#### One Size Doesn't Fit All– Alternative Responses to Mental Health & Other Crises



#### **Your Panel**



Moderator

Karen Pinkos

City Manager,

City of El Cerrito



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Jorge Cisneros
Police Chief,
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City Manager,
City of El Cerrito









Matthew Chidester
City Manager,
City of Half Moon Bay



# CARRESONSE & Evaluation Services





# How did we get here? Crisis Assistance Response & Evaluation Services

# Half Moon Bay/Coastside



### Yanira Serrano-Garcia



# Sandra Harmon



# Public Safety Research and Outreach



Half Moon Bay Law Enforcement Survey - Report on Results -

February 2022





# What alternatives exist? What is best for our community?



# CARES:

Crisis Assistance Response & Evaluation Services

## What is CARES?

 Alternative for dispatching calls involving a mental health crisis

 Redirecting calls from law enforcement and other 1<sup>st</sup> responders

 Provides connections for sustainable mental health care and treatment



# **CARES** is a partnership









# Regional Collaboration



















# What's the point?

 Minimize law enforcement dispatch to mental health calls

Many mental health crisis calls do not need an armed response

- Diversion from Criminal Justice System
- Interrupt the cycle of mental health crisis within a family
- Lower costs associated with emergency mental health care





#### Who is on the CARES Team?

- Two Crisis Intervention Specialists
  - Extensive and ongoing specialized training
  - One or both bilingual (Spanish)
  - One or both EMT or medical certification
- Clinical Director (LCSW) supervisor



# How does CARES get dispatched?

- 1. A member of the community calls 911/988
- 2. Call is screened by dispatcher: No weapons, medical emergency, or crime
- 3. CARES dispatched on primary law enforcement channel/called directly
- 4. CARES keeps dispatch and law enforcement updated



# What happens when they arrive?

- 1. Scene assessment
- 2. Situation de-escalation and assessment, scene stabilization
- Motivational interviewing, plan of action, referrals and safety plans



#### What if the scene can't be stabilized?

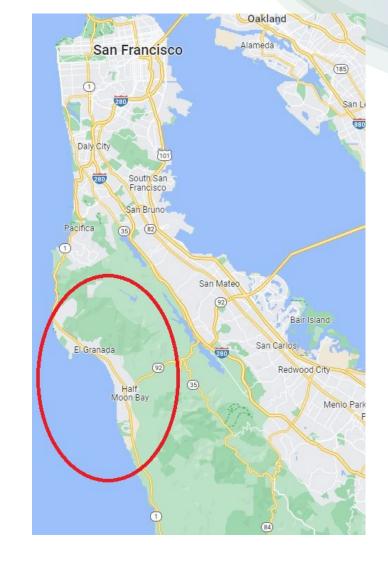
- Transportation to additional services
- Voluntary 5150 holds
- Escalation to Law Enforcement





# When and where will CARES respond?

- Daily 8:00 am to 6:30 pm\*
- Mid-Coast of San Mateo County, California
- Homes, business, schools, shelters, and homeless encampments - anywhere





# What happens after the response?

- Referrals and warm handoffs to partner agencies
- Next day holistic follow up visits
- Ensure connections made between agencies, clients, and the client's support network





#### Data collection or outcomes?

- Pilot program focused on collecting data
- Inform program evolution
- Inform desired outcomes
- Sample data:
  - Average response time
  - o# visits deferred away from LE/TFR
  - # stabilizations
  - Types of calls received
  - o# successful referrals and connections



#### How did CARES launch?

- 1. Agency coordination (Public Safety Communications/911, Sheriff, Emergency Medical Services, Fire)
- 2. Program design/budget development/funding
- 3. Infrastructure (vehicles, radios, uniforms, EMT supplies, etc.)
- 4. Training (CIT, MH First Aid, radio etiquette, etc.)
- 5. Pilot/field training/playbook development
- 6. Program evaluation/expansion/institutionalization



#### Successes

- Law Enforcement collaboration
- Recruiting mental health professionals
- 988 coordination
- Community support







# Challenges

- Dispatch implementation
- EMS coordination
- Recruiting EMTs/medical professionals





# Inspiration





#### City of Half Moon Bay

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#### El Centro de Libertad

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Jorge Cisneros
Police Chief,
City of Anaheim





# ADDRESSING HOMELESSNESS

JORGE CISNEROS

CHIEF OF POLICE

ANAHEIM POLICE DEPARTMENT

## HOMELESS SHELTERS

- Over four years Anaheim opened four temporary shelters.
- Operated by The Salvation Army.
- 2.8 acre open-campus design with 325 beds.



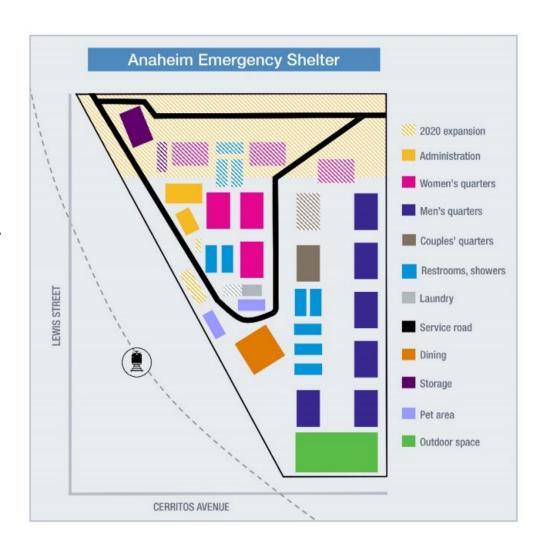
On-site support services



Pet area



Recreational space





# **FUNDING**

FUND	EXPENDITURES	Uses
City General Fund	\$6 million annually	Anaheim Emergency Shelter Operations
Federal Funds*	Up to \$6 million annually	Community Programs and Services for Homeless Prevention
State Funds	\$32 million	Affordable Housing, Interim Shelter, and Community Programs and Services
Total	\$59 Million	Serving the Anaheim Community

<sup>\*</sup>Does not include newly announced federal "All In" Strategic Plan Funds



#### **OUTREACH - CCRT**



- Implemented January 2020.
- Responds to non-emergency homelessness-related calls.
- Focused on







#### MOBILE CRISIS RESPONSE – BE WELL OC

- Implemented April 2022.
- Partnership between Anaheim and a nonprofit partner, Be Well Orange County.
- Responds to **non-emergency** homelessness-related calls.
- Focused on









## **CO-RESPONSE - PERT**



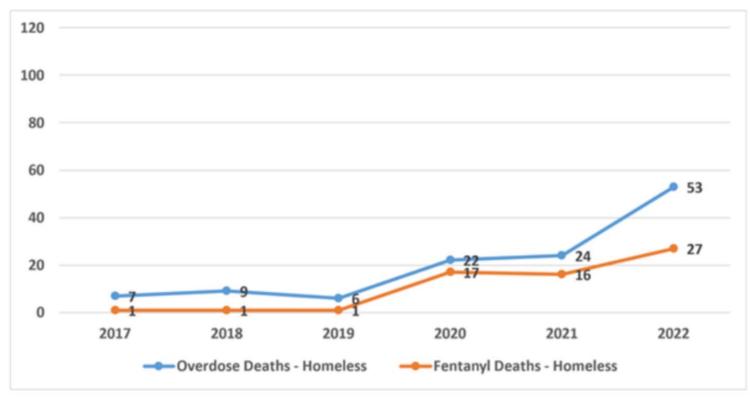
Established in 2013.

Officers paired with a full-time
 Orange County Mental Health
 Clinician.

• Conducts follow-up.

## **ACCESS**





Note: 500+ cases still not finalized by the County Coroner, which could increase these numbers



# QUESTIONS?





Marisa Creter
Executive Director,
San Gabriel Valley Council of
Governments





### SAN GABRIEL VALLEY COUNCIL OF GOVERNMENTS

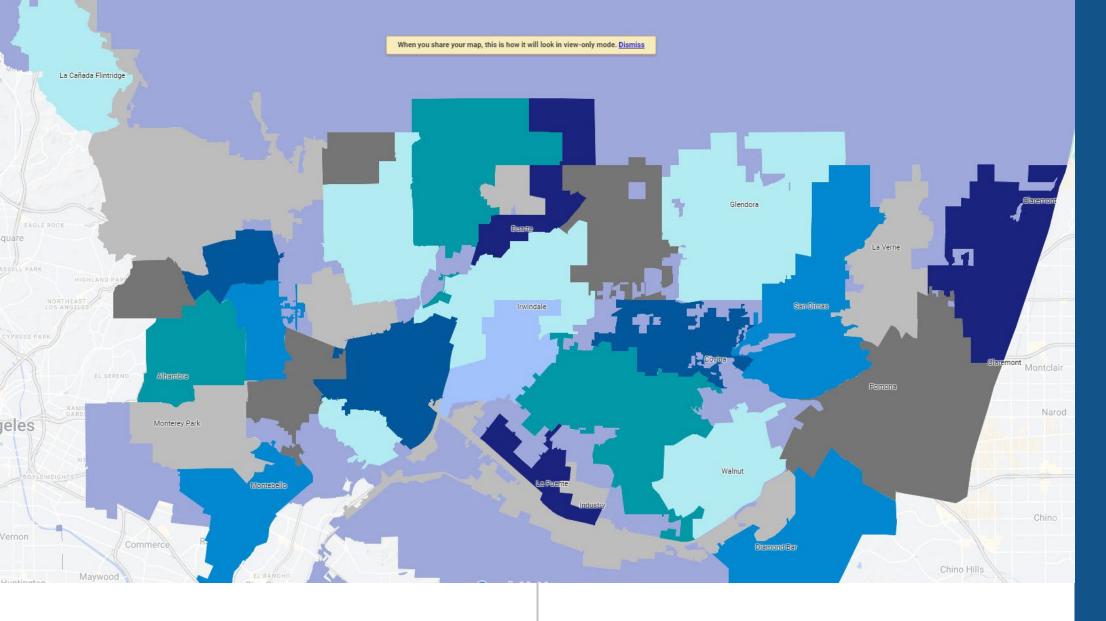
# San Gabriel Valley Crisis Assistance Response & Engagement Program







- 1.SGVCOG Overview
- 2. SGV CARE Intro
- 3. Phased Approach
- 4. Lessons Learned



374 Square Miles

2 million residents

# SGVCOG Mission

Laying the Groundwork for Regional Programming

#### Listen

SGVCOG Committee structures provide a forum for identifying common issues occurring in the area.

#### **Assess**

Understanding existing structures & gaps in services is a key part of identifying if and how programming can be regionalized.

#### Act Regionally

No City wants a program imposed on them, but by building a coalition of the willing and applying for grant funding or earmarks the resistance threshold is lowered substantially.

In California, people experiencing a behavioral health crisis are increasingly unable to get the care they need. In virtually no corner of the state can they or their families be assured they will get the right care, in the right place, at the right time.

National Alliance on Mental Health, CA Chapter



# Funding

Building multijurisdictional consensus

#### Start-up Costs

Launched with Measure H Funds

#### **Funding Advocacy**

\$850,000 with support from State Senator Portantino

\$1,500,000 with support from Representative Judy Chu and Senator's Dianne Feinstein and Alex Padilla

#### **Partnerships**

Coordinating with L.A. County DMH to facilitate Medi-Cal reimbursements

# Getting to SGV CARE



#### **Feasibility Study**

Homlessness
Committee
identifies alternative
crisis response as a
programming
interest area and
commissions a
feasibility study.

RFI followed by an RFP released.
Negotiations are conducted and Governing Board approved contact amount.

#### **Procurement**

#### **Preperation**

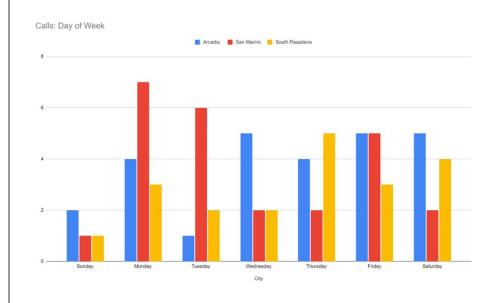
Conversations were had with programs across the County. Pilot cities were required to collect 911 call data to participate.

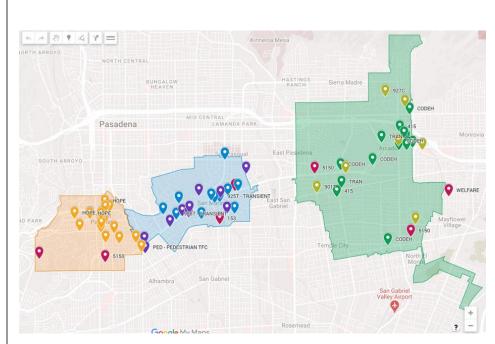
SGV CARE launched as a phased approach to prevent the program from stalling.

#### Iteration

In partnership with GPL, an in depth conversation was had around call code alignment in order to begin true alternative responses.

#### Launch





# Data: Iteration Focus on





#### SGV CARE Teams

Two-person teams:

- Clinician
- Peer Support Specialist/EMT

#### **Pilot Cities**

Four cities with a shared passion for improving service:

- Cohort: Arcadia, San
   Marino, South Pasadena
- Montebellow

#### Building on Common Agreement

Phased approach got the pilot off the ground:

- Co-response to start
- Dispatch process
- Loosely defined response to mental health crises

## SGV CARE Overview

**Building on Best-Practicies & Consensus** 



# Phased Approach

Building multijurisdictional consensus

#### Phase 1 - Pilot

Launching as a co-response model in partnership with existing first responders.

#### Phase 2 - Alternative Reponse

Identifying which calls calls to respond to was the biggest hurdle and the main reason for taking a phased approach.

#### Phase 3 - Expansion

Codifying the program and brining new cities online with a comprehensive program document to sign-on to.

# Phase 1: Call Eligibility & Dispatching Process

#### 1. Call Code Alignment

No two mobile crisis programs are the same, police officers used their discretion to determine which calls to respond to.

#### 2. Exclusionary Criteria

Report or history of weapons, violent calls, criminal activity, servious medical needs.

#### 3. Dispatch

Agreement on alternative reponse couldn't be reached before pilot launch.

911 Call Dispatch Police CARE Team

# Phase 2: Call Eligibility & Dispatching Process

#### 1. Call Code Alignment

An in depth process including dispatchers and Police Chiefs was conducted to identify clearly and precisely which calls the Team will provide alternative response to.

#### 2. Exclusionary Criteria

Report or history of weapons, violent calls, criminal activity, servious medical needs.

#### 3. Direct Dispatch

By identifying a small number of calls that the SGV CARE Team

911 Call Dispatch CARE Team

# Lessons Learned

#### **Act Regionally**

By taking a regional approach, cities of all sizes can benefit from this needed programming area.

#### **Call Code Alignment**

Spend time building consensus on the types of calls your program will respond to. No two programs are alike.

#### **Phased Roll-Out**

Start small and in a limited way to build successes.

Iteration is inevitable.

#### Limited Service Providers

Find a partner who is exciting about building this program with you.

**SGV CARE** 

### Questions?

#### San Gabriel Valley Council of Governments

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## **Q&A** with Panelists



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