Background

Resolution 40622

Alternative Response Study Completed

2020

2021

Organizational Anti-Racist Mission Statement

2022

2023

Alternative Response Implementation
What is Alternative Response?

Alternative Response programs enhance public perception of safety by connecting more people with the right resources at the right time.
Alternative Response Focus Areas

Expand Homelessness Outreach
Expand and enhance homelessness response and proactive outreach efforts

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

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

- Fire / Medical Emergency
- Mental / Behavioral Health Crisis
- Violent Criminal Acts
- Homelessness
- Non-violent Criminal Acts

Roles:
- Community
- HEAL
- HOPE
- CSO's
- Fire
- Police
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: HEAL Team

**Purpose**
Expand and enhance homelessness response and proactive outreach efforts by the Homeless Engagement and Alternatives Liaison (HEAL) team.

**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

**Implementation Timeline**

<table>
<thead>
<tr>
<th>Q1</th>
<th>Q2</th>
<th>Q3</th>
<th>Q4</th>
<th>Q1 2025</th>
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</thead>
<tbody>
<tr>
<td>Standardize HEAL operations, launch new vehicles that enhance service, refine data &amp; reporting capacity</td>
<td>Standardize HEAL Team operations, launch new data dashboard</td>
<td>Standardize HEAL Team operations, refine data collection &amp; presentation</td>
<td>Standardize HEAL Team Operations</td>
<td>Review HEAL Team Operations</td>
</tr>
</tbody>
</table>

**Team Lead**
Allyson Griffith

**Project Lead**
Javon Carlisle
Quarter 1 Updates

• Tacoma First 311 Requests (1/1/24-3/1/24):
  • 181 open requests – a decrease of 93% since January 1st, 2023
  • YTD HEAL has made:
    • 361 connections with new and repeat clients
    • 179 connections resulted in clients accepting services
    • 41 clients placed into temporary shelter
HEAL Updates

• HEAL received two Ford F-150 Hybrids with Tommy Lifts in February 2024

• These new trucks allow HEAL to be more responsive to service needs
  • Beds and lift gates for storage transport
  • Large passenger capacity for transport
  • Ability to have blankets, gloves, water, etc. readily accessible
Storing of Items

• The option to store personal belongings is offered during general outreach and removals.

• If storage is accepted, items are taken to Stability Site, 1423 Puyallup Ave, Tacoma, WA.

• The individual(s) who choose to store items will receive HEAL contact information for future communication to receive items if needed.

• Information such as name, location, number and description of items, store date, and date 60 days from store date are logged.

• Items are held for 60 days, often longer as we have the capacity to do so.

• On average, HEAL receives ten to twelve calls per year to retrieve items that were stored.

• The option to transport items is available, though some individuals do pick up their items at Stability Site with the assistance of Stability Site staff and the HEAL Team.
In Progress: HEAL Dashboard

Foundation

Goal (Example)
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**

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<tr>
<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>
<td>Ongoing program evaluation to include staffing, budget, services, data review and engagement with stakeholders for feedback</td>
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</tr>
</tbody>
</table>
HOPE Launch Update

January 2024: Phase 3 –

- Begin transport capabilities
- Establish policy and procedure for Medication Assisted Treatment (MAT) and psychiatric medication management services
- Begin application process for Behavioral Health Agency (BHA) licensure

February 2024: Phase 4 –

- Begin tandem dispatch for psychiatric related Fire/EMS calls
- Ongoing development of policy and procedures for Medication Assisted Treatment (MAT) and psychiatric medication management services
- Begin and continue community provider collaboration to support upcoming closure of crisis stabilization facilities in Pierce County

March 2024: Ongoing work –

- Reviewing legislative changes and impacts to HOPE program, including HCA community-based crisis team endorsement, liability protections, and BHA requirements
HOPE STAFFING UPDATE

FIELD RESPONSE
Two teams made of a Behavioral Health Crisis Responder and Mobile Unit Registered Nurse
Current swing shift Behavioral Health Crisis Responder position vacant with interviews scheduled 03/14/2024

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 Position is still vacant and recruitment is ongoing

BUSINESS SERVICES ANALYST
This position will serve as the Certified Peer Specialist role Recruitment, interviewing, and onboarding goal by end of Q2 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
Community Collaboration/Data Collection

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

- Volunteers of America Western Washington (988) Pierce County provider
- An Intentional Response (AIR) Coalition, The Conversation 253, Democratic Socialists of America
- Tacoma-Pierce County Department of Health, Department of Health, Health Care Authority
- MultiCare, and more
- Holds a seat on the Crisis Response Improvement Strategy (CRIS) Committee
- Co Responder Outreach Alliance (CROA)

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
- Ongoing review of data collection and ways data is shared
**Preliminary Data: Workload/Response**

**First 6 Months**

September 06, 2023 – March 06, 2024

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**Case Management: Referral Totals**

**Caseload:** 73 enrolled individuals

**Referred/Waitlist:** 126 individuals

**Total Referrals:** 199

**Total contacts for service:** 161

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**Field Team: Response Totals**

**Total:** 236 in-field responses

**Response with TFD:** 180

**Response with TPD:** 56

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*Responses not captured in this number include: referrals, outreach, self and independent dispatch, and follow up*

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*Disclaimer: Data provided may be incomplete due to person’s right to refuse service engagement and/or refusal to disclose part or all information collected in the encounter, especially demographic information.*
Preliminary Data: Workload/Response

First 6 Months
September 06, 2023 – March 06, 2024

**DISPATCH TYPE**
- Tandem Dispatch, TFD 13.26%
- Self-Dispatch 3.31%
- Secondary Dispatch, TPD 19.89%
- Secondary Dispatch, TFD 35.36%
- Follow-Up 1.66%
- Independent Dispatch 1.10%
- Outreach 2.76%

**PRESENTING PROBLEM**
- Substance Use Disorder 2.41%
- Co-Occuring 37.35%
- Mental Health 60.24%

**BEHAVIORAL PRESENTATION**
- Acute Distress 45.30%
- Danger to Others 2.76%
- Danger to Self 14.36%
- Unknown 19.34%
- Grave Disability 8.29%
- Psychosis 9.94%
Preliminary Data: Alternative Call Outcomes
First 6 Months
September 06, 2023 – March 06, 2024

JAIL DIVERSION
- Yes: 7.84%
- No: 12.75%
- N/A: 79.41%

HOSPITAL DIVERSION
- Yes: 34.783%
- No: 30.435%
- N/A: 12.75%

LENGTH OF SERVICE
- 15 min: 3.53%
- 1 hr 15 min: 8.24%
- 1 hr 30 min: 2.57%
- 1 hr 45 min: 2.35%
- 2 hr: 1.18%
- 30 min: 19.41%
- N/A: 17.65%
- 45 min: 32.94%
**Preliminary Data: Dispatched Call Outcomes**

**First 6 Months**

*September 06, 2023 – March 06, 2024*

<table>
<thead>
<tr>
<th>Outcome Description</th>
<th>Count</th>
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<tbody>
<tr>
<td>Attempted Contact</td>
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</tr>
<tr>
<td>Did not require MH or SUD services</td>
<td>5</td>
</tr>
<tr>
<td>Other</td>
<td>19</td>
</tr>
<tr>
<td>Provided Transportation Option</td>
<td>15</td>
</tr>
<tr>
<td>Referred to Acute Detox</td>
<td>2</td>
</tr>
<tr>
<td>Referred to Crisis Team</td>
<td>5</td>
</tr>
<tr>
<td>Referred to Designated Crisis Responder</td>
<td>9</td>
</tr>
<tr>
<td>Referred to Fire Department</td>
<td>3</td>
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<tr>
<td>Referred to HOPE CM</td>
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<tr>
<td>Referred to Law Enforcement</td>
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<tr>
<td>Referred to non-MH Community Resources</td>
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<tr>
<td>Referred to Stabilization</td>
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<tr>
<td>Referred to Sub-Acute Detox</td>
<td>1</td>
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<tr>
<td>Referred to SUD Inpatient Program</td>
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</tr>
<tr>
<td>Referred to Voluntary Inpatient MH Services</td>
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<tr>
<td>Referred to Voluntary Outpatient MH Services</td>
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<tr>
<td>Refused Services</td>
<td>33</td>
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</table>
Preliminary Data: Demographics
First 6 Months
September 06, 2023 – March 06, 2024

**RACE**
- White: 41.18%
- Black or African American: 18.94%
- Hispanic or Latino: 3.73%
- Asian: 3.11%
- American Indian or Alaska Native: 3.73%
- Native Hawaiian or Other Pacific Islander: 0.62%
- Other Race: 8.70%

**AGE**
- 0-18 y/o: 24.18%
- 19-25 y/o: 9.24%
- 26-50 y/o: 52.72%
- 51-63 y/o: 11.68%
- 64 and Older: 2.17%

**HOUSING STATUS**
- Homeless: 47.43%
- Stably Housed: 42.30%
- Unstably Housed: 10.27%
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></th>
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<th>Q2 2024</th>
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<tr>
<td>Interviews</td>
<td>Interviews / Background</td>
<td>Background Investigations</td>
<td>Training and Integration</td>
<td>Program Eval and Procedure</td>
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<tr>
<td></td>
<td>Background Investigations</td>
<td>Investigations / Poly / Psych / Medical Exams</td>
<td>Integration</td>
<td>Procedure Refinement</td>
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<tr>
<td>Team Lead</td>
<td>Chief Avery Moore</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Project Lead</td>
<td>Deputy Chief Paul Junger</td>
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Team Structure & Role

• Work under the general supervision of a Tacoma Police Sergeant
• Provide various services on behalf of TPD, such as:
  • Responding to specific types of calls for service
  • Sub-station staffing
  • Report taking
  • Providing transportation & assisting stranded persons
  • Assisting at various incidents
  • Perimeter security and traffic control
Response Protocol

• CSOs will respond to calls for service that are:
  • **Routine:** Calls that do not involve immediate danger or ongoing criminal activity.
  • **Not in Progress:** Incidents where the situation has stabilized or is no longer escalating.
  • **No Suspects on Scene:** Cases where suspects have left the scene, and there is no immediate threat to public safety.

• CSO vehicles will be visually distinct from police officers
  • Delivery and outfitting were completed last November
CSO Applicant Updates

December 2023 – February 2024

• Interviews concluded on December 14

• 29 of 57 applicants were sent to the background process
  • 3 week to 3-month process

• 10 Applicants were offered a Conditional Offer of Employment
  • The final 3 testing processes take 1 month:
    • Polygraph
    • Medical
    • Psychological exam

• Curriculum & Vendor finalization

March 2024

• Complete backgrounds and final testing

• Offer Letters
CSO Updates (continued)

April-May 2024

- Initial onboarding and new applicant processing

<table>
<thead>
<tr>
<th>Administrative</th>
<th>Observation</th>
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<tbody>
<tr>
<td>1-3 weeks</td>
<td>1 week</td>
</tr>
<tr>
<td>Supervisors</td>
<td>5 days with FTO</td>
</tr>
</tbody>
</table>

- Field Training
  - 4 weeks
  - 20 days with FTO
Related Program Updates...
Patron Crisis and De-escalation Team
Tacoma Public Library
Project Overview: Patron Crisis and De-escalation Team

**Project Lead**
Amita Lonial (she/her)
Deputy Director

**Library Social Worker**
Samie Iverson (she/her)

**Library Safety and Security Coordinator**
Marco Vargas (he/him)

**Purpose**
Provide culturally centered/responsive responses to safety and security issues; meaningfully connect patrons to resource providers; bolster staff capacity to engage in trauma-informed conflict resolution and de-escalation

**Outcomes**
- Connect patrons to critical resources
- Decrease library security incidents

**Implementation Timeline**

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<td>Recruitment</td>
<td>Onboarding</td>
<td>Pilot</td>
<td>Integrate Main Library</td>
<td>Feedback/Implementation</td>
</tr>
</tbody>
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Timeline
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, develop medication programs, operational enhancements, goal of hiring peer specialist
- **CSO’s**: Initial CSO onboarding, training begins
April

**HEAL:** Standardize HEAL operations, launch new vehicles that enhance service, refine data & reporting capacity

**HOPE:** BHA licensure, develop MAT and psychiatric medication program, recruit a Certified Peer Counselor, and begin transportation capabilities

**CSO’s:** Background Investigations / Poly / Psych / Medical Exams

**TPL Patron Crisis Team:** Onboarding

May

**HEAL:** Standardize HEAL operations, launch new vehicles that enhance service, refine data & reporting capacity

**HOPE:** BHA licensure, develop MAT and psychiatric medication program, recruit a Certified Peer Counselor, and begin transportation capabilities

**CSO’s:** Background Investigations / Poly / Psych / Medical Exams

**TPL Patron Crisis Team:** Onboarding

June

**HEAL:** Standardize HEAL operations, launch new vehicles that enhance service, refine data & reporting capacity

**HOPE:** BHA licensure, develop MAT and psychiatric medication program, recruit a Certified Peer Counselor, and begin transportation capabilities

**CSO’s:** Background Investigations / Poly / Psych / Medical Exams

**TPL Patron Crisis Team:** Onboarding
Alternative Response Quarterly Update

Find us online:
CityofTacoma.org/CommunitySafety

March 19, 2024