasing Administrator/Procurement Manager at 505-468-7394, or by e-mail jzamora@bernco.gov, to request a hard copy document at a cost of 50 cents per page. This RFP is issued by the Purchasing Department in accordance with the provisions of Sections 13-1-103 through 13-1-110 NMSA 1978. The Purchasing Department is the only organization who is authorized to make copies or distribute this RFP on behalf of the County.

<u>Sealed submittals for the referenced proposal must be addressed and delivered, no later than 4:00 p.m.MDT on June 16, 2017</u> at the Albuquerque/Bernalillo County Government Center, Bernalillo County, One Civic Plaza NW, Purchasing Department, 10h Floor, Room #10010, front desk, Albuquerque, New Mexico, 87102. Sealed submittals will be date and time stamped upon receipt. Delivery of proposals is the sole responsibility of the Offeror.

Request For
Proposals For
Behavioral Health
Clinicians For
Mobile Crisis
Teams

The Crisis Intervention Team Knowledge Network ECHO

Topics

- Bipolar Disorder
- Veteran Information & Resources
- CIT Programs and Setup
- · Drugs and their Effects
- Borderline Personality Disorder
- · Common Drug Street Names
- · Active Listening Skills
- · Disability Rights and Advocacy
- Law Enforcement Suicide & Mental Health
- · Perspectives of Psychotic and Manic Symptoms
- VA Justice Outreach
- Alcohol Withdrawal
- Medication Awareness
- NAMI. National Alliance on Mental Illness
- Schizophrenia
- Use of Data in CIT Programs
- · Community Collaboration in CIT
- · News Trends in Mental Health and Law Enforcement
- Assistant Outpatient Treatment
- · Antisocial Personality Disorder
- · Officer Self-care
- Attention Deficit Hyperactivity Disorder
- · Verbal Defense and Influence
- Anxiety Disorders
- Drug Induced Intoxication
- Homelessness
- PTSD
- Verbal De-escalation
- Spree Killings
- · Developmentally Disabled Waivers
- Mindfulness

Schedule

Every Tuesday 1:30pm - 3:00pm

Join from a computer, laptop, tablet or smart phone. It's that easy!

Contact the Project Coordinator for more details. Jennifer Earheart: jearheart@cabq.gov





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Visit www.goCIT.org to request your membership or email the Project Coordinator. Jennifer Earheart: jearheart@cabq.gov

Visit www.goCIT.org for more information

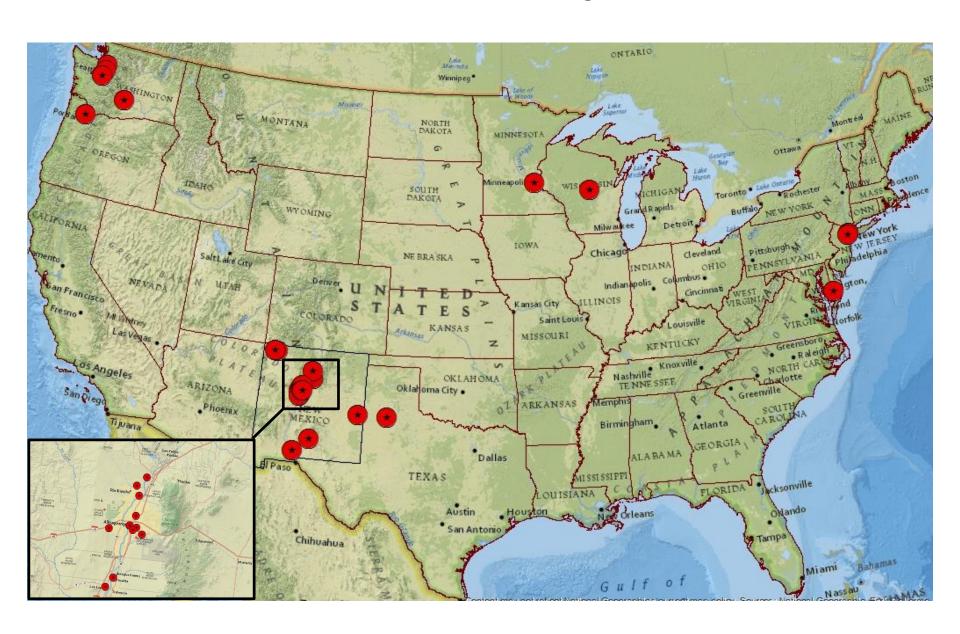
Visit www.goClT.org for more information



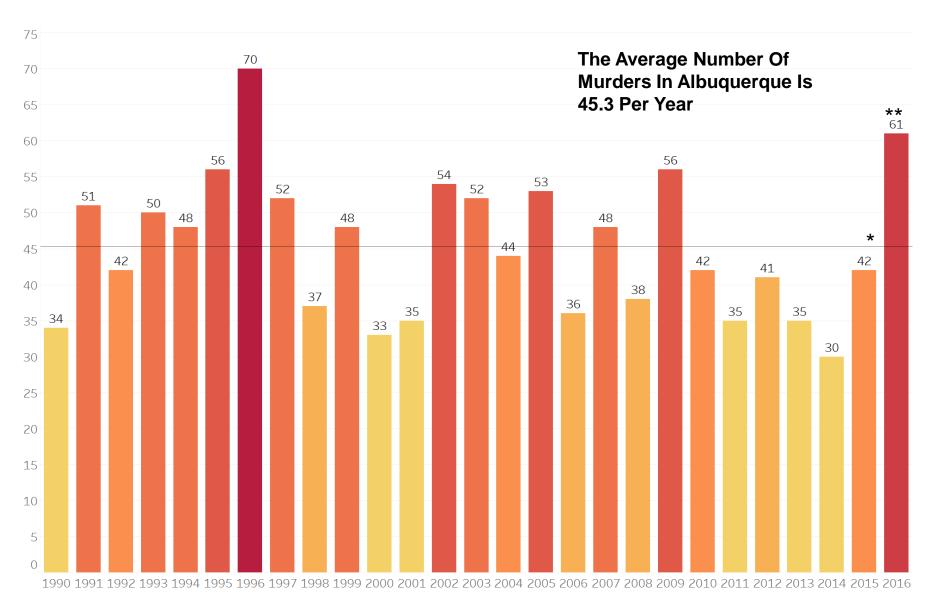


Crisis

The Crisis Intervention Team Knowledge Network ECHO



The Number Of Murders In Albuquerque 1990 To 2016



^{* 2015} FBI UCR Murder Numbers Do Not Include 4 Negligent Homicides ** 2016 Murder Numbers Are Not Official UCR Yet

Recent Child Homicides In New Mexico

Victoria Martens - 2016



Lilly Garcia - 2015



Jayden Dayea - 2016



Nhi Nguyen - 2016



The Macarenas Children - 2016



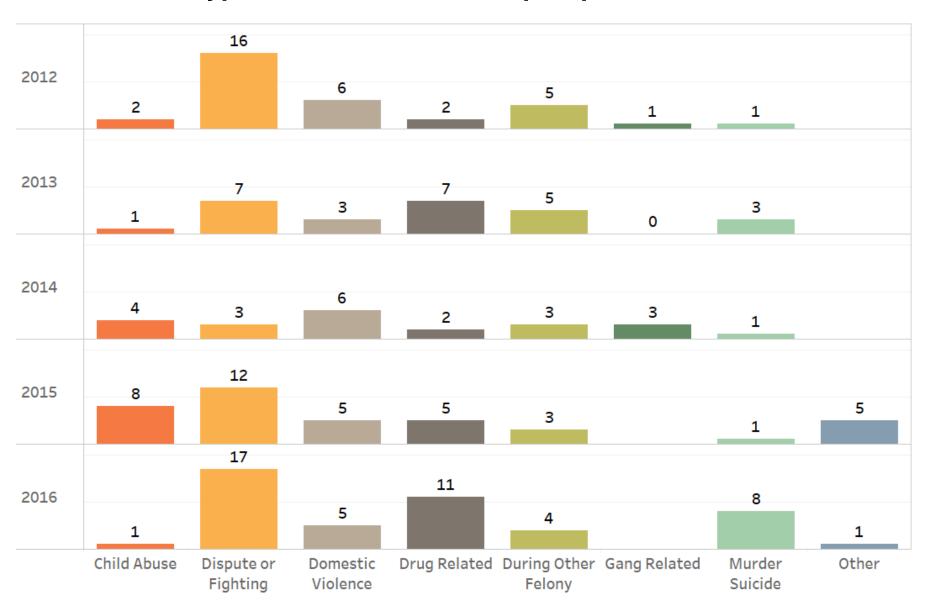
Ashlynne Mike - 2016



Villegas Mother & Children - 2016



The Types Of Murders In Albuquerque 2012 To 2016



In Summary

The Issues We Face

- A Rising Number Of Behavioral Health Issues
- A Rise In Crime
- A Lack Of Trust And Understanding
- Inadequate Systems Of Resources And Support

The Resources We Have

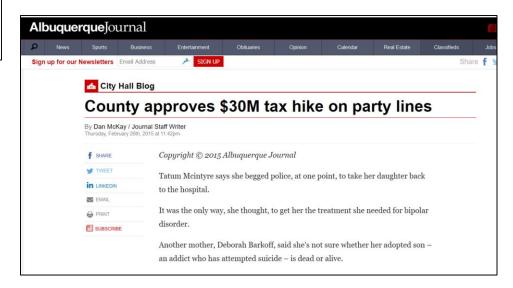
- Highly Trained Field
 Officers
- The CIU Detectives & Clinicians
- The Crisis Outreach And Support Team (COAST)
- Project ECHO & Other Partnerships

Achievements We Have Made







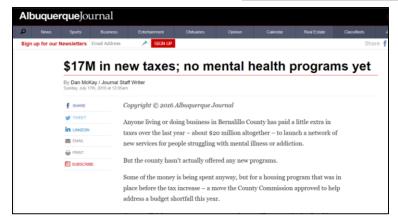




The Challenges Ahead











How Do We Build Systems Of Support?







