



An engagement initiative on policing in Modesto

**Work Group Meeting  
November 15, 2021**

# *Forward* *Together*

An engagement initiative on policing in Modesto

## **WELCOME!**

# Intentions for our time

- Get updates: Ad Hoc work
- Begin our education on response models
- Align on next steps

# Approximate Session flow

|        |  |
|--------|--|
| 5:30pm | Welcome and Opening                                    |
| 5:45pm | Ad Hoc Updates   |
| 5:55pm | Public Comment   |
| 6:25pm | Educational Presentation and Dialogue: Response Models |
|        | BREAK  |
|        | Educational Presentation and Dialogue: Response Models |
| 7:50pm | Next steps and Closing                                 |
| 8:00pm | Adjourn  |

# Group Agreements

## How we will do our best work together

- Call each other “in”, not “out”
- Expect, and be in, discomfort
- Stay at the table
- Keep the end in mind - aligning on recommendations
- Keep disagreements productive
- Respect each other
- Stay open to other perspectives and opinions
- Do our work with transparency, openness, inclusivity
- Step up, Step back
- Be patient and flexible
- Make room for, and be curious about, other people and ideas



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# General Updates

# Ad Hoc Updates

- Policies and Procedures
  - Questions from our last workgroup meeting
    - Answers coming
  - Our work continues (will meet again next month)

# Public Comment

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**Exploring**

## **Alternative Response Models**

that ensure the right type of response and resources are applied to a situation

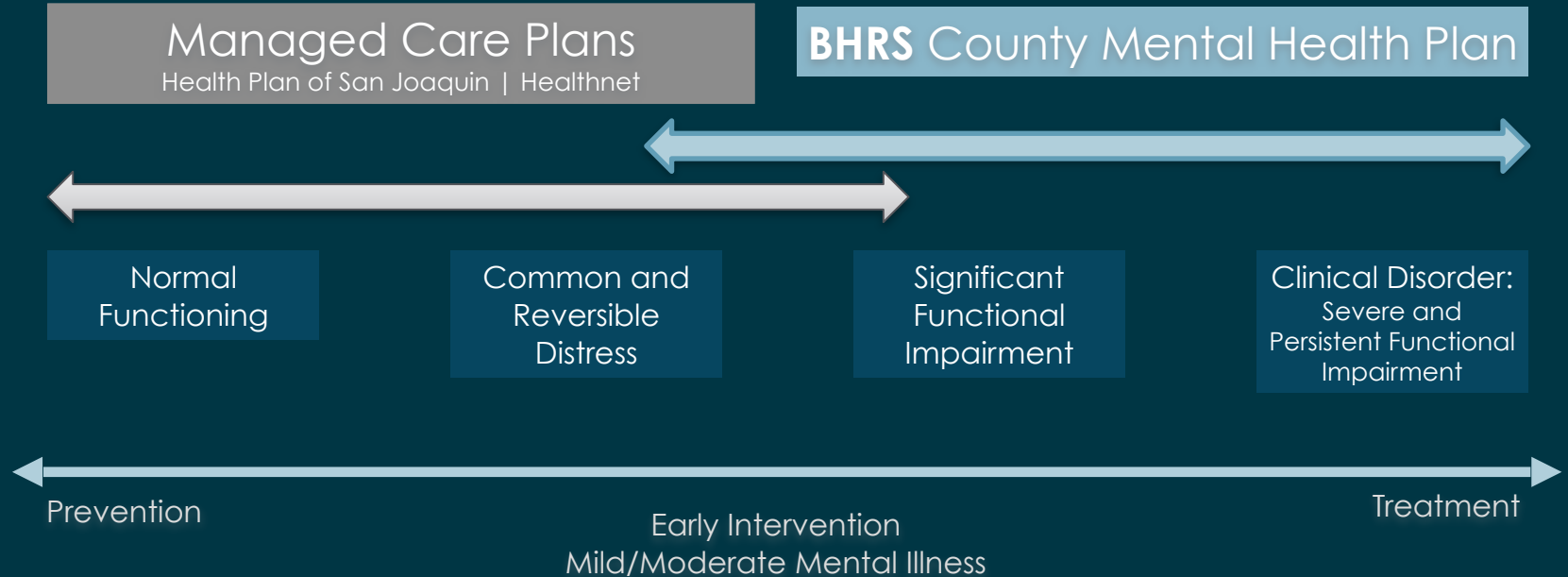
**Modesto Police  
Department (MPD)**

**&**

**Stanislaus County  
Behavioral Health and  
Recovery Services  
(BHRS)**

# Mental Health Continuum of Care

Medi-Cal Beneficiaries Treatment Services



# Systems of Care



Adult System of Care

Children/Transitional Age  
Youth System of Care

Substance Use Disorder  
System of Care

A system of care incorporates a broad, flexible array of treatment services and supports for a defined population that is organized into a coordinated network, integrates service planning and services coordination.

Stanislaus County Behavioral Health System of Care Services include:

- Outreach and Engagement
- Crisis Services
- Access/Assessment
- Behavioral Health Services Teams: Treatment Teams
- Supportive Services
- Public Guardian Services

# BHRS Systems of Care

**Crisis & Support Line**  
24/7 Crisis & Support Telephone  
Services

**Community Emergency  
Response Team**  
Crisis Services \* | Hospitalization  
Psychiatric Health Facility

**Outreach/  
Engagement**  
Behavioral Health Outreach |  
CARE\*\* Assisted Outpatient  
Treatment

**Community  
Collaboratives**  
Promotores | Community  
Collaboratives

## Access

**Assessment Team**

**Children's/Transitional Age Youth  
System of Care**

**Adult System of Care**

**Substance Use Disorders System of  
Care**

## Treatment & Supportive Services

**Supportive Services Division**  
Peer & Family Support | Housing | Shelter | Supportive  
Services

**Office of Public Guardian**  
Conservatorship Investigations | Conservatee Care Coordination  
Estate Management Office | Residential Mental Health Treatment State  
Hospital Placements

- County Mental Health Plan provides mental health crisis services (5150/5585 assessment | placement for evaluation and treatment) for all County residents
- \*\* Community Assessment, Response and Engagement / BHRS provides mental health staff for the CARE Multi-disciplinary Team

# Police And Mental Health Response

## Framing The Conversation

**There is a national spotlight on mental illness & increased media coverage/scrutiny of incidents involving law enforcement:**

- Challenges for people experiencing homelessness and/or a mental illness have increased and become more complicated.
- Demand on law enforcement to respond to incidents involving our homeless population and those living with mental illness has increased and become more complicated.
- Public's perception of how police handle an incident can lead to a loss of trust in law enforcement and their ability to handle incidents involving mental illness
- Family members and friends may be reluctant to call the police for assistance in a crisis if they think their loved one may get hurt or killed as a result of their intervention
- Both the public and government entities are exploring alternative to police responses

**According to Mental Health America ([www.mhanational.org](http://www.mhanational.org)):**

- In 2019, 19.86% of adults experienced a mental illness, equivalent to nearly 50 million Americans.
- The national rate of suicidal ideation among adults has increased every year since 2011-2012.
- Over 2.5 million youth in the U.S. have severe depression, and multiracial youth are at greatest risk.

# History of Mental Health Laws in California

- 1954- FDA approves first antipsychotic drug to treat delusions/hallucinations. Thorazine opens possibility that some people with serious mental illnesses can live in the community
- 1957-Legislature expands state funds for local community mental health programs
- 1959- Number of patients in CA mental hospitals peaks at 37,500
- 1965- Congress creates Medicare and Medicaid, allowing people with mental illnesses to live in their communities and collect federal benefits
- 1967- Gov. Ronald Reagan signs law limiting involuntary detention of all but the most gravely disabled
- Late 1960;s-1970's-State mental hospitals begin to close as patient numbers decline to a fifth of their high point. Number of prison/jail inmates with mental illnesses rises.

# History of Mental Health Laws in California

- 1991-Legislature passes “realignment”—shifting responsibility for many mental health services from the state to counties
- 1999- CA begins requiring private health plans to provide comparable benefits, deductibles and copays for physical health and serious mental illness
- 2002- Laura's Law—named for a young woman killed by a man who refused psychiatric care—allows counties to build court-ordered treatment programs
- 2004- CA voters OK 1% tax on people with incomes above \$1 million to bolster the mental health system
- 2010- The Affordable Care Act (Obamacare) requires insurers to provide mental health as an essential benefit

# Homelessness, Mental Health & Substance Abuse

- New York Times analysis found 67% of homeless individuals in Los Angeles had a mental illness or substance abuse disorder
  - \*<https://www.latimes.com/california/story/2019-10-07homeless-population-mental-illness-disability>
- Analysis by the California Policy Lab (October 2019) found:
  - 78% of unsheltered people surveyed reported having a mental health condition
  - 75% of unsheltered people surveyed having substance abuse condition

# Law Enforcement Options For Mental Health Calls

- 72hr Mental Health Hold
  - 5150 Welfare and Institutions Code- (a) When a person, as a result of a mental health disorder, is a danger to others, or to himself or herself, or gravely disabled, a peace officer, professional person in charge of a facility designated by the county for evaluation and treatment, member of the attending staff, as defined by regulation, of a facility designated by the county for evaluation and treatment, designated members of a mobile crisis team, or professional person designated by the county may, upon probable cause, take, or cause to be taken, the person into custody for a period of up to 72 hours for assessment, evaluation, and crisis intervention, or placement for evaluation and treatment in a facility designated by the county for evaluation and treatment and approved by the State Department of Health Care Services.
- Emergency Room
- Respite Centers/Sobering Centers
- Jail

# Modesto PD Policies Related to Mental Health Calls

- Policy 418- Mental Illness Commitments: It is the policy of the Modesto Police Department to protect the public and individuals through legal and appropriate use of the 72-hour treatment and evaluation commitment (5150 commitment) process.
- Policy 470 Crisis Intervention Incidents: The Modesto Police Department is committed to providing a consistently high level of service to all members of the community and recognizes that persons in crisis may benefit from intervention. The Department will collaborate, where feasible, with mental health professionals to develop an overall intervention strategy to guide its members' interactions with those experiencing a mental health crisis. This is to ensure equitable and safe treatment of all involved.

# Modesto PD Policies Related to Mental Health

- Policy 464- Homeless Persons (464.5):
  - Mental illness and mental impairment
    - Some homeless persons may suffer from a mental illness or a mental impairment. Officers shall not detain a homeless person under a mental illness commitment unless facts and circumstances warrant such a detention (See Crisis Intervention Incident Policy).
    - When a mental illness hold is not warranted, the contacting officer should provide the homeless person with contact information for mental health assistance as appropriate. In these circumstances, officers may provide transportation to a mental health specialist if requested by the person and approved by a supervisor.

# Alternative Response

Mental Health  
Clinician

Mental Health  
Clinician with  
Law Enforcement  
Officer

Mental Health  
Clinician with  
Health \ Outreach  
Worker

# Alameda County

EXAMPLE of a county with all three models \ Mental Health Clinician needed for Crisis Services (5150/5585)

## Clinicians

Mobile Crisis Team (MCT)

Countywide

- Crisis intervention
- 5150/5585 assessment
- **Diversion**
- Referral to a wide range of mental health & SUD services
- Currently: **Mon-Fri 10am-8pm**
- Dispatched via 911 or by calling (510) 891-5600

## Clinician & Officer

Mobile Evaluation Team (MET)

Oakland

- Crisis intervention
- 5150/5585 assessment
- **Diversion**
- Referral to a wide range of mental health & SUD services
- Currently: **Mon-Thurs 8am-3pm**
- Dispatched via 911 or by calling (510) 891-5600

## Clinician & EMT

Community Assessment & Transport Teams (CATT)

Oakland, San Leandro, Hayward, Fremont, Union City, Newark

- Crisis intervention
- 5150/5585 assessment
- **Diversion**
- Referral & **transportation** to a wide range of mental health & SUD services
- **7 days a week 7:30 am-11pm !**
- **Dispatched via 911**

# Exploring Non-Traditional Responses To Calls For Service

## Some Alternative Response Models being explored:

- Crisis Assistance Helping Out On the Streets (CAHOOTS)- Eugene, Oregon
- Support Team Assisted Response (STAR)- Denver, Colorado
- Mobile Crisis Team/Community Assessment & Transport Team- Oakland
- Street Crisis Response Team – San Francisco, Ca

# Exploring Non-Traditional Responses To Calls For Service

## CAHOOTS

- Collaboration between White Bird Clinic & City of Eugene, Oregon
- CAHOOTS budget \$2.1M, Eugene contributed over \$900K in FY21
- Estimated \$2.2M in savings to officer wages
- Pairs a crisis worker & emergency medical technician together for response to a variety of non-criminal crises including homelessness, intoxication, disorientation, substance abuse and mental illness problems, and dispute resolution.
- Does not respond to violent situations or life-threatening medical emergencies.
- 1 two-person van 24hrs a day and 1 van with 7hr overlap

# Exploring Non-Traditional Responses To Calls For Service

## CAHOOTS 2019 Data

- CAHOOTS had some level of activity in 20,746 public initiated CFS
- CAHOOTS was the sole resource dispatched to 13,854 CFS
  - Welfare Check- 4,220 (30.5%)
  - Public Assist- 3,996 (28.8%)
  - Transport- 3,303 (23.8%)
- CAHOOTS divert rates are likely between approximately 5% to 8% of EPD CFS
- CAHOOTS called for backup from EPD in 311 instances in 2019
- Approximately 60% of calls are related to homelessness

# Exploring Non-Traditional Responses To Calls For Service

## CAHOOTS



# Exploring Non-Traditional Responses To Calls For Service



# Landscape Of Our Community

## January 2020 Point In Time Count

- 2,107 people, including 207 children were identified as being homeless in the Stanislaus County.
- 75% of individuals experiencing homelessness are in Modesto. This trend has persisted over the last 5 years
- 80% of individuals experiencing homelessness in Stanislaus County, also first became homeless in the County.

# Landscape Of Our Community

## MPD Quality of Life/Mental Health Calls For Service (CFS) in 2020

- 19,238 CFS involving Quality of Life (QOL) crimes and/or Mental Health keywords
  - 12,293- No safety related keywords
    - 7% of all police CFS
  - 6,945- Keywords indicating a safety concern
    - 4% of all police CFS

# Landscape Of Our Community

## 5150 Calls For Service

2019- 1,247

2020- 1,118

2021- TBD YTD

## Attempted Suicide Calls For Service

2019- 212 CFS with 48 suicides

2020- 237 CFS with 32 suicides

2021- TBD CFS with TBD Suicides YTD

# Local Resources/Responses

Homeless Engagement and Response (**HEART**) and Community Assessment Response and Engagement (**CARE**) Initiative

- HEART officers proactively engage homeless individuals in the field, providing education, resources and services to restore the person and find a path out of homelessness
- Duties Include:
  - Daily outreach at known homeless encampments
  - Posting and cleanup of illegal camps
  - Strategic meetings with service providers to determine how to best help homeless individuals causing the most distress to the community and themselves

# Local Resources/Responses

CHAT- Community Health and Assistance Team



# Local Resources/Responses

## CHAT

- Two year grant- Ends December 2022
- Funded through HUD to focus on homelessness (\$800K)
- Allocated 4 Full-time Outreach Specialists
- Purchase of two Vans
- Primary duty is responding to qualifying calls for service



Community Health and Assistance Team

# CHAT STATISTICS YTD

| <b>Total Counts 11/08-11/12</b> |   |                        |                   |
|---------------------------------|---|------------------------|-------------------|
|                                 | <b>This week's totals</b>   | <b>Previous totals</b> | <b>YTD totals</b> |
| <b>Dispatch calls</b>           | 19 (including 3 Access Center requests) + 3 special Assignments: 22 | 109                    | 131               |
| <b>ESRI completed</b>           | 30  | 1916                   | 1946              |
| <b>Services offered</b>         | 30  | 1916                   | 1946              |
| <b>Services accepted</b>        | 27  | 1499                   | 1526              |
| <b>Services refused</b>         | 3   | 248                    | 251               |
| <b>Shelter Placement</b>        | 2   | 355                    | 357               |
| <b>Housing</b>                  | 0   | 17                     | 17                |



# Local Resources/Responses

## MCERT- Mobile Crisis Emergency Response Team

- Co-Response model that pairs a mental health clinician and police officer in a patrol car together
- Included 40hr Crisis Intervention Training for officers
- MPD is partnering with BHRS to bring the MCERT program back using ARPA and grant funding

# Crisis Services Planning

## BHRS & Modesto Police Department Alternative Response Partnership Development

### Community Emergency Response Team

Crisis Services | Hospitalization  
Psychiatric Health Facility

### Outreach/ Engagement

Behavioral Health Outreach |  
CARE\* Assisted Outpatient  
Treatment

Alternative  
Response?

 **CHAT**  
Community Health and Assistance Team

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## Questions?

# Emerging calendar

| Month           | December 20             | January 17                                     | Feb-May (TBD)   |
|-----------------|-------------------------|--|---|
| Type of meeting | Full work group meeting | Full work group meeting & Listening Session(s) | Full work group & Ad Hoc work                             |
| Topic           | Education               | Education<br><br>General community feedback    | Continued learning, developing & refining recommendations |

# Closing session

- Work group members, please consider doing a ride-along with MPD
  - You can contact Ruth Baca at [BacaR@modestopd.com](mailto:BacaR@modestopd.com).
  - We will also arrange for you to experience the Forced Option Simulator (FOS). Stay tuned.
- Final thoughts and reflections

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**Thank you**