In Attenance:

Co-Chair Danny Whatley, The Rock at Noon Dav Rick Miera, Executive Committee Detective Matt Tinney, APD Crisis Intervention Unit Ellen Braden, CABQ-Dept. of Family & Comm. Services Rob Nelson, APD/C.O.A.S.T. Robert Salazar, NAMI/Peer Representative David Lev, NM Solutions Betty Whiton, NAMI Lieutenant Matt Dietzel, APD CIU Paula Burton, Peer Representative George Mercer, Albuq. Health Care for the Homeless Nils Rosenbaum, M.D., APD Behavioral Health Division James Burton, Peer Representative

Non-Voting members:

Deputy Chief E. Garcia Sergeant D. Dosal, APD Scribe: Lori Cruz, APD

Absent:

Johnny Martinez, NMVIC/ FIC
David Webster, Bernalillo County
Behavioral Health
William Narrow, MD., M.P.H., UNM
Dept. of Psychiatry
Mike McConnell, NAMI/Peer
Representative
Nancy Koenigsberg, Disability Rights
NM

Meeting was called to order at 5:03 PM. A quorum of 11 was met at time of start.

Welcome first time quests:

- Matt Dietzel, Lieutenant CIU, APD (new board member)
- Jim Williams, Deputy Chief, Albuquerque Ambulance
- Laura Nguyen, Adult Protective Services
- Tulsa Oklahoma Police Department
- Luke Languit, Lieutenant Special Operations, APD
- Lindsay Van Meter, Assistant City Attorney

Approval of meeting minutes

There was a motion made to approve the minutes as written. Paula Burton noted that James Burton should be included in the minutes as present. The motion was second and approved.

Public Comment (two minutes per person, 15 minutes total)

There was a discussion initiated by Rick about the resolution which was passed by City Council on August 20, 2018. The scope of the project is to purchase land and/or property, plan, design, construct and otherwise improve, a single-site behavioral health services center with associated supportive and transitional affordable housing for those suffering from behavioral health issues and who are in need of shelter.

(Q) Questions, (A) Answers, (C) Comments:

- C: Rick mentioned that it will be a 42 bed facility.
- C: Ellen pointed out that it will not be a facility but rather a single-site supported housing unit with wrap around services provided for single adults. No treatment provided.
- Q: Rick: Physical location?
- A: Ellen: Not aware of the location.
- C: Ellen: Hopeworks will continue to operate the day center.

Rick provided an update on the Tiny Home Village Project. The future site of the project has been narrowed down to 4 or 5 potential sites. The site will be a closed facility. It will be near bus and other exiting services. Residents will be responsible for paying rent. There will be approximately 12 to 14 tiny homes. There will be one main unit in the middle which will offer full bathroom, laundry and kitchen facilities.

(Q) Questions, (A) Answers, (C) Comments: None

Paula noted that outreach to the community is ongoing. NAMI is trying to reach out to the broader community.

Rick took the opportunity to acknowledge and welcome James Lewis (with APD/Mayor's Office)

Report and update from CIU, APD and Dr. Rosenbaum

Dr. Rosenbaum introduced Lieutenant Matt Dietzel as the new Lieutenant over the Behavioral Health Unit. He replaces Lieutenant Zach Wesley. Lieutenant Dietzel provided a summary of his experience working in conjunction with the unit. Dr. Rosenbaum made a motion to make Lieutenant Dietzel a voting member of the board. The motion was seconded by Rick. The board voted and approved the motion. Dr. Rosenbaum informed the board that the APD has received the IALEP Phil E. Keith Project of the Year Award of Merit for their outstanding project entitled "Crisis Intervention Team (CIT) Knowledge Network". The award is from the International Association of Law Enforcement Planners for our Project ECHO. Detective Tinney informed the board of the CIT International Conference which members of the CIU attended. APD had four groups presenting. The presentation topics were: CIT ECHO, de-escalation, data collection and triage, and how CIU detectives and clinicians collaborate as a team. Detective Tinney asked several agencies what criteria they followed on how to triage calls. None of the agencies had defined criteria.

(Q) Questions, (A) Answers, (C) Comments:

- Q: Detective Tinney: What is manageable for home visit follow-ups? APD receives approximately 7000 behavioral health related calls a year.
- C: Sergeant Dosal: We are assigning 50 to 100 per month.

- Q: Detective Tinney: What should we as a unit follow-up on?
- Q: David Ley: How do we avoid redundancy on calls?
- C: David Ley: It's all about allocation of resources from systemic resources. I'd like to be a part of that process.
- C: Sergeant Dosal: We are working on our SOPs and have adopted your ideas regarding SOP 2-19. We have an Assistant City Attorney, Lindsay Van Meter, working with CIU on updating them. She is here today at this meeting.
- C: Rick: We do not want it all to be on APD's shoulders. CET vs MCT. Who is doing what? There should be a collaborative agreement on who gets visited and who gets a follow-up. MCTs should only get referrals from HopeWorks and APD.
- C: Sergeant Dosal: Only HopeWorks makes referrals to CETs. Our referral
 process is an email. Triage on how to handle is difficult. If criteria for CET
 are not met it goes to our detectives.
- C: Rick: Should get all the players together, compare rosters, will bring up at BHI.
- C: Ellen: Believes there is overlap
- Q: Danny: Are the detectives maintaining a case load, how much?
- A: Sergeant Dosal: Varies, case load dependent on the detective. Some have been in the unit a longer period of time.
- Q: Rick: Is there a follow-up for 3, or 4 or etc. levels?
- A: Sergeant Dosal: There is no cookie cutter answer. Depends on the case.
- Q: Danny: Is there closure on cases?
- A: Sergeant Dosal: Not really unless they have moved or passed away
- Q: David: Can you have a case but no follow-up?
- A: Sergeant Dosal: Yes
- Q: David: What criteria are used for caseload and follow-up requirement?
- Q: Danny: Does this issue fall under any or all of the 3 subcommittees?
- A: David: This is a full committee issue. There should be a follow-up on the referral process.

Training: next CIT class is next month. Thirty (30) laterals were hired and will be at that training. We have another CIT class in October and one in December.

David mentioned pick-up orders and how it all works. Because Nancy is out, he asked that discussion be deferred for next MHRAC meeting. Rick stated that they are mostly conducted by BSCO. Rick asked is they would need to be involved in the discussions. Lieutenant Dietzel replied yes. David stated that getting APD in engagement and training has been very successful. Robert asked how they could get BCSO so involved since they do not fall under CASA. Danny pointed out that AFD has been to the meeting but as the City of Albuquerque, they fall under CASA. David pointed out that it has always been the intent of MHRAC to have more community impact, not just with APD. The future of MHRAC will be in involving other entities while maintaining support and structure from APD. Danny stated that door has been opened before but can be opened again. James mentioned that if MHRAC is trying to get other agencies to buy in – they might need to be placed on the board so that they feel they have a voice. Danny mentioned that CASA mandates board members but is not sure if there is a restriction on who can be on

the board. Certainly a discussion to have. Have to realize they are not required to follow MHRAC. It was then recognized that Sergeant Dosal had been named Supervisor of the Quarter, that clinicians Mark Oberman and Terri Singer had been named Civilians of the Month and that Detective Tinney had received an award from NAMI for CIT Educator of the Year.

Report and update from sub-committees:

Information Sub-Committee:

George: We have been active in the review of SOP 2-19. We would like to be included in the review of the new SOP.

Training Sub-Committee:

David: We continue to review curricula. We have a meeting on Monday.

(Q) Questions, (A) Answers, (C) Comments:

- C: There has been some dialogue with Veterans.
- C: Health Care for the Homeless (a collaboration of advocates and police) from Nashville will be giving a 15 minute presentation.

Resource Sub-Committee:

Ellen: We have been waiting for the new lieutenant to be selected.

Report and update from C.O.A.S.T

None

Draft Crisis Negotiations Team Revised SOP Presentation:

The draft SOP was emailed out to the board members. Commander Sanchez hoped that everyone had the opportunity to read it. In the past, this SOP was restricted. It is Commander Sanchez's intent to open it up and review it like the other SOPs. Several of the changes noted are mainly formatting changes. In the past, CNT would only respond to tactical activations. CNT will respond when there is someone threatening suicide from an elevated structure. In the past such a situation would take up a lot of resources from the field. The current process is as follows: First a CIT officer is called, then an eCIT officer, then a CIU Detective and finally a CNT Sergeant. Only a CNT Sergeant (the primary negotiator) and a secondary officer will be sent. This change also impacts SOP 2-20. Commander Sanchez informed the board that the SOP would be posted, Wednesday, August 22, 2018 for a 7 day comment period.

(Q) Questions, (A) Answers, (C) Comments:

- O: Danny: Is this SOP was under a six month review?
- A: Commander Sanchez: Yes. He further pointed out that suggestions can be made prior to the six months.
- Q: David: Once CNT responds who is in command of the team?

- A: Commander Sanchez: If CNT responds, they will not take over command of the team. The Field Supervisor will maintain control. The CNT Sergeant will be there to ensure that field will not have negotiators do things they should not.
- Q: Danny: Is there a time frame involved when CNT should or is called out?
- A: Commander Sanchez: There is no time frame. It is hard to predict. It could be a short period or a lengthy one. If field is communicating will we don't want them to feel like they are not able to do their job.
- Q: David: How does the department know if this works? What process is in place where APD looks and says this worked or it didn't work? Where does this happen?
- A: Commander Sanchez: If we can get a person down it works.
- Q: David: From a procedural viewpoint is there a body that looks at it? Active review?
- A: Sergeant Dosal: In reference to the case sited, yes, they did review the process and met with area command and officers to discuss the process.
- A: Commander Sanchez: There were debriefs, with CIU in attendance. This led to the CNT process change.
- Q: David: Is there a multi-unit review of procedures?
- A: Deputy Chief Garcia: That is a good idea. Interaction would work within the affected units.
- A: Commander Sanchez: Formal training will be conducted. CIU will be involved as well as the Academy. This will include response to any hostage or suicide barricaded subjects. CIU will be giving input with the training.
- Q: James: Will there be a point it will never reach CNT because field is handling it?
- A: Commander Sanchez: At some point it will get to CIU but not necessarily CNT.
- Q: David: Is it possible to get multi-division review?
- A: Asst. City Attorney Van Meter: It does get reviewed in the policy review process ad OPA.
- Q: Rick: Was there any change due to the new player (MCT)?
- A: Commander Sanchez: No the process is field, field CIT, eCIT, CIU, CNT. MCT would only be called if available.
- C: Commander Sanchez: Will send a copy of the clean SOP to MHRAC

MHRAC Final Discussion:

None

Adjourn

Meeting adjourned at 6:45 PM