

Response to Behavioral Health Incidents



January 1, 2023 – June 30, 2023

Crisis Intervention Section
Albuquerque Police Department





Documenting Behavioral Health Contacts

APD officers are directed by SOP 2-19, Response to Behavioral Health Issues, to complete a CIT contact sheet for any interaction with any individual who is experiencing a Behavioral Health Issue or a Behavioral Health Crisis. CIT contact sheets are recorded in APD's records management system and documents' the interaction with the individual, circumstances of the encounter, and the outcomes of the contact. These data are use for management purposes to ensure that APD has appropriate services for people in crisis. This report covers the period of January 1, 2023 through June, 2023.

APD is also able to identify calls for service that are most likely behavioral health related using the Computer-Aided Dispatch (CAD) system. Calls for service classified as behavioral health or suicide are used to ensure that behavioral health contacts are identified. The CAD system also tracks all officers who responded to a call for service. Some calls originally classified as behavioral health or suicide may be found to not be crisis-related during the response.

If a use of force occurred during the interactions, APD investigates the incident according to the use of force policy. Information related to the use of force is recorded in the department's use of force database. Data related to use of force in this report is retrieved from the use of force database.

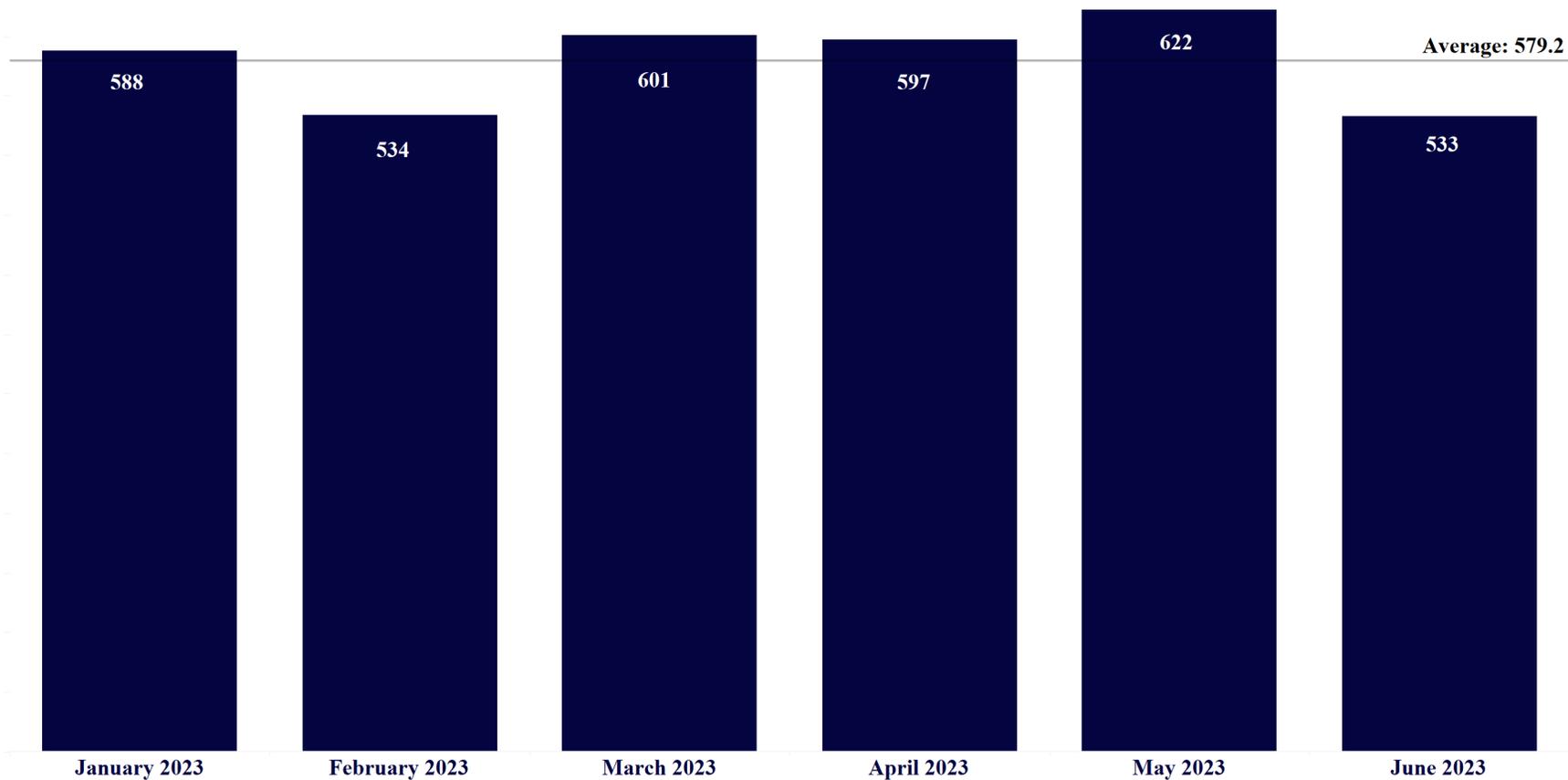


Types of Behavioral Health Response

1. Field Services officers assigned to Area Commands respond to calls for service that may have a behavioral health component. All officers receive training on responding to behavioral health crises; additionally, over 60% of Field Services officers have received Enhanced Crisis Intervention Team (ECIT) training. In behavioral health crisis situations, when feasible, officers are instructed to request backup from ECIT trained officer if they are not ECIT certified.
2. Crisis Intervention Unit (CIU): Detectives specialized in crisis intervention are assigned cases with individuals who are suffering from more severe behavioral health issues and may pose a safety risk to others.
3. Mobile Crisis Team (MCT): MCT is a two-person unit comprised of one independently licensed mental health clinician paired with an ECIT trained officer. MCTs can provide assessments of people with behavioral health concerns and consultation to other officers.
4. Crisis Outreach And Support Team (COAST): Civilian staff meet with individuals with less severe behavioral health issues and/or homeless individuals and provide crisis intervention, access to mental health services, and education in response to police referrals. During the time frame of this report, COAST services were transferred to Albuquerque Community Safety (ACS). Future APD reports will not include COAST.



Encounter data - CIT Contacts by Month – APD total

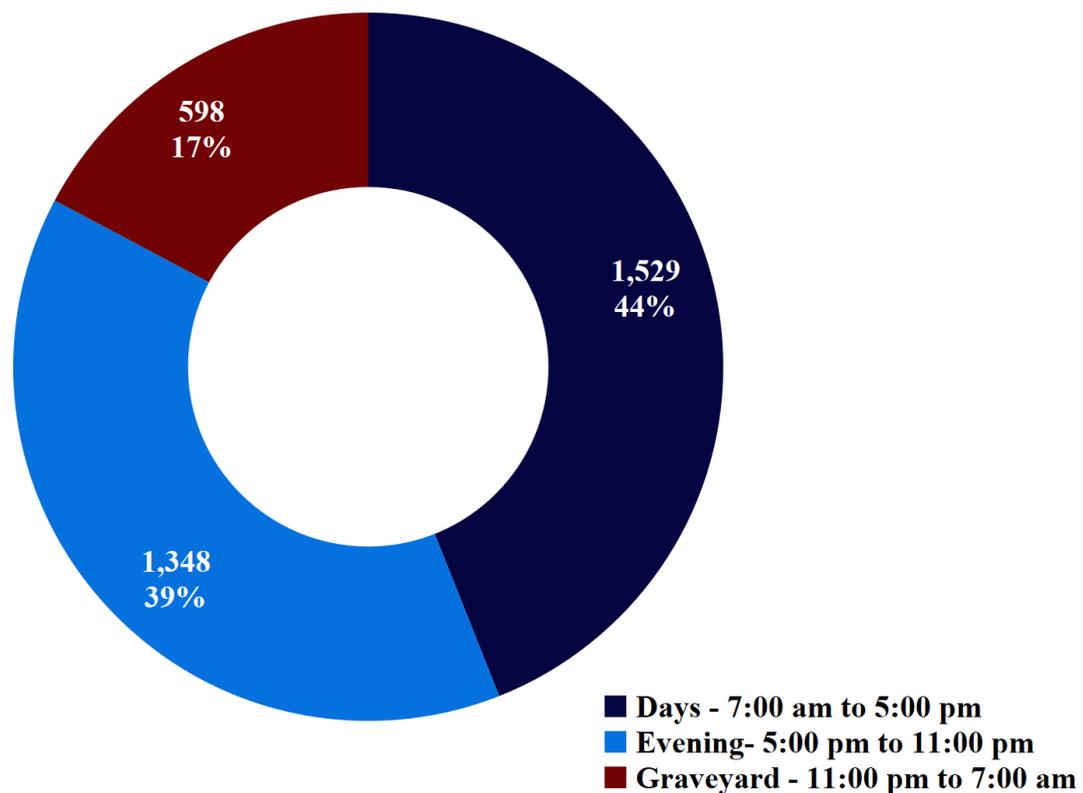


During January 2023- June 2023 there was a monthly average of 579.2 Crisis Intervention Contacts.

n = 3,475



Encounter data - CIT Contacts by Shift – APD Total

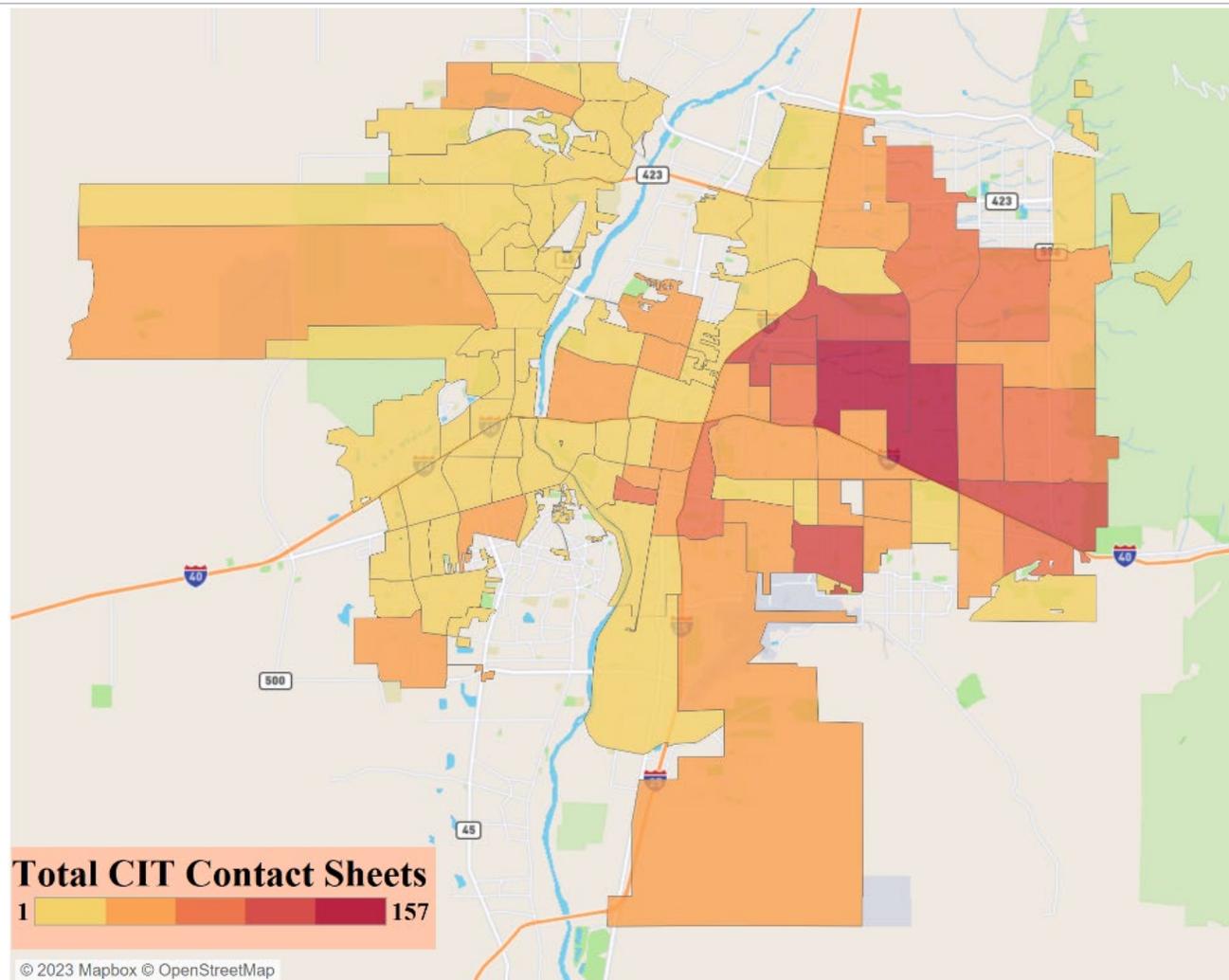


Forty-four percent (44%) of crisis intervention contacts occurred during the day shift, followed by the evening shift (39%) and grave shift (17%).

n = 3,475

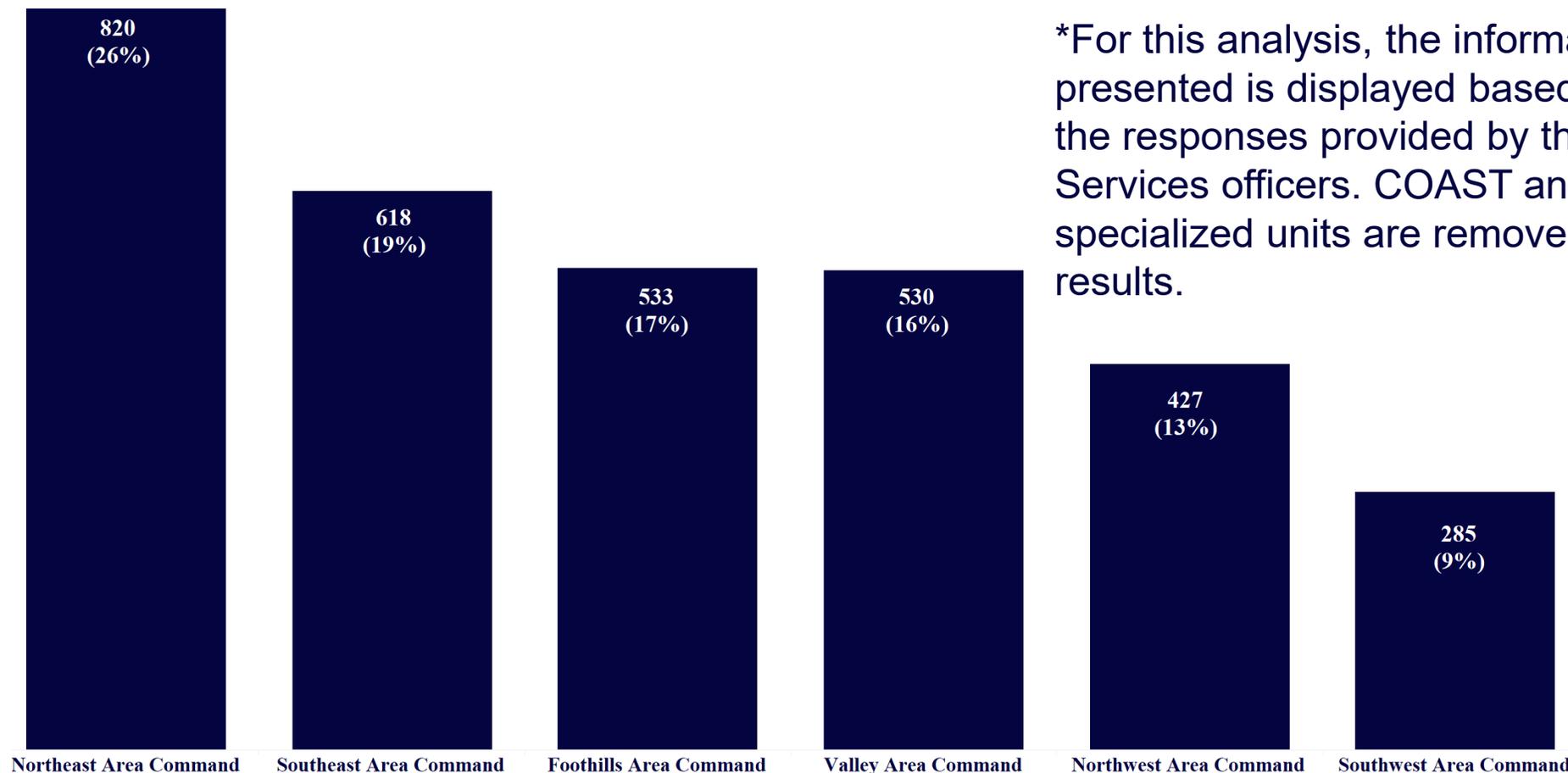


Location of CIT Contacts (n=3,250 with location)





Encounter data - CIT Contacts by Area Command – Field Services Officers Only*

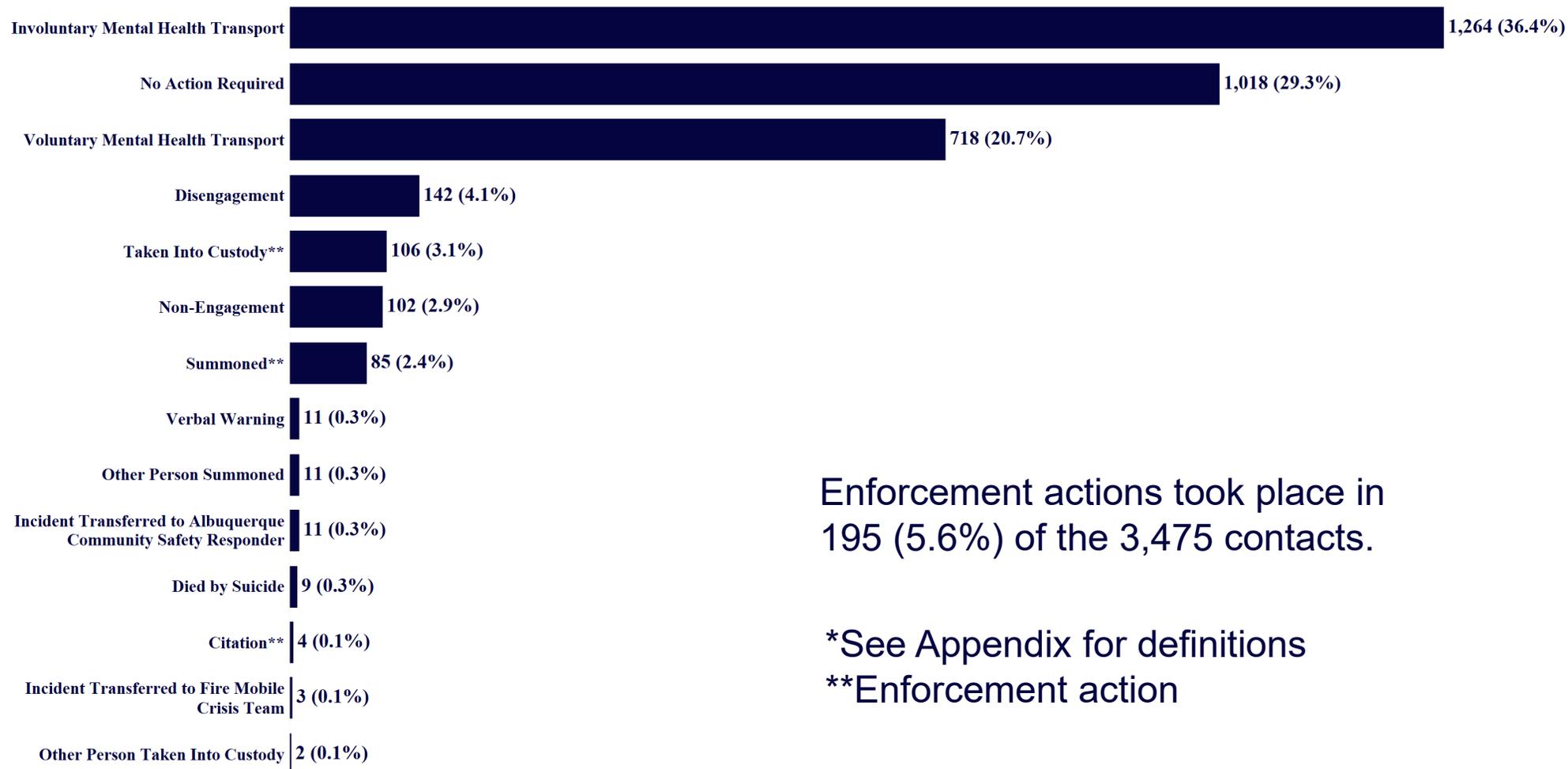


*For this analysis, the information presented is displayed based only in the responses provided by the Field Services officers. COAST and other specialized units are removed from the results.

*There are 225 Null values. 37 contact sheets were excluded because they occurred out of area/ or labeled incorrectly [South & North]



Encounter data – Outcomes for CIT Encounters (n= 3,475)*



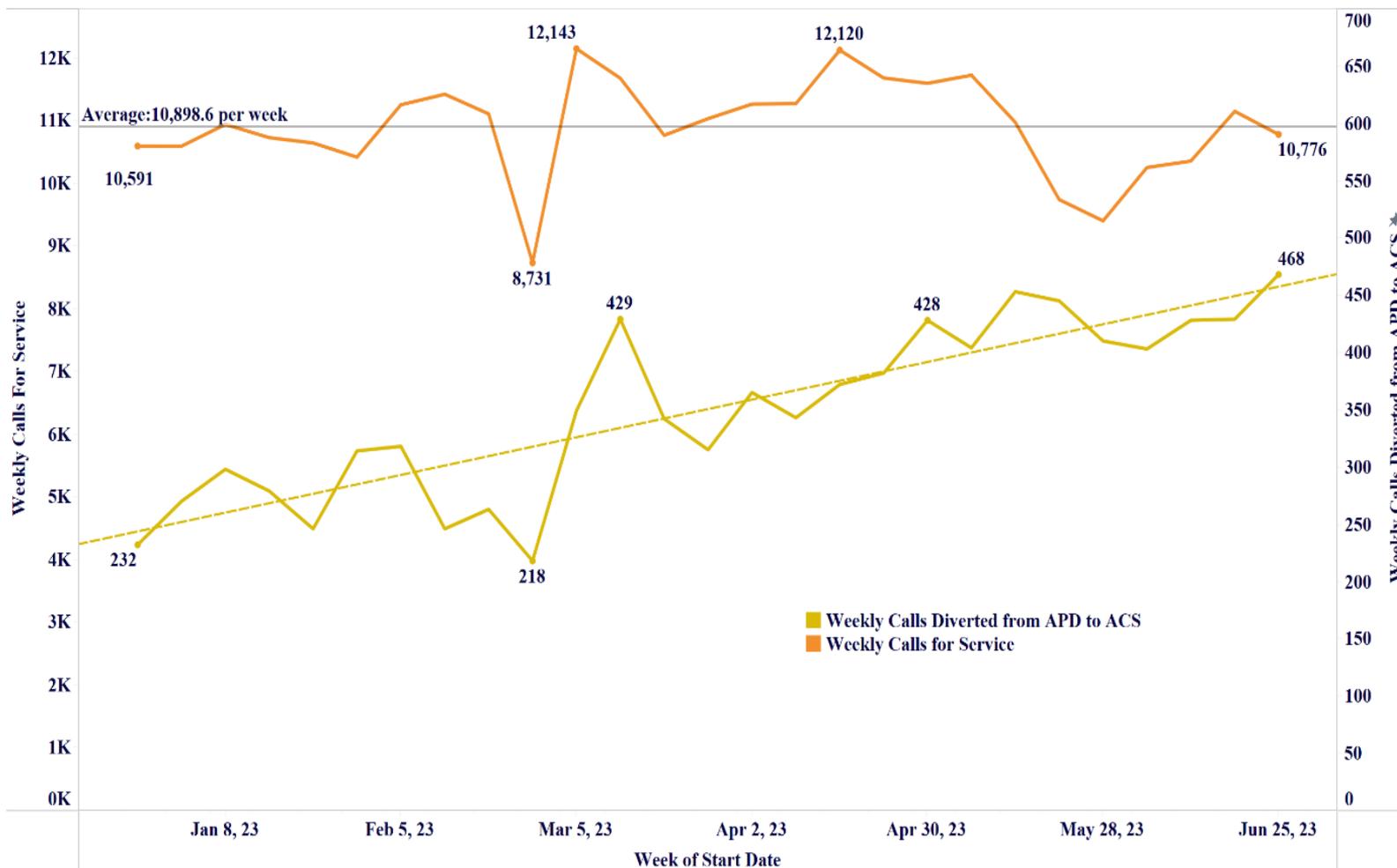
Enforcement actions took place in 195 (5.6%) of the 3,475 contacts.

*See Appendix for definitions

**Enforcement action



Calls Diverted from APD to Albuquerque Community Safety (ACS), lines are on different scales



A total of 9,449 calls that would have been dispatched to APD were diverted to ACS from Jan. to June 2023.

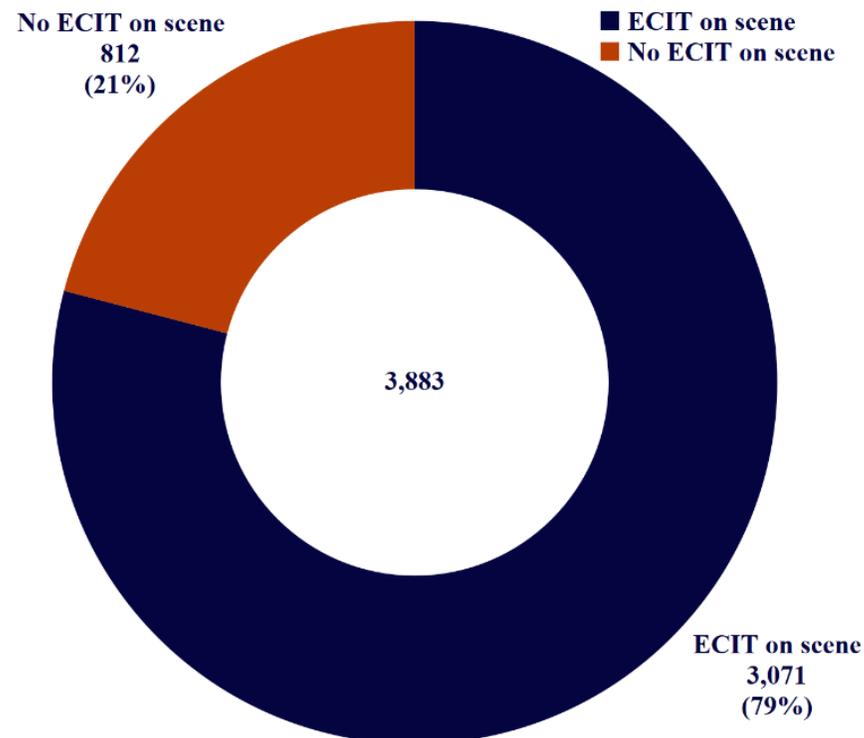
An average of 350 calls per week were diverted to ACS.

Data come from Emergency Communications Center count of weekly diverted calls.



Encounter Data – ECIT on Scene

Behavioral Health and Suicide CAD calls where an ECIT officer arrived on scene



Enhanced Crisis Intervention Team (ECIT) certified officers receive additional training on responding to behavioral health calls for service.

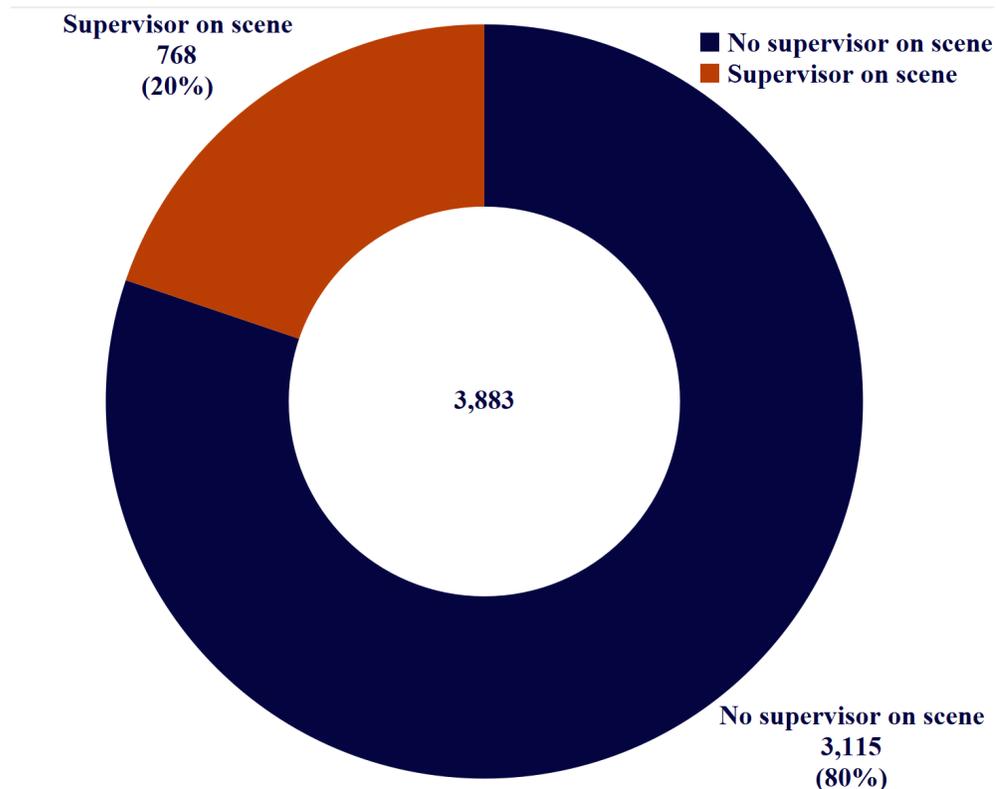
In January – June 2023, 79% of calls for service* beginning or ending as “Behavioral Health” or “Suicide” had an ECIT certified officer arrive on scene.

* For this analysis, a call for service is counted as one distinct CAD number where the original or final call types were Behavioral Health or Suicide. Calls that were cancelled, BOLOs (be on the lookout), and calls where no officer arrived on scene are excluded. A total of 3,883 calls for service met these criteria.



Encounter Data – Supervisor Responded

Behavioral Health and Suicide CAD calls where a supervisor arrived on scene



Supervisors responded to 20% of all “Behavioral Health” and “Suicide” calls for service* in January – June 2023.

Not all behavioral health and suicide calls require a supervisor. APD dispatch policy requires supervisors respond to calls which are the “most serious in nature,” generally incidents where a person is armed with a deadly weapon or where a circumstance exists where there is a high likelihood of death or great bodily injury.

*For this analysis, a call for service is counted as one distinct CAD number where the original or final call types were Behavioral Health or Suicide. Calls that were cancelled, BOLOs (be on the lookout), and calls where no officer arrived on scene are excluded. A total of 3,883 calls for service met these criteria.



Crisis Intervention Section Activities

CIU Home Visit Detective	Number of Detectives	Count of In Person contacts
	7	1,622
MCT Unit	Number of Officers	Count of contacts
	4	1,290
COAST Unit*	Number of non sworn employees	Count of contacts**
	1	222
Total		3,134

**Includes phone contacts and services provided.

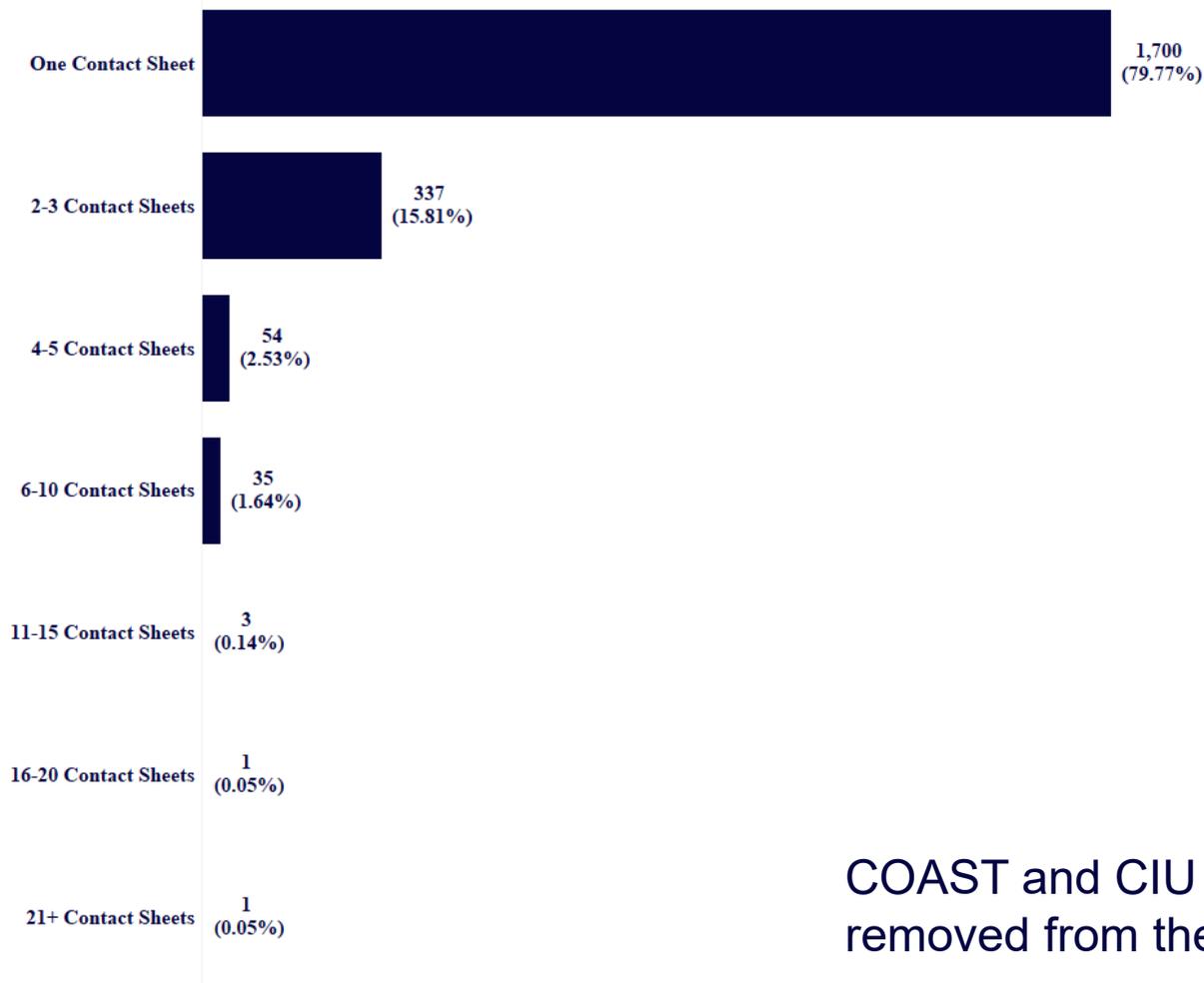


2023 CIT Contact Sheets Demographics

- Individuals often appear multiple times in CIT Contact Sheets and often do not have a unique ID in the records management system. To report on the demographics of individuals involved, data analysts in the Data Analysis Division created a unique identifier based on name and birthdate. The identifiers were then grouped based on similar spelling and birthdates. Finally, analysts manually reviewed all groupings to ensure the grouped records were likely the same person based on name, birthdate, demographics, and addresses.
- A total of 2,221 unique individuals were identified across the 3,475 CIT Contact Sheets.



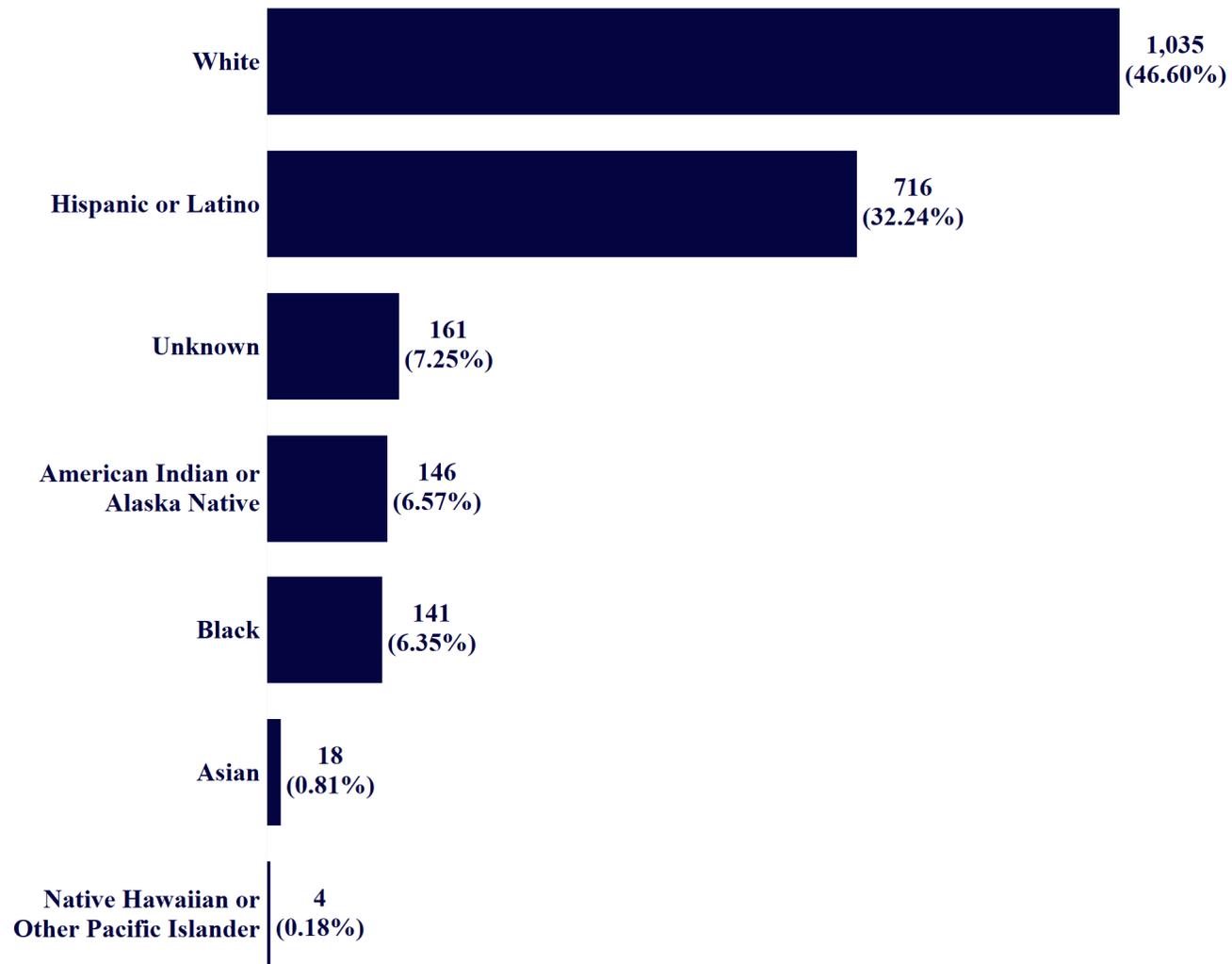
Number of Contacts



COAST and CIU Detective visits are removed from the results.

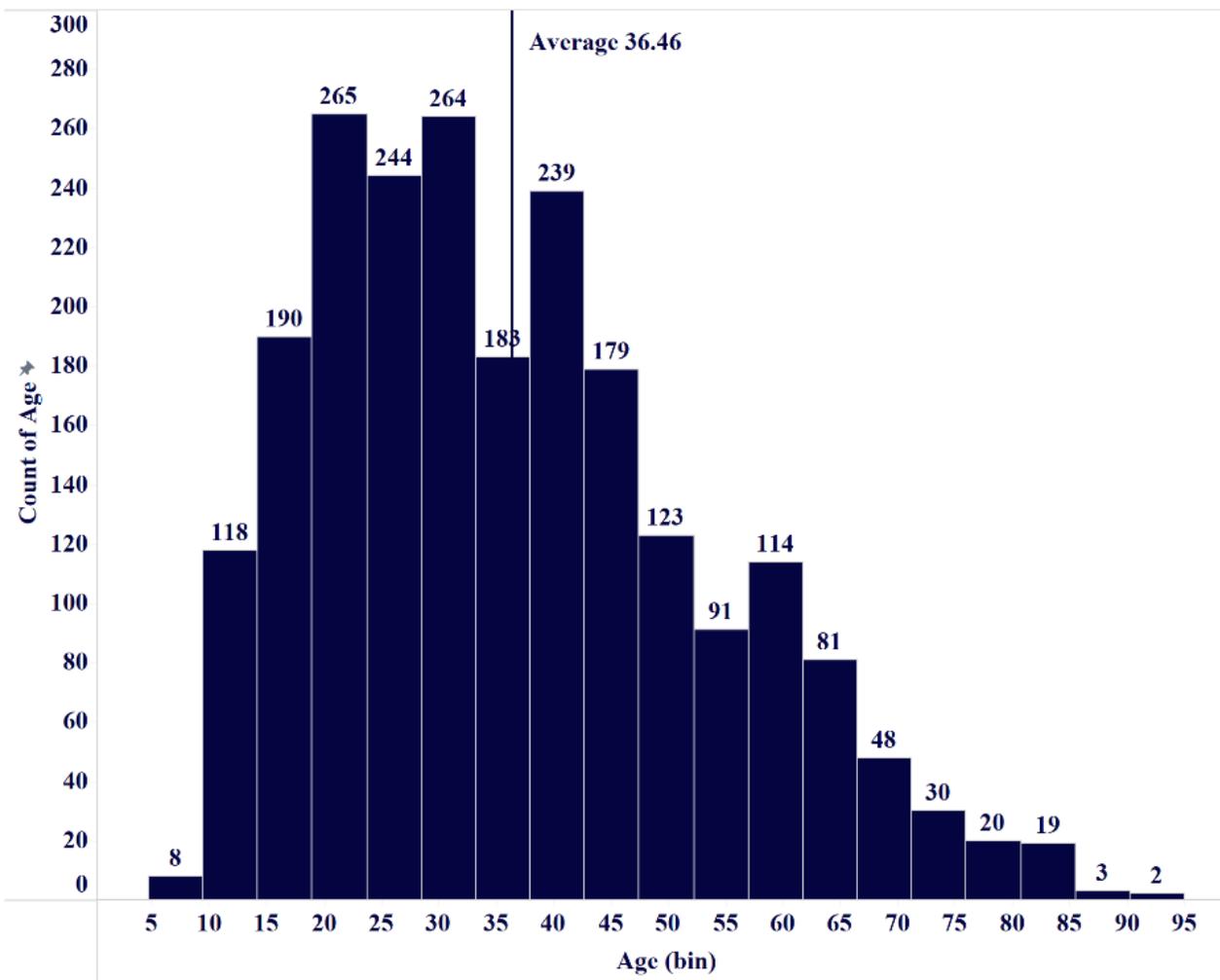


CIT percentage of Individuals by Race and Ethnicity





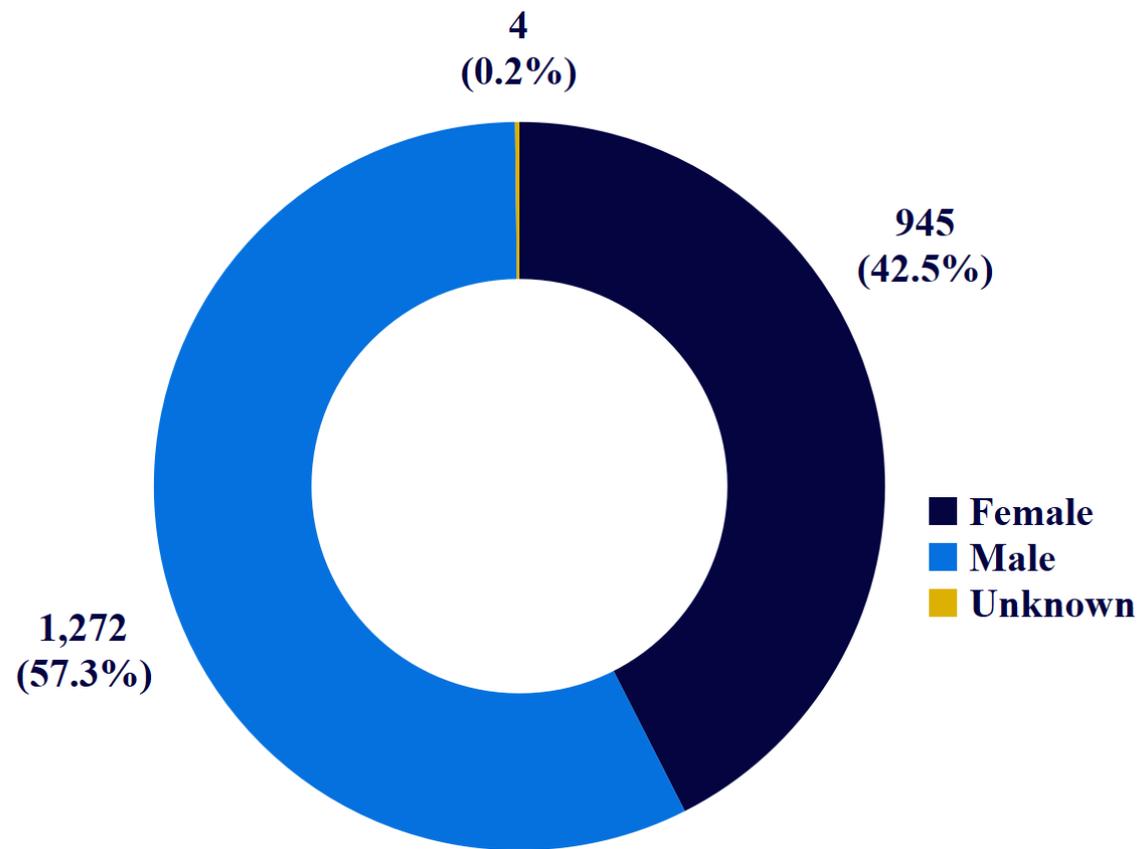
Age of Individuals at the Time of Contact



Age is calculated in the records management system relative to date of contact. For individuals with more than one contact who had a birthday or provided different years of birth, the average age across encounters is reported.



Gender of individuals at the time of contact

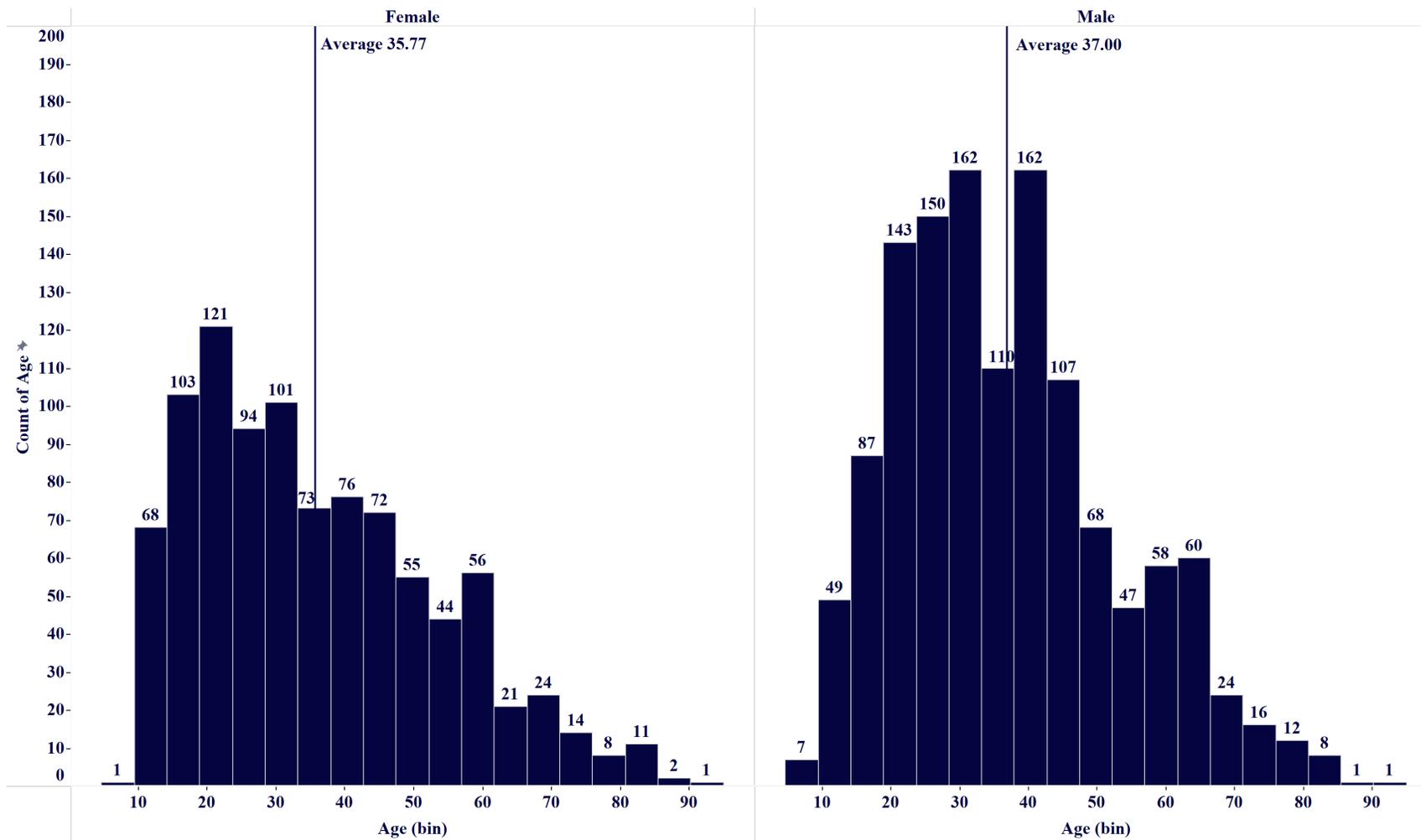


57.3% of individuals during crisis intervention contacts were Male.

n = 2,221

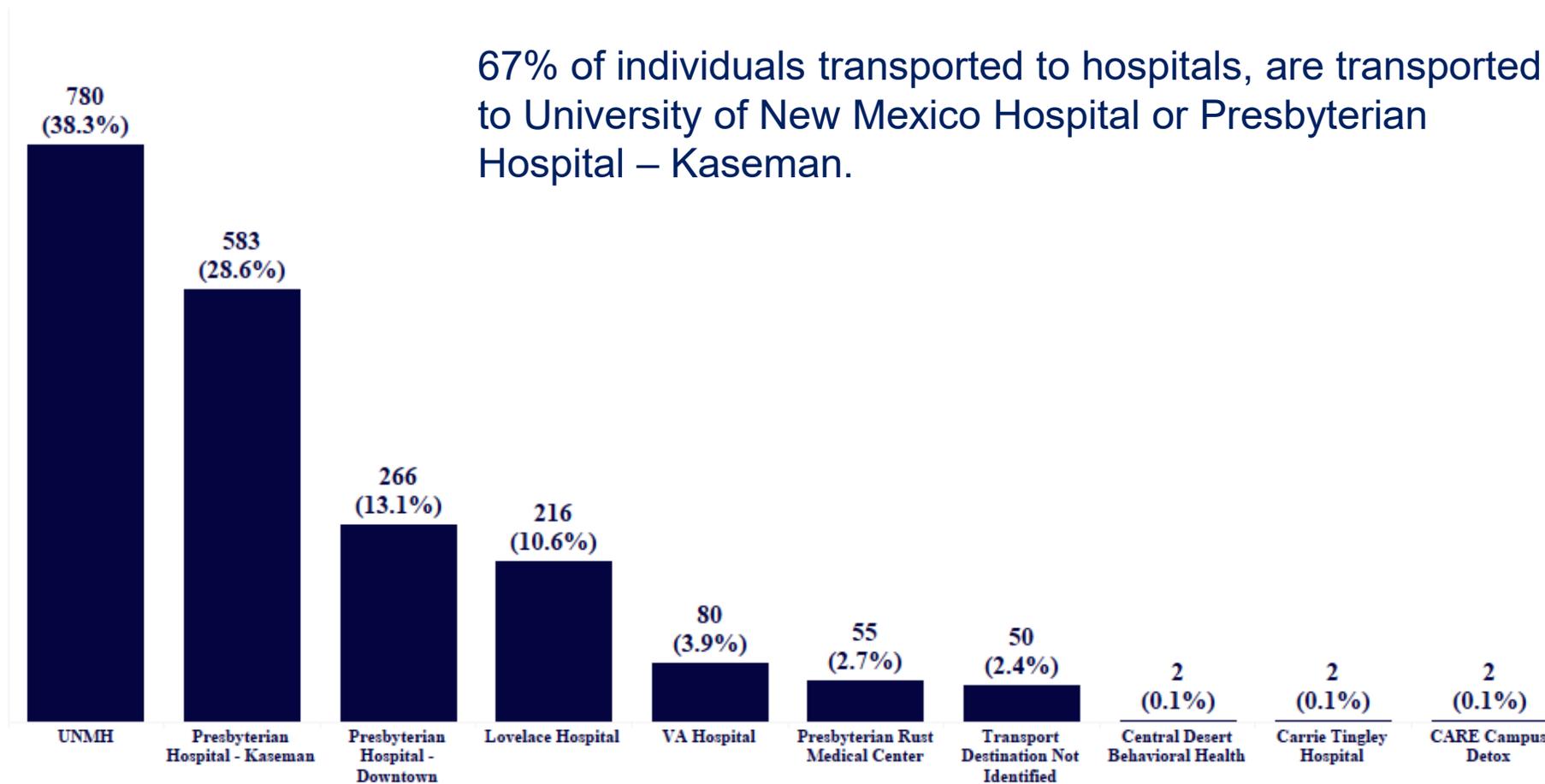


Age & Gender of Individuals at the Time of Contact





Mental Health Transport Destinations





Force and Behavioral Health

APD matches records of behavioral health calls to the use of force records system to identify when force was used. APD uses three different methods to identify the possible behavioral health incidents where force may have occurred.

APD identified 88 total cases using the three methods detailed on the next slide. These cases include levels 1, 2, and 3 force.



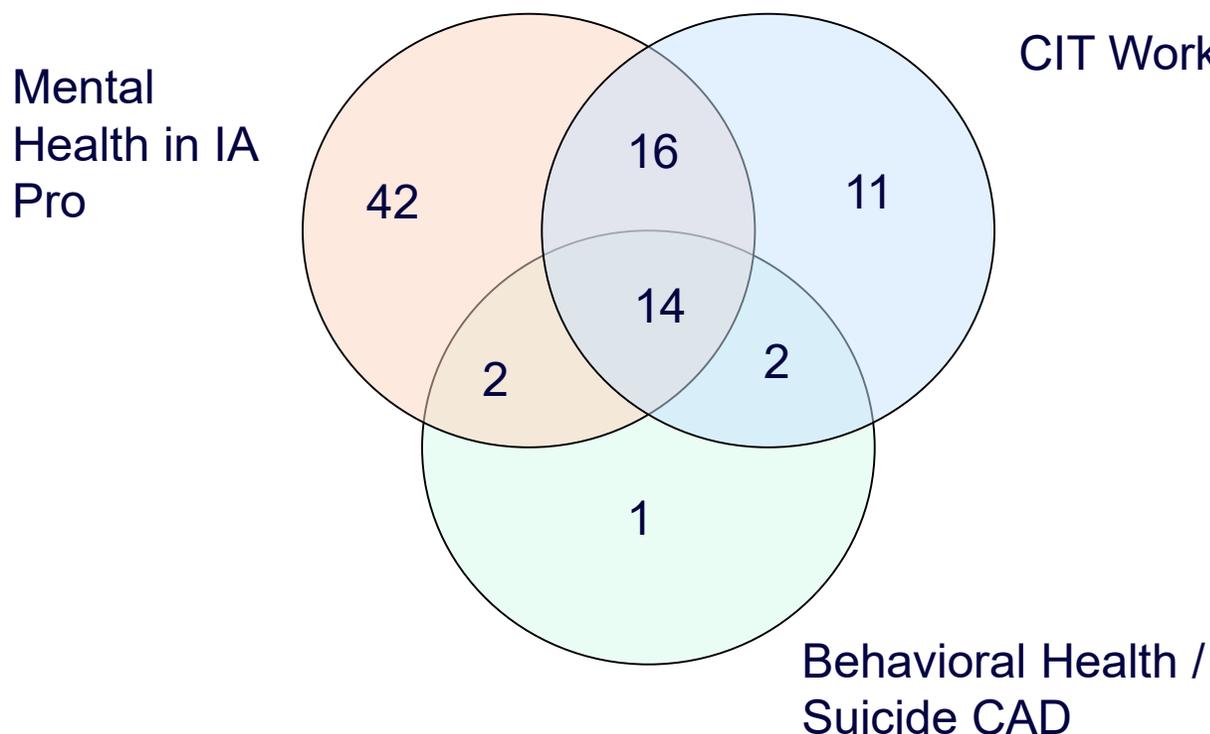
Methods for Identifying Mental Health Related Force

1. Behavioral health calls for service where force occurred (source: CAD)
For this analysis, a call for service is counted as one distinct CAD number where the original or final call types were Behavioral Health or Suicide. Calls that were cancelled, BOLOs (be on the lookout), and calls where no officer arrived on scene are excluded. A total of 3,883 calls for service met these criteria.
2. CIT contact sheets associated with use of force reports (source: RMS)
3. Force investigations where the investigator reported the individual was in crisis or the involved individual self-reported behavioral health crisis (source: IA Pro)
Indicator: “Experiencing Mental Crisis (Officer Assessment)”
Indicator: “Experiencing Mental Crisis (Self Reported)”
 - Cases are included when meeting either or both criteria.



Force – Reported During Force Investigation

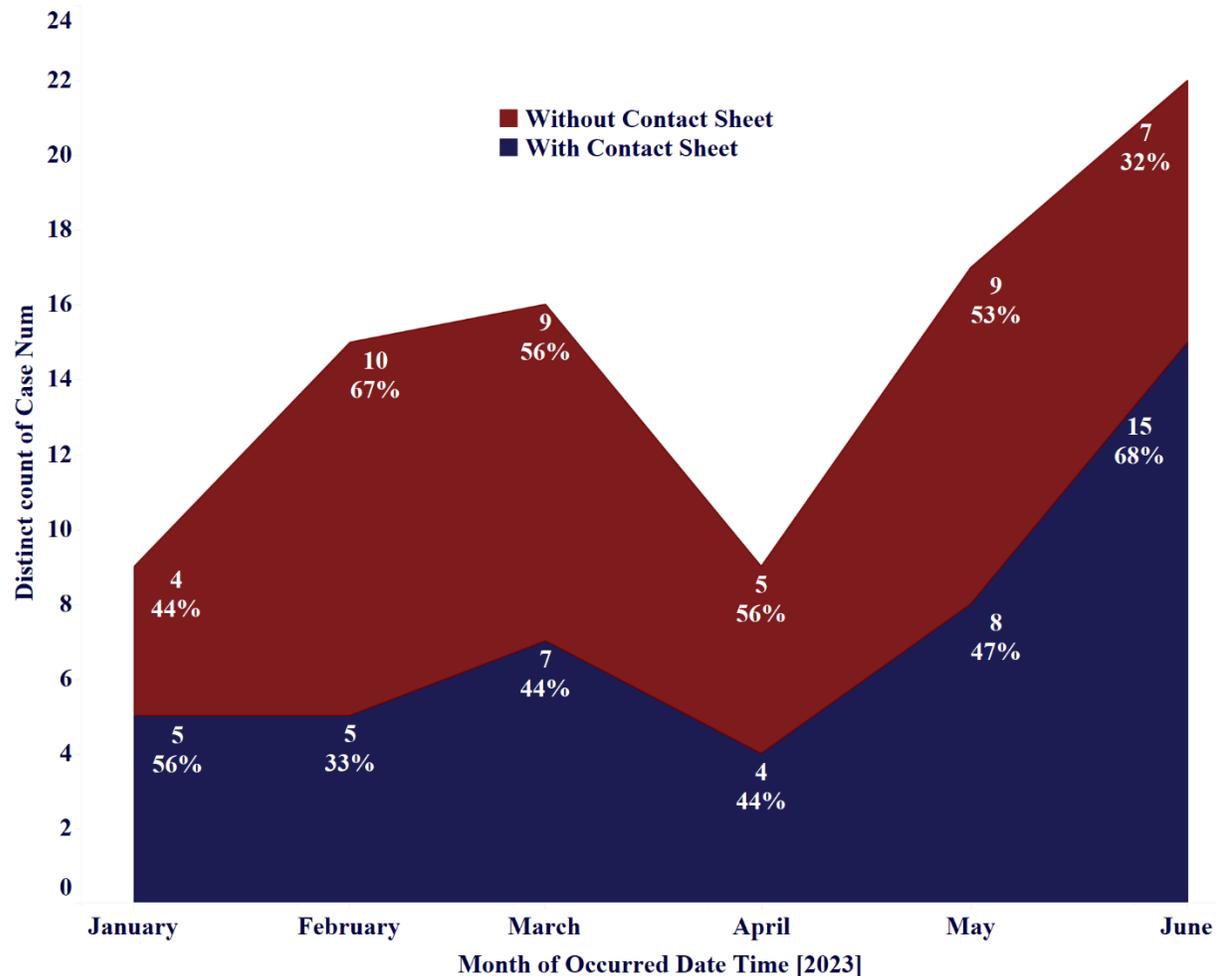
Sources of 88 Force Cases Identified



- Of the 88 force cases, 74 were identified as mental health related in the use of force database, IA Pro.
- 14 force cases (15.9%) were not identified in IA Pro as related to a behavioral health crisis but had a CIT worksheet or behavioral health/suicide CAD.
- 45 force cases (51.1%) did not have a CIT contact sheet completed.



Contact Sheet Completion for MH Force Incidents

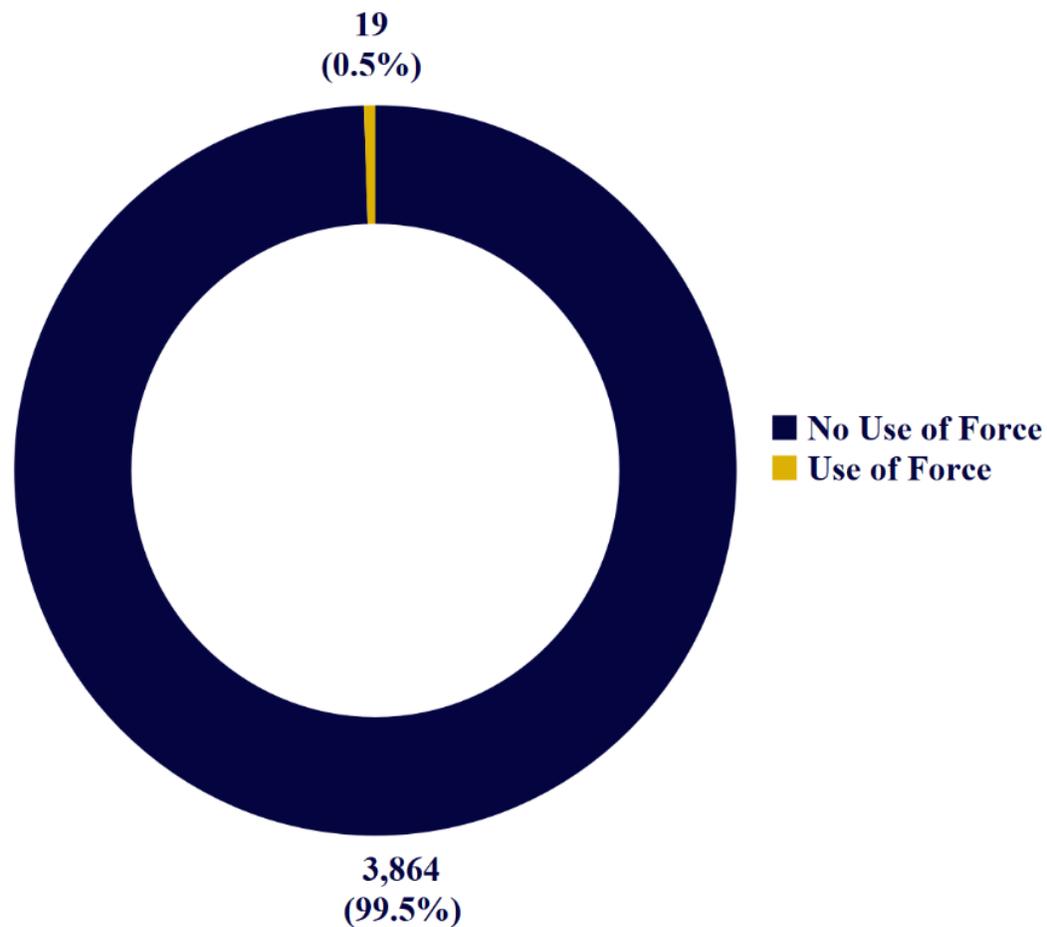


APD has been working to improve completion of contact sheets during force incidents.

There was an increase in completion in the last month at this period.



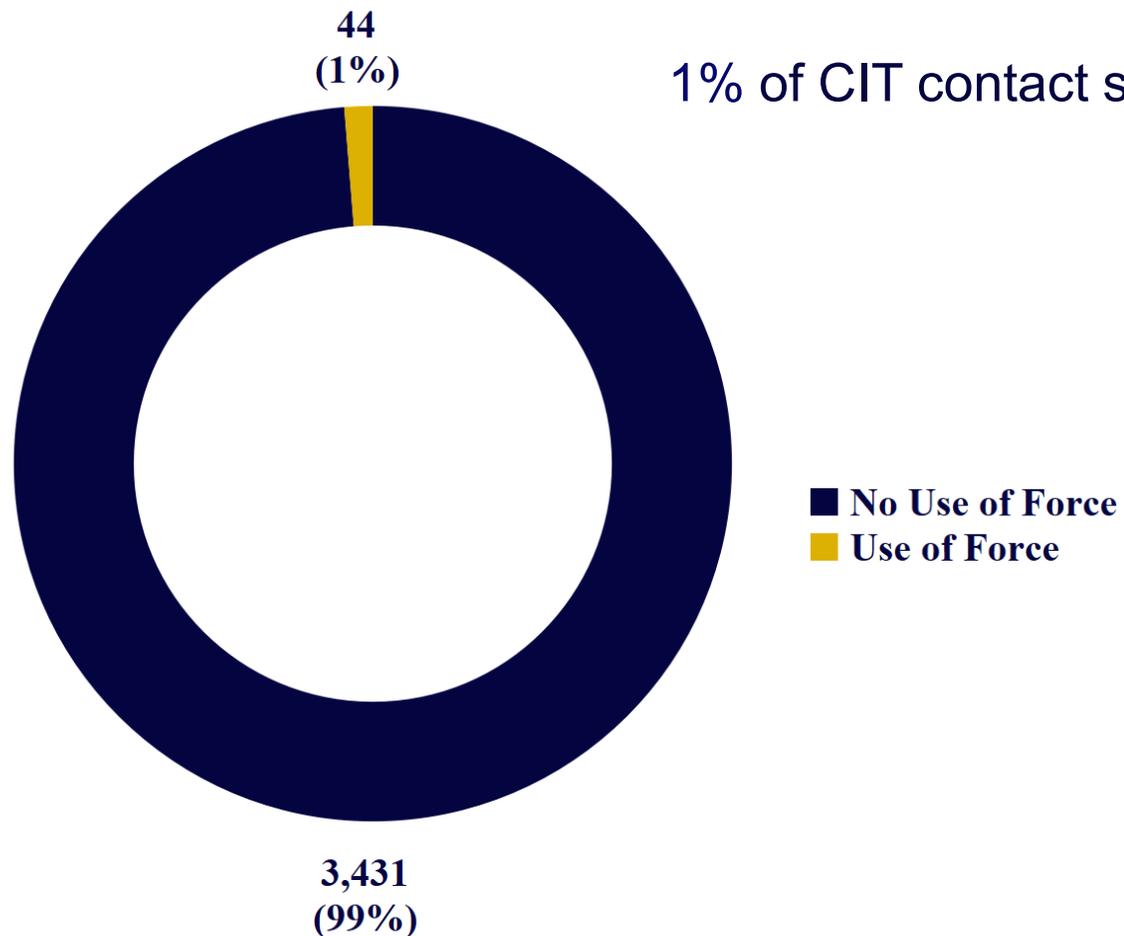
Total Force Cases in Behavioral Health and Suicide Calls for Service



Calls categorized as 43-1 or 10-40 January 1, 2023 to June 30, 2023



Total Force Cases in CIT Contact Sheets



1% of CIT contact sheets also had a use of force incident

CIT contacts documented from January 1, 2023 to June 30, 2023



Level of Force*

- **Level 1 Use of Force:** Any use of force that is likely to cause only temporary pain, disorientation, and/or discomfort during its application as a means of gaining compliance; or any show of force.
- **Level 2 Use of Force:** Any use of force that causes injury, that could reasonably be expected to cause injury, or that results in a complaint of injury greater than temporary pain, regardless of whether the use of force was unintentional or unavoidable.
- **Level 3 Use of Force:** Any use of force that results in, or could reasonably result in, serious physical injury, hospitalization, or death, regardless of whether the use of force was unintentional or unavoidable.

* For additional information see SOP 2-53 at <https://www.cabq.gov/police/standard-operating-procedures/standard-operating-procedures-manual>

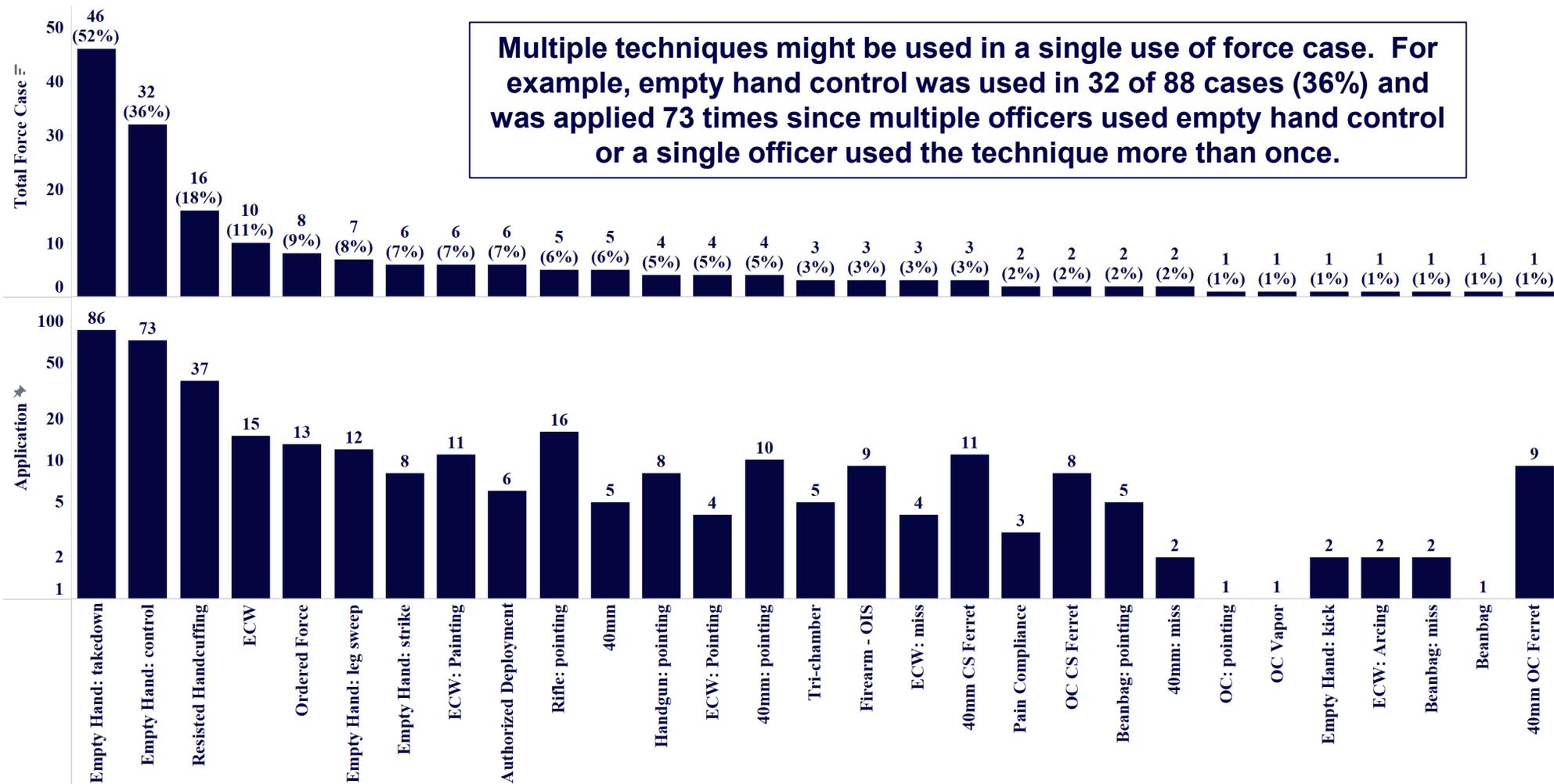


Force Cases by Level of Force

Force Levels	Force Cases
Level 1	18 (21%)
Level 2	53 (60%)
Level 3	17 (20%)
Total	88

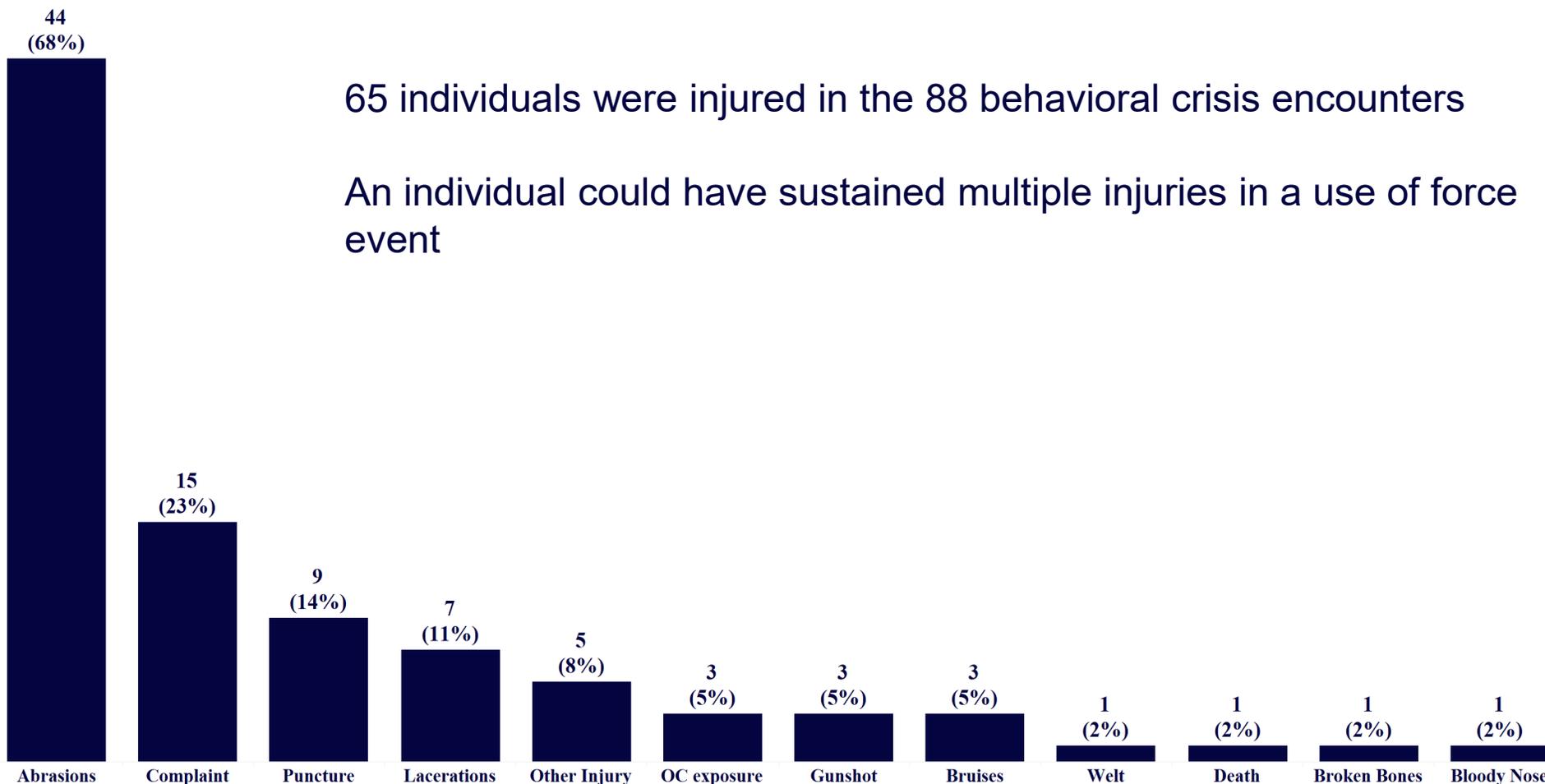


Applications of Force Used in Behavioral Health Crisis Encounters (n=88)



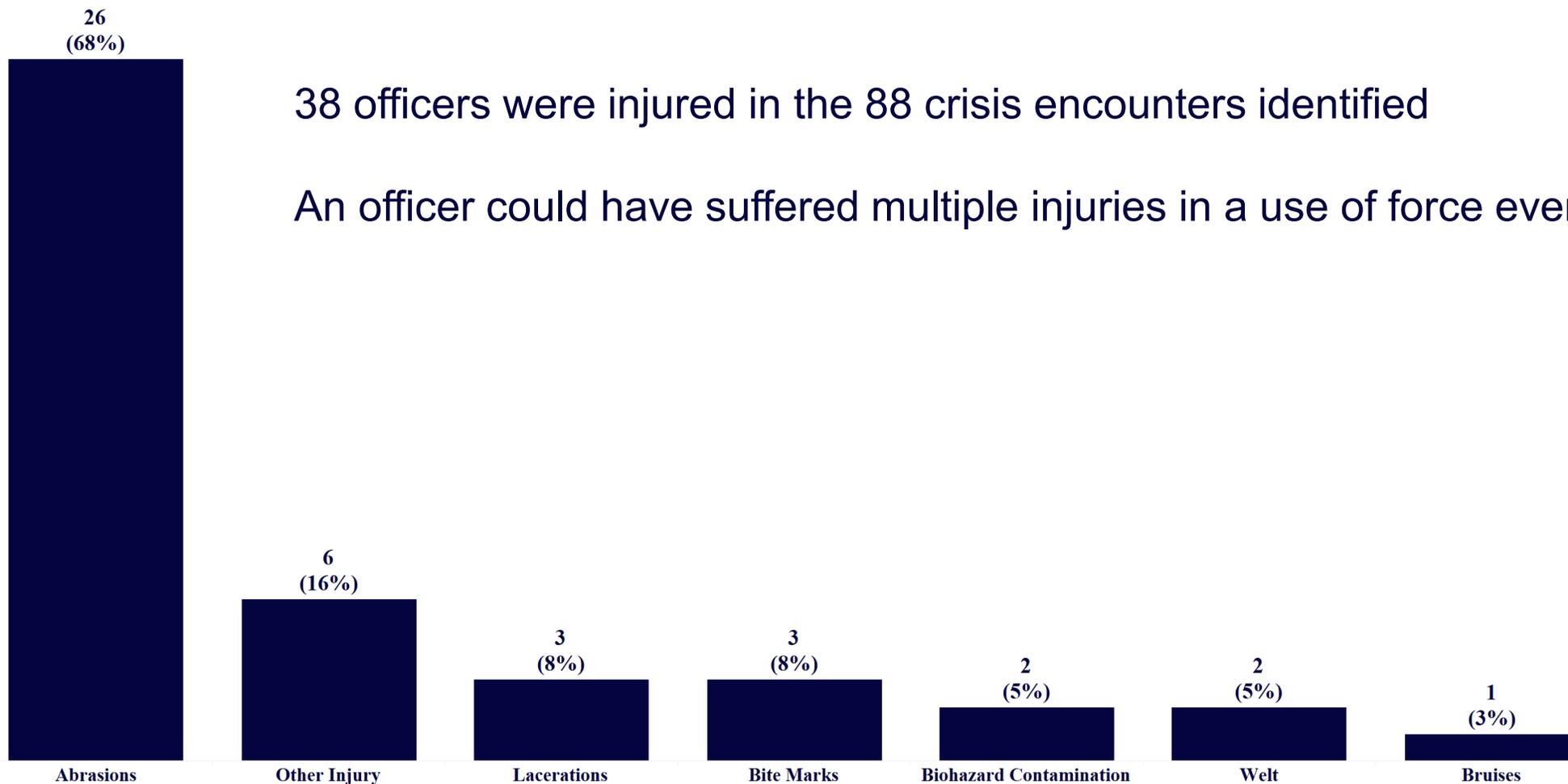


Injuries Caused by Law Enforcement During Behavioral Health Crisis Encounters





Officer injuries during behavioral health crisis encounters





Was the Individual Armed During Behavioral Health Use of Force

Armed Individuals	Number of Force Cases
Yes	26 (30%)
No	54 (61%)
Unknown	8 (9%)
Total	88

For this analysis, the information presented is presented based on the 88 use of force cases identified. From the 87 use of force cases, 54 (61%) of the individuals were unarmed, 26 (30%) of the individuals were armed, and 8 (9%) are unknown.



Force Investigation Findings

Finding	Force Cases
In Policy	88 (100%)



Appendix-Key Definitions for analysis:

- **No action required:** officers arrived on the scene, spoke to the individual, and determined that no actions were necessary in the circumstances.
- **Voluntary mental health transportation:** when an individual experiencing a Behavioral Health Issue or a Behavioral Health Crisis chooses to be taken to a hospital.
- **Involuntary mental health transportation:** when an officer takes an individual experiencing a Behavioral Health Issue or a Behavioral Health Crisis to a hospital and the individual is not free to leave for the safety of themselves, others, or pending criminal charges.
- **Disengagement:** situations where an officer ceases contact with an individual. This may occur when an individual refuses to talk with officers. Officers attempt to leave appropriate resources and CIU/MCT will often follow up as necessary.
- **Summoned:** an individual is charged with a misdemeanor crime but is not taken into custody by an officer.
- **Non-engagement:** situations where an officer does not engage with the individual. In these circumstances, officers should notify appropriate resources if necessary.
- **Taken into custody:** an individual is charged with a crime and a Police Officer transports the individual for booking in jail.



Appendix-Key Definitions for analysis:

- **Incident transfer to ACS:** when an individual experiencing a Behavioral Health Issue or a Behavioral Health Crisis is connected with Albuquerque Community Safety.
- **Citation:** when an individual is charged with an ordinance violation by an officer.
- **Died by suicide:** when an individual experiencing a Behavioral Health Issue or a Behavioral Health Crisis died by his/her own means.
- **Verbal warning:** when an individual receives a verbal warning by an officer without further law enforcement action.
- **Incident Transfer to Fire MCT:** when an individual experiencing a Behavioral Health Issue or a Behavioral Health Crisis is transferred to Bernalillo County Fire Department mobile crisis team.
- **Other Person Summoned:** when an individual who is not the subject of the CIT contact sheet is summonsed by an officer.
- **Other person taken into custody:** when an individual who is not the subject of the CIT contact sheet is arrested by an officer and booked into jail.
- **Enforcement Actions:** instances where a Police Officer issues a citation, summons, or takes a person into custody.