Alternative Response
Quarterly Update

December 19, 2023
Overview of Alternative Response

2020
Resolution 40622

2021
Alternative Response Study Completed

2022
Organizational Anti-Racist Mission Statement

2023
Alternative Response Implementation
Current Response Methods

- Fire / Medical Emergency
- Mental / Behavioral Health Crisis
- Criminal Acts
- Police
- Community Trauma Response Team
Alternative Response Focus Areas

Expand Homelessness Outreach
Expand the Homelessness Engagement and Alternatives Liaison (HEAL) Team

Behavioral Health Response Team
Provide specialized response for behavioral health, mental health, substance use, and co-occurring disorders

Community Service Officers
New unarmed officers that respond to certain calls when there is no threat to life or property
Future Response Methods

- Community
- Crisis Response Team
- Fire
- Police
- Community Service Officers
- Community Trauma Response Team

Types of Responses:
- Fire / Medical Emergency
- Mental / Behavioral Health Crisis
- Non-violent Criminal Acts
- Violent Criminal Acts
Response Spectrum

Proactive Engagements → Non-Emergency → Routine → Priority / Urgent → Life Threatening or Serious Harm

Lower Risk → Higher Risk
Homelessness Outreach

Neighborhood and Community Services – HEAL Team
Project Overview: Expand HEAL Team

Purpose
Expand the Homelessness Engagement and Alternatives Liaison (HEAL) team to enhance homelessness response and proactive outreach efforts.

Outcomes
- Decrease response time to 311 complaints related to homelessness
- Increase on-time completion rate of homeless outreach requests from 30% to 60%
- Reduce reliance on police presence in HEAL Team response to encampments
- Increase use of interim status indicators via 311 system

Team Lead
Allyson Griffith

Project Lead
Javon Carlisle

Implementation Timeline

<table>
<thead>
<tr>
<th>Q3</th>
<th>Q4</th>
<th>Q1 2024</th>
<th>Q2 2024</th>
<th>Q3 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Improved HEAL Team Operations</td>
<td>Improved HEAL Team Operations</td>
<td>HEAL Team Operations Standardized</td>
<td>HEAL Team Operations Standardized</td>
<td>HEAL Team Operations Standardized</td>
</tr>
</tbody>
</table>
Quarter 4 Updates

Staffing and Recruitment:
- HEAL is fully staffed with 8 FTE for outreach

Tacoma First 311 Requests:
- 126 open requests – a decrease of 95% since January 1st, 2023
- Current on-time closure rate: 74%
- YTD HEAL has made:
  - 2,915 connections with new and repeat clients
  - 1,631 connections resulted in clients accepting services
  - 240 clients placed into temporary shelter
Services HEAL Team Utilizes

• Holistic Outreach Promoting Engagement (HOPE) Team (training and referrals)
• Veterans Administration and other veteran/servicemember resources and supports
• Shelter/storage/inclement weather resources
• Detox services
• Substance use disorder treatment assessment for outpatient, intensive outpatient, and/or inpatient programs
• Designated Crisis Responders for involuntary detainment evaluation
Behavioral Health Response
Tacoma Fire Department – HOPE Team
Project Overview: Establish HOPE Team

**TEAM LEAD**
Chief Tory Green

**PROJECT LEAD**
Assistant Chief Mary Hallman

**PROGRAM MANAGERS**
Cassie Hallstone and Aleesia Morales

**PURPOSE**
Provide a community-based response to behavioral health, mental health and substance use emergency crises through a dispatched field team staffed by civilians.

**OUTCOMES**
HOPE team becomes a primary mental health/behavioral health (MH/BH) and substance use crisis response resource, along with providing preventative and follow up outreach.

### Implementation Timeline

<table>
<thead>
<tr>
<th>Q3</th>
<th>Q4</th>
<th>Q1 2024</th>
<th>Q2 2024</th>
<th>Q3 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Behavioral Health Case Manager and Field Response team operational</td>
<td>Data collection, procedure refinement, policy finalization, interview ARNP applicants</td>
<td>BHA licensure, develop MAT and psychiatric medication program, recruit a Certified Peer Counselor, and begin transportation capabilities</td>
<td>Review state legislative changes and refine program and review and apply for funding opportunities</td>
<td>Year 1 program evaluation to include staffing, budget, services, data review, and engagement with stakeholders for feedback</td>
</tr>
</tbody>
</table>
HOPE Launch Update

September 2023: Phase 1 –
• Soft Launch

October 2023: Phase 2 –
• Fire/EMS incident commander and Law Enforcement personnel may request HOPE be dispatched
• Finalize HOPE program policy and procedure

January 2024: Phase 3 –
• Begin transport capabilities
• Establish policy and procedure for Medication Assisted Treatment (MAT) and psychiatric medication management services
• Apply for Behavioral Health Agency licensure
HOPE STAFFING UPDATE

FIELD RESPONSE
Two teams made of a Behavioral Health Crisis Responder and Mobile Unit Registered Nurse

Sunday-Wednesday: 7:00 AM – 5:00 PM
Wednesday-Saturday: 1:00 PM – 11:00 PM

CASE MANAGEMENT
Case management services provided by the Behavioral Health Case Manager and the field response teams

Behavioral Health Case Manager
Monday-Friday: 10:00 AM – 6:00 PM

ADVANCED REGISTERED NURSE PRACTITIONER
Support with Medication
Assisted Treatment and medication management services
Interviews to be scheduled in December 2023

BUSINESS SERVICES ANALYST
This position will serve as the Certified Peer Counselor role
Recruitment, interviewing, and onboarding goal by end of Q1 2024
How HOPE Can Help

HOPE will:

- Maintain up-to-date resources based on a person's needs/wants for supports or services
- Provide all levels of voluntary and consent-based supports and services
- Coordinate with Tacoma Police Department and Designated Crisis Responders for involuntary detention supports and services

---

What is the difference between a behavioral health emergency and a behavioral health crisis?

A behavioral health emergency is a life-threatening and emergent need for behavioral health related help. Help is provided in-person and may include medical care. Callers use 911 to request support.

A behavioral health crisis is a non-life-threatening and urgent need for behavioral health related help. Help may be provided over the phone or in-person. Callers use the national/regional crisis and suicide line numbers listed on the back of this card.

---

Who to Call for Behavioral Health Support

**BEHAVIORAL HEALTH EMERGENCY**

CALL 911

When a person appears to be a danger to self, others, or gravely disabled. The caller can request the HOPE team for immediate in-person support and intervention. If available, HOPE will respond, if unavailable traditional 911 resources will respond.

**BEHAVIORAL HEALTH CRISIS**

CALL/TEXT 988

When a person needs phone support and intervention.

CALL 800-576-7764

When a person needs phone support and intervention and where they or a community member can request an evaluation by a Designated Crisis Responder (DCR) or an in-person outreach by a mobile crisis team.

TEXT 741-741

For suicide text support and intervention.
Community Collaboration/Data Collection

HOPE leadership coordinates with state, county, and local community members, groups and providers including:

- Volunteers of America Western Washington (988)
- An Intentional Response (AIR) Coalition
- Tacoma-Pierce County Department of Health
- MultiCare, and more
- Holds a seat on the Crisis Response Improvement Strategy (CRIS) Committee

Data collection:

- Aligned with the Behavioral Health Administrative Service Organization (Carelon) and the WA State Health Care Authority requirements for alternative response and crisis programs
- Also aligns with the Association of Washington Cities grant requirements
Response Outcomes ~ First 75 Days

September 06 - November 30

Tandem Response with Police
Tacoma Police Department (TPD)
• 33 Tandem Calls
• 3 Calls-Emergency Department diversions
• 5 Calls- Jail diversions

Fife Police Department
• 2 Tandem Calls
• 1 Call- Emergency Department diversion

Tribal Police Department
• 3 Tandem Calls

Tandem Response with Fire
Tacoma Fire Department (TFD)
• 65 Tandem Calls
• 13 calls - Emergency Department diversions

HOPE Response
• 44 referrals from TPD and TFD
  • HOPE responded with telephonic follow up or in person welfare check
• 11 Self-initiated contacts
  • Preventative outreach by HOPE staff in the field

147 calls total, 16% diverted from Emergency Departments/Jails
Examples of Services and Outcomes

Connection to and coordination of services and supports, such as:

- Veterans Administration and other veteran/servicemember resources and supports
- Homeless Engagement Alternatives Liaison (HEAL) team for housing
- Home and Community Services to access Adult Family Home care and other services for elderly adults
- Catholic Community Services for family and youth
- Anger management resources
- Shelter/storage/inclement weather resources
- RIPPL care for aging adult services
- Detox services through Metropolitan Development Council
- Substance use disorder treatment assessment for outpatient, intensive outpatient, and/or inpatient programs
- Crisis stabilization units (Recovery Response Center and Crisis Recovery Center)
- Forensic programs related to the criminal courts (FPATH/FHARPS/OCR/Forensic Navigators)
- Referral to Designated Crisis Responders for involuntary detainment evaluation
Community Service Officers (CSO)
Tacoma Police Department
Purpose
Respond to non-emergent calls for service and provide a variety of public safety related service within the community that does not require the enforcement authority of a sworn police officer.

Outcomes
• Increased community perception of public safety
• Decreased response time to non-emergent calls
• Diversion of calls from commissioned officers

Implementation Timeline

<table>
<thead>
<tr>
<th>Q3</th>
<th>Q4</th>
<th>Q1 2024</th>
<th>Q2 2024</th>
<th>Q3 2024</th>
</tr>
</thead>
<tbody>
<tr>
<td>Recruitment and Onboarding</td>
<td>Interviews / Background Investigations</td>
<td>Background Investigations / Poly / Psych / Medical Exams</td>
<td>Training and Integration</td>
<td>Program Eval and Procedure Refinement</td>
</tr>
</tbody>
</table>
Team Structure & Role

• Work under the general supervision of a Tacoma Police Sergeant
• CSOs will respond to calls for service that are:
  • Routine, not in progress, with no suspects on scene and no immediate threat
• Provides various services on behalf of TPD, such as:
  • Sub-station staffing
  • Report taking
  • Providing transportation & assisting stranded persons
  • Assisting at various incidents
  • Perimeter security and traffic control
CSO Updates

September 2023
• Community Policing Management reviewed applications
  o 184 applicants
  o 75 applicants completed personal history statements

October - November 2023
• Took possession of CSO vehicles
• Completed final outfit of CSO vehicles
• 57 interviews scheduled
• Interviews began on November 14
CSO Updates (Cont.)

December 2023
- Interviews concluded on December 14
- 29 of 57 applicants were sent to the background process
  - 3 week to 3-month process
- Conditional Offer of Employment
  - Scheduling and results for the final 3 testing processes take 1 month:
    - Polygraph
    - Medical
    - Psychological exam
- Curriculum & Vendor finalization

January / February 2024
- Complete backgrounds and final testing
- Offer Letters
CSO Updates

March 2024

• Initial onboarding and new applicant processing

Administrative
- 1-3 weeks
- Supervisors

Observation
- 1 week
- 5 days with FTO

Field Training
- 4 weeks
- 20 days with FTO
Timeline
NOVEMBER

HEAL: Improved HEAL Team Operations
HOPE: Data collection and procedure refinement, policy finalization
CSO’s: Interviews / Background Investigations

DECEMBER

HEAL: Improved HEAL Team Operations
HOPE: Data collection and procedure refinement, policy finalization, ARNP interviews
CSO’s: Interviews / Background Investigations
Q1 2024

**JANUARY**
- **HEAL:** Data & metrics, operations standardized
- **HOPE:** Seek BHA licensure, develop medication programs, operational enhancements, post peer specialist position
- **CSO’s:** Complete background checks, final testing

**FEBRUARY**
- **HEAL:** Data & metrics, operations standardized
- **HOPE:** Submit BHA licensure application, develop medication programs, operational enhancements, review peer specialist applicants
- **CSO’s:** Complete background checks, final testing

**MARCH**
- **HEAL:** Data & metrics, operations standardized
- **HOPE:** Await BHA licensure approval, develop medication programs, goal of hiring peer specialist
- **CSO’s:** Initial CSO onboarding, training begins
Alternative Response
Quarterly Update

Find us online:
CityofTacoma.org/
CommunitySafety

December 19, 2023