How Data Can Build Stronger CIT Programs

Prepared For:
The CIT Knowledge Network
Detective Matthew Tinney
Crisis Intervention Unit
Albuquerque Police Department
June 24, 2016

Prepared By:
Dr. Peter Winograd, Data and Policy Support, Crisis Intervention Unit, Albuquerque Police Department
Sarah Masek, Crime Analysis Unit Supervisor, Real Time Crime Center, Albuquerque Police Department

Why Data Matter

- Data provide us with insight into the behavioral health and law enforcement issues facing our families, communities and agencies.

- Data provide us with a basis for advocacy and enable partnerships to come to consensus on pragmatic ways to address critical challenges including disparities in racial, cultural, economic, and political equality.

- Data enable us to ask better questions about the challenges we face; the laws, regulations, budgets, programs and policies we pass; and the barriers that keeps us from working collaboratively.

- Data help us prioritize limited resources by identifying where our citizens are most in need, how our sources of support are deployed, and where the gaps remain.

- Data help us hold each other accountable by tracking the outcomes that matter and by providing fair and independent information that people of good will can use to strengthen their efforts.

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Seven Key Policy Levers

1. Understanding the **problems** that the state needs to solve.

2. Using **data** for **insight, advocacy** and **accountability.**

3. Respecting the **value** of diverse **cultural**, **economic**, and **political perspectives**.

4. Establishing relationships with **power** organizations and understanding issue networks.

5. Understanding **budgets** and who **controls appropriations** and **spending.**

6. Examining the **laws, regulations, standards** and **policy frameworks** currently in place.

7. Understanding the **fears** and **hopes** associated with data, laws, regulations, and budgets.

Geospatial Mapping

Geospatial mapping is an approach to applying statistical analyses, data visualization, and other analytic techniques to data that have geographical dimensions.

- Geospatial Mapping approaches make these variables obvious and easier to understand in the specific context of educational achievement.

- Some authors (e.g. Hogrebe & Tate, 2012) argue that a geospatial perspective is essential in developing a type of ***visual political literacy*** in the areas of education, health and human services.

Mapping Is Powerful

- Geospatial mapping is an important tool for policy development because:
  - images, illustrations, and graphic representations strongly support learning, understanding and other aspects of cognition
  - maps have long been useful in engaging multiple groups in civic debates and other political discussions because they can be used as planning tools.
  - a geospatial perspective is essential in developing a type of ***visual political literacy*** in the areas of behavioral health and law enforcement.
- Geospatial mapping is used extensively in other fields including health and human services, natural resources, public safety, defense, and urban and regional planning.
- The data in the maps are immediately accessible to a wide range of audiences including policy-makers, community members, educators, students, and parents.
- Maps are powerful conversation starters. Everybody sees something different in the maps based on their perspectives and experiences.
- Maps equalize the conversations among different groups at the table. People want to know what others think!

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How We Use Mapping and Data Visualization

- **Advocacy:** Our assumptions and arguments

- **Description:** Making the data accessible to all audiences

- **Analysis:** Making sense of the data

- **Action:** Using data for change

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These Are The Ways That Data Can Be Helpful

Policy Question	Data Questions	Practice & Policy Questions	Political Questions
How Do We Minimize Police Use Of Force With People Living With Mental Illness?	• **How many calls for service are related to people living with mental illness?** • **What are the demographics and other characteristics of the individuals with mental illness encountered by the police?** • **How was the encounter resolved?** • **Did the encounter result in the use of force?**	• **How do we learn the important lessons after difficult incidents?** • **How do we train police officers to handle encounters with people living with mental illness?** • **How do we improve the collaboration between the police and mental health system?** • **How do we make sure that enough money is available to address the issue we face?**	• **Who has the power to influence communities to take better care of people living with mental illness?** • **Who can change how funding resources are allocated?** • **Who has the influence to make sure that families, police, mental health providers, and others to work together?**

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Just Give Me The Facts: How The Albuquerque Police Department Is Using Data To Build Stronger CIT Programs

Nienke Bos

**Presented at the
CIT International Conference
Chicago, Illinois
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Prepared By:
Lieutenant Glenn St. Onge, Crisis Intervention Section/Juvenile Section, Albuquerque Police Department.
Sarah Masek, Crime Analysis Unit Supervisor, Real Time Crime Center, Albuquerque Police Department.
Dr. Peter Winograd, Professor Emeritus, University of New Mexico.

Acknowledgements

This report could not have been completed without the work, guidance, support, and patience of the outstanding professionals who work in the Albuquerque Police Department including:

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Nils Rosenbaum, Psychiatrist, Crisis Intervention Unit
Tasia Sullivan, Detective, Crisis Intervention Unit
Bonnie Briones, Detective, Crisis Intervention Unit
Mark Oberman, Clinician, Crisis Intervention Unit

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Version 1.1

Our Conversations With Others Always Lead To Better Data And Smarter Thinking

The Issues We Face

"*Mental health in America has been marginalized and we are all suffering for it. This includes individuals who live with mental health issues and addictions, their families, our employers, our schools and our first responders who all too often become stopgaps in a broken system.*"

Mayor R.J. Berry, Albuquerque

One Of Our City's Darkest Days

https://www.youtube.com/watch?v=F7_TYvAx-wY

http://www.kob.com/article/stories/s3882024.shtml#.Vpe-FfkrI2w

How Albuquerque Police Department Uses Data

1. To Advocate For Those Individuals Living With Mental Illness.

2. To Help Strengthen Crisis Intervention In Albuquerque.

3. To Address The Most Difficult Issues Our City Faces.

4. To Better Understand And Support The Individuals In Crisis Who Come In Contact With The Albuquerque Police Department.

5. To Continually Improve The Training, Safety and Effectiveness Of Police Officers Dealing With Individuals In Crisis.

6. To Address The Requirements Of The APD-DOJ Agreement.

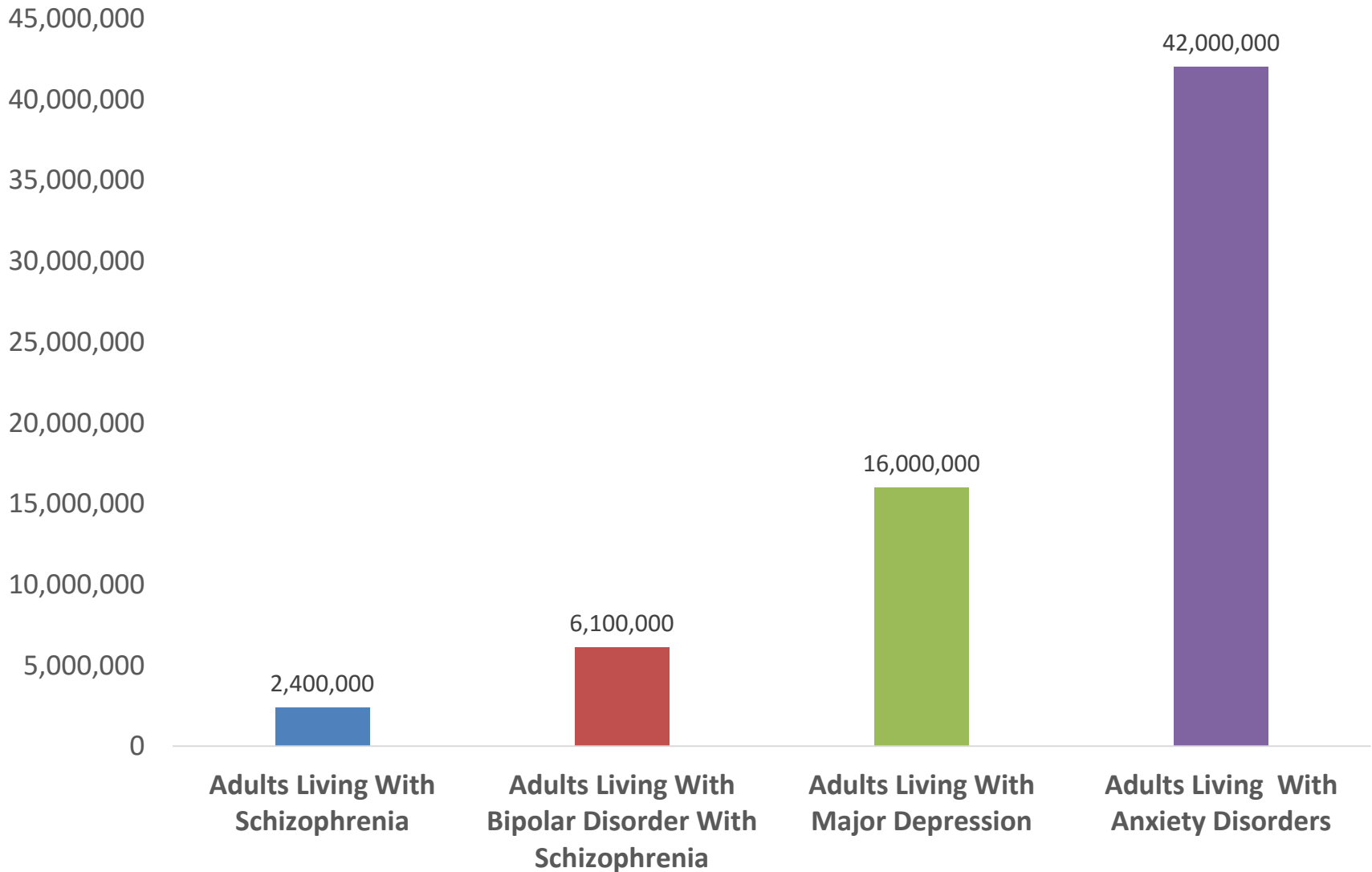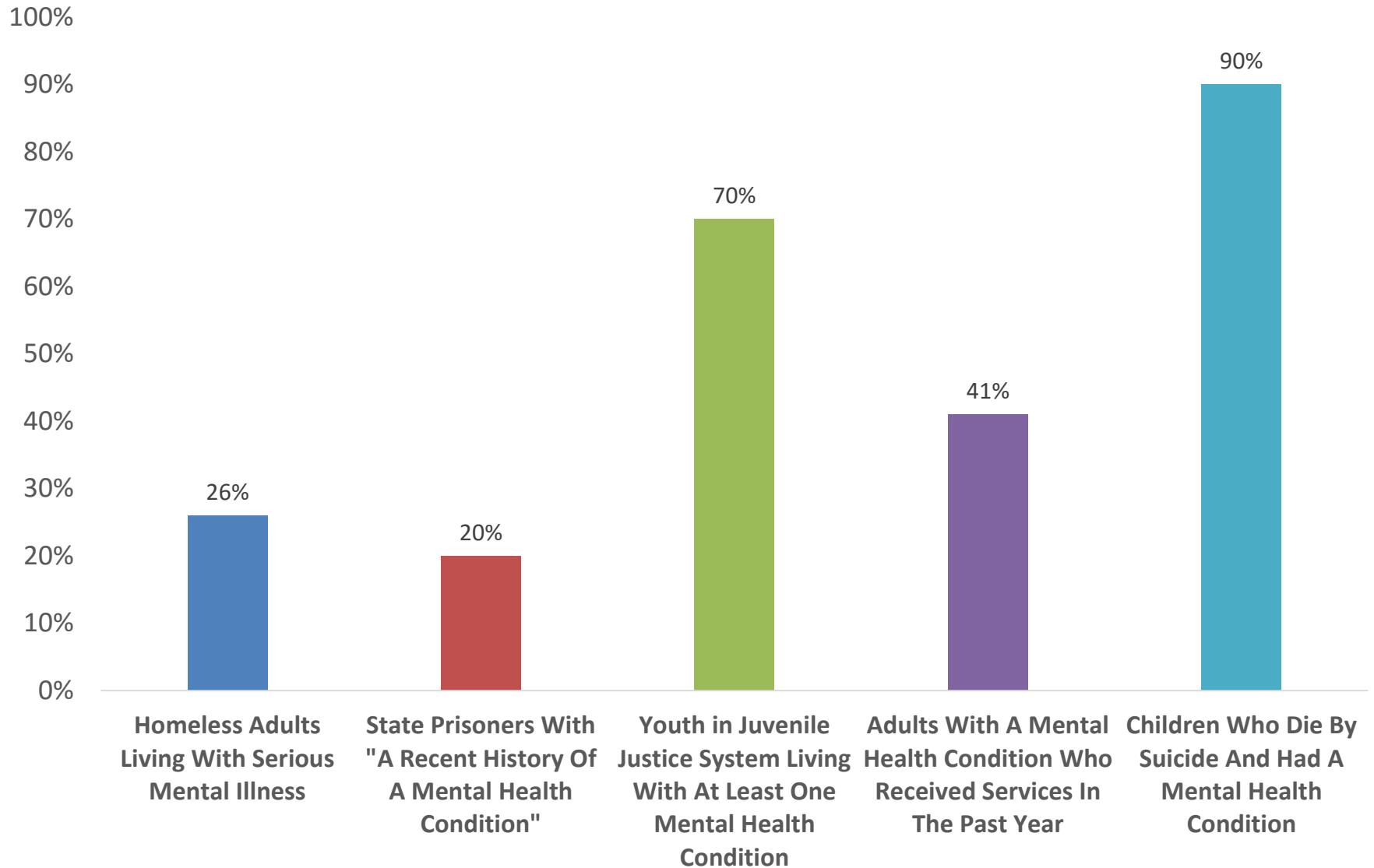**APD CIU RTCC**

APD Uses Data To:

To Advocate For Those Individuals Living With Mental Illness

The Prevalence Of Mental Illness In America

45,000,000
40,000,000
35,000,000
30,000,000
25,000,000
20,000,000
15,000,000
10,000,000
5,000,000
0

Adults Living With Schizophrenia	Adults Living With Bipolar Disorder With Schizophrenia	Adults Living With Major Depression	Adults Living With Anxiety Disorders
2,400,000	6,100,000	16,000,000	42,000,000

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Source: National Alliance On Mental Illness. www.nami.org

The Social Costs Of Mental Illness In America

Bar chart showing percentages:
- Homeless Adults Living With Serious Mental Illness: 26%
- State Prisoners With "A Recent History Of A Mental Health Condition": 20%
- Youth in Juvenile Justice System Living With At Least One Mental Health Condition: 70%
- Adults With A Mental Health Condition Who Received Services In The Past Year: 41%
- Children Who Die By Suicide And Had A Mental Health Condition: 90%

Source: National Alliance On Mental Illness. www.nami.org

The Number And Percentage Of Adults Over 18 In Bernalillo County With Serious Mental Illness

Bernalillo County had an estimated 517,800 individuals over 18 years of age in 2013.

6.70%	Major Depression (n=34,693)
2.60%	Bipolar Disorder (n=13,463)
1.10%	Schizophrenia (n=5,696)

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Source: Landscape of Behavioral Health In Albuquerque (2014). UNM Department of Psychiatry and Behavioral Sciences, UNM Center For Educational Policy, and RWJF Center for Health Policy, UNM
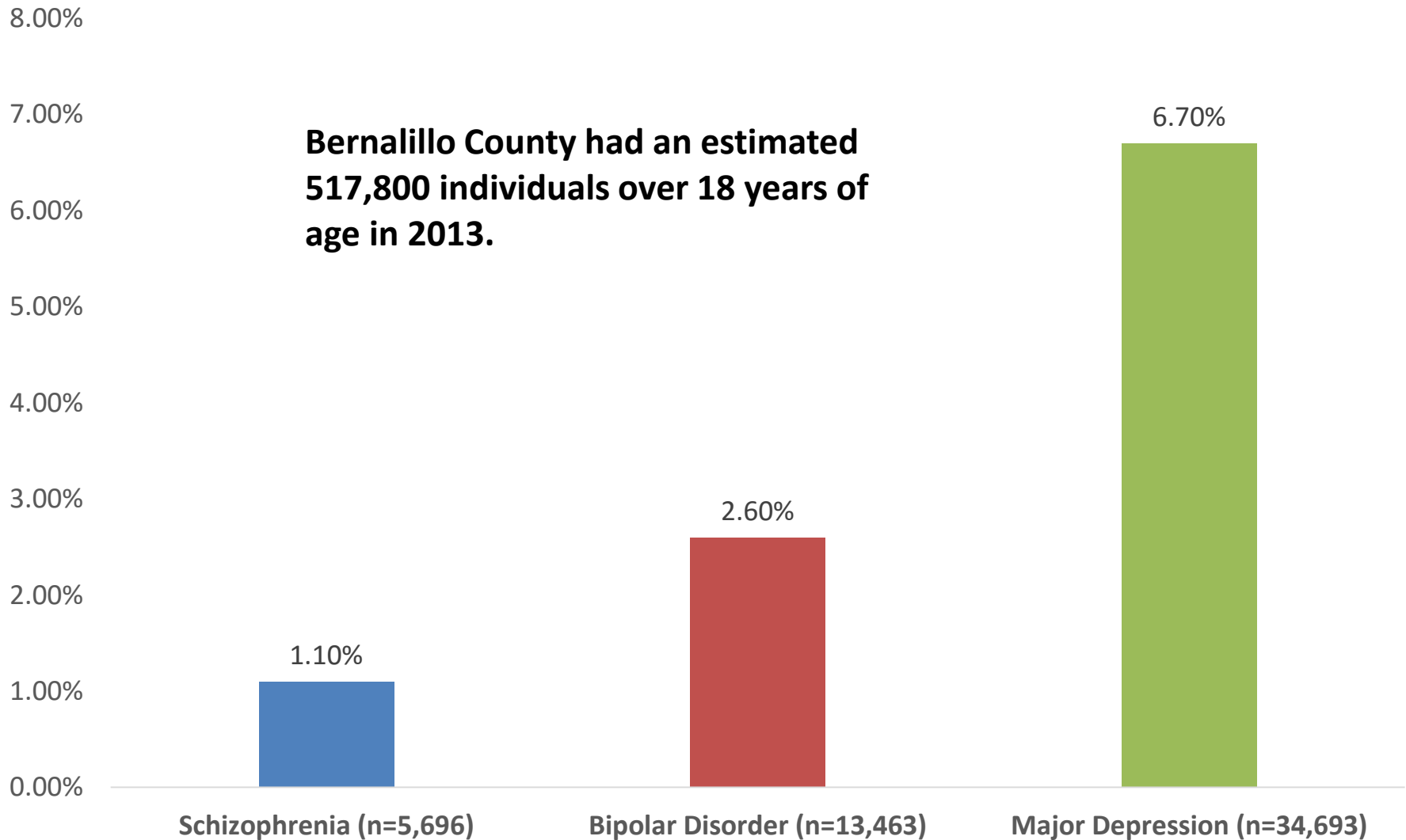
The Landscape Of Behavioral Health In Bernalillo County, New Mexico

Twenty-two percent (22.4%) of Bernalillo County's population is estimated to have mental illness and/or substance use disorders. Of those, an estimated 53,000 individuals (35%) are not receiving services.

Category	Value
Total Population	674,213
Estimated Number Of Individuals With Diagnosis	150,982
Individuals Receiving Services	98,000
Gap	52,982
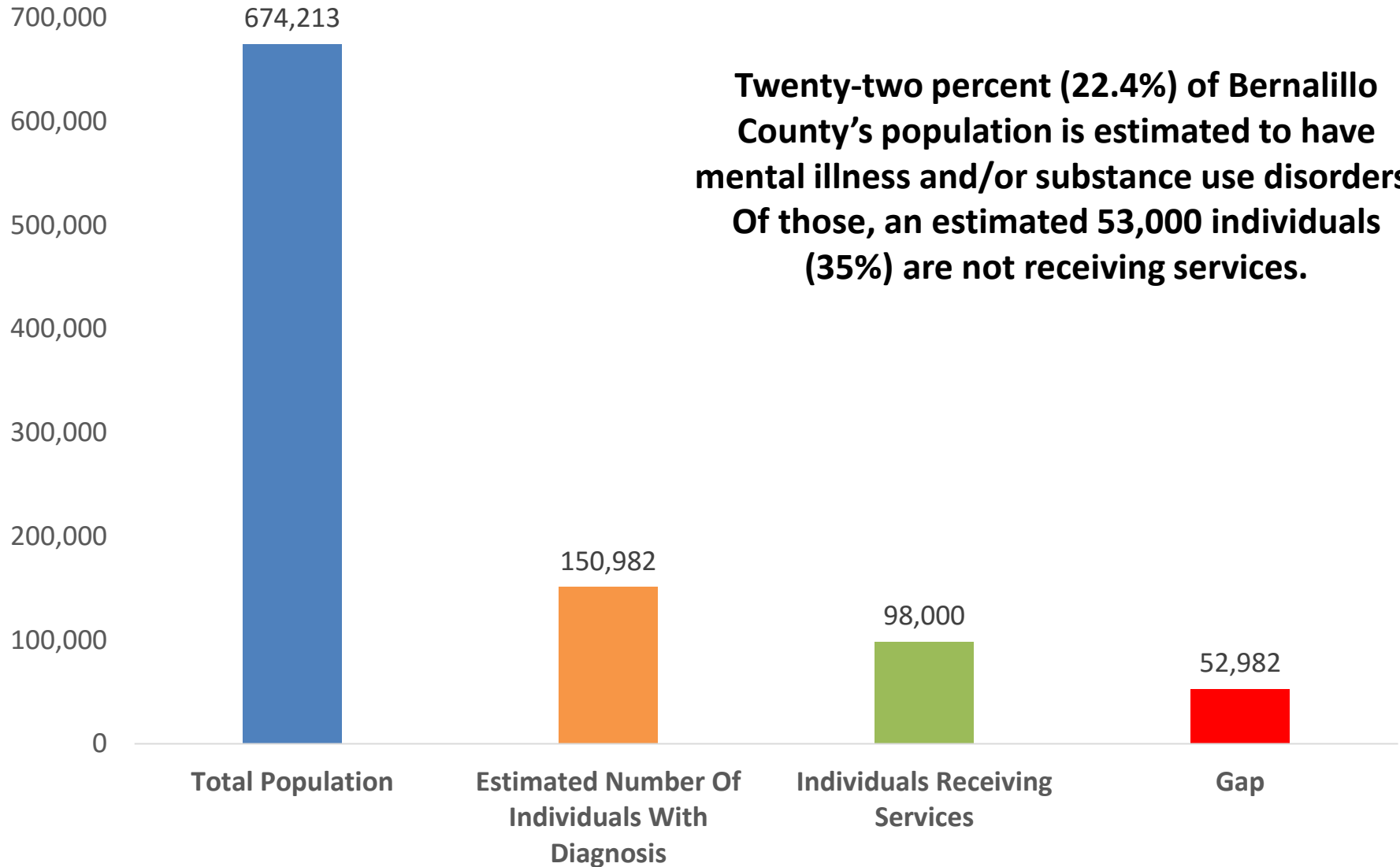
How Bernalillo County Compares To The Nation
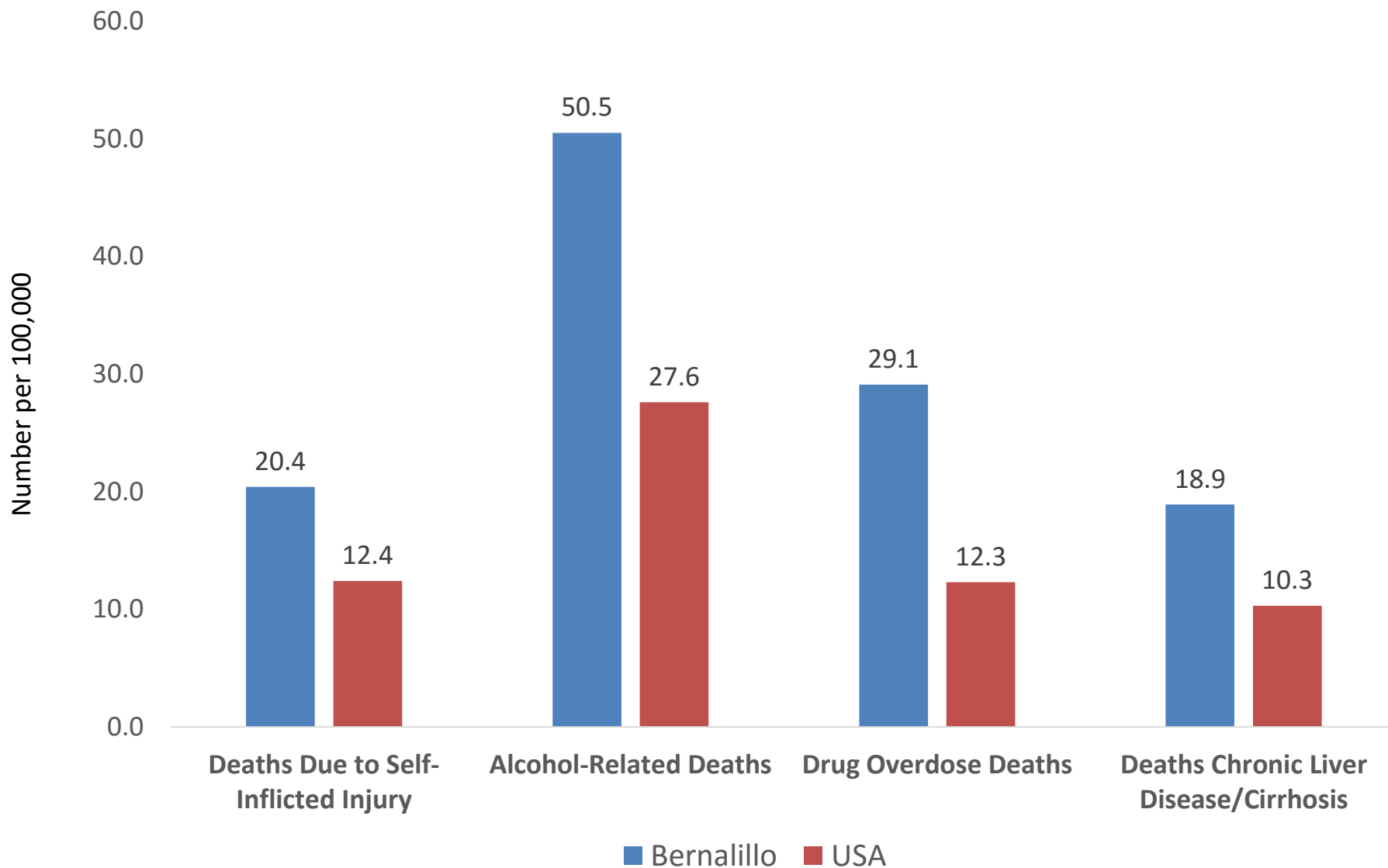
The Data Are Clear. Millions Of Americans Live With Mental Health Issues. Few Come In Contact With Police.

Our Most Important Resources Are Compassion, Understanding And Strong Systems Of Support.

When Systems Of Support Fail, The Human Costs Are Devastating

John Hyde Killed Five People Including Officers King and Smith, 2005

"FALLEN HEROES"

Officer Michael R. King
Served 23 years

Officer Richard W. Smith
Served 25 years

...while performing their duties...two Albuquerque Police Officers lost their lives at this location...for their Ultimate Sacrifice...forever grateful. The Citizens of the City of Albuquerque

August 18, 2005

'They tried everything'

By Robert Browman, Nicole Perez And Elise Kaplan / Journal Staff Writers
Thursday, August 27th, 2015 at 12:05am

James Boyd Shot By Police, 2014

David and Kathy Finch Attacked By Their Son James, 2015

Miracle Recovery

Police Officer Who Was Shot Helps Mentally Ill
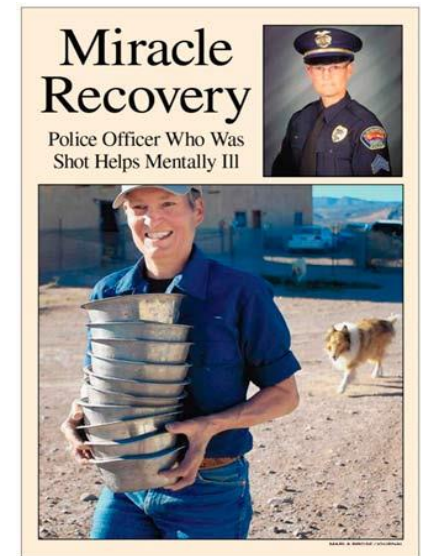
Officer Carol Oleksak Shot By Duc Mihn Pham, 2003

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And So Are The Financial Costs

ALBUQUERQUE JOURNAL | APD UNDER FIRE

TIMELINE   COST   MAP   VIDEO   LINKS

COST TO THE CITY

Police misconduct lawsuits since 2010 have resulted in a tab of $23 million for Albuquerque taxpayers. The number will likely increase as several suits are ongoing and recent officer-involved incidents may result in new lawsuits being filed.

Included in the $23 million figure is a $7.95 million settlement with the family of Iraq War veteran Kenneth Ellis III, who was fatally shot in the neck by APD officer Brett Lampiris-Tremba while holding a gun to his own head. The settlement came after a jury awarded $10.3 million to the the family and the city appealed. The judgement was one of the largest against the city in its history.

Another high-profile case was settled in mid-December 2013, when the city agreed to pay $900,000 to the family of Alan Gomez. Gomez was shot by officer Sean Wallace after the girlfriend of Gomez's brother called police asking for assistance. Police said they believed Gomez was holding his brother and his brother's girlfriend hostage, but Gomez was unarmed at the time he was shot. The shooting was Wallace's third in the line of duty.

A lawsuit that is still ongoing involves the fatal shooting of Christopher Torres, who had a history

City agrees to pay $7.95 million in Ellis shooting

Detective Brett Lampiris-Tremba demonstrates during a wrongful death trial how Iraq war veteran Kenneth Ellis III was holding a gun to his own head when Lampiris-Tremba shot and killed him in the parking lot of a 7-Eleven in 2010.
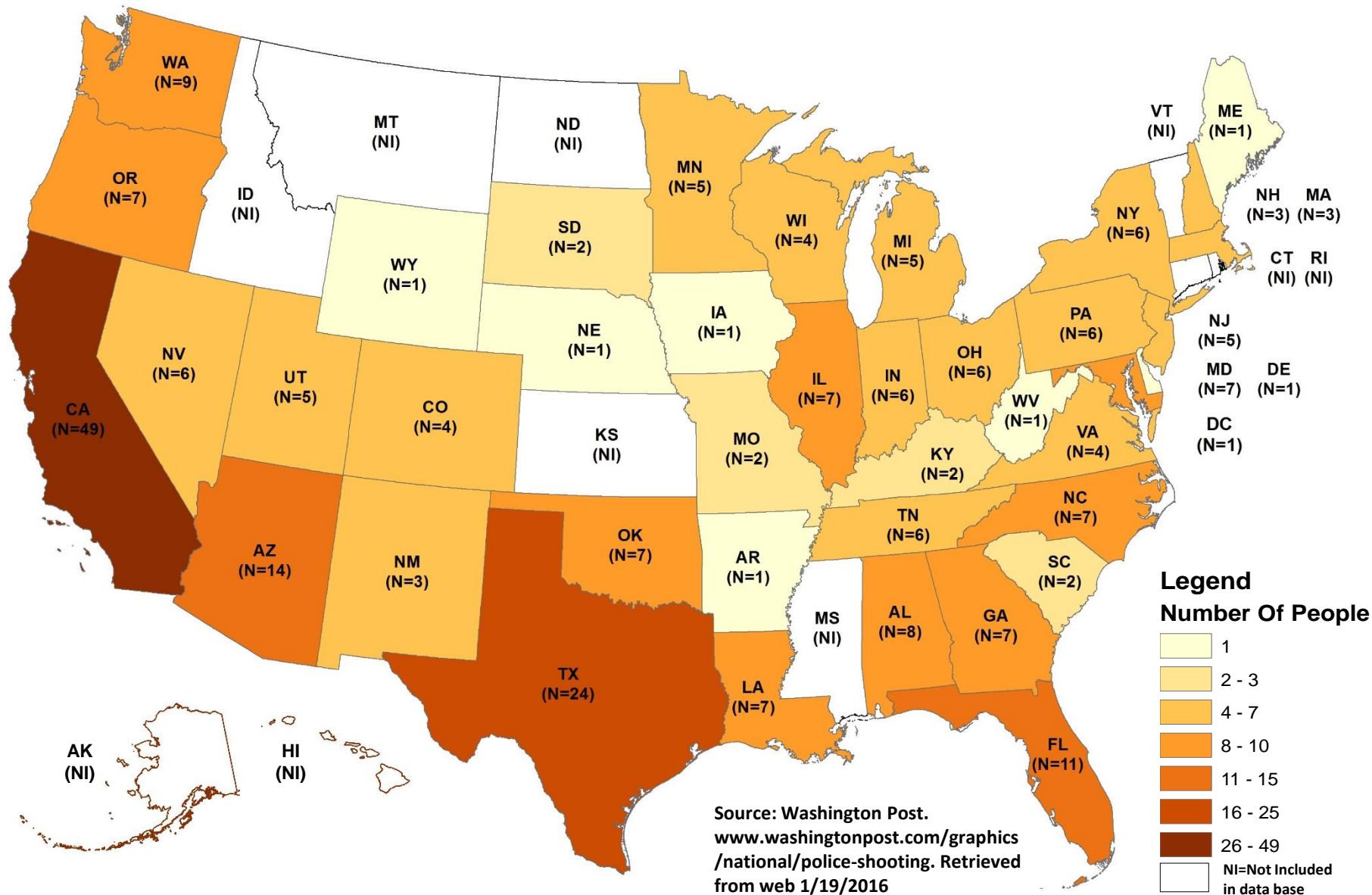
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The Issues We All Face

Police shooting raises ques. how to best treat mentally ill

KOB 4

https://www.youtube.com/watch?v=9SgRN8xZfRE

The Issues We All Face: 257 People With Signs Of Mental Illness Were Involved In Deadly Encounters With Police (January 2, 2015 – January 19, 2016)
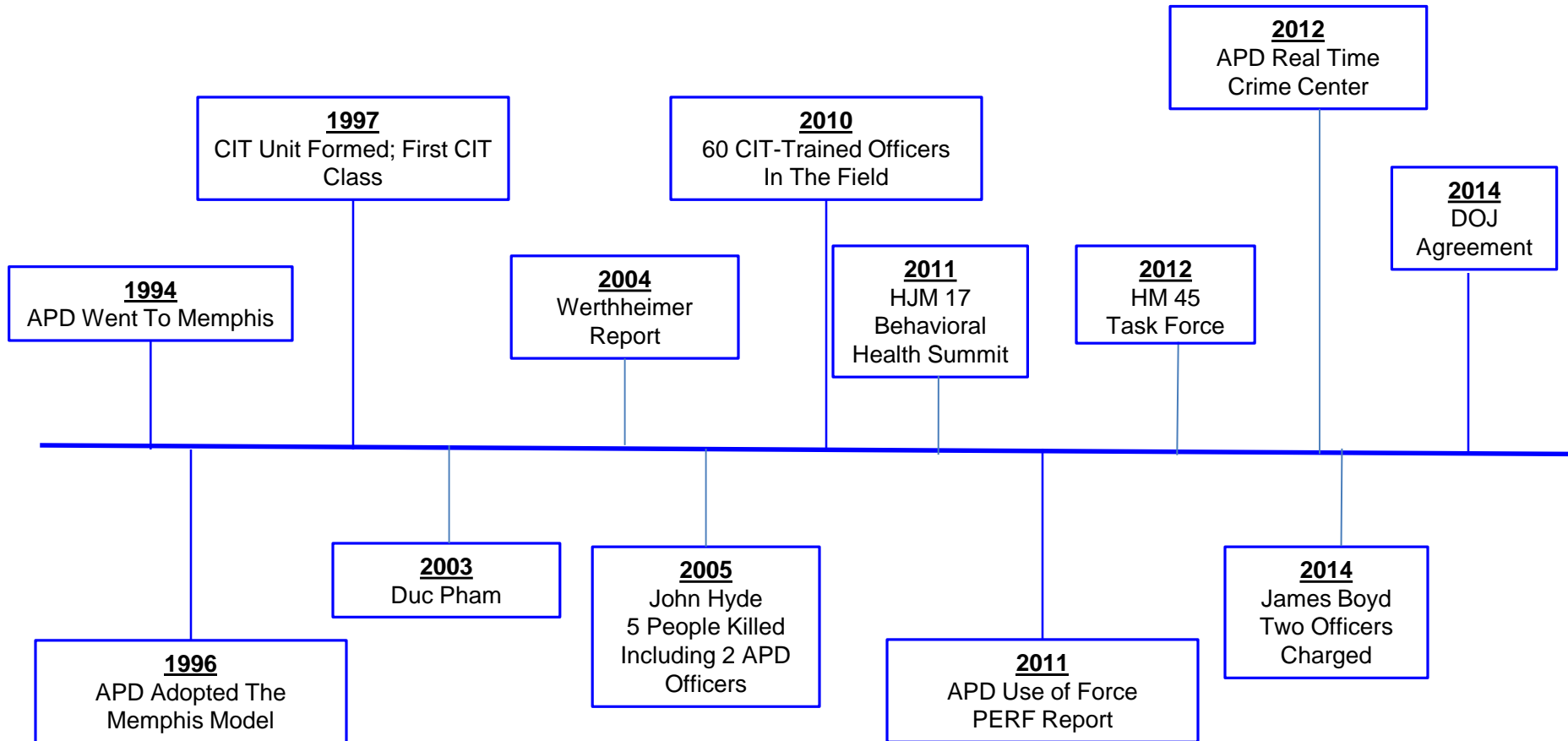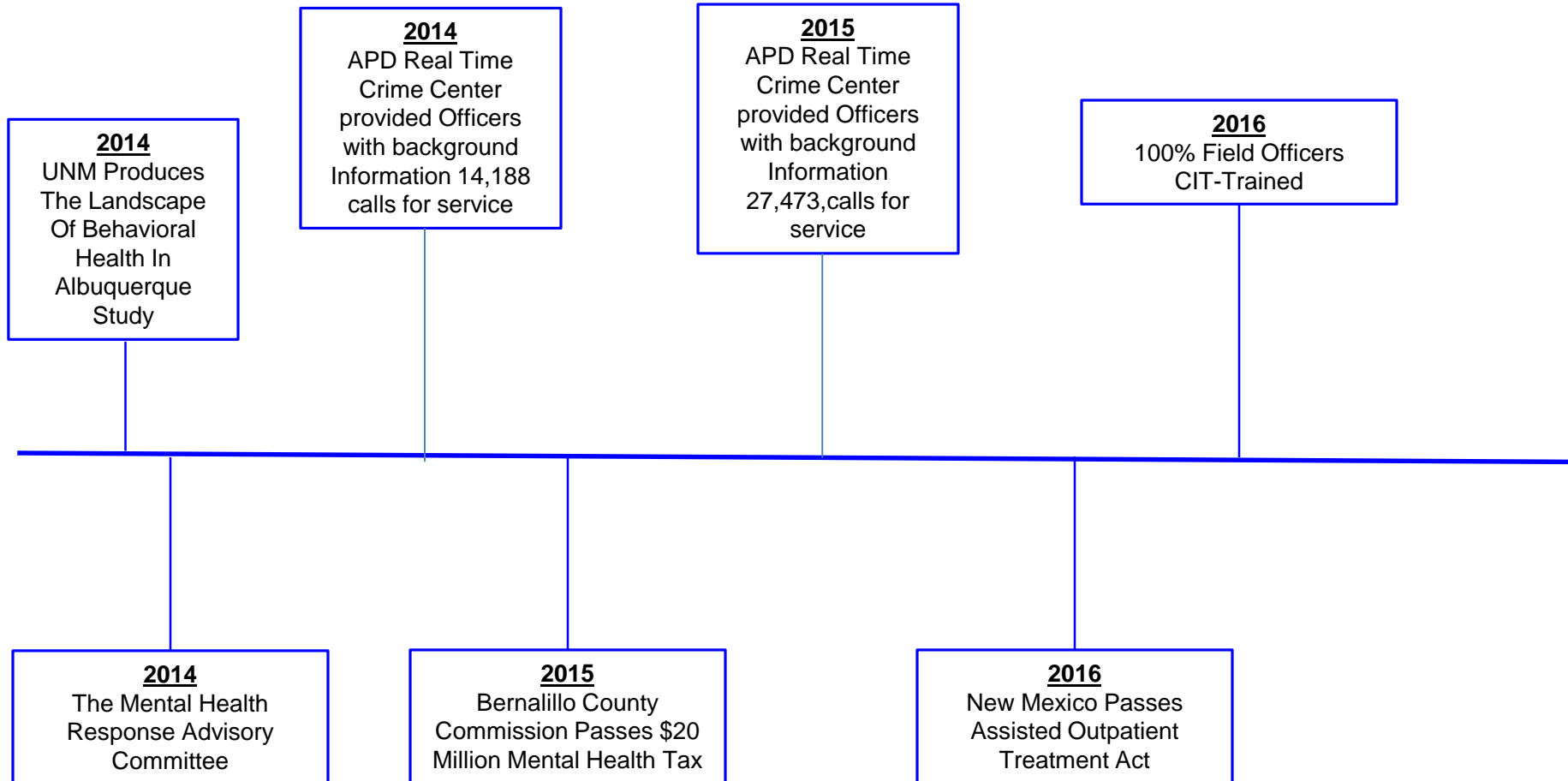

WA (N=9)
MT (NI)
ND (NI)
VT (NI)
ME (N=1)
OR (N=7)
ID (NI)
MN (N=5)
NH (N=3)
MA (N=3)
NY (N=6)
WI (N=4)
MI (N=5)
CT (NI)
RI (NI)
SD (N=2)
WY (N=1)
PA (N=6)
NJ (N=5)
NV (N=6)
IA (N=1)
UT (N=5)
NE (N=1)
IL (N=7)
IN (N=6)
OH (N=6)
MD (N=7)
DE (N=1)
CA (N=49)
CO (N=4)
KS (NI)
MO (N=2)
WV (N=1)
VA (N=4)
DC (N=1)
KY (N=2)
NC (N=7)
AZ (N=14)
NM (N=3)
OK (N=7)
AR (N=1)
TN (N=6)
SC (N=2)
MS (NI)
AL (N=8)
GA (N=7)
TX (N=24)
LA (N=7)
FL (N=11)
AK (NI)
HI (NI)

Legend
Number Of People
- 1
- 2 - 3
- 4 - 7
- 8 - 10
- 11 - 15
- 16 - 25
- 26 - 49
- NI=Not Included in data base

Source: Washington Post. www.washingtonpost.com/graphics /national/police-shooting. Retrieved from web 1/19/2016

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APD Uses Data To:

To Help Strengthen Crisis Intervention In Albuquerque

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APD Crisis Intervention Unit: The Past

2012
APD Real Time Crime Center

1997
CIT Unit Formed; First CIT Class

2010
60 CIT-Trained Officers In The Field

2014
DOJ Agreement

1994
APD Went To Memphis

2004
Werthheimer Report

2011
HJM 17 Behavioral Health Summit

2012
HM 45 Task Force

2003
Duc Pham

2005
John Hyde
5 People Killed Including 2 APD Officers

2014
James Boyd Two Officers Charged

1996
APD Adopted The Memphis Model

2011
APD Use of Force PERF Report

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APD Crisis Intervention Unit: The Present

2014
APD Real Time
Crime Center
provided Officers
with background
Information 14,188
calls for service

2015
APD Real Time
Crime Center
provided Officers
with background
Information
27,473,calls for
service

2016
100% Field Officers
CIT-Trained

2014
UNM Produces
The Landscape
Of Behavioral
Health In
Albuquerque
Study

2014
The Mental Health
Response Advisory
Committee

2015
Bernalillo County
Commission Passes $20
Million Mental Health Tax

2016
New Mexico Passes
Assisted Outpatient
Treatment Act

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The Albuquerque Police Department Crisis Intervention Unit

CIU/COAST Organization Chart April, 2016

(TBD) Commander

Glenn St. Onge Lieutenant

John Gonzales Sergeant

Matthew Tinney CIU Detective

Lawrence Saavedra CIU Detective

Tasia Sullivan CIU Detective

Terry Dye CIU Detective

Colleen Bultmann CIU Detective/BCSO

Bonnie Briones CIU Detective

Dave Baca CIU Detective

Nils Rosenbaum CIU Psychiatrist

Mark Oberman CIU Clinician

Terry Singer CIU Clinician

Celina Lopez COAST

Tatiana Percival COAST

Denise Hovey-Thomas COAST

Yvette Garcia COAST

Ray Maynes COAST

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Mapping The Data

Data Incognita	Data Firma			Data Incognita	
Individual's Private Life Before And After Encounters With APD, Mental Health And/Or The Judicial System	**Initial Encounters With APD Field Officers**	**CIU Detectives Caseload** / **COAST Services**		**Emergency Facilities** / **Jail**	**Mental Health System** / **Prison System** / **Court System**

Legend

Private Data	Data We Have	Data That Takes Partnerships

Data	Initial Encounter With Field Officers	CIU Cases	COAST Services
Number of individuals in the COAST and CIU case loads		X	X
Number of individuals receiving crisis prevention services		X	X
Date, shift, area command of initial incident	X		
Disposition of the initial encounter (arrest, citation, referral)	X		
Dispositions of follow-up encounters with CIU & COAST		X	X
Subject's age, race/ethnicity, and gender	X	X	X
Was subjected armed & type of weapon during initial and follow-up encounters	X	X	X
Was subject US military vet?	X		
Name & badge of responder or detective	X		
Did a supervisor respond to the scene	X		
Technique or equipment used during initial and follow-up encounters	X	X	X
Any injuries to officers, subjects or others during initial and follow-up encounters	X	X	X
Use of force in any encounter?	X	X	X
Brief narrative	X		

These Are The Data We Follow

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The Data on Individuals In Crisis Come From Three Sources

1. Field Officer Reports and 911 Calls For Service (CFS)

   - This data set includes CFS that are primarily coded as 10-40 (Mental Patient); 10-39 (Disturbance) and 10-43 and "43-1" (Suicide) but also include other CFS with codes for mental commitment or psychiatric evaluation.
   - The data also include location and other geospatial data that can be used for hot spot mapping and other analytic tools.

2. The Case Load of the CIU Detectives

   - These individuals have met the policy requirements of SOP 3-06 and 2-13, Investigations Section SOP and been assigned to the CIU Detectives by the CIU/COAST Sergeant.

3. COAST Monthly Reports

   - The data set includes the number of individuals contacted; the number of individuals assisted; the number of mental health consumers assisted; the number of referrals to services; and the number of referrals received.

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CAVEAT DATA USER

One of the most important questions we face is whether the data we are gathering is capturing the full extent of the interactions between individuals in crisis and law enforcement. We must make every effort to develop data gathering and reporting protocols that ensure completeness, fairness, and objectivity.

APD Uses Data To:

To Address The Most Difficult Issues Our City Faces

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Albuquerque Police Involved Shooting Of Individuals With and Without Indications Of Mental Health Issues (2004-2016)

These data are tentative and subject to change as investigations reveal additional information.

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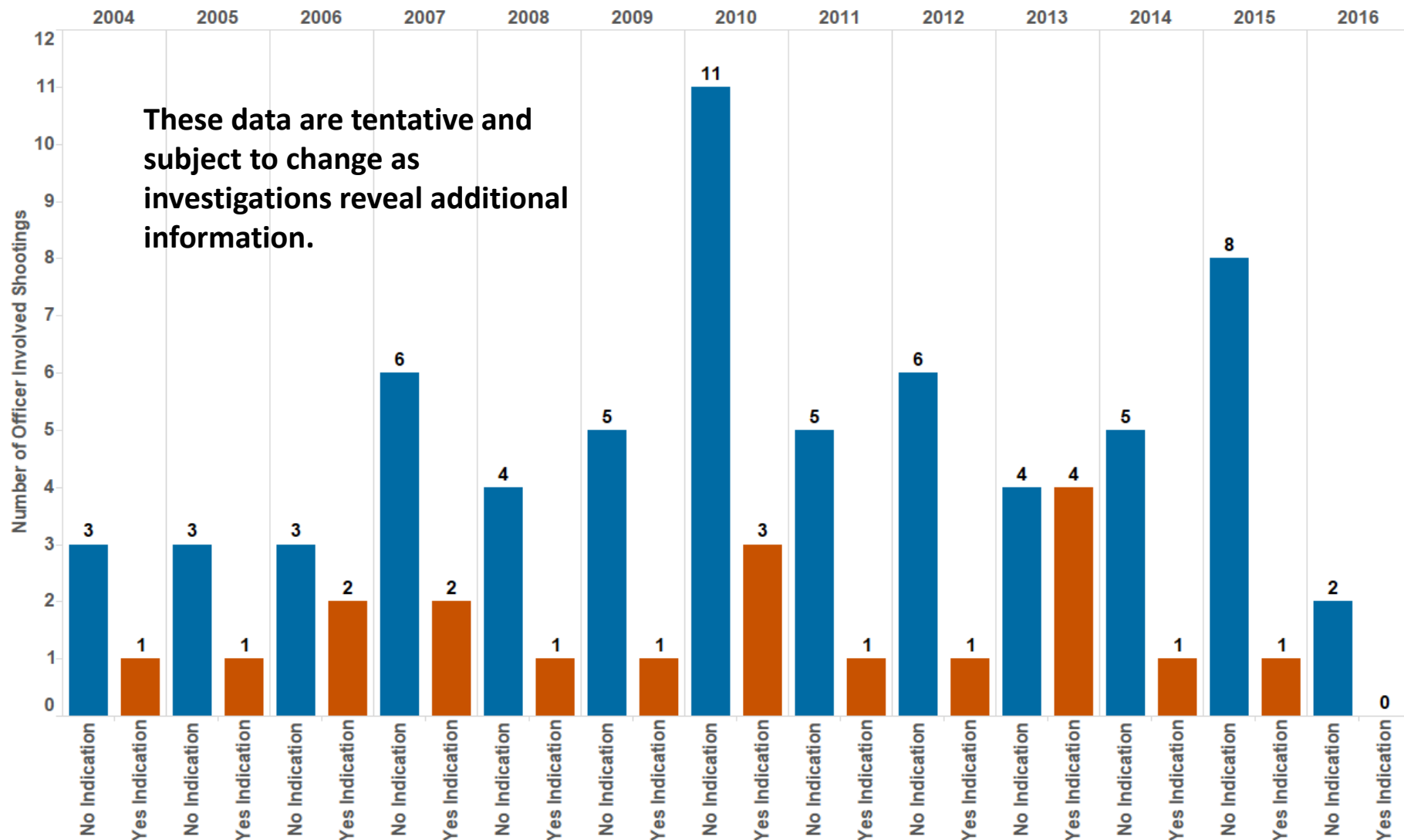
Percent Of Total Albuquerque Police Involved Shooting That Involved Individuals With Indications Of Mental Health Issues (2004-2016)

These data are tentative and subject to change as investigations reveal additional information.

Sources: APD Real Time Crime Center; 2010-2014 Officer Involved Shooting Report, Civilian Police Oversight Agency, 2015
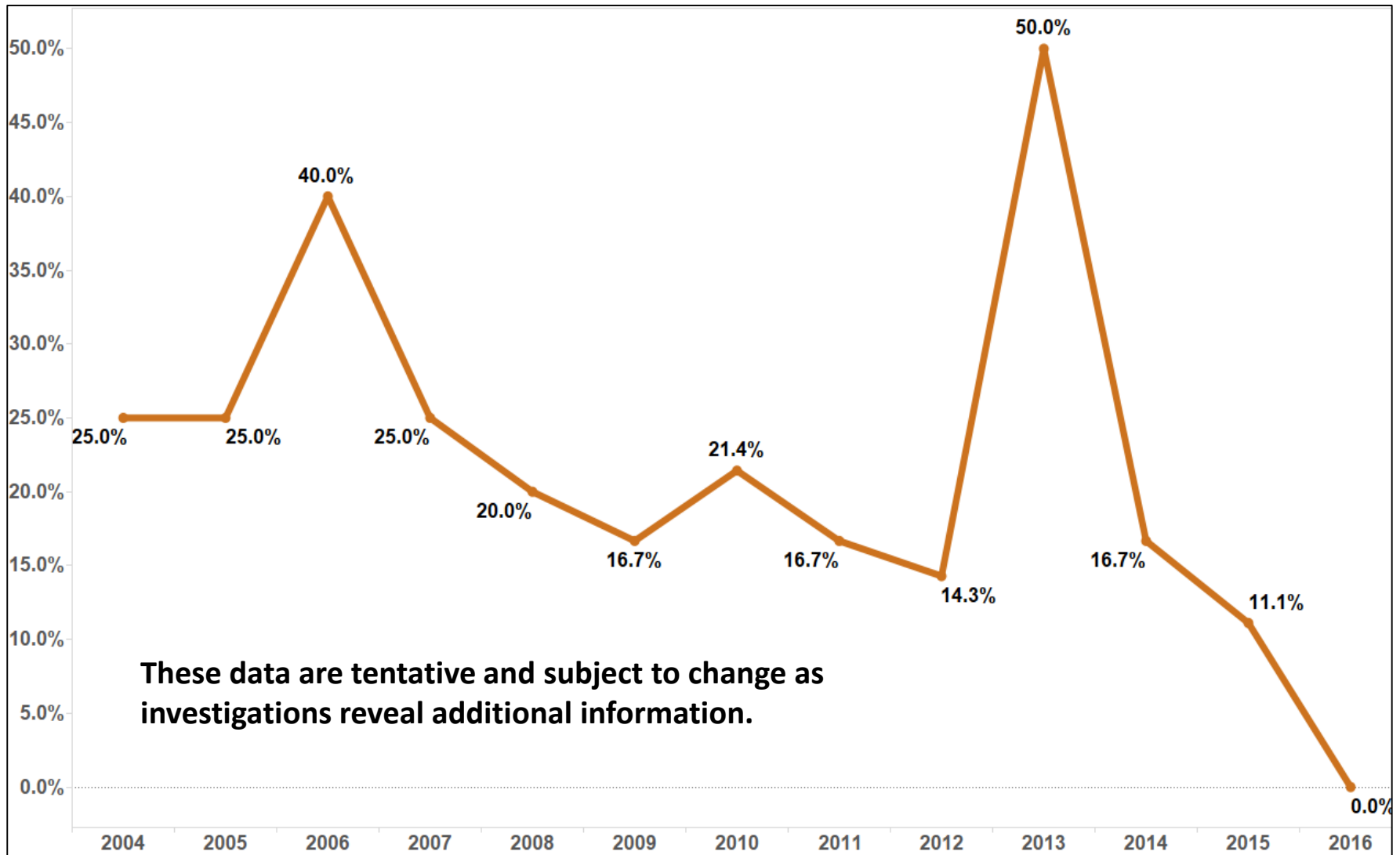
Total CIU-Related Cases & Encounters And Use Of Force

64 Field Reports Still In Process

Types Of Force: Taser, Handcuffs, OC

Chart data:

Category	Total Cases	Use Of Force
CIU Detectives (9/15 - 3/16)	105	0
COAST (11/15 - 3/16)	435	0
Field Officers (1/16 - 3/16)	587	4

Legend: ■ Total Cases ■ Use Of Force

Source: APD Real Time Crime Center; Crisis Intervention Unit
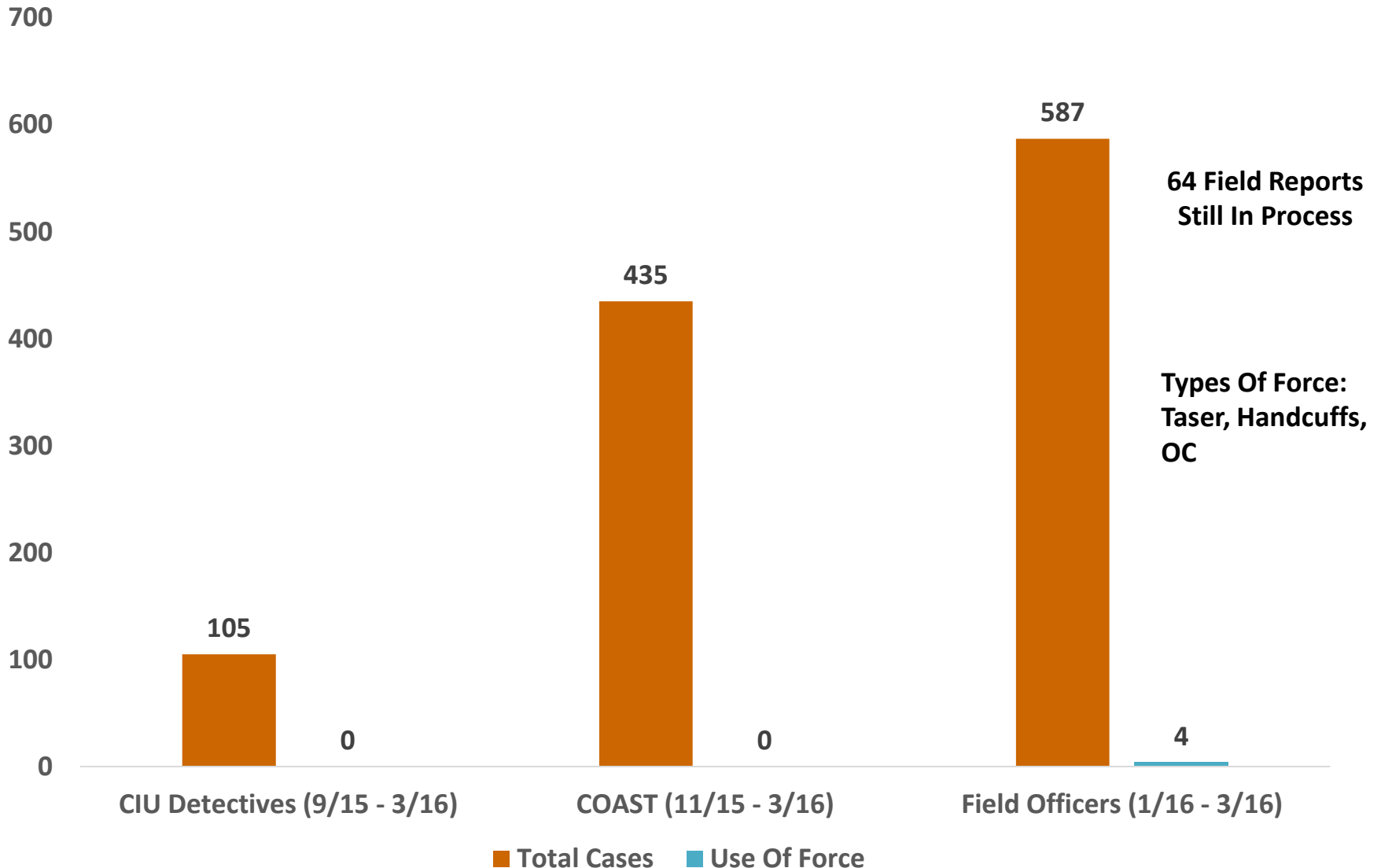
APD Uses Data To:

To Better Understand And Support The Individuals In Crisis Who Come In Contact With The Albuquerque Police Department

Our Community

APD Beats
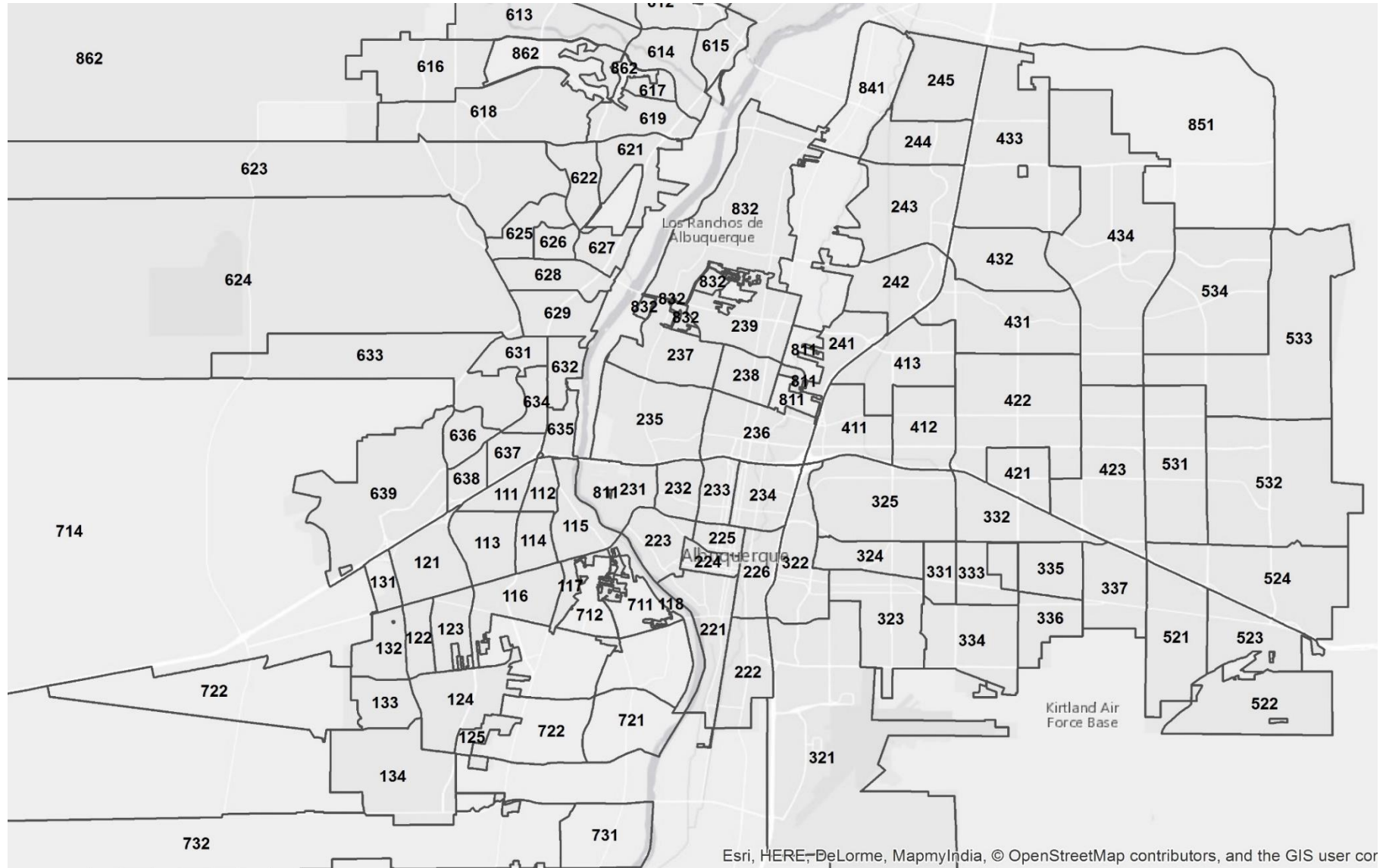
The Number Of All Priority 1, 2, 3 Calls For Service Compared To Mental Patient and Suicide Calls For Service: 2010 To 2015
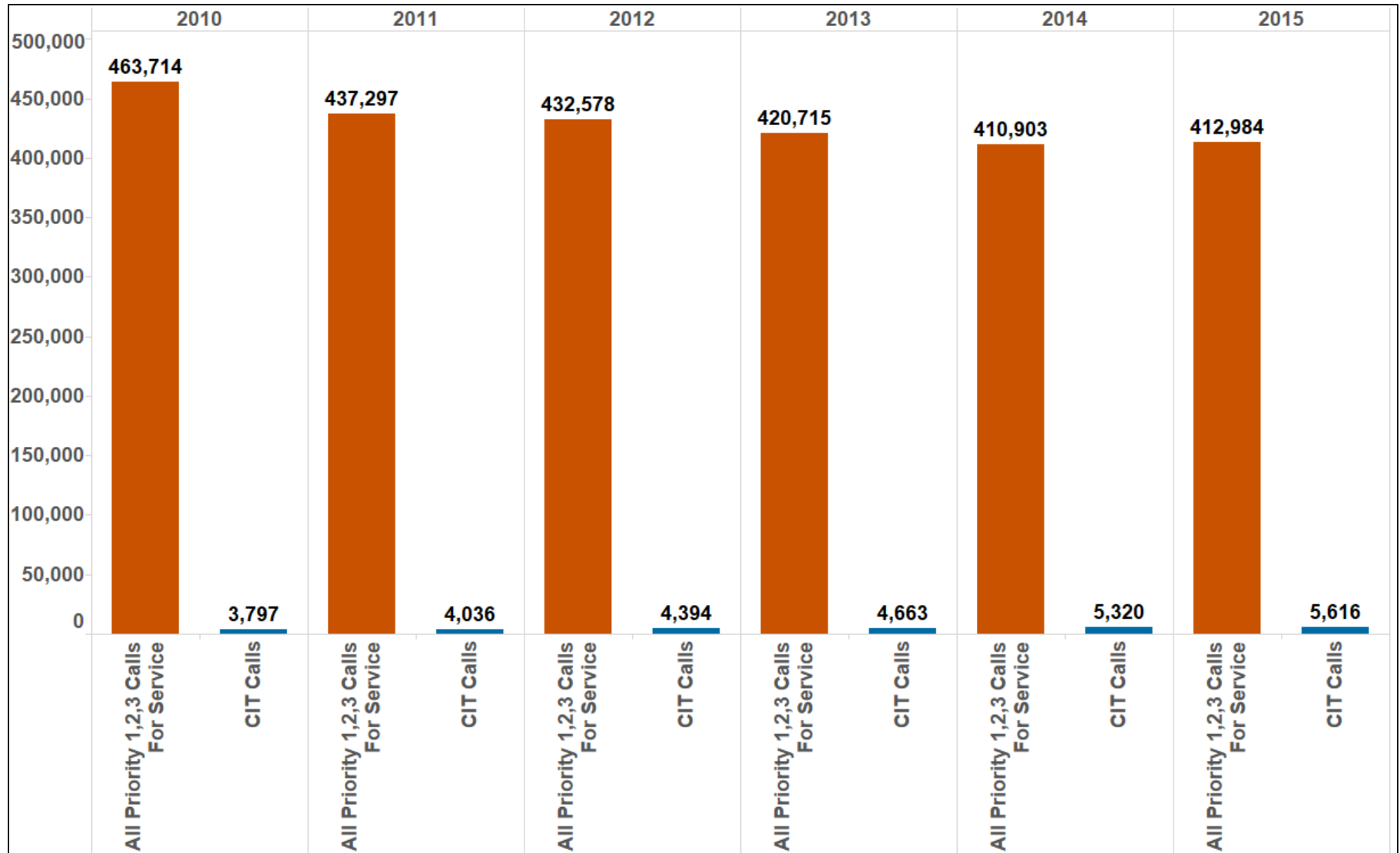
The Number Of Mental Patient and Suicide Calls For Service; APD Lieutenants, Sergeants and Field Officers; And CIU Detectives, 2010 To 2015

Source: APD Real Time Crime Center; Crisis Intervention Unit

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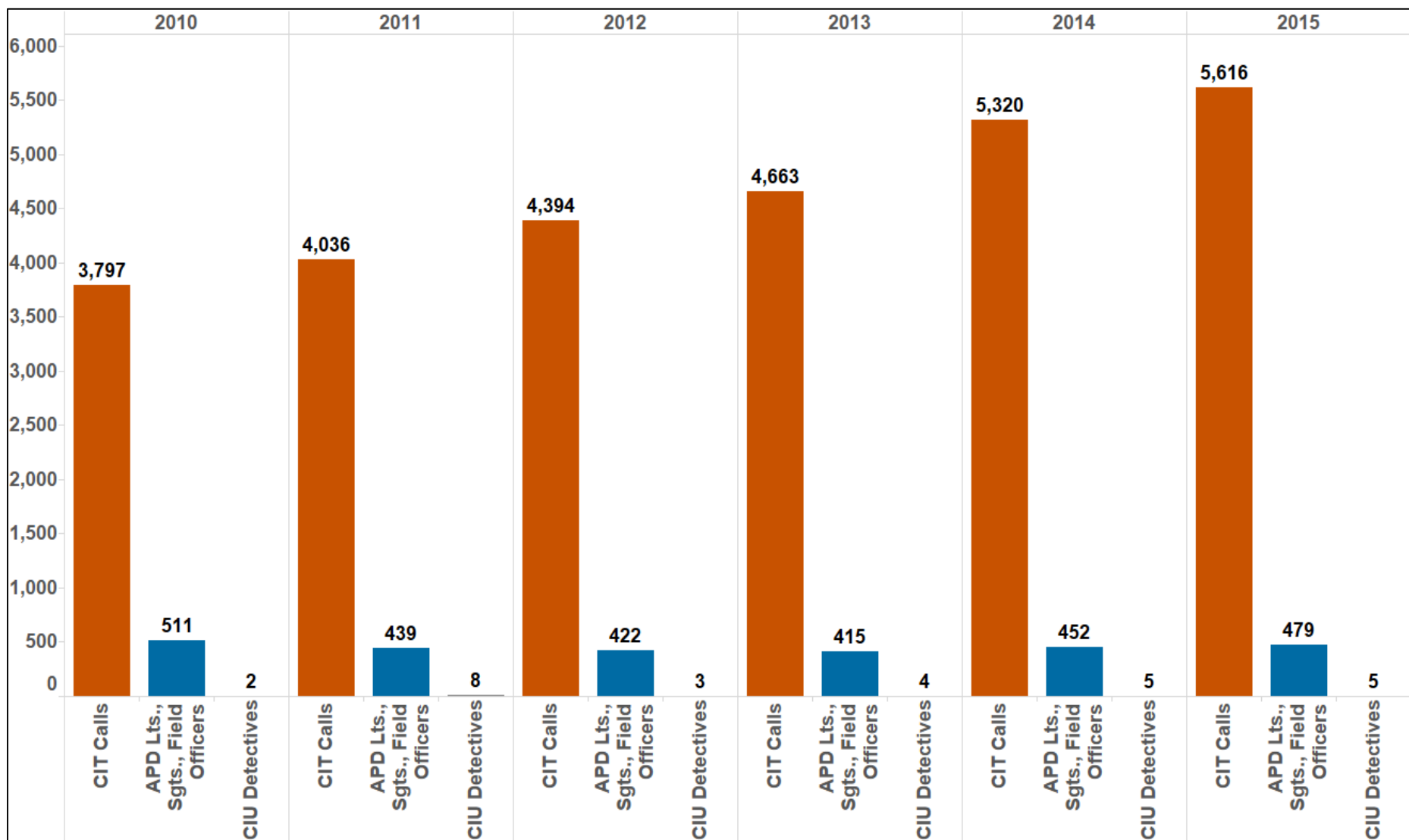
In 2015, APD Field Officers Responded To 5,616 Mental Patient and Suicide Calls For Service

Month	Value
January	447
February	459
March	475
April	482
May	512
June	503
July	472
August	488
September	463
October	461
November	406
December	448

Legend: January, February, March, April, May, June, July, August, September, October, November, December

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Source: APD Real Time Crime Center
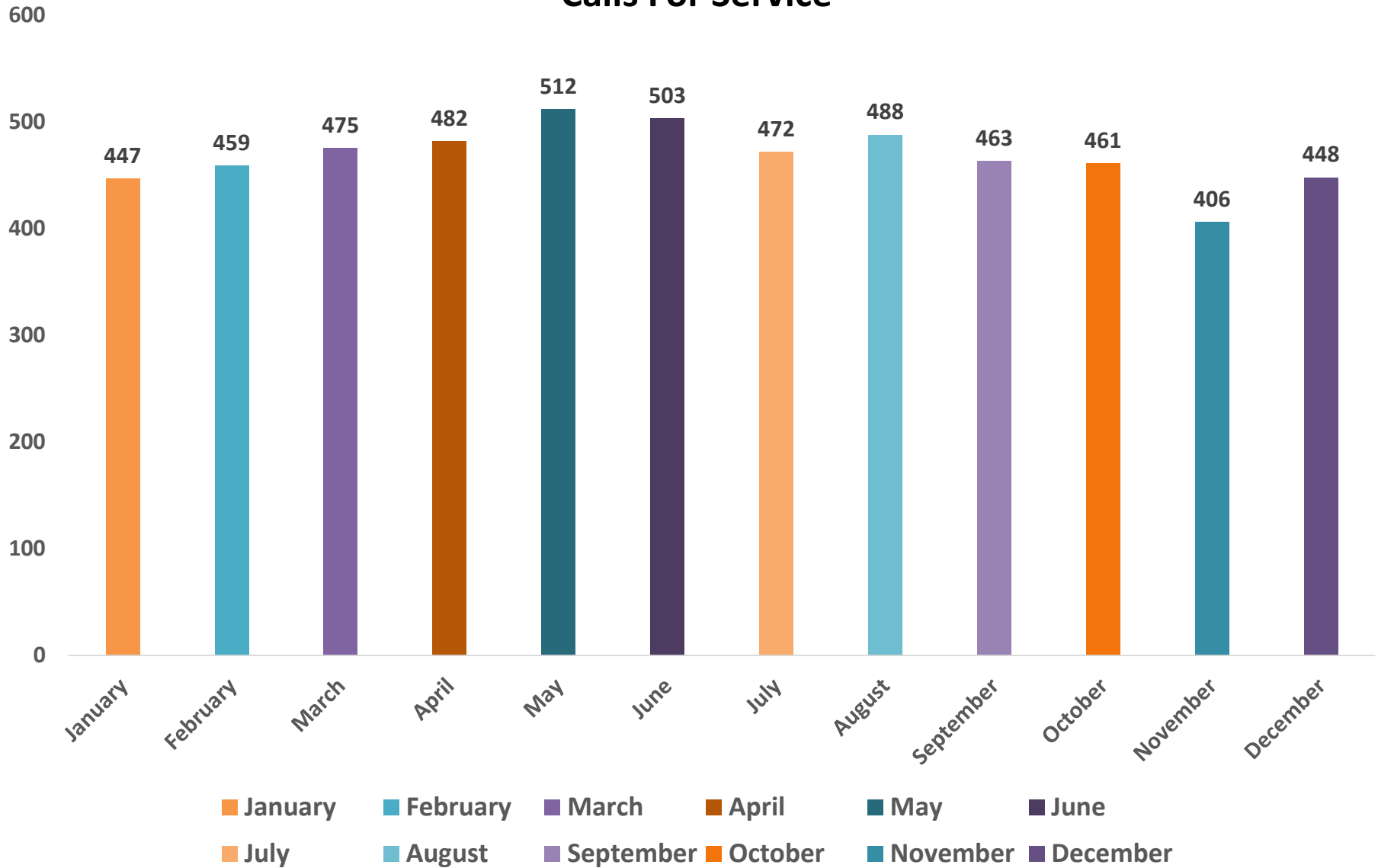
What Do We Know About What Kinds Of Incidents Are Included In These Calls?

The 5,616 Calls For Service Are Classified As Either Mental Patient Or Suicide

Source: APD Real Time Crime Center

APD CIU RTCC

45
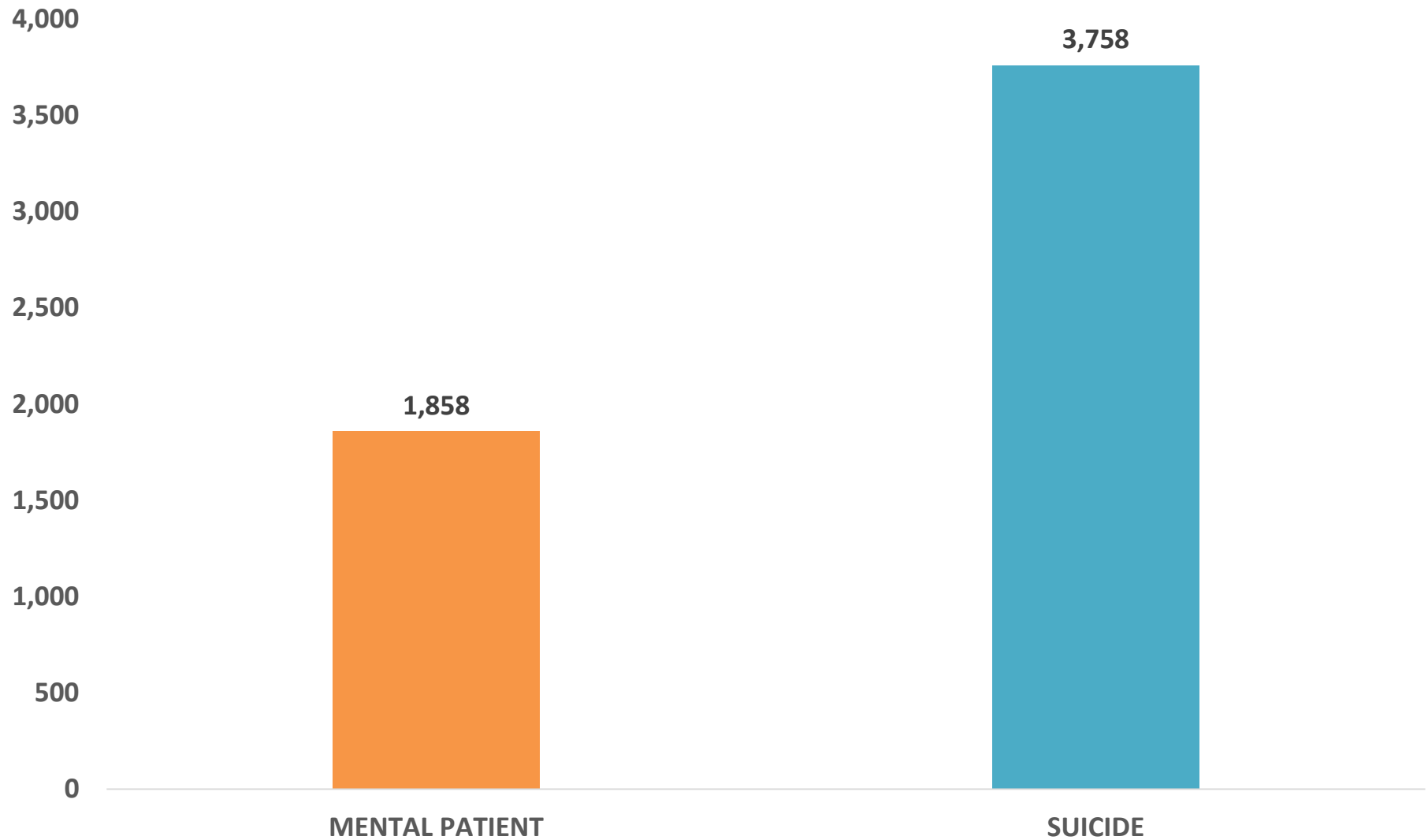
What Sub-Categories Of Incidents Are Included In The Final Computer Aided Dispatch Categories Of Mental Patient And Suicide?

Final CAD Description	ARS Incident Type	RMS Incident Type	Statute Description	Value
MENTAL PATIENT	Null	Null	Null	468
		MENTAL COMMIT	Null	
	MENTAL COMMIT	MENTAL COMMIT	INCIDENT	
			MENTAL COMMIT	17
			PROHIBITED PEDESTRAI	1
			PSYCHIATRIC EVALUATI	16
SUICIDE	Null	Null	Null	827
		SUICIDE	Null	160
			INCIDENT	1
			PSYCHIATRIC EVALUATI	
	ATTEMPTED SUICIDE	ATTEMPTED SUICIDE	MENTAL COMMIT	4
			PSYCHIATRIC EVALUATI	
			SUICIDE	2
		SUICIDE	INCIDENT	
			PSYCHIATRIC EVALUATI	2
			SUICIDE	
	MENTAL COMMIT	MENTAL COMMIT	INCIDENT	
			MENTAL COMMIT	16
			PSYCHIATRIC EVALUATI	
			SUICIDE	
		SUICIDE	DOMESTIC VIOLENCE RE	
			INCIDENT	3
			MENTAL COMMIT	
			PSYCHIATRIC EVALUATI	43
	SUICIDE	MENTAL COMMIT	PSYCHIATRIC EVALUATI	
		SUICIDE	CHILD ABUSE-SITUATIO	1
			DOMESTIC VIOLENCE RE	
			INCIDENT	
			MENTAL COMMIT	7
			NEGLIGENT USE OF A D	
			PSYCHIATRIC EVALUATI	41
			RUNAWAY	1
			SUICIDE	22
			UNATTENDED DEATH/DEA	1

APD Field Officers Often Respond To Calls For Service That Are For Other Kinds Of Incidents But Turn Into Mental Health Related Incidents

Category	Value
SUSP PERS/VEHS	195
FAMILY DISPUTE	113
DISTURBANCE	108
WELFARE CHECK	57
CONTACT	30
MISSING PERSON	19
RESCUE CALL	19
BURGLARY RES	15
THEFT/FRAUD/EMBE	12
STABBING	11
E911 HANG UP	10
ONSITE SUSPICIOU	10
SHOOTING	10
AGGR ASSAULT/BAT	8

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Source: APD Real Time Crime Center
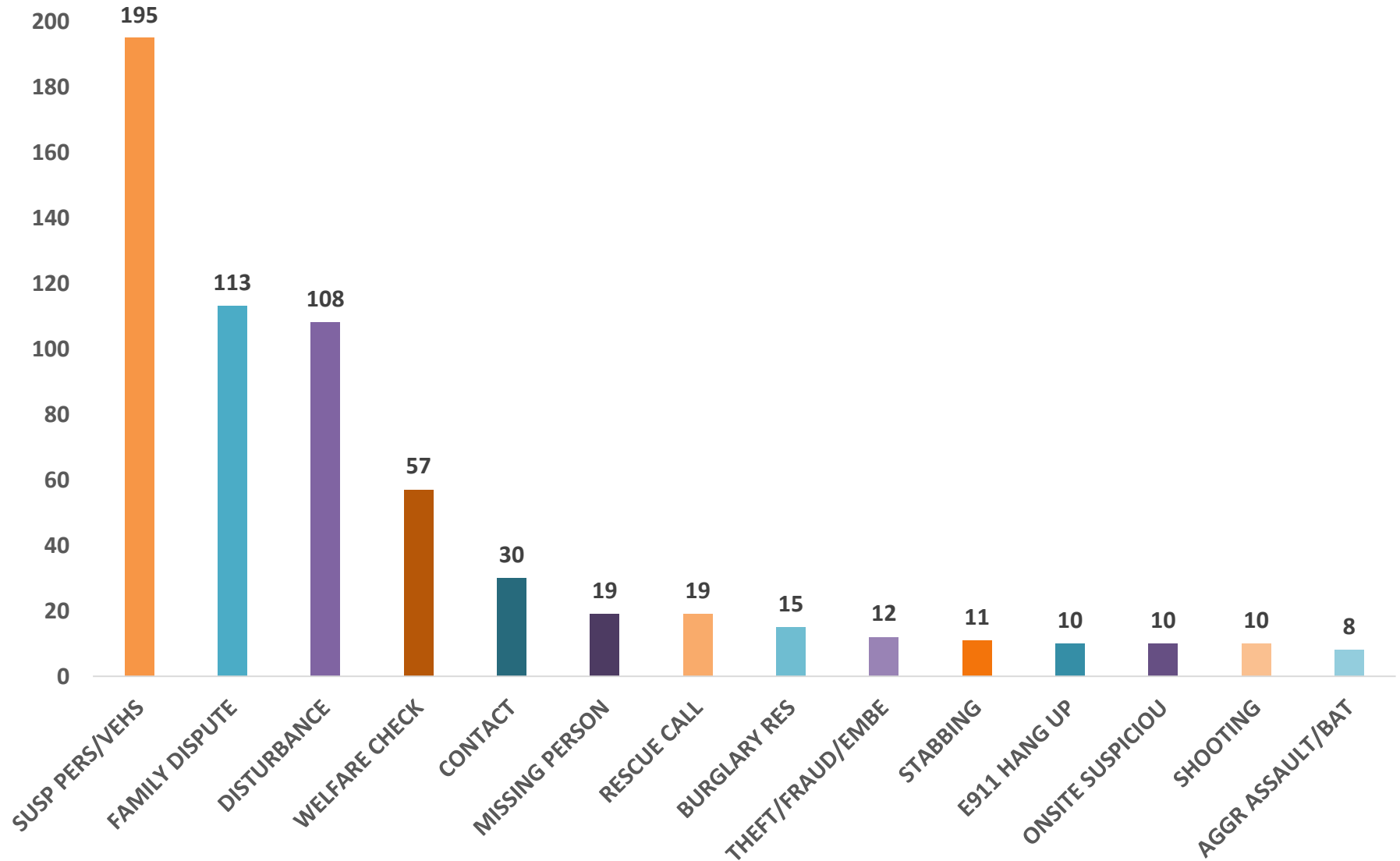
What Do We Know About Where These Calls Take Place?

In 2015, APD Field Officers Filed Reports On 3,114 Mental Commit, Suicide and Attempted Suicide Incidents
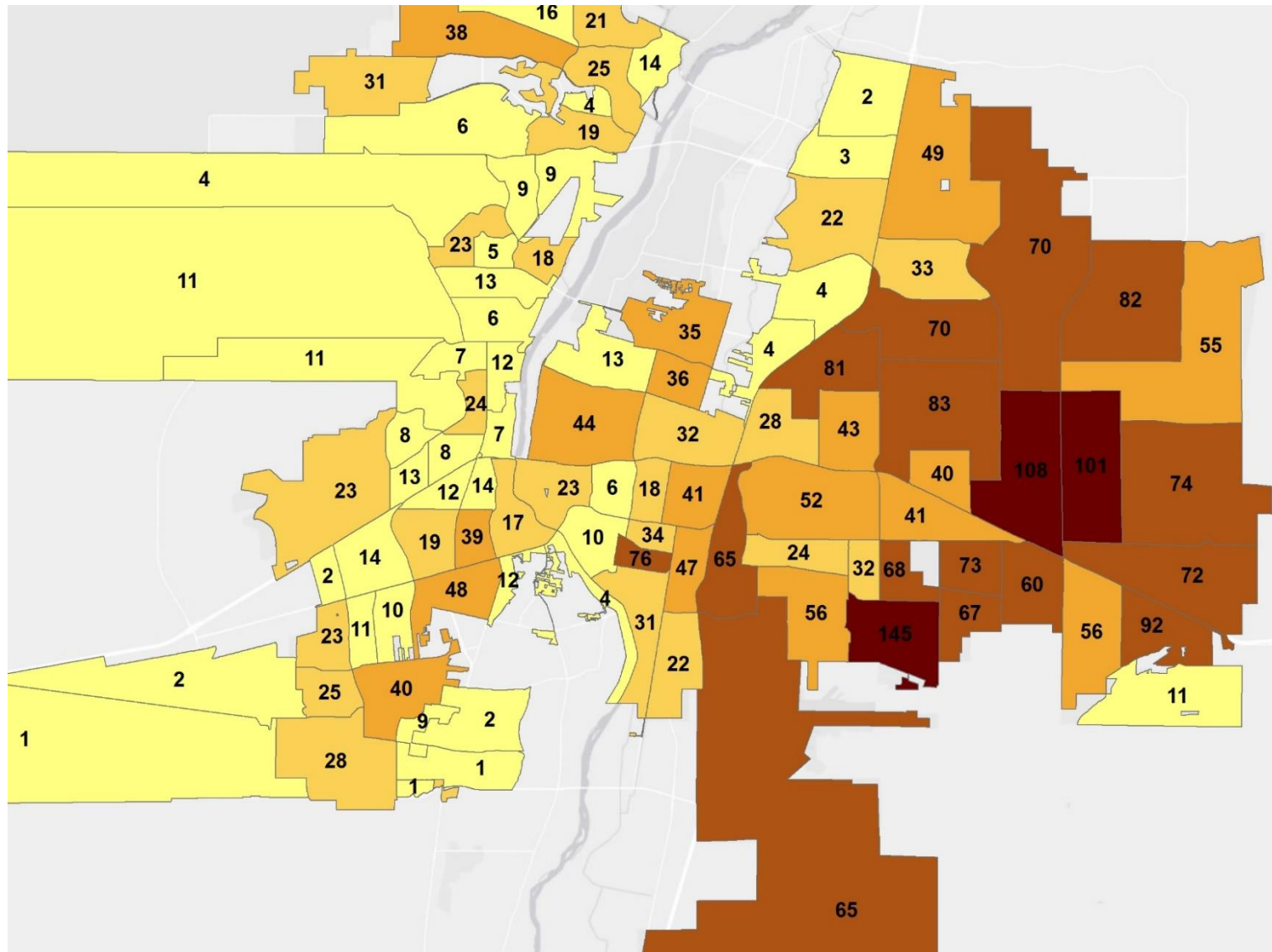
These incidents often are related to NM Statute 43-1-10: Emergency Mental Health Evaluation And Care.

Legend

Number Of Incidents Per Beat

- 1 - 16
- 17 - 34
- 35 - 56
- 57 - 92
- 93 - 145

APD CIU RTCC
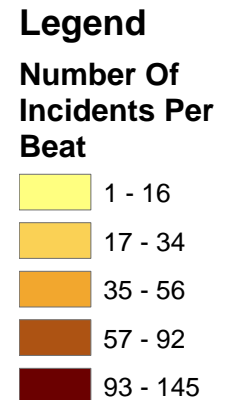
In 2015, Field Officers In These Beats Provide 1,634 Transports To Emergency Facilities

Legend: 1 - 9 | 10 - 17 | 18 - 27 | 28 - 43 | 44 - 74

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Source: APD Real Time Crime Center
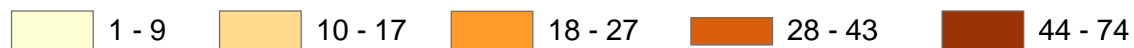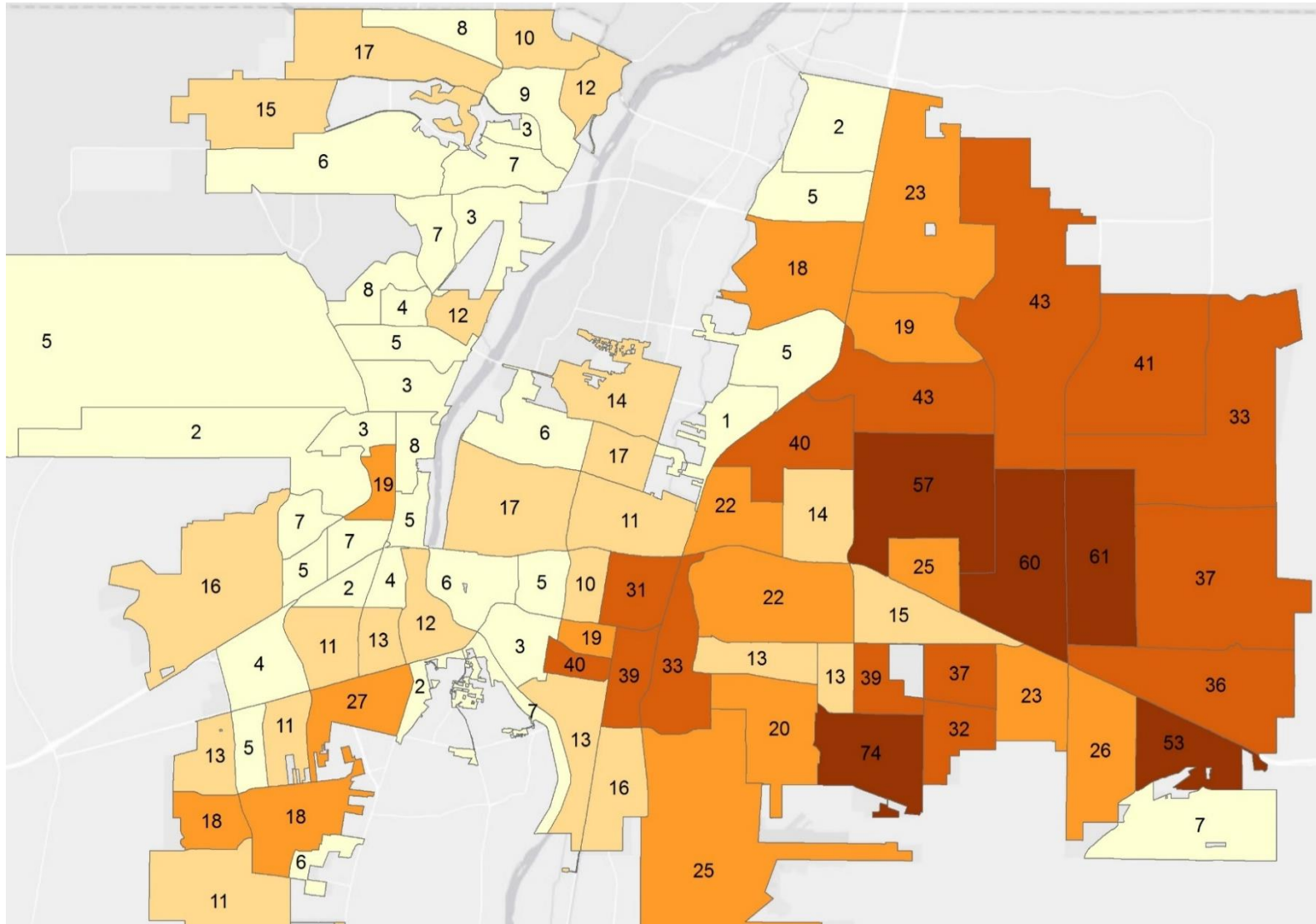
In 2015, These Emergency Facilities Received Most Of The Individuals Transported

Bar chart showing individuals transported by facility:
- UNM: 651
- Kaseman: 464
- Presbyterian: 173
- Lovelace: 157
- VA: 74
- Women's Hospital: 45
- Rust Medical Center: 30
- Haven Behavioral Hospital: 6

APD CIU RTCC

Source: APD Real Time Crime Center
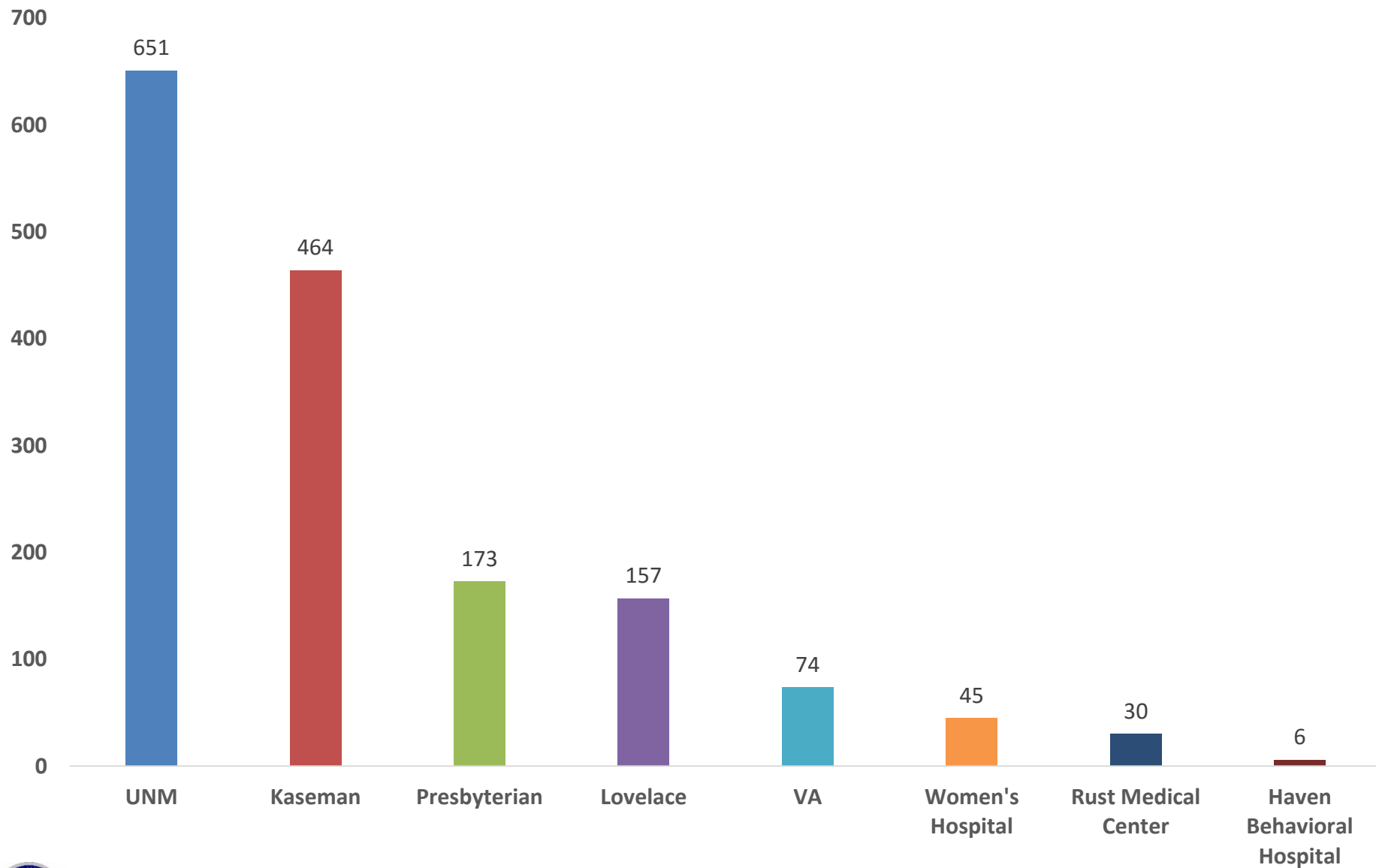
Transporting Individuals In Crisis To Emergency Facilities Rather Than Jail Is Critically Important

Legend

Number Of Transports To Emergency Facilities

- 2 - 6
- 7 - 50
- 51 - 92
- 93 - 225
- 226 - 464
- 465 - 652

Number Of Transports By Beat

- 1 - 9
- 10 - 17
- 18 - 27
- 28 - 43
- 44 - 74

APD CIU RTCC
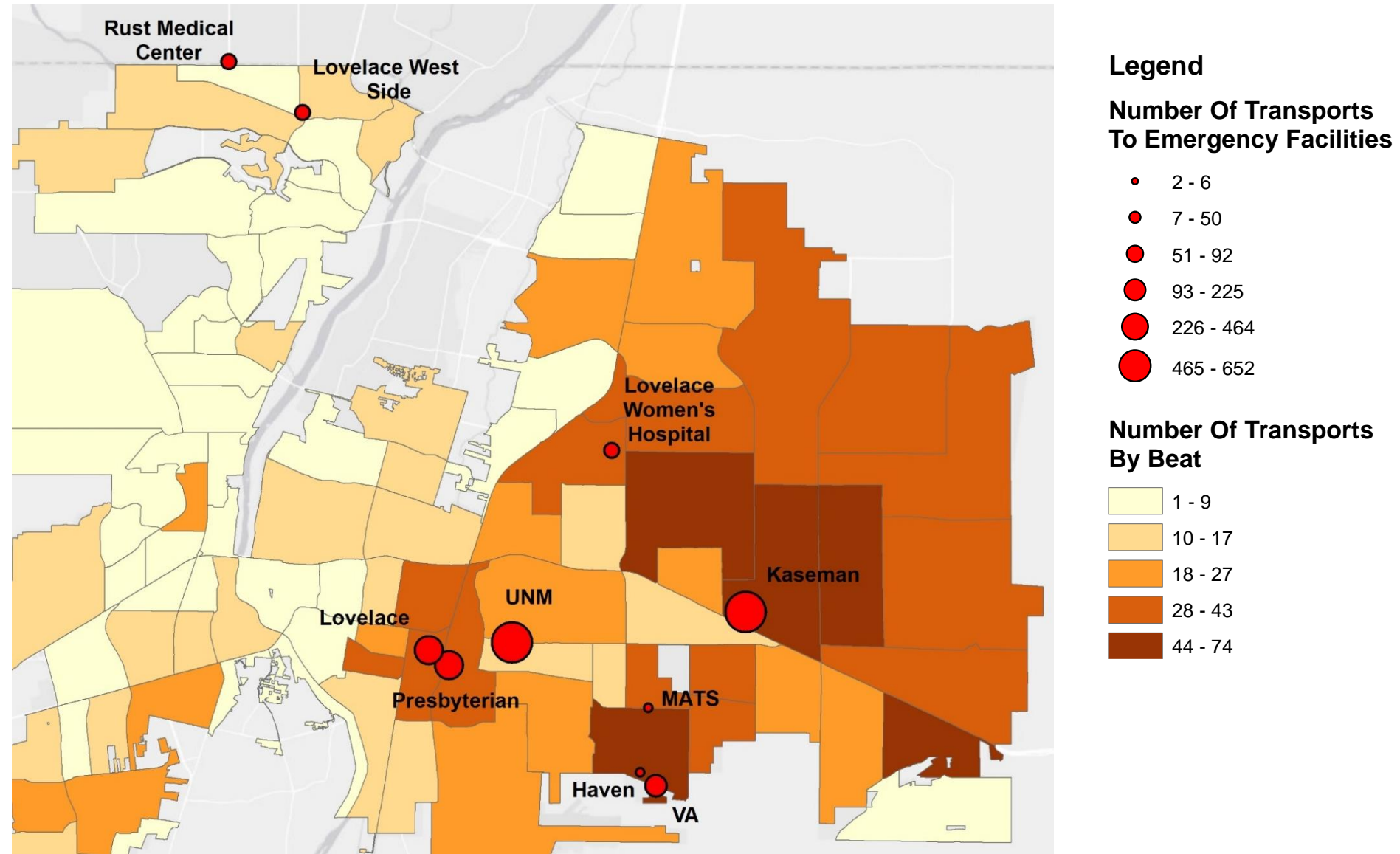
What Do We Know About When These Calls Take Place?

These 5,616 Calls For Service Happen More At Certain Times Of The Day And Days Of The Week

	Sunday	Monday	Tuesday	Wednesday	Thursday	Friday	Saturday	Time Totals
Midnight to Six AM	2.3%	2.2%	1.9%	1.8%	2.0%	1.6%	2.3%	14.2%
Six AM To Noon	2.4%	2.8%	3.1%	2.8%	2.8%	2.9%	2.1%	19.0%
Noon To Six PM	3.9%	5.8%	5.3%	5.0%	5.8%	4.5%	3.7%	34.0%
Six PM To Midnight	4.5%	5.2%	4.5%	4.7%	4.8%	4.6%	4.6%	32.8%
Day Totals	13.1%	15.9%	14.8%	14.3%	15.4%	13.6%	12.8%	5,616

APD CIU RTCC

Source: APD Real Time Crime Center

The Number Of Calls Increase As The Day Goes On

Mondays and **Thursdays** From Noon To Six PM Are High Volume For Mental Patient And Suicide Calls For Service

Midnight to Six AM — Six AM To Noon — Noon To Six PM — Six PM To Midnight

—Sunday —Monday —Tuesday —Wednesday —Thursday —Friday —Saturday

Source: APD Real Time Crime Center
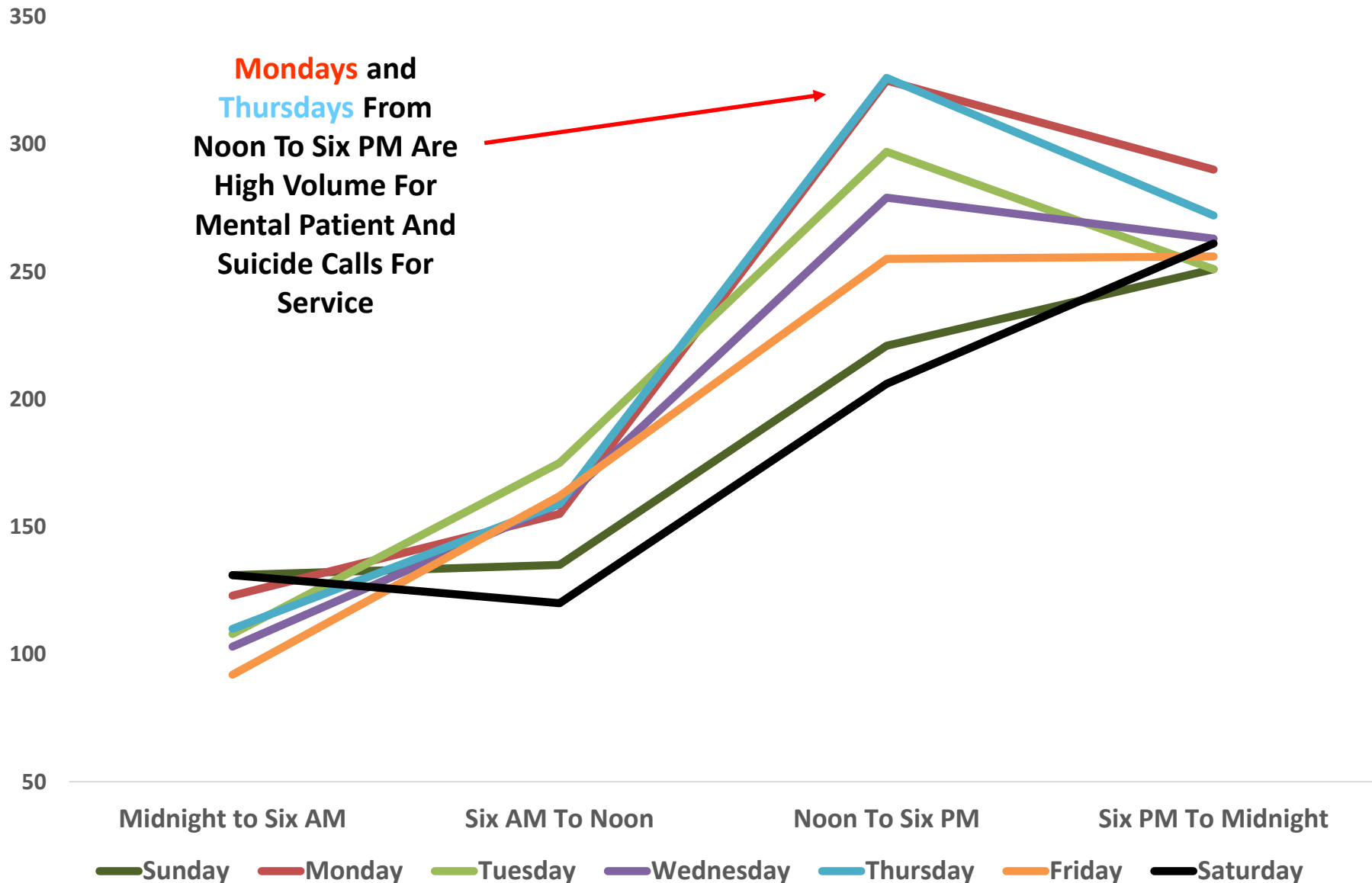
If We Unpack The Calls For Service Using The Statute Description, We See That Psychiatric Evaluations and Mental Commit Account For Most Of The Increase

These Data Are Based On The 3,114 CIT-Related Reports Filed By Field Officers In 2015

Legend: DOMESTIC VIOLENCE RE — INCIDENT — MENTAL COMMIT — PSYCHIATRIC EVALUATI — SUICIDE

X-axis: Midnight To Six, Six To Noon, Noon To Six, Six To Midnight

Y-axis: 0, 100, 200, 300, 400, 500, 600

Source: APD Real Time Crime Center
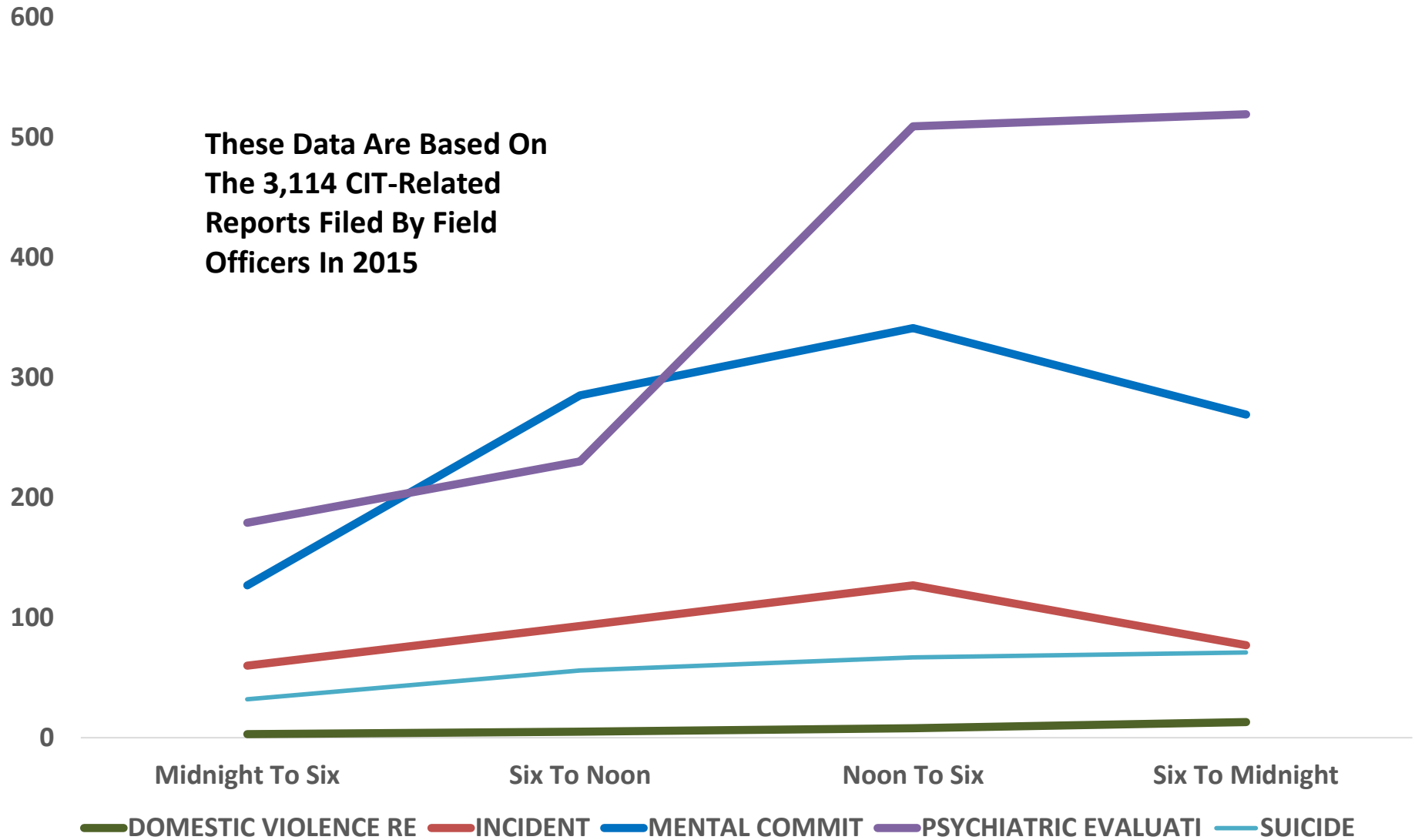
If We Unpack The Calls For Service Using The ARS Incident Type, We See That Calls Related to NM Statute 43-1-10: Emergency Mental Health Evaluation Account For Most Of The Increase

These Data Are Based On The 3,114 CIT-Related Reports Filed By Field Officers In 2015

Legend: ATTEMPTED SUICIDE, MENTAL COMMIT, SUICIDE

X-axis: Midnight To Six, Six To Noon, Noon To Six, Six To Midnight

Source: APD Real Time Crime Center

APD CIU RTCC
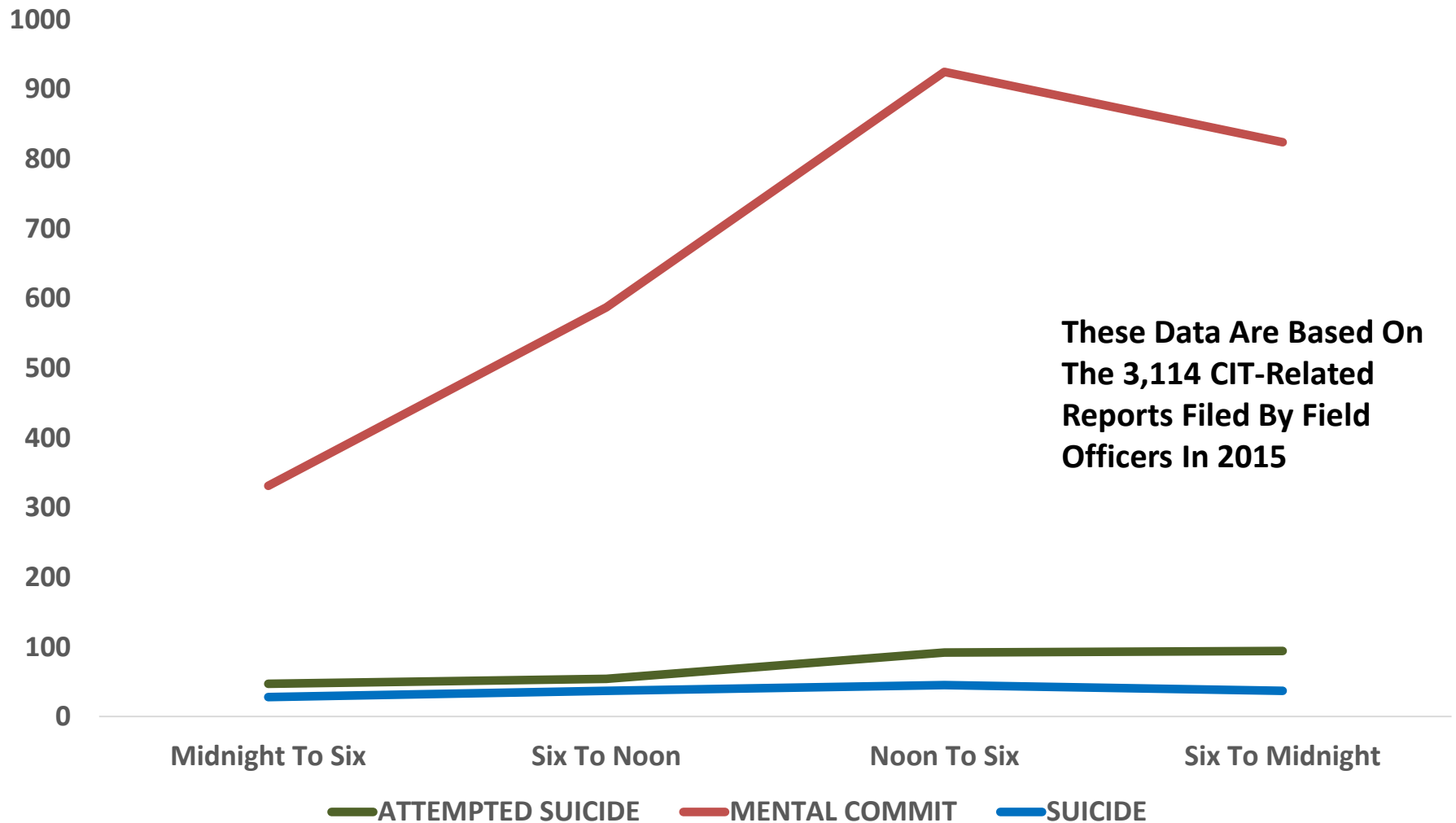
Type Of Call By Time Of Day and Day Of Week
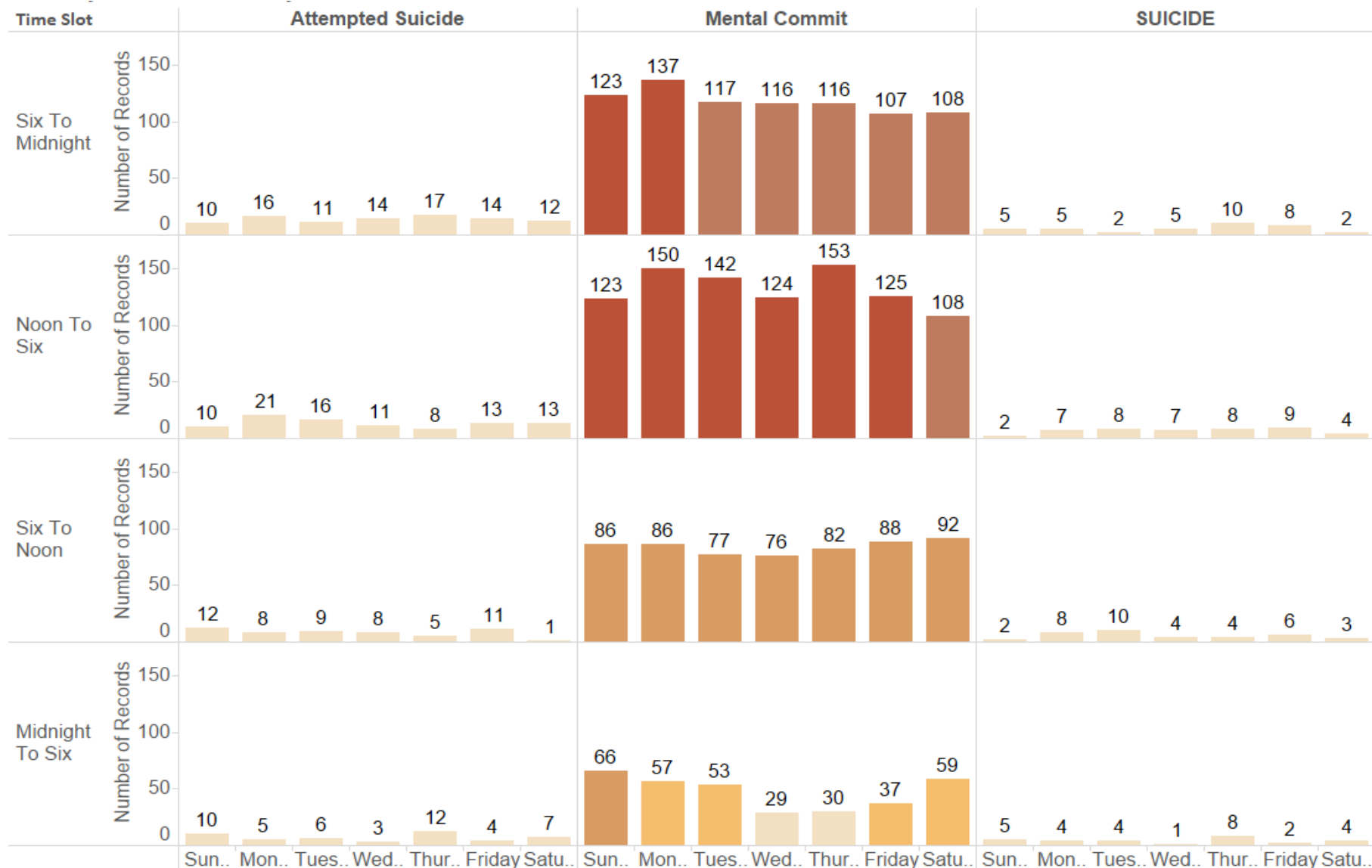
An Exploratory Analyses Of Age And Time (206 CIU-Related Calls In February, 2016)

Source: APD Real Time Crime Center; Crisis Intervention Unit

APD CIU RTCC
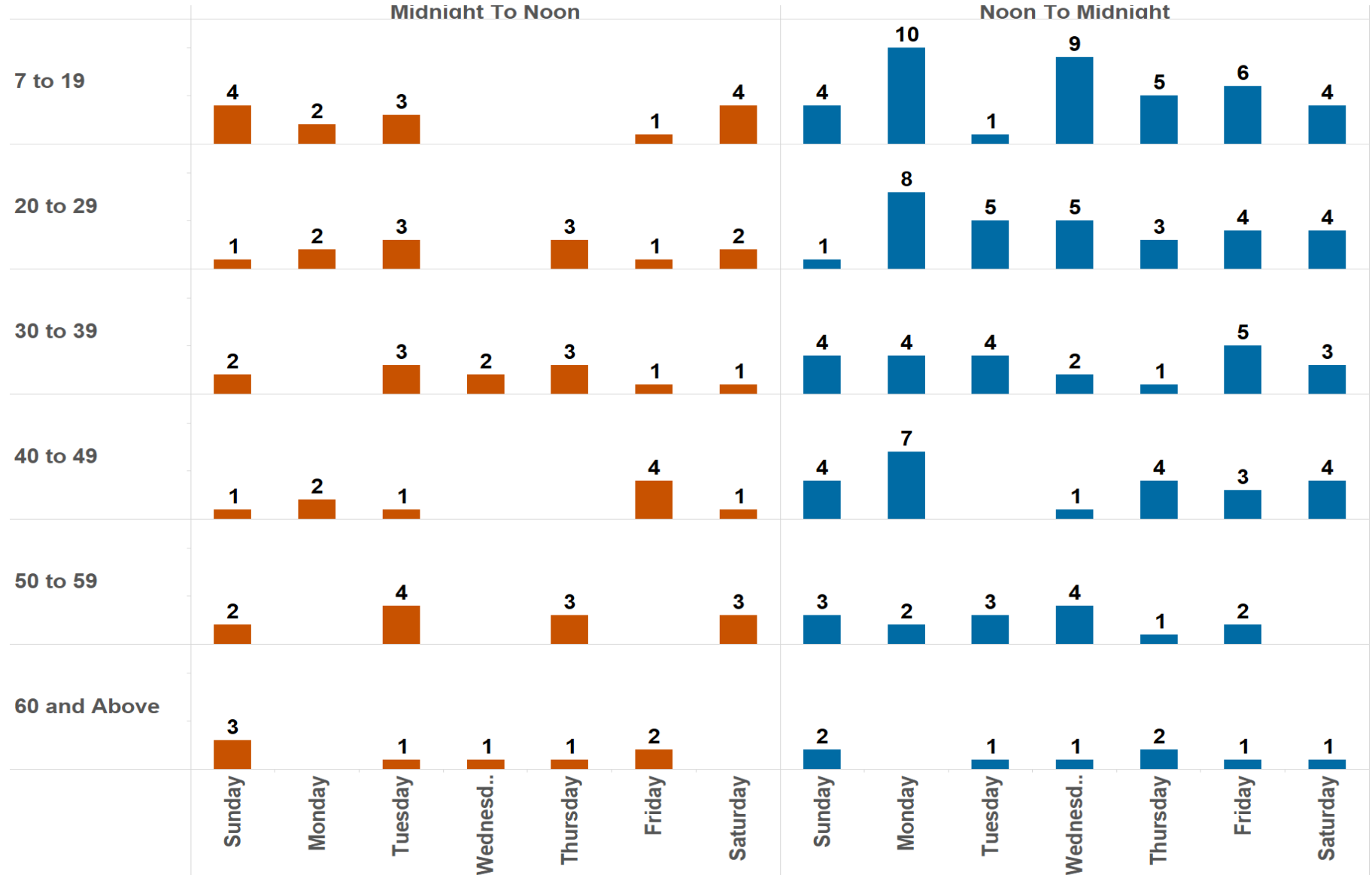
An Exploratory Analyses Of Gender And Time (206 CIU-Related Calls In February, 2016)

APD CIU RTCC
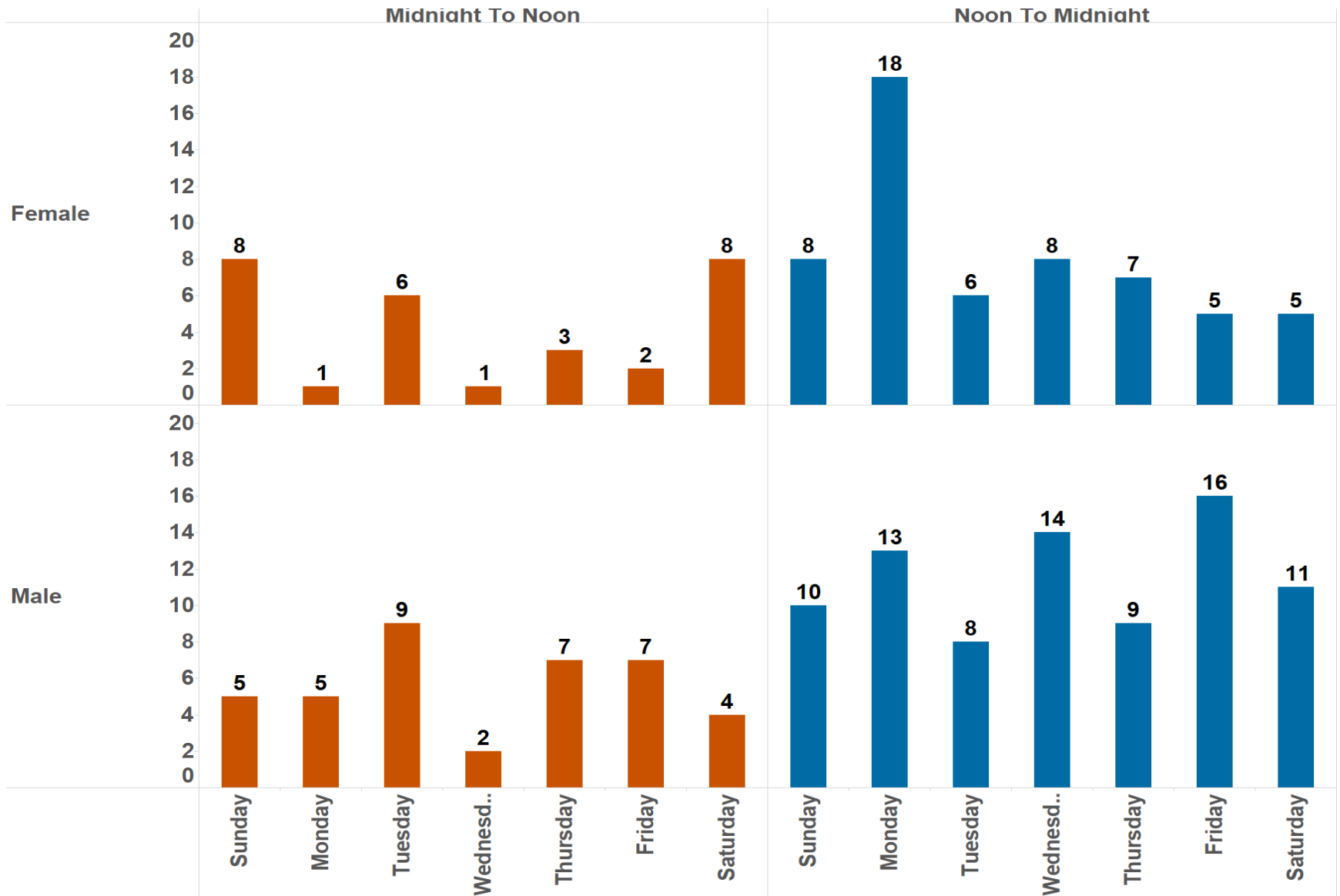
An Exploratory Analysis Of 78 CIT-Related Calls For Youth Age 12-18 By Time And Weekday (Monday-Friday)

Source: APD Real Time Crime Center; Crisis Intervention Unit
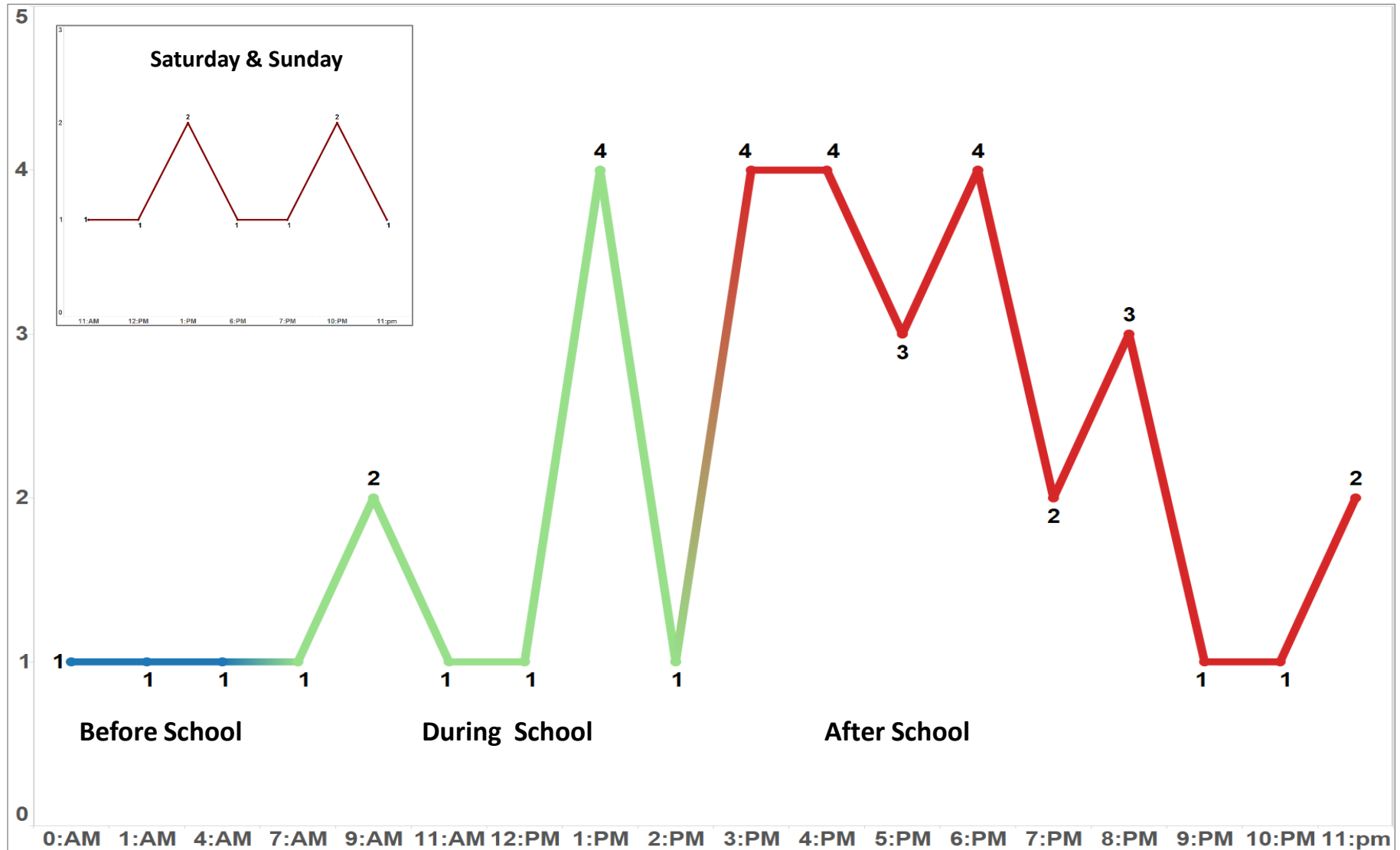
What Do We Know About Mental Health Evaluation Calls When We Put Time And Place Together?

Data Question: Why Is There Such A Range Among Beats?

Policy Question: How Can APD And Its Partners Make Effective Use Of This Information?

These Are Beats With 20 Or More Mental Commit Calls During 2015

The Percentage Of Increase In Mental Health Evaluation Calls Vary By Time Of Day Varies By Beat

(Beats With 20 Or More Mental Commit Calls During 2015)
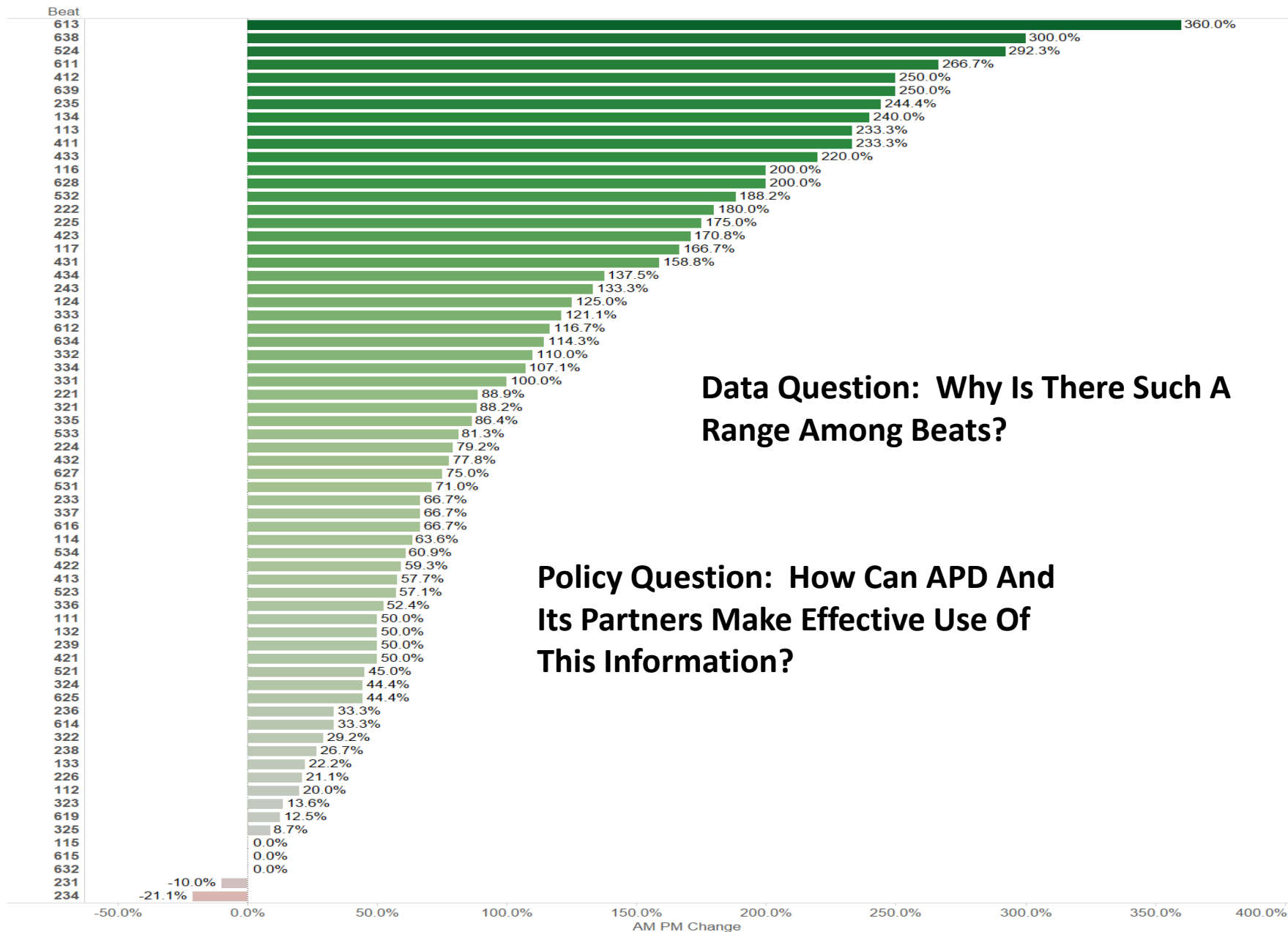
Numbers In White Are Beats

Legend

AM_PM_Change

- -21.1% - 33.3%
- 33.4% - 86.4%
- 86.5% - 137.5%
- 137.6% - 220.0%
- 220.1% - 360.0%

APD CIU RTCC

Source: APD Real Time Crime Center

64

Beat 524 Had 64 Mental Health Evaluation Reports In 2015
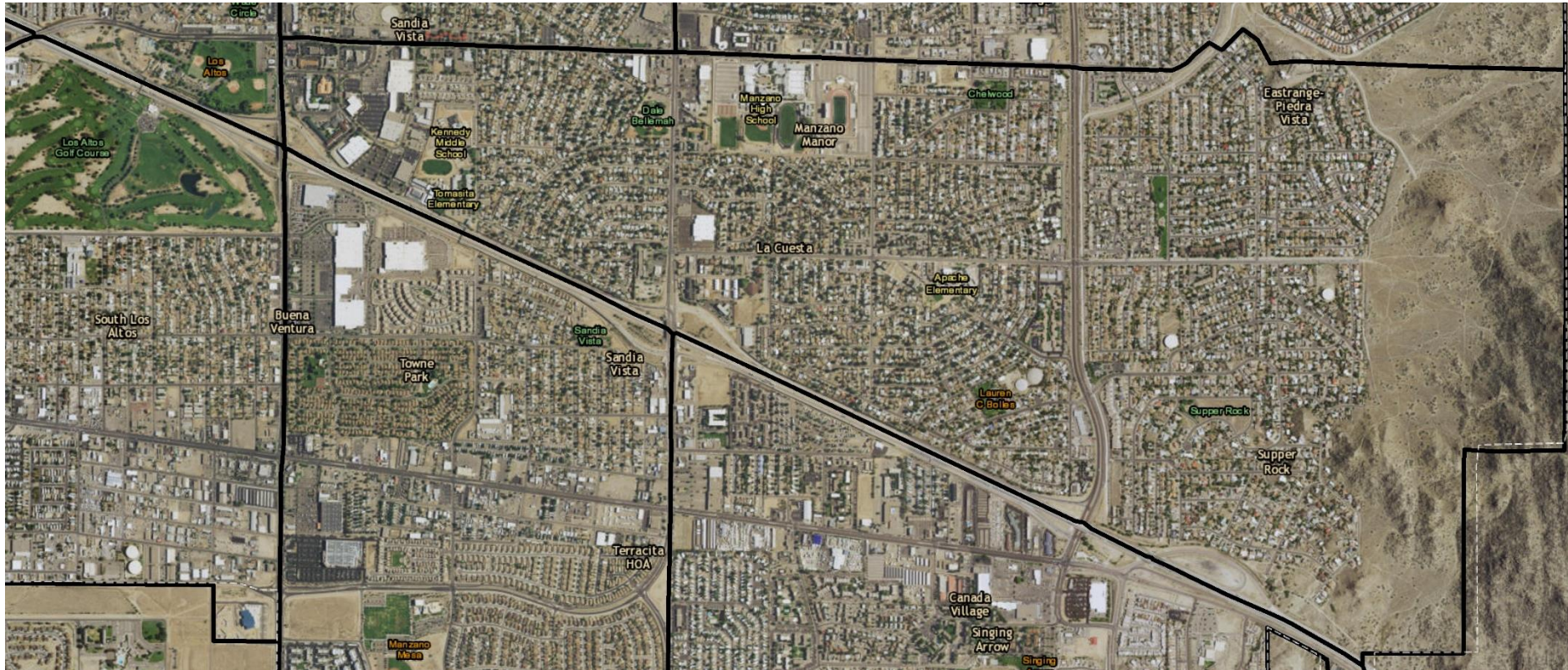
Time	#	%
Midnight To Six	4	6.3%
Six To Noon	9	14.1%
Noon To Six	28	43.8%
Six To Midnight	23	35.9%
Totals	64	100%

APD CIU RTCC

Source: APD Real Time Crime Center

How Can We Learn More About The 3,758 Calls For Service Classified As Suicide In 2015?

Critical Context: The NM Office Of The Medical Investigator Reported These Completed Suicides For Bernalillo County, 2005 - 2014

Number Of Suicides

2005	2006	2007	2008	2009	2010	2011	2012	2013	2014
104	118	131	134	142	127	137	146	147	147

Source: The New Mexico Office Of The Medical Investigator, Annual Report 2014
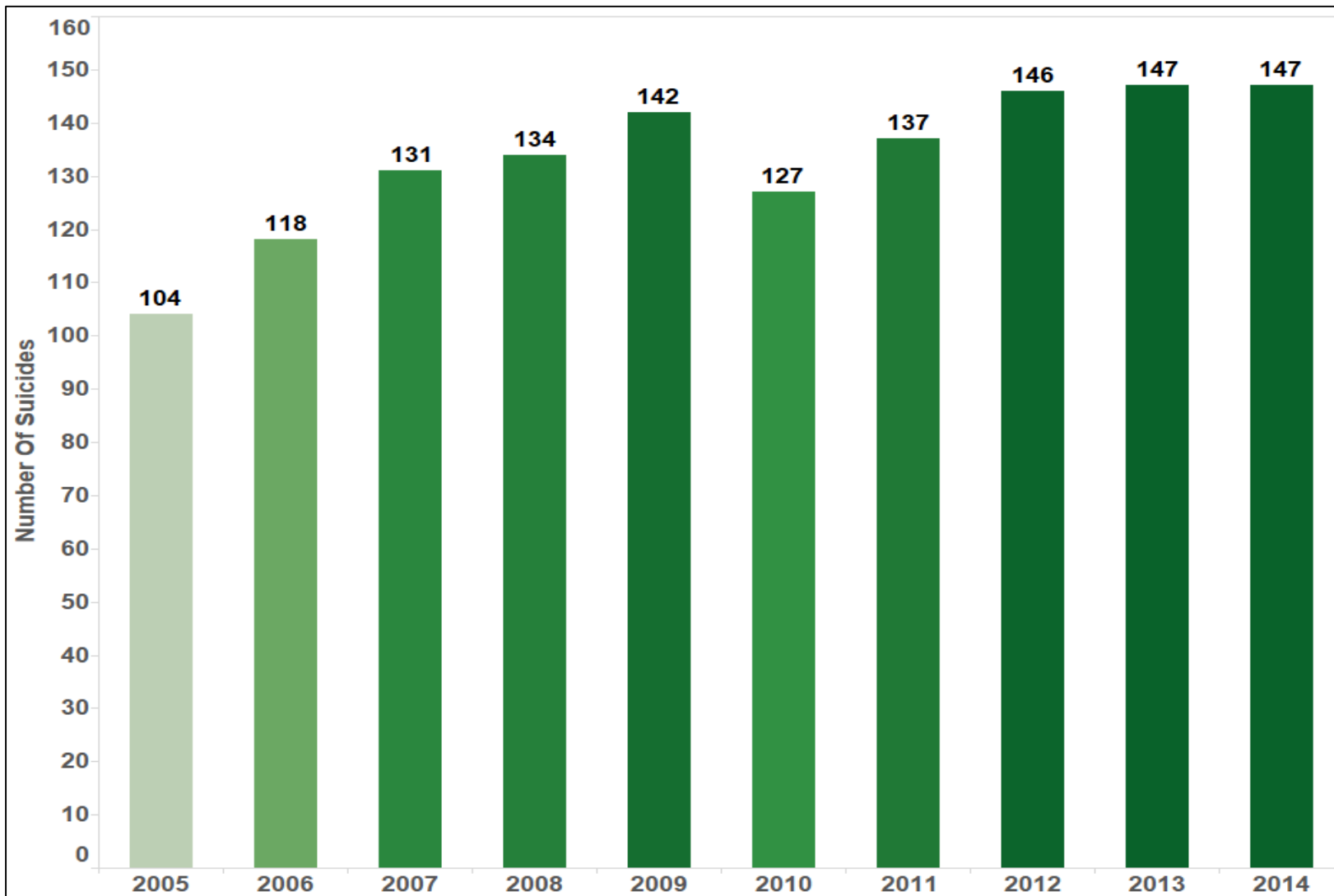
We Need To Unpack The Data Labeled Suicide In Order To Conduct Analyses And Communicate With The Public And Other Stakeholders

APD CIU RTCC
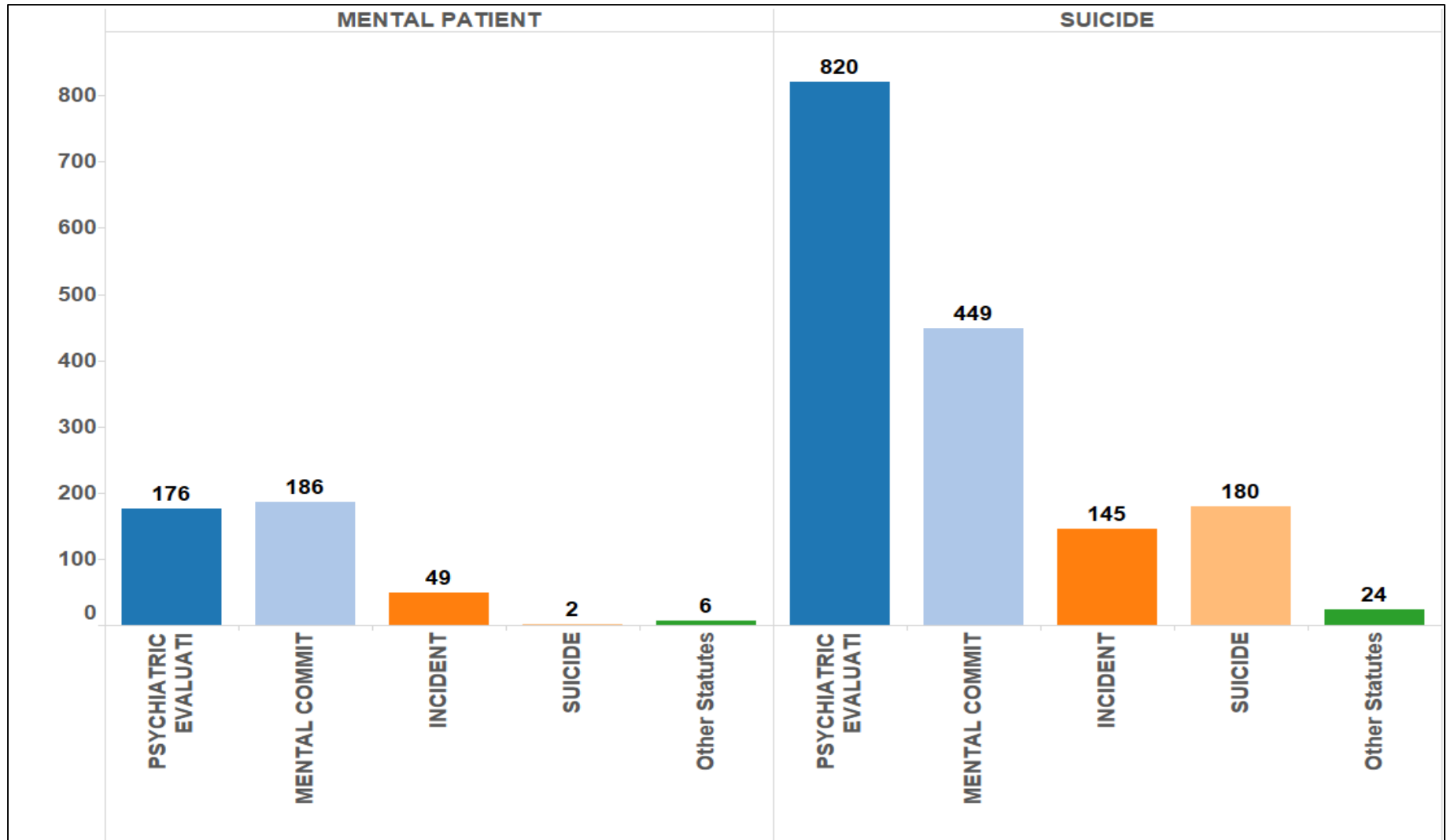
Labels Matter

What Albuquerque Looks Like When We Map The 65 Incidents That Are Labeled As "Suicide" At All Levels Of Reporting
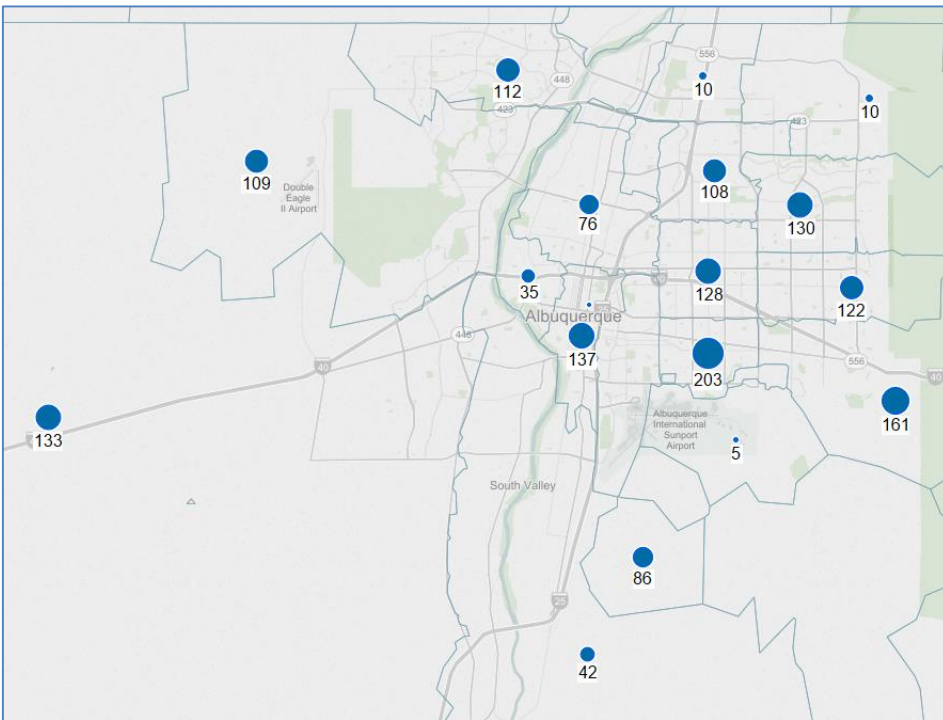
What Albuquerque Looks Like When We Map All 1,618 Calls For Service That Are Labeled As "Suicide"

APD CIU RTCC
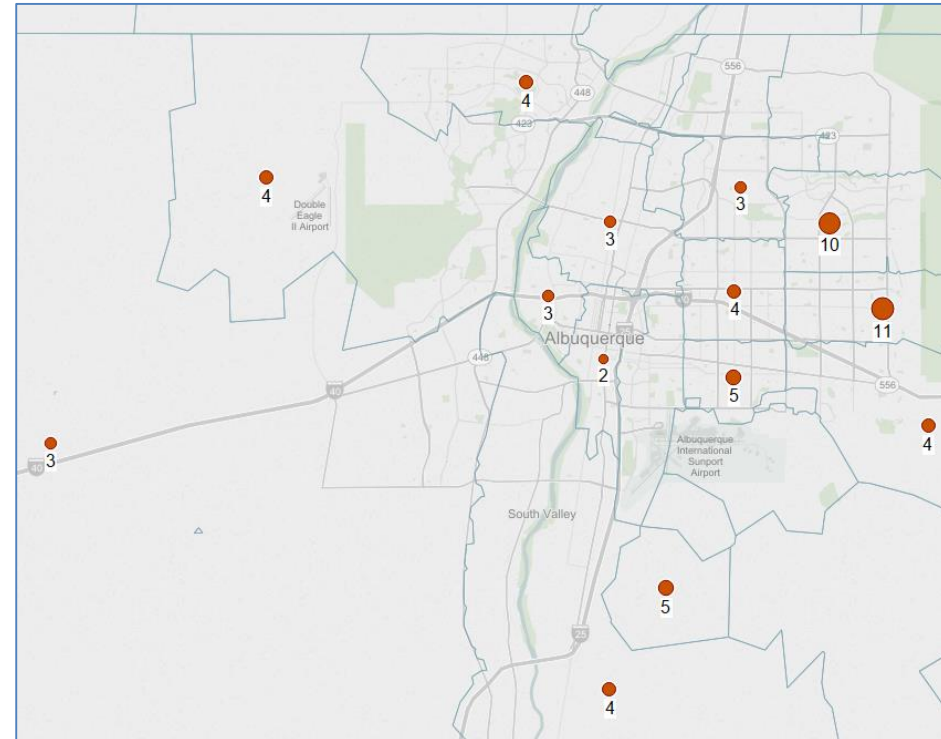
It Is Important To Note That A Review Of 56 Incident Reports Indicate That Even Those Incidents Categorized As Suicide At All Levels Of The Reporting System Were Related To Suicide Incidents Or Attempts, But Were Not Often Completed Suicides
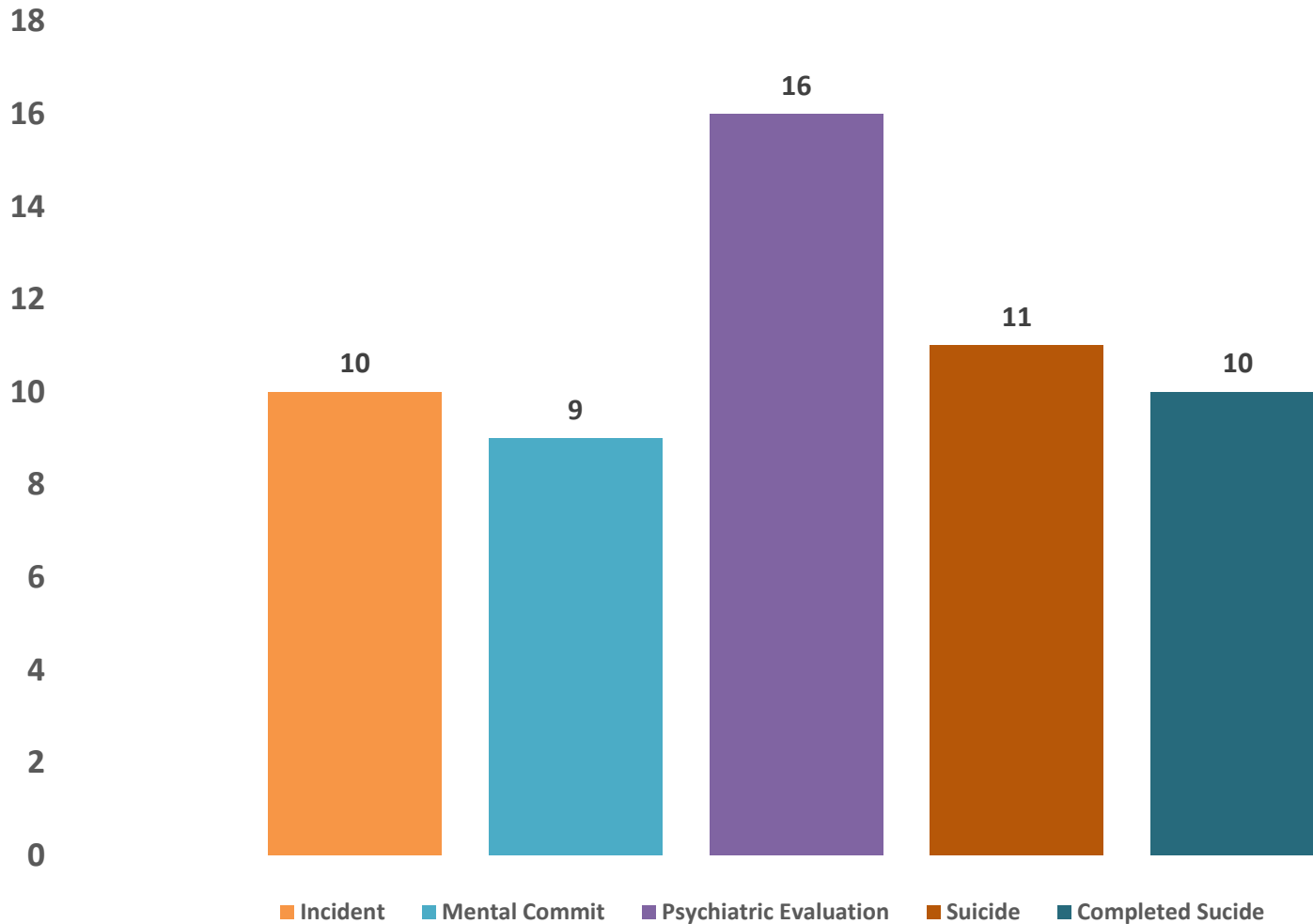
Labels Uses In The Offense/Incident Box Of The New Mexico
Uniform Incident Report

What Do We Know About The Individuals In Crisis That Come In Contact With The Crisis Intervention Unit?

Individuals On The CIU Detectives' Case Loads Meet These Criteria

CIU detectives shall limit their intake to Police Referrals only, unless exigent circumstances exist. These referrals should have the following criteria:

a. Availability of weapons
b. Substantiated statements to commit, or the actual commitment of a violent or dangerous act
c. Personal history, known or provided, that reflects prior violence under similar circumstances
d. Any corroborating information that would lead a CIU detective to believe the individual is a danger to others or displays escalating behavior

Number of Individuals On CIU Detectives' Case Loads By Month From September, 2015 To March, 2016
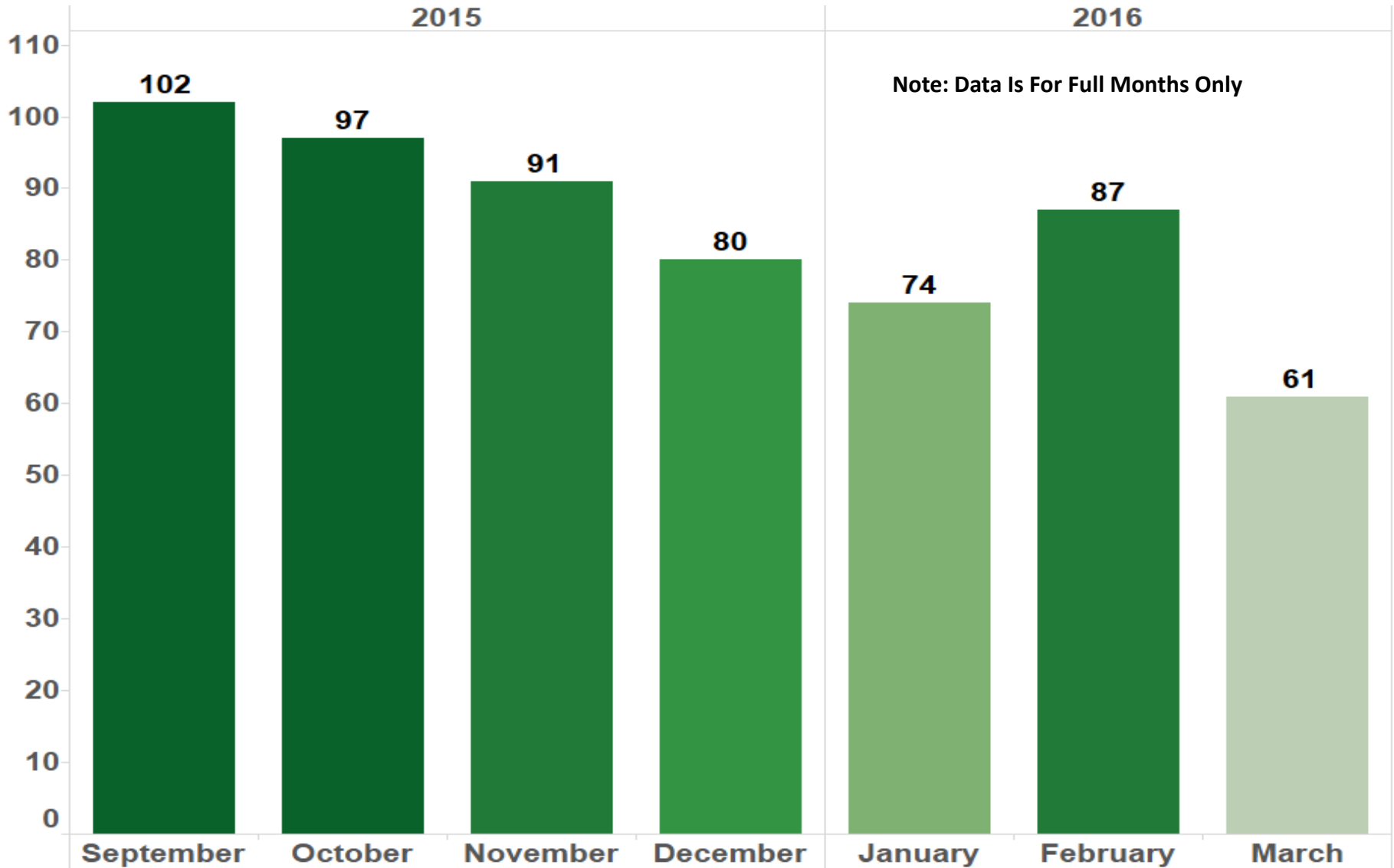
Source: APD Crisis Intervention Unit

APD CIU RTCC

73

CIU Detectives Worked With 105 Unique Individuals From August 17, 2015 To April 8, 2016: Age

APD CIU RTCC

Source: APD Crisis Intervention Unit
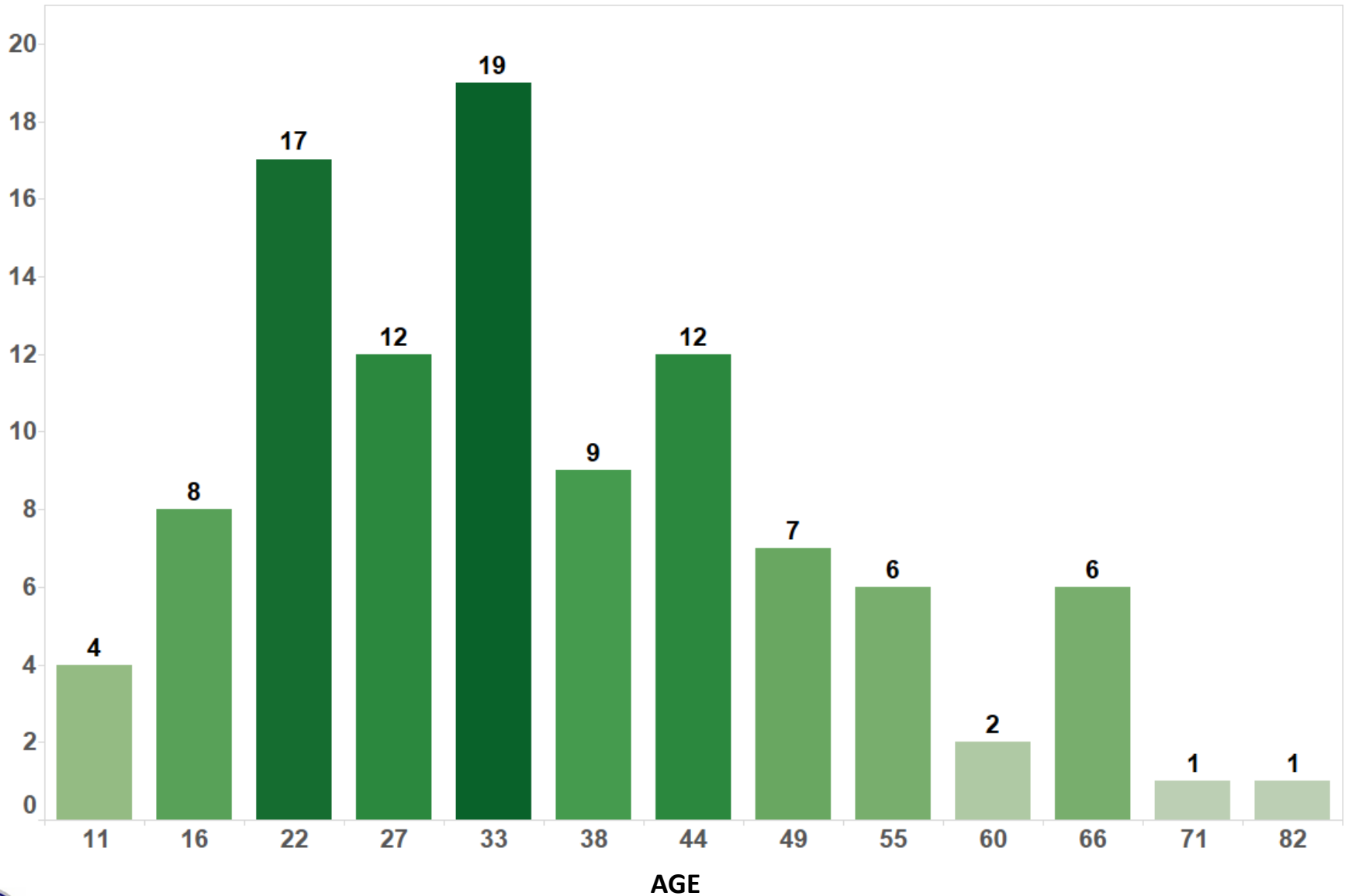
CIU Detectives Worked With 105 Unique Individuals From August 17, 2015 To April 8, 2016: Gender, Race/Ethnicity

Source: APD Crisis Intervention Unit

APD CIU RTCC
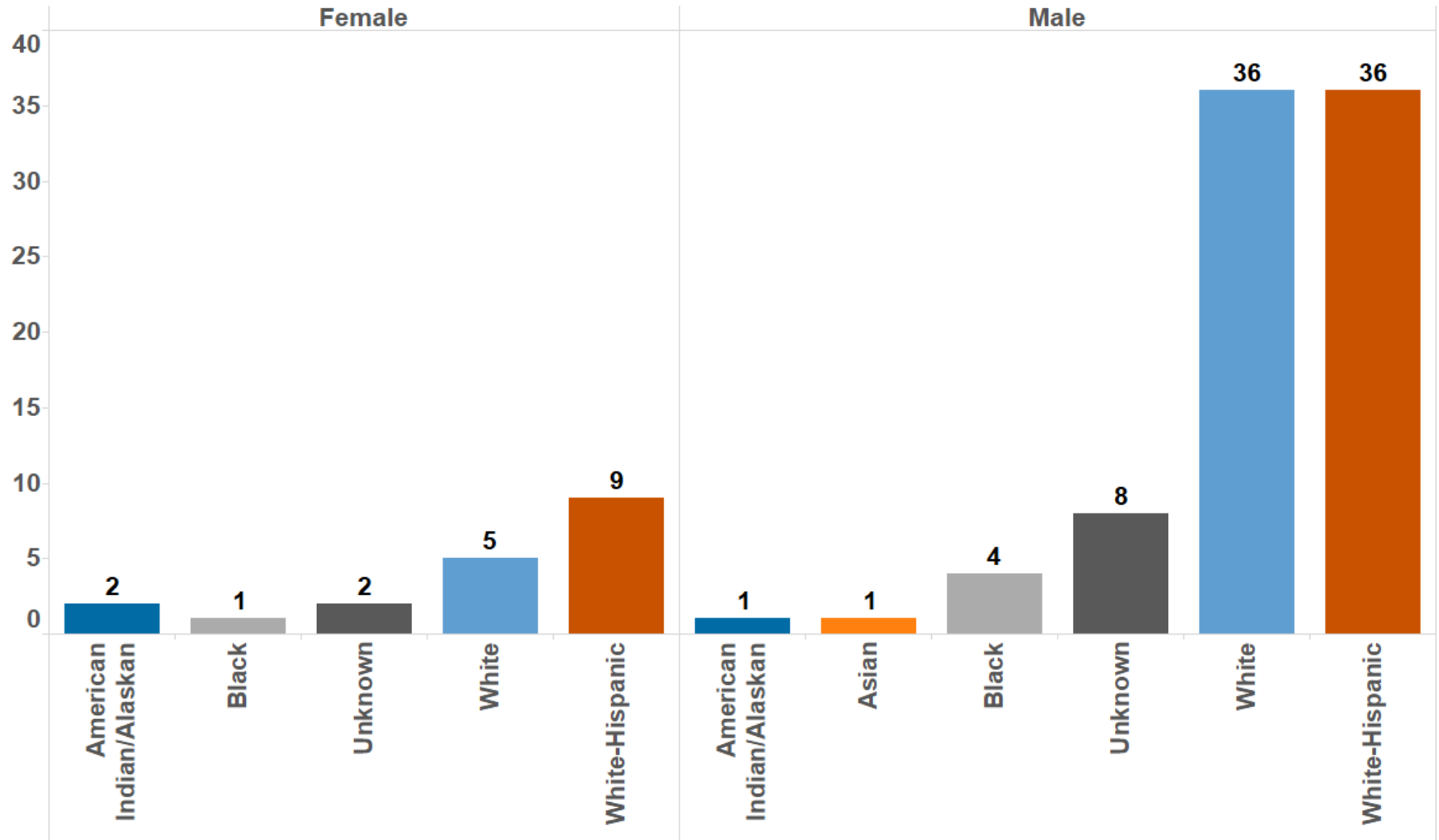
CIU Detectives Worked With 105 Unique Individuals From August 17, 2015 To April 8, 2016: U.S. Veteran Status By Gender

APD CIU RTCC

Source: APD Crisis Intervention Unit
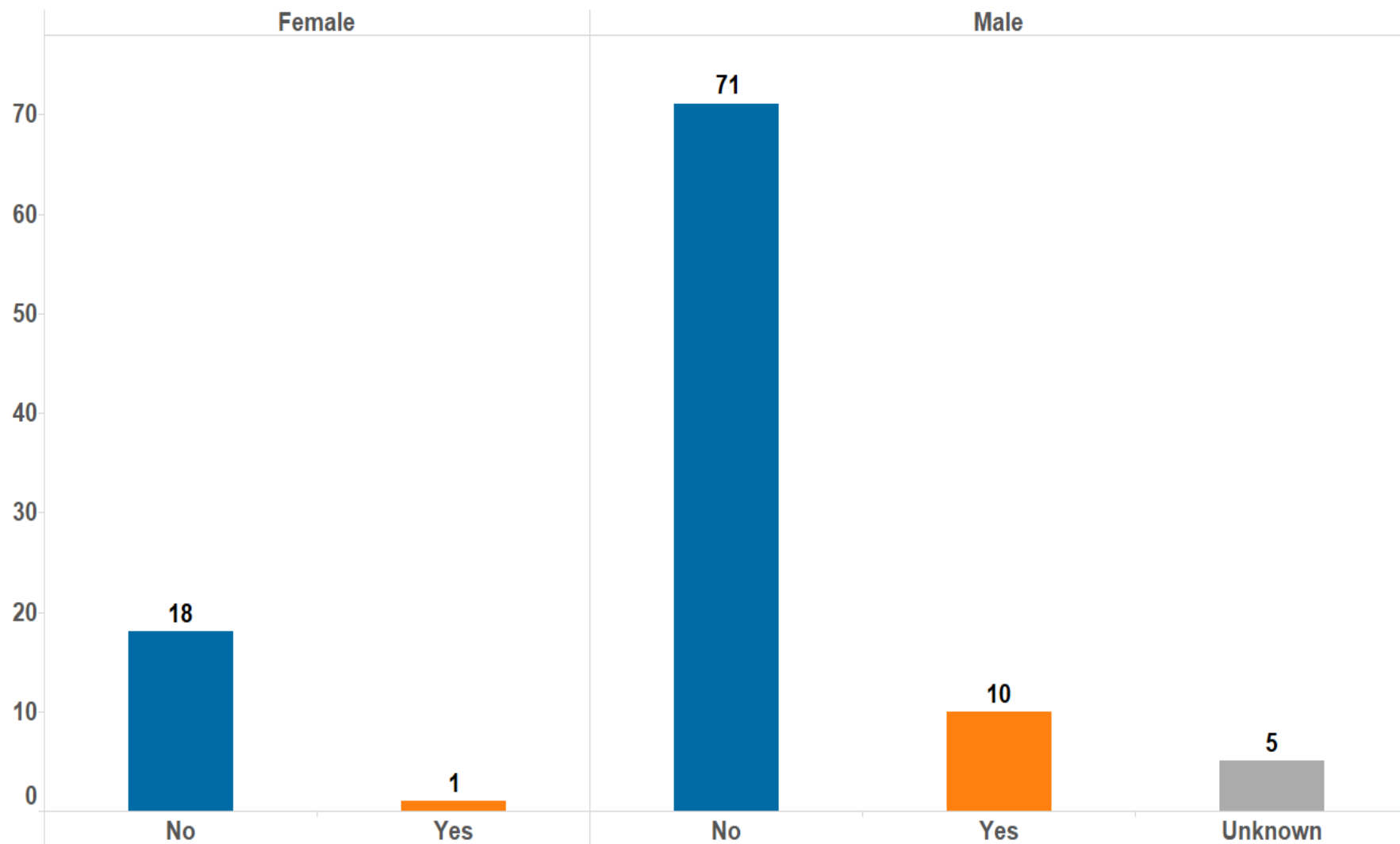
Many Of The Individuals On The CIU Detectives' Case Loads Require Multiple Face-To-Face Contacts

There Were No Uses Of Force By CIU Detectives During Any Of These Contacts

Chart values:
- 1 To 2 Contacts: 49.0%
- 3 to 4 Contacts: 16.7%
- 5 to 8 Contacts: 6.9%

Source: APD Crisis Intervention Unit
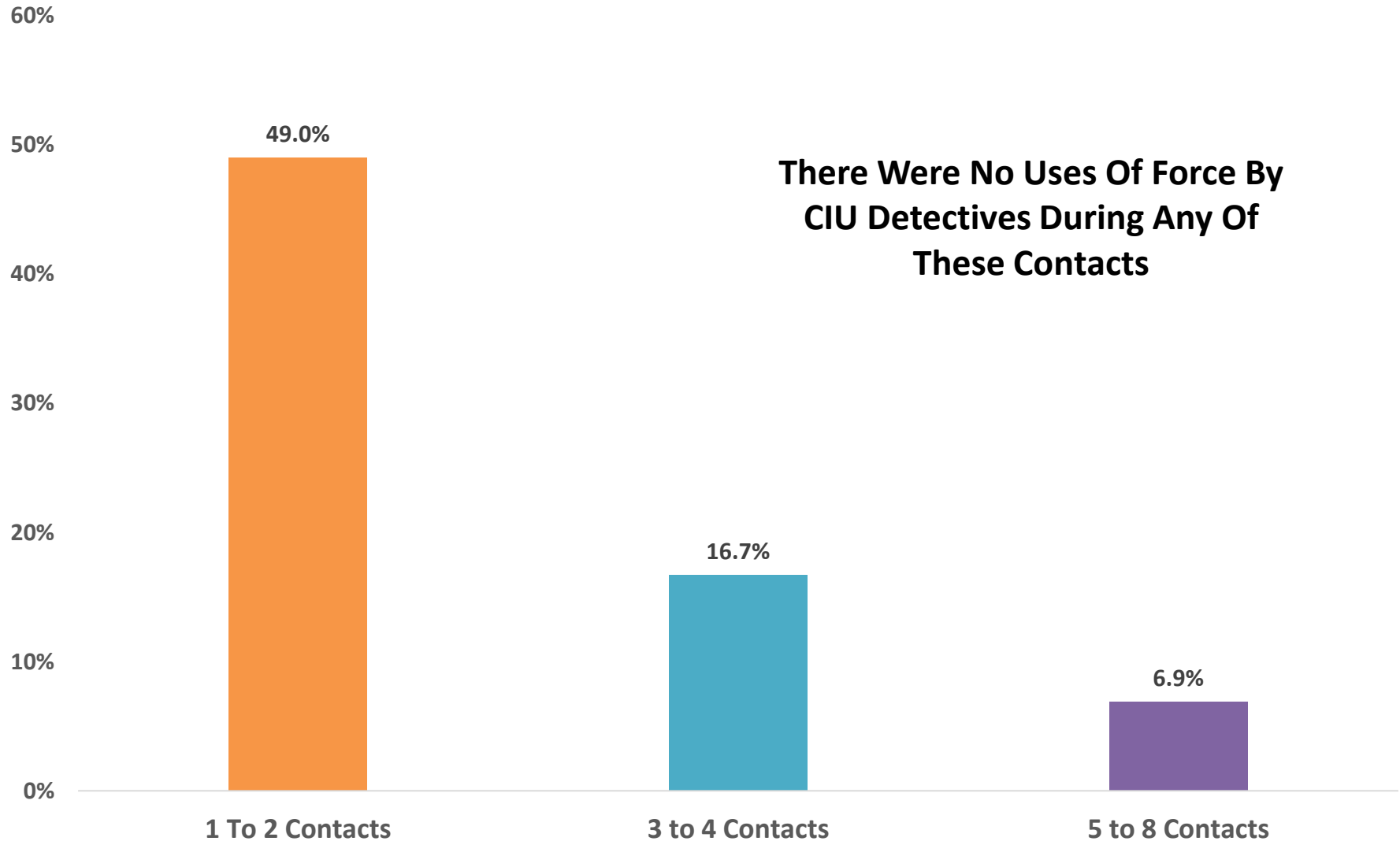
Risk Assessments
(Chapter 43 NMSA 1978 Definitions)

Danger To Others

"Likelihood of Serious Harm to Others" means that it is **more likely than not** that in the near future a person will inflict serious, unjustified bodily harm on another person or commit a criminal sexual offense, as evidenced by behavior causing, attempting or threatening such harm, which behavior gives rise to a reasonable fear of such harm from the person.

Danger To Self

"Likelihood of Serious Harm to Oneself" means that **more likely than not** that in the near future the person will attempt to commit suicide or will cause serious bodily harm to the persons self by violent or other self-destructive means, including but not limited to grave passive neglect.

The Individuals On The CIU Detective Case Loads By Risk Assessment And Gender

Source: APD Crisis Intervention Unit

APD CIU RTCC
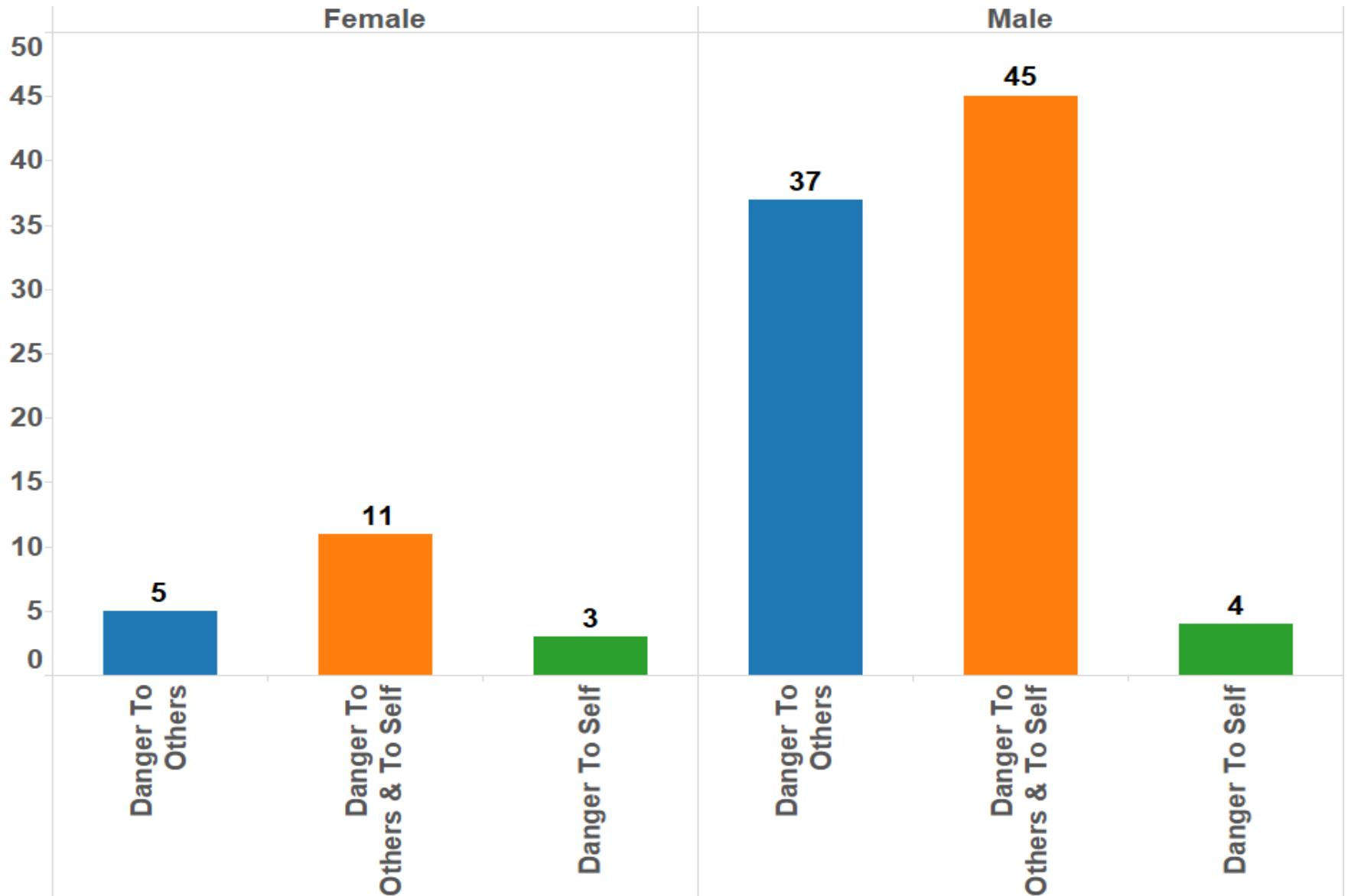
Were Drugs Involved In The Initial Encounter?

Source: APD Crisis Intervention Unit

APD CIU RTCC

80
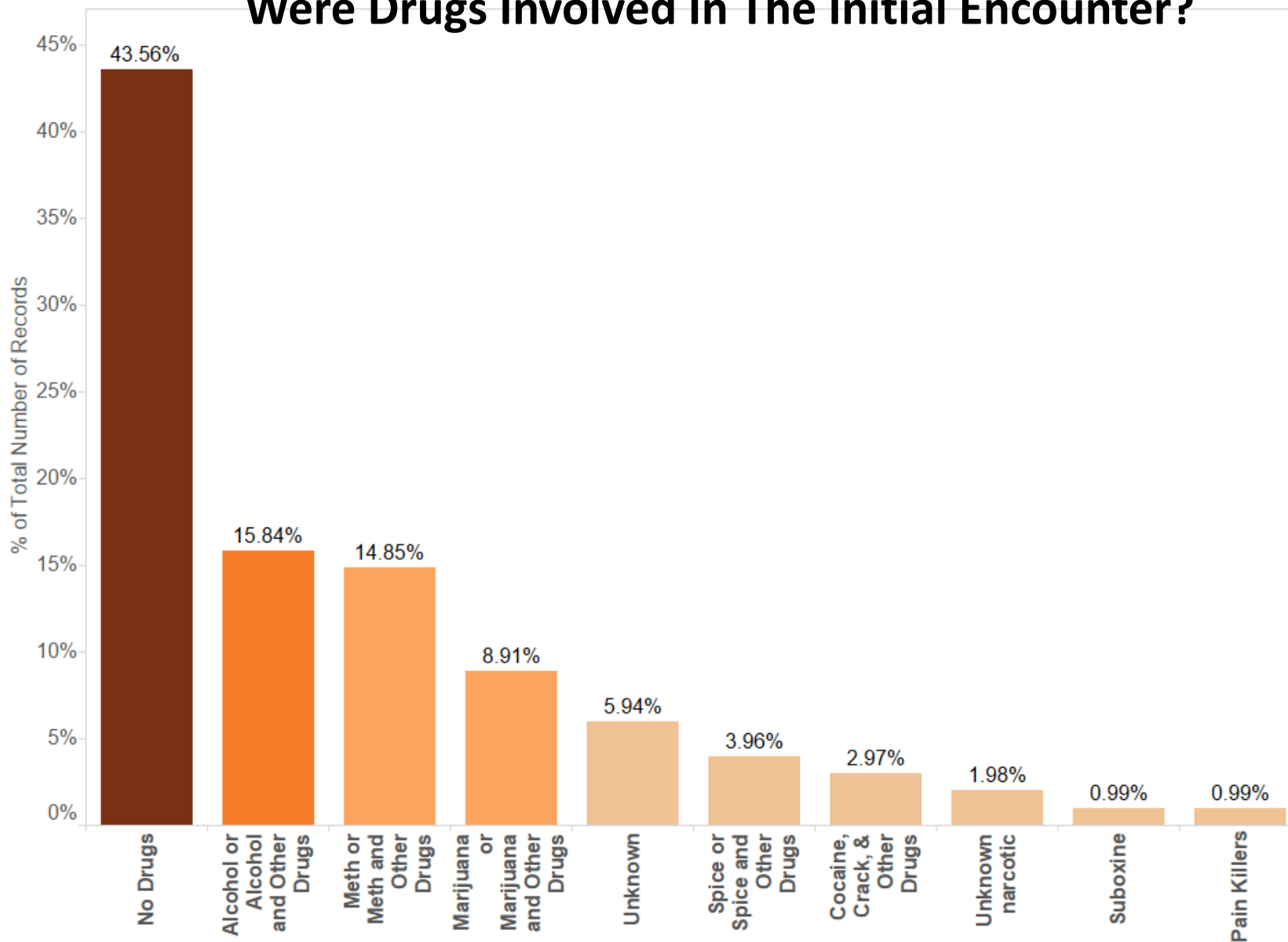
The CIU Detectives Use The Information On Their Cases In A Number Of Ways

a. Use information and anecdotal evidence to improve communication with individuals who have frequent contact with law enforcement.
b. When detectives and COAST find service gaps and other needs, they are brought to the attention of community stakeholders and policy-makers.
c. Detective provide field officers with current information about high-risk individuals.
d. Detectives use actual cases and encounters in case-based teaching in CIT Classes and continuing education for law enforcement.
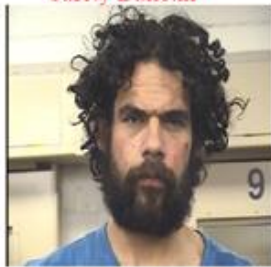
The Critical Importance Of Foresight

**CIU Detectives Sent Out The
Safety Bulletin On April 4, 2016**

**This Individual Was Safely Taken
Into Custody On April 14, 2016**

**SAFETY BULLETIN
WITH BACKGROUND
INFORMATION**

APD CIU RTCC

What Do We Know About The Individuals In Crisis Who Are Served By COAST?

COAST Specialists Provide Their Services In These Circumstances

1. COAST will be utilized by officers to provide further crisis intervention, referrals to services, and education.
2. When an officer has determined the scene is safe and there is a need for COAST on scene, they will request a COAST unit.
3. COAST shall provide a reasonable effort to resolve the crisis that created the call-out. This may include frequent contacts, as well as police that are having several interactions with the person due to their behavior which may include dispatched calls, unfounded reports of crimes or self-initiated stops.
4. Risk to self: The person is at risk of harming him/herself.
5. Be responsible for taking cases referred to COAST, which are in addition to on-scene referrals, and have been assigned to them by the CIU Sergeant.
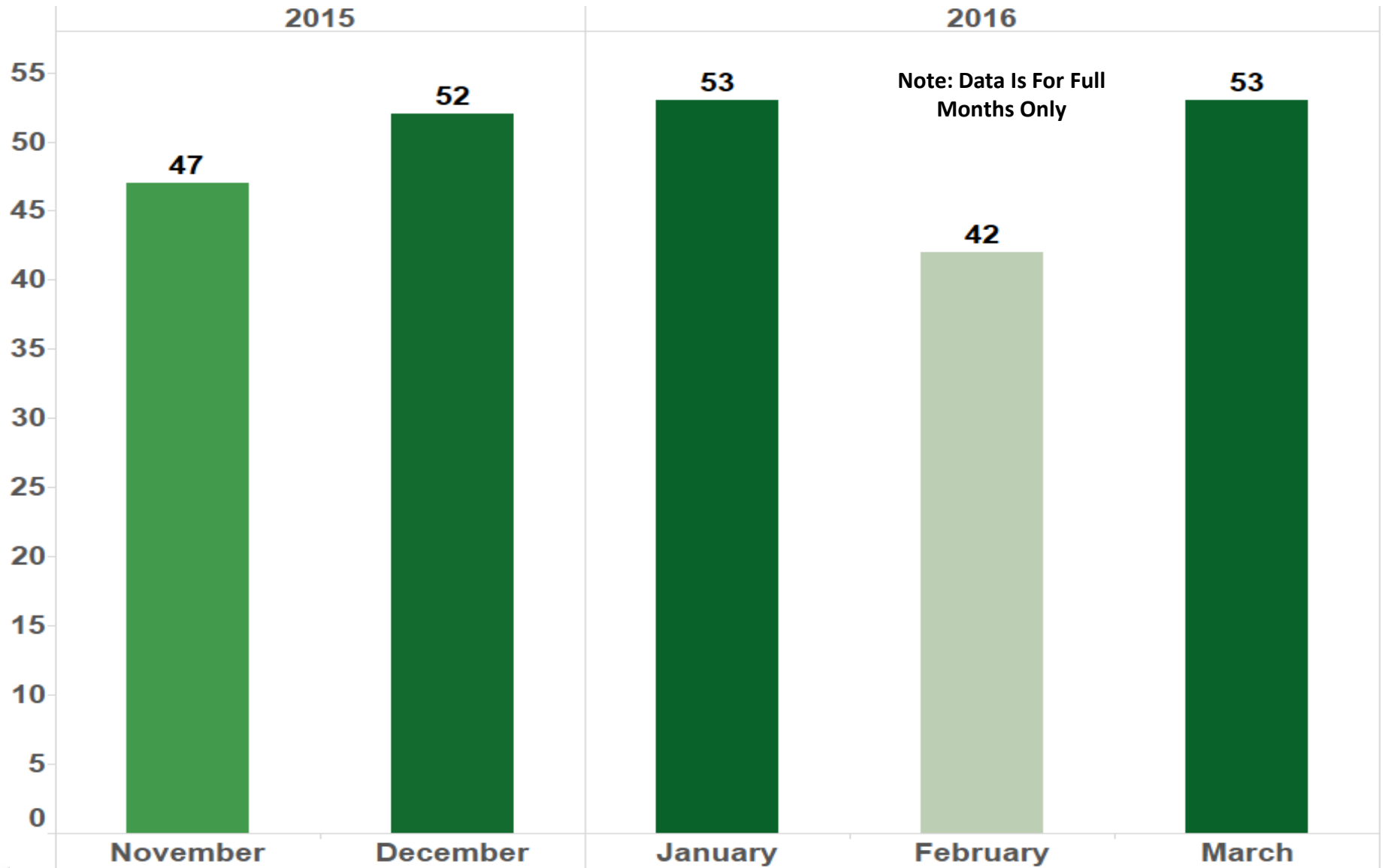
Source: APD Crisis Intervention Unit

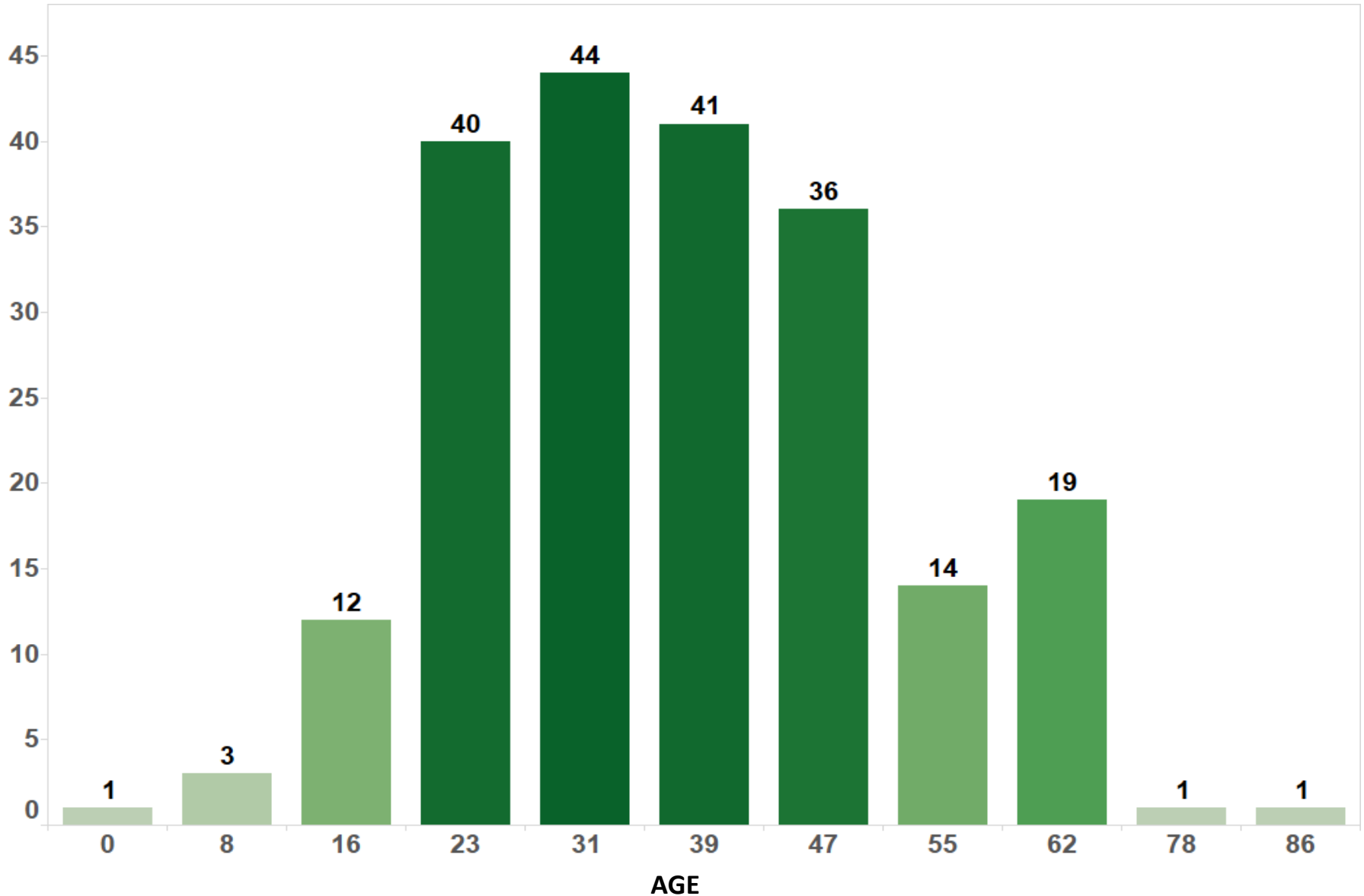# COAST Specialists Focus On These Kinds Of Issues

- Mental Health Issues

- Suicide Intervention

- Homelessness

- Substance Abuse

- Basic Needs

- Elder Abuse and Neglect

- Crisis Intervention and Response
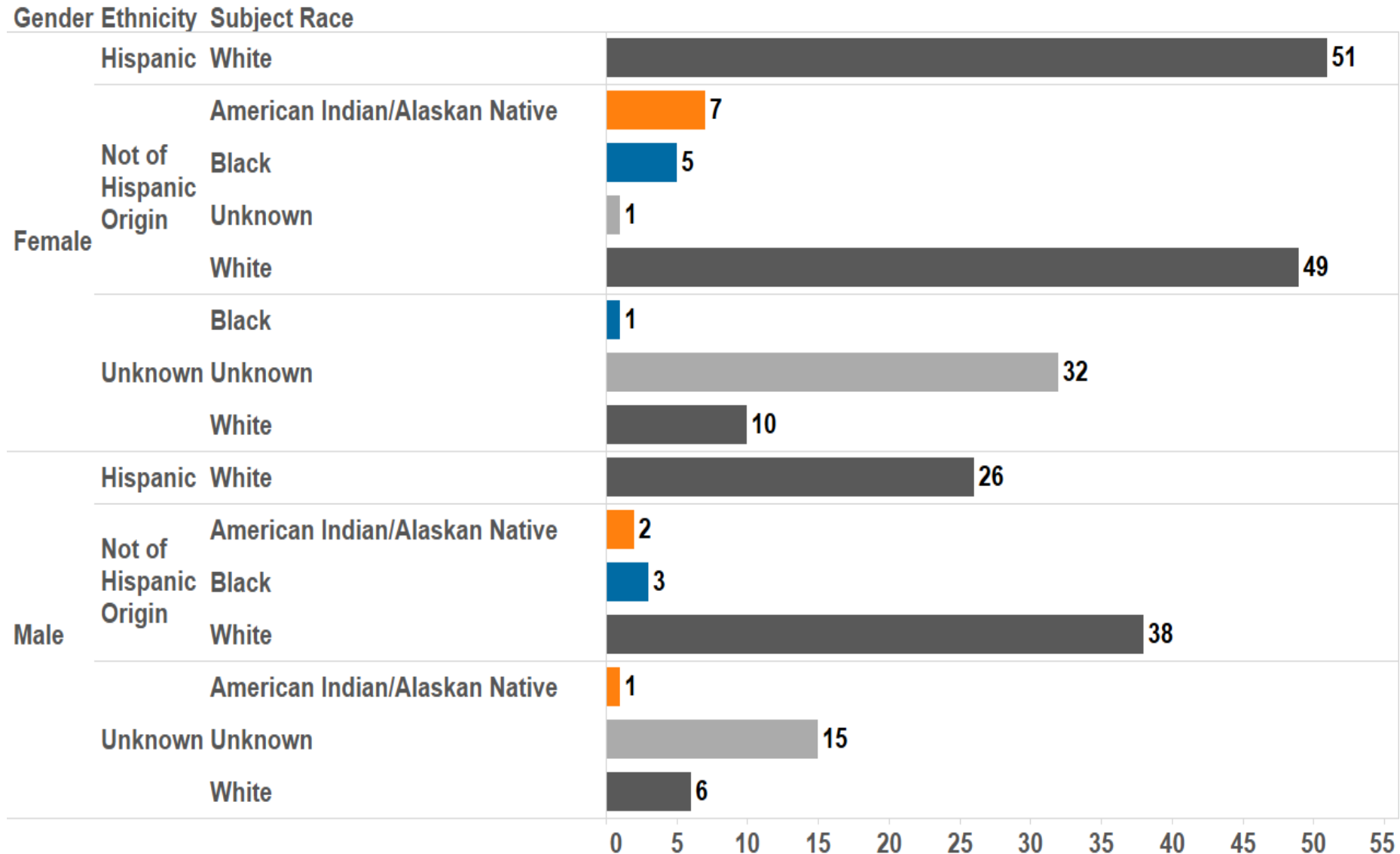
- Death Related Issues

Coast Provided Services To 247 Individuals Between November, 2015 and March, 2016

2015

2016

Note: Data Is For Full Months Only

November	December	January	February	March
47	52	53	42	53

APD CIU RTCC

Source: APD Crisis Intervention Unit

The Age Of The Individuals Served By COAST

Bar chart showing the age of individuals served by COAST:

AGE	Count
0	1
8	3
16	12
23	40
31	44
39	41
47	36
55	14
62	19
78	1
86	1

AGE

APD CIU RTCC

Source: APD Crisis Intervention Unit

The Gender & Race/Ethnicity Of The Individuals Served By COAST

APD CIU RTCC

Source: APD Crisis Intervention Unit

Did The Individuals Served By COAST Claim To Be U.S. Veterans?
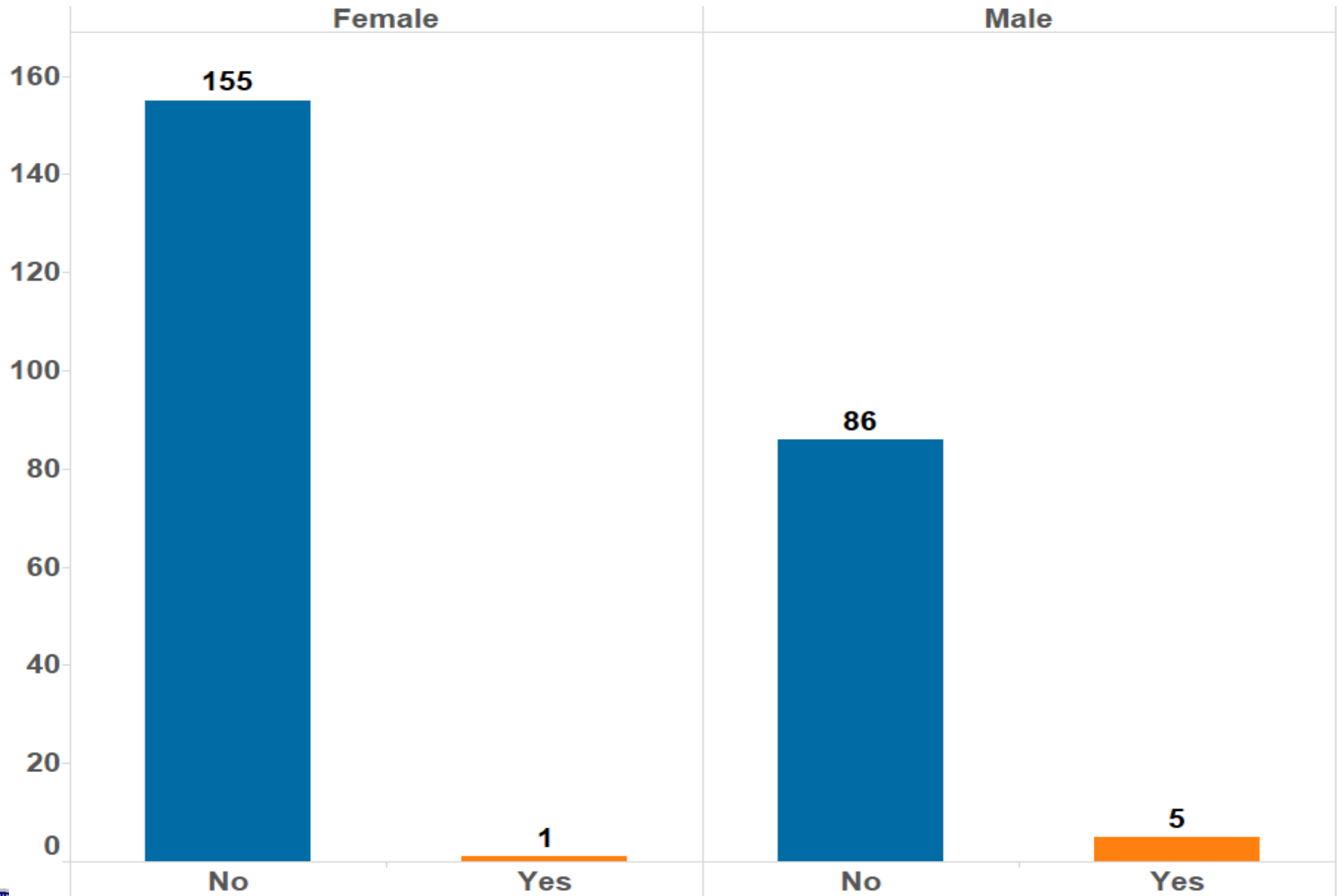
Were The Individuals Served By COAST Homeless?
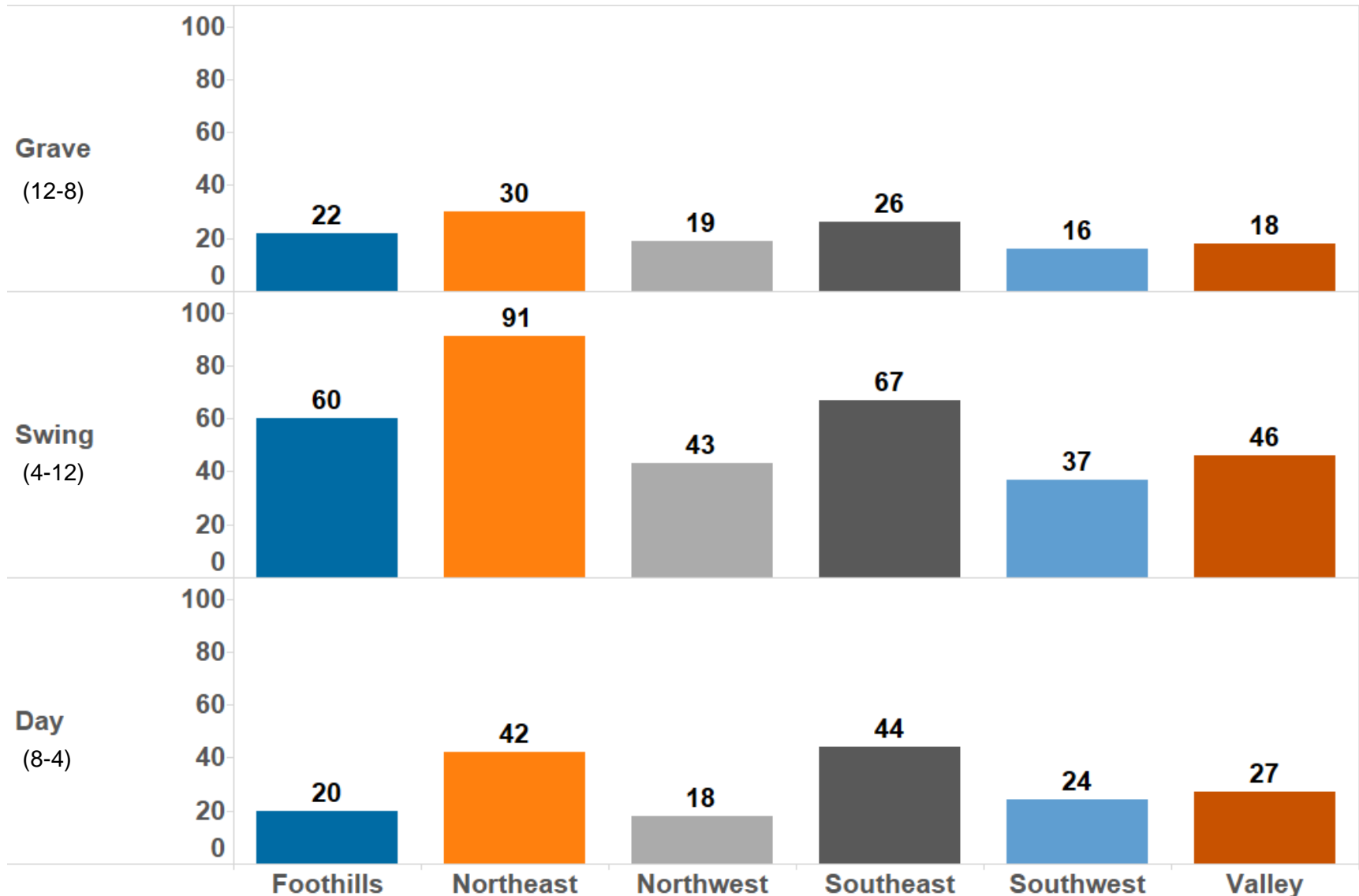

Source: APD Crisis Intervention Unit
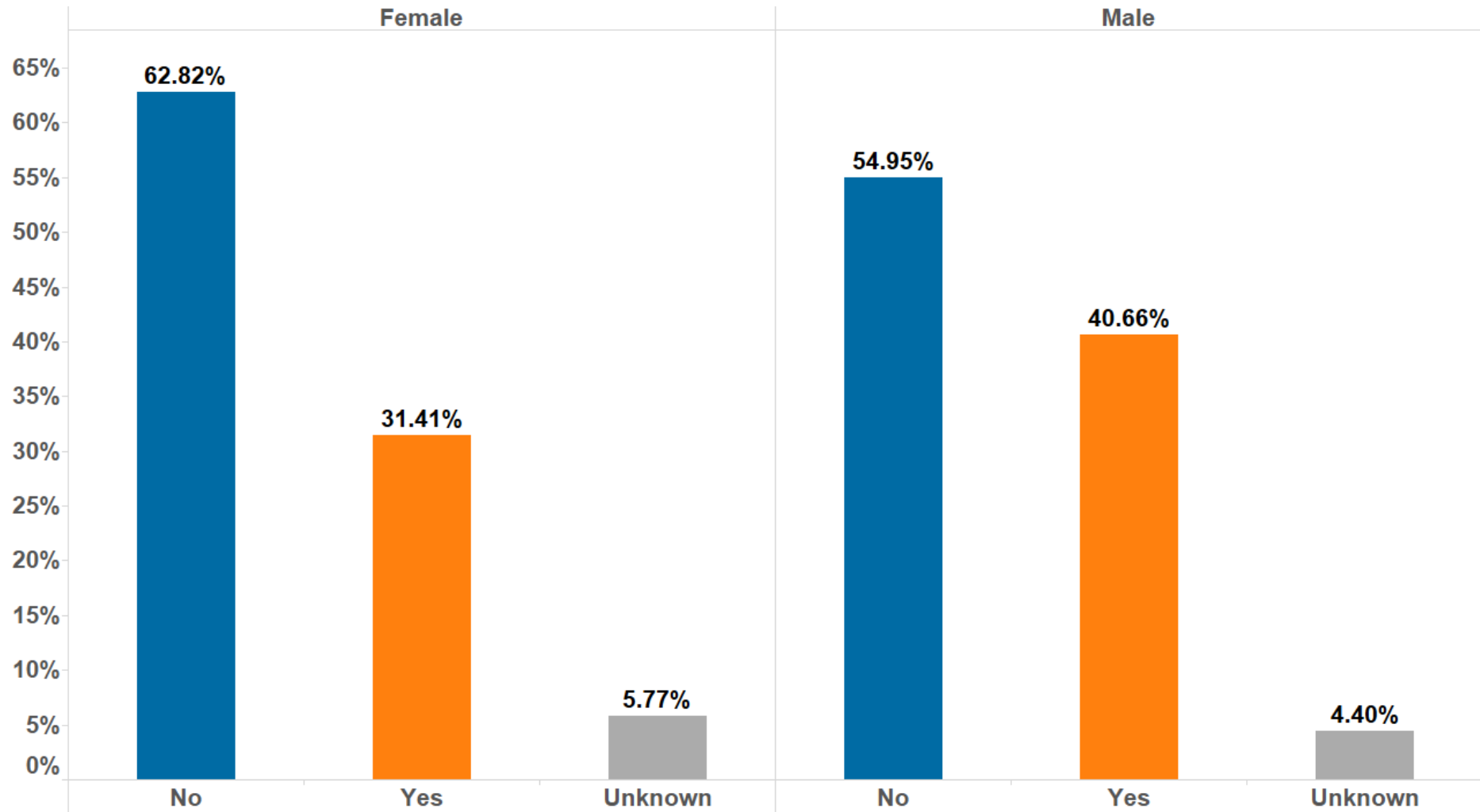
What Do We Know About The Initial CIT-Related Encounters With APD Field Officers?

Field Officers In The Six APD Area Commands Worked With 651 CIT-Related Incidents January, 2016 to March, 2016

January
- Foothills: 28
- Northeast: 66
- Northwest: 28
- Southeast: 41
- Southwest: 24
- Valley: 41

February
- Foothills: 37
- Northeast: 38
- Northwest: 20
- Southeast: 48
- Southwest: 24
- Valley: 21

March
- Foothills: 37
- Northeast: 59
- Northwest: 32
- Southeast: 48
- Southwest: 29
- Valley: 29

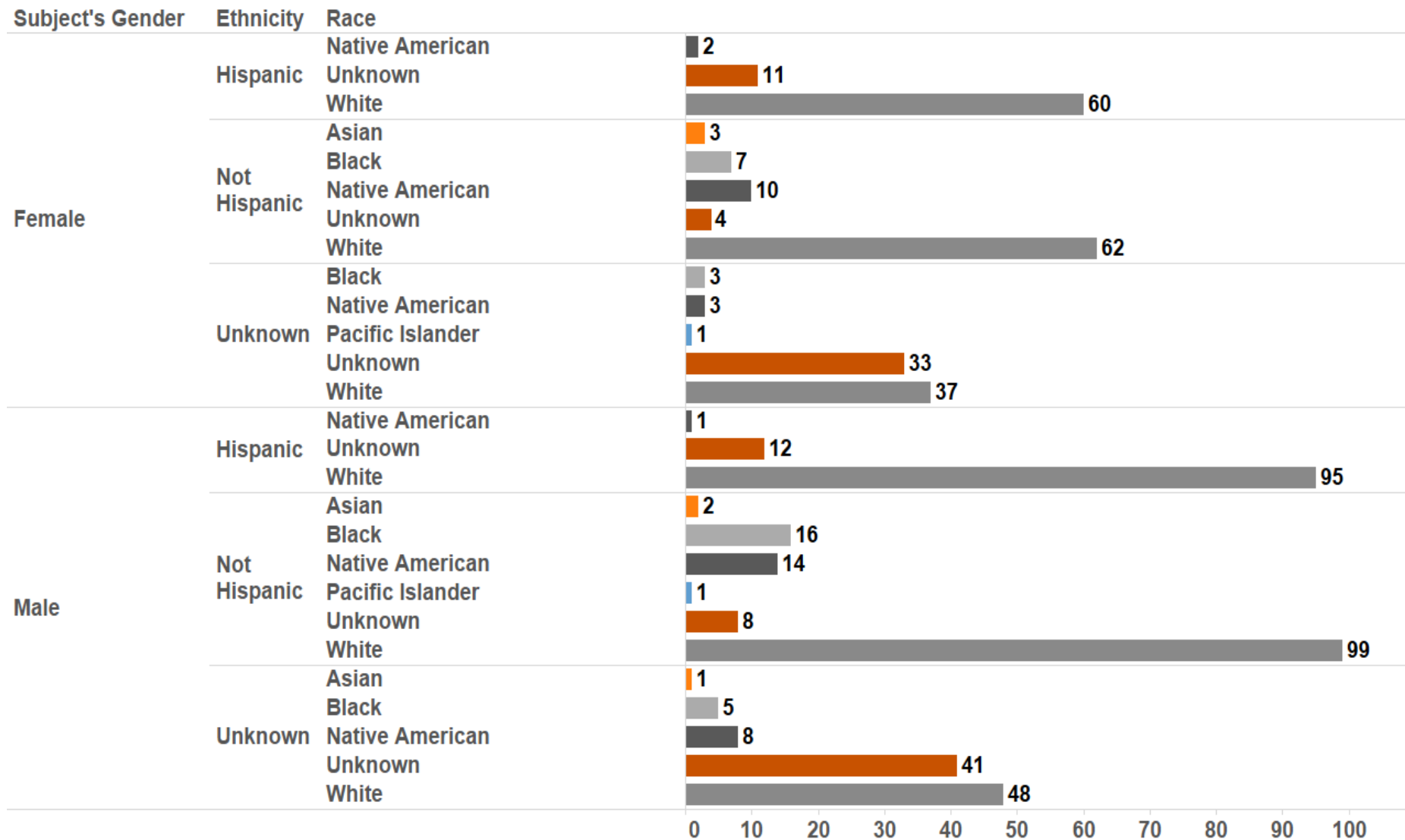**APD CIU RTCC**

Source: APD Real Time Crime Center; Crisis Intervention Unit
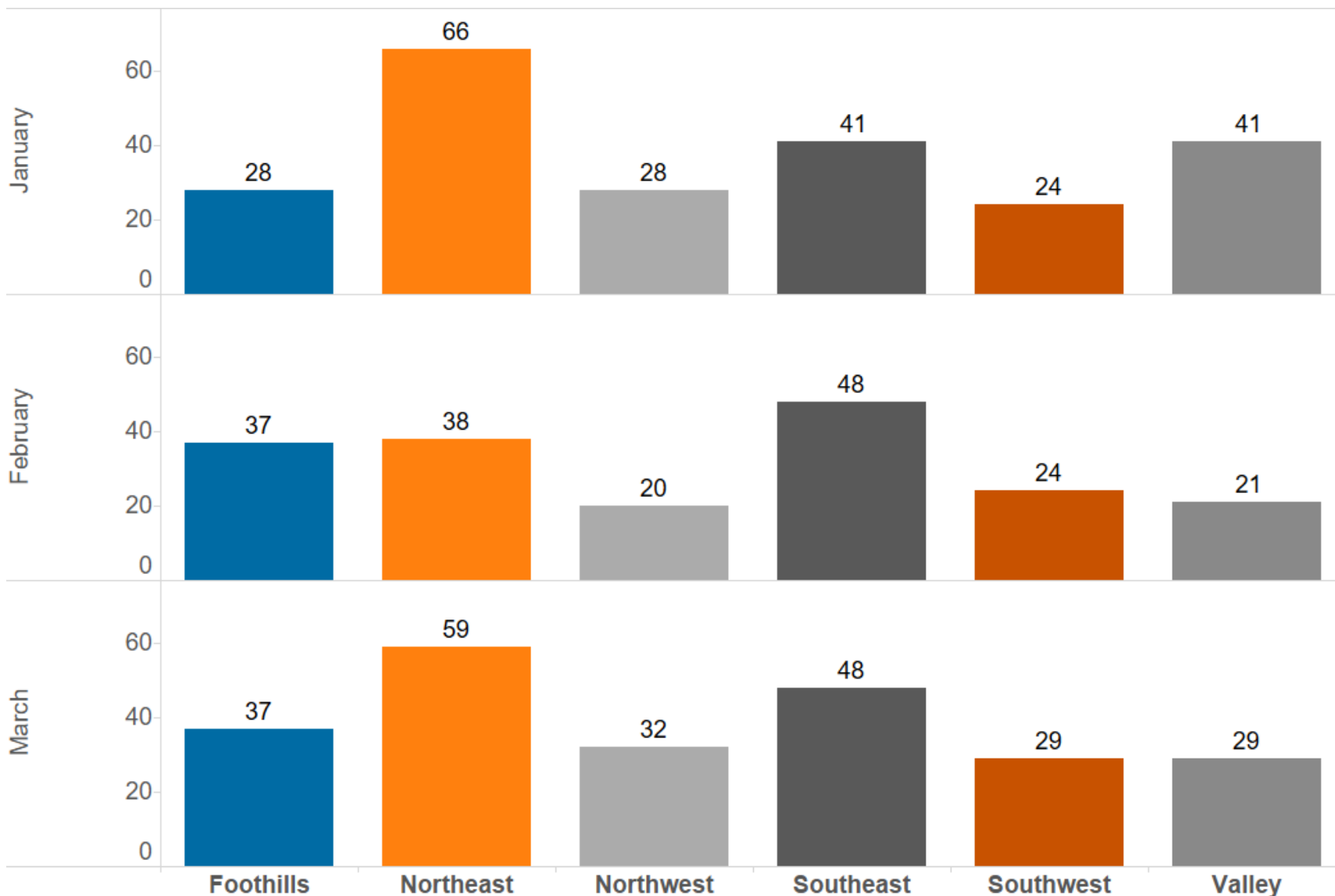
These 651 CIT-Related Incidents With Field Officers Took Place On The Following Shifts November 1, 2015 to March 14, 2016

Grave (12-8)

| Foothills	Northeast	Northwest	Southeast	Southwest	Valley
22	30	19	26	16	18

Swing (4-12)

Foothills	Northeast	Northwest	Southeast	Southwest	Valley
60	91	43	67	37	46

Day (8-4)

Foothills	Northeast	Northwest	Southeast	Southwest	Valley
20	42	18	44	24	27

APD CIU RTCC

The Age Of The Individuals In Initial Encounters With Field Officers

Source: APD Crisis Intervention Unit
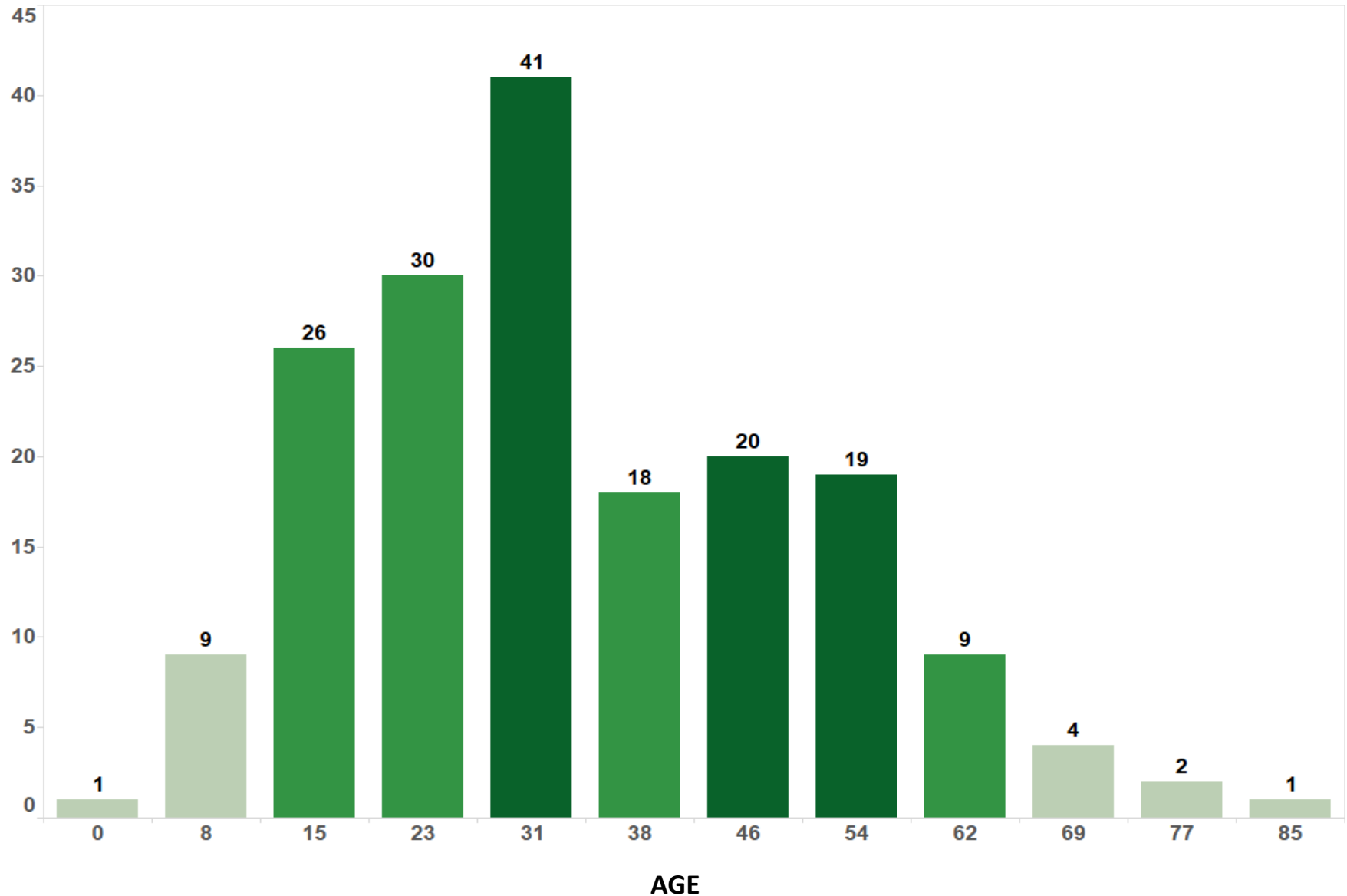
The Gender & Race/Ethnicity Of The Individuals Encounter By Field Officers

Subject's Gender	Ethnicity	Race	Value
Female	Hispanic	Native American	2
		Unknown	11
		White	60
	Not Hispanic	Asian	3
		Black	7
		Native American	10
		Unknown	4
		White	62
	Unknown	Black	3
		Native American	3
		Pacific Islander	1
		Unknown	33
		White	37
Male	Hispanic	Native American	1
		Unknown	12
		White	95
	Not Hispanic	Asian	2
		Black	16
		Native American	14
		Pacific Islander	1
		Unknown	8
		White	99
	Unknown	Asian	1
		Black	5
		Native American	8
		Unknown	41
		White	48

Source: APD Crisis Intervention Unit

The 651 CIT-Related Initial Incidents With Field Officers Resulted In The Following Dispositions, January, 2016 to March, 2016

APD CIU RTCC

Source: APD Real Time Crime Center; Crisis Intervention Unit
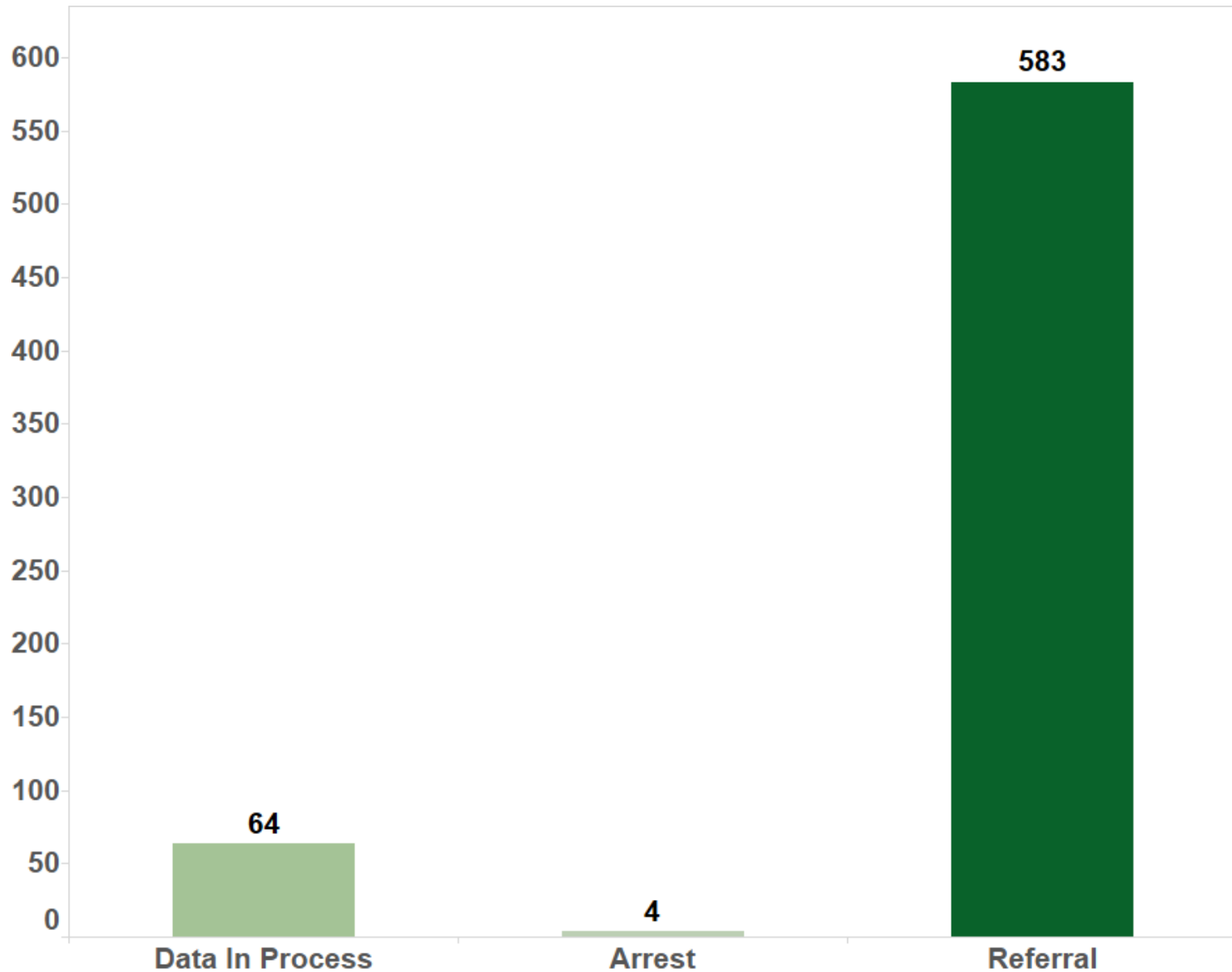
Use Of Force With Individuals On CIU Case Loads During Initial Encounter With Field Officers

Source: APD Crisis Intervention Unit

APD CIU RTCC
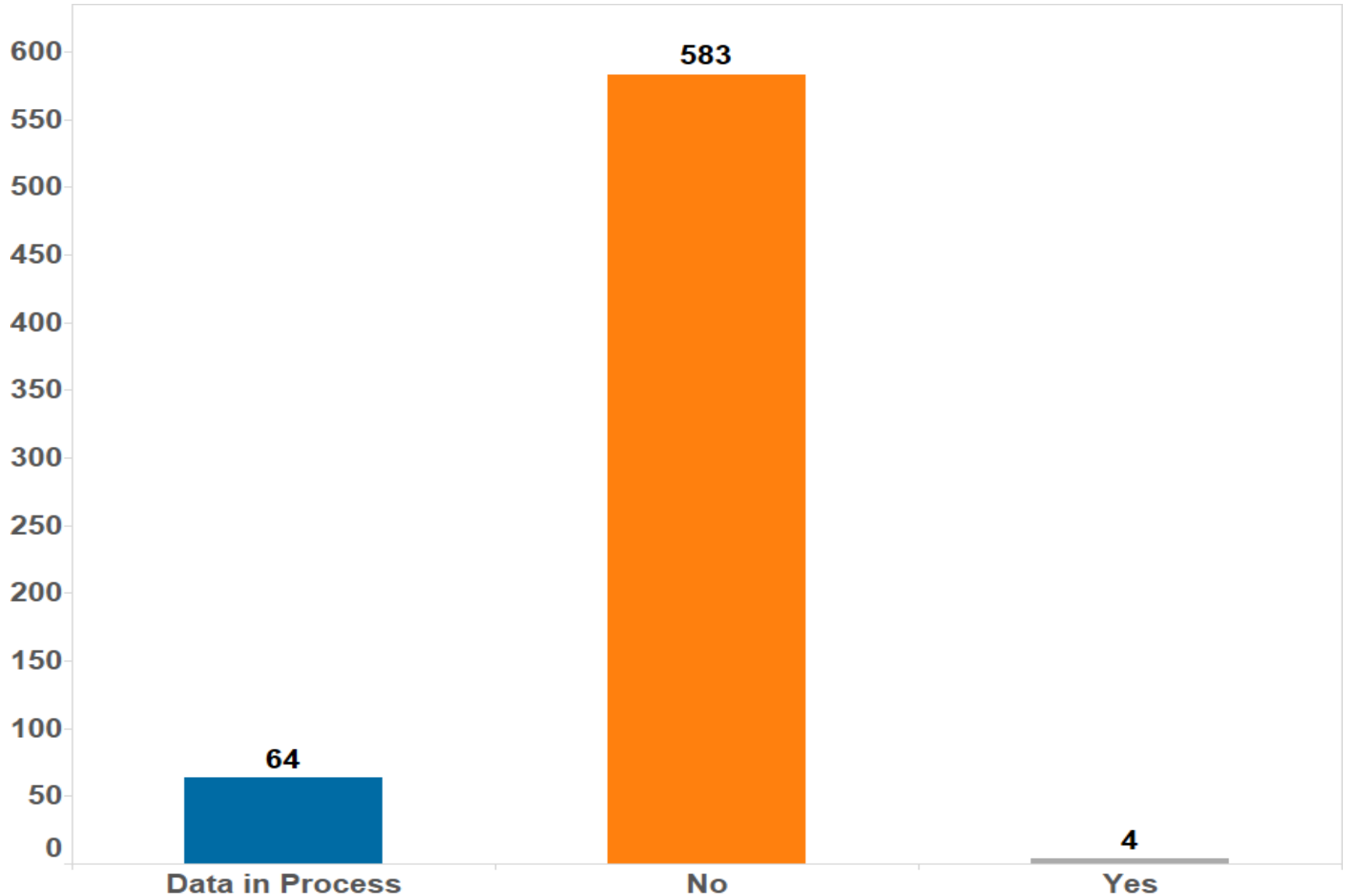
Summary APD Contact Demographics Compared To Albuquerque Demographics

People In Crisis By Gender By APD Contacts

	Total*	Males	Male Percent	Female	Female Percent
Total Population	**553,576**	**268,772**	**48.6%**	**284,804**	**51.4%**
Field Officer Reports	**587**	**351**	**59.8%**	**236**	**40.2%**
CIU Detective Case Loads	**105**	**86**	**81.9%**	**19**	**18.1%**
COAST Clients	**247**	**91**	**36.8%**	**156**	**63.2%**

Source: 2010-2014 American Community Survey, 5-Year Estimates; APD Real Time Crime Center.
*Note: Cases Are From Different Time Periods And Those Cases Missing Gender Information Excluded From These Analyses

APD CIU RTCC

People In Crisis By Age By APD Contacts

Age	Total Population	Percent	Field Officer Reports	CIU Detectives	COAST
Under 5	37,448	6.80%			.8%
5 to 9 years	36,300	6.60%	0.4%%		
10 to 14 years	36,437	6.60%	8.0%	2.0%	1.4%
15-19 years	34,697	6.30%	14.0%	4.0%	5.2%
20 to 24 years	41,467	7.50%	12.8%	9.9%	6.0%
25 to 34 years	86,575	15.60%	22.7%	31.7%	26.1%
35 to 44 years	70,882	12.80%	16.8%	19.8%	26.9%
45 to 54 years	73,429	13.30%	12.5%	17.8%	13.9%
55 to 59 years	34,021	6.10%	6.2%	3%	4.9%
60 to 64 years	31,270	5.60%	3.8%	3%	5.4%
65 to 74 years	39,083	7.10%	2.1%	6.9%	6.3%
75 to 84 years	22,372	4.00%	.03%	2.0%	1.9%
85 years and older	9,595	1.70%	.03%		1.4%

Source: 2010-2014 American Community Survey, 5-Year Estimates; APD Real Time Crime Center; Crisis Intervention Unit. *Note: Cases Are From Different Time Periods And Those Cases Missing Age Information Excluded From These Analyses

APD CIU RTCC

People In Crisis By Race & Ethnicity By APD Contact

	Total	White	Hispanic	Black Or African American	American Indian and Alaskan Native	Asian	Other Races Alone or Together
Total Population	553,576	228,881 (41.3%)	262,070 (47.3%)	15,956 (2.9%)	20,742 (3.7%)	13,771 (2.5%)	22,348 (4.1%)
CIU Detective Cases	105	41 (39.0%)	45 (42.9%)	5 (4.8%)	3 (2.9%)	1 1.0%	N/A
COAST	247	103 (41.7%)	77 (31.2%)	9 (3.6%)	10 (4.0%)	0 (0%)	N/A
Field Officers	587	246 (41.9%)	178 (30.3%)	31 (5.3%)	38 (6.5%)	6 (1.0%)	N/A

Source: 2010-2014 American Community Survey, 5-Year Estimates; APD Real Time Crime Center & Crisis Intervention Unit. *Note: Cases Are From Different Time Periods And Those Cases Missing Race/Ethnicity Information Excluded From These Analyses

APD CIU RTCC

The Albuquerque Police Department
Real Time Crime Center

APD Made A Number Of Important Changes After The John Hyde Incident Including The Creation Of The Real Time Crime Center

The RTCC's Goal:
To provide relevant real-time information to field officers engaged in high-risk calls before they go on their first call for service and while they are on their first call for service

APD Real Time Crime Center: CIT Assistance

2005
John Hyde
5 People Killed
Including 2 APD
Officers

March 2013
APD RTCC Opens
Bridge is Dayshift 5
Days a Week

2014
Bridge Calls: 17,628
CIT CMS Searched: 14,437
Mental Health Calls Worked: 760

December 2013
Bridge Policy
to Search
Every Name
through CIT*

January 2013
Crime Analysis Unit
Joins RTCC

May 2013
Bridge Starts 7
Days a Week, 2
Shifts

February 2013
Video Unit Joins
RTCC

April 2013
Daily 49
Premieres

2015
Bridge Calls: 31,048
CIT CMS Searched: 24,841
Mental Health Calls Worked: 1,072

August 2012
APD Real Time
Crime Center Bridge Opens Under
Proof of Concept
(1 squad, 1 shift, 1 Area Command)

May 2013
CIT Case
Management System
Goes Live

APD CIU RTCC

*Number of Cases in CIT Case Management System: 4,568

The APD Real Time Crime Center

The RTCC:

- **Takes field Intel requests.**

- **Addresses all requests with a special focus on mental health, domestic abuse and suicide calls.**

- **Provides live Intel to the field.**

- **Produces a daily Video Briefing.**

- **Has access to all available video feeds.**

- **Updates all divisions with the latest analytical data.**

- **Takes burden off of 911**.
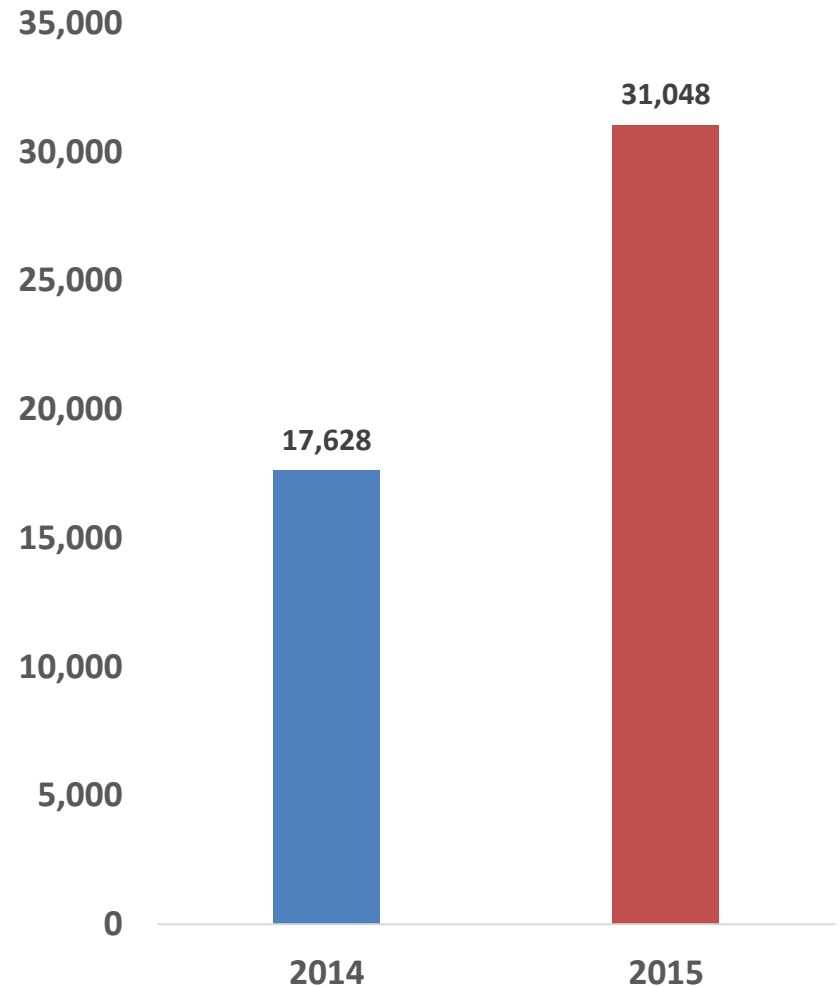
Total Number Of Calls Taken by RTCC Bridge Operators

Chart data:
- 2014: 17,628
- 2015: 31,048

APD CIU RTCC

Real Time Crime Center Bridge CIT Examples

Situational Awareness for Family Fight Call Type:

Initial Call Information	███████████████████████, ALB Type:15 Name:████████████ Phone:███████ ...BRO/BRO DISPUTE -- CLR ADVING BRO IS VERY -18 CAUSING A 39 -- SUBJ KEEPS TRYING TO GET CLR TO 32 WITH HIM -- CLR ADVING BRO IS OUTSIDE YELLING -- REQING 34S ASSITANCES IN REMOVING SUBJ FROM AROUND THE 20 SUBJ S#:1 Race:W Sex:M Age:28 DOB:██████ Hght:6'0 Name:████████
Notes/Comments	Advised via radio to Use extreme **48** w/ both subjects. Brothers always 32'ing and causing 39's. During last encounter *SUBJ WAS INTOXICATE AND CARRYING A LARGE KNIFE WHEN APPROACHED BY 34'S AND STATED HE WAS UPSET THAT HIS FATHER WOULDN'T TAKE HIM TO HIS MOTHER'S GRAVE.***34'S CONTINUED TO TRY AND CALM ██████ DOWN BUT NOTHING SEEMED TO CALM HIM DOWN. HE BECAME MORE AGITATED WITH OFFICERS AS HE CONTINUED TO YELL, CURSE, AND PACE IN THE STREET. SUBJ HAS MULTIPLE INCIDENTS WHERE HE WOULD CUT HIS LEFT HAND WITH THE KNIFE. 34'D STATED THEY WERE TRYING TO GET SUBJ HELP, BUT ████████ REFUSED TO DROP THE KNIFE AND COOPERATE. SEVERAL OFFICERS WERE FORCED TO RETREAT SLIGHTLY IN ORDER TO KEEP A SAFE DISTANCE AS HE WALKED TOWARDS THEM IN A VIOLENT MANNER. SUBJ WAS SHOT USING BEAN BAGS DURING THIS INCIDENT(apd ref.150041679). SUBJ DOES HAVE CIT LOGS (130046911)WHERE HE WANTED TO COMMIT 43-1 BY COP AND SWAT. SUBJECT WAS DEPRESSED DUE TO THE DEATH OF HIS MOTHER*** *20 does have a hazard that is sent to 34's* Subj's have long history in RTCC log. Most recent (151750321).
Training	No
Law Enforcement Resources	ARS; CIT; MDS; RTCC Logs; WebQuery

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Real Time Crime Center Bridge CIT Examples

Escalating behaviors of police calls by Joseph:

- Active threats on law enforcement personnel

- Hazard placed at house in system

- Extensive drug abuse (methamphetamine)

- Self proclaimed schizophrenic

- RTCC notified CIT in 2014 of increase to LE interactions

- Officers cautioned when contacting him

Verbal de-escalation assistance for Judy:

- History of harassment/threats to harm someone

- Brandished knife and firearm previously

- Diagnosed with Bi-polar disorder and schizophrenia

- Several attempts to gain access to neonatal ward

- Judy concerned officers perceive her as mentally ill

- Officers cautioned to not mention past mental history

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Real Time Crime Center Bridge CIT Examples

<u>Multiple Call-for-Service escalation by Ronald:</u>

- CIT notified due to alarming number of CFS

- Known drug user (crack cocaine)

- Suffers from delusions, and possibly auditory and visual hallucinations

- Frustration with Law Enforcement /Government over Veteran Affairs treatment

- RTCC notified CIT in 2014 due to large number of false CFS he creates
  - Since 2014, RTCC involved in approximately _100 CFS by Ronald_

- RTCC clarifies call history to assist supervisors in response

- RTCC assists in cancel call prior to arrival.
  - Clause identified by CIT:
    - ***If subject is violating the law by contacting 911 or emergency services for unrealistic calls, enforcement action should be taken. If subject is calling, officers should be dispatched to subject's home to check for 43-1-10 or to be 16'd for charges. His address is …***

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One Of RTCC's Most Powerful Tools Is Developing Geospatial Crime Hotspot Maps For Different Categories Of Crime Including CIT-Related Incidents

CIT Hotspots & Tables – February Police Reports

Key Points:

- Increase of hotspots in the Southeast and Foothills Area Commands. Mainly along and South of Central.
- November - December police reports to Crisis calls are lower than July – October 2015.
- 79 of 188 (42%) of Mental Commit reports used statute code for Psychiatric Evaluations.

Legend

Concentration of Mental, Crisis Calls Responded to

- Very High
- High
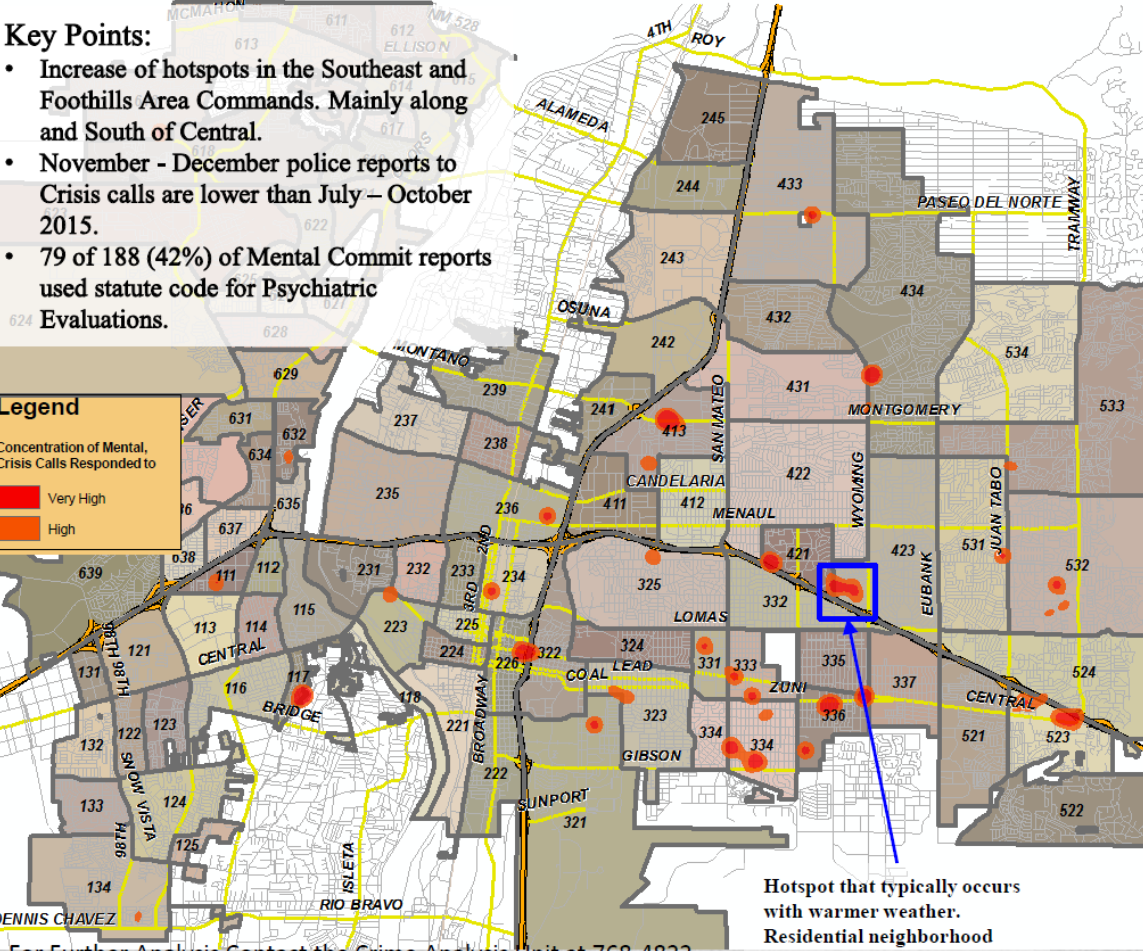
Hotspot that typically occurs with warmer weather. Residential neighborhood

For Further Analysis Contact the Crime Analysis Unit at 768-4822

Reports	July 2015	August 2015	September 2015	October 2015	November 2015	December 2015	January 2016	February 2016
Crisis Calls Responded to	44	45	55	55	30	27	30	25
Mental Commit	20	179	162	194	151	197	197	163
Total	264	224	217	249	181	224	227	188

Beat	Count	Beat	Count	Beat	Count	Beat	Count	Beat	Count	Beat	Count
111	3	221	1	321	5	413	8	521	2	613	1
112	2	222	1	322	3	421	4	523	9	614	1
114	1	223	2	323	3	422	3	524	6	616	2
116	1	226	4	325	5	423	10	531	6	618	1
117	4	231	2	331	3	431	3	532	7	619	2
121	1	232	1	333	4	432	1	533	4	624	2
122	3	234	2	334	10	433	3	534	3	625	1
124	1	235	2	335	3	434	6			628	2
132	1	236	2	336	9					629	1
133	1	238	1	337	3					632	2
134	6	239	1							634	1
		244	1							635	1
		245	1							636	1
										638	2

CIT Transports:

143

CIT Hotspots & Tables - (March 1-14, 2016) Police Reports

ALBUQUERQUE POLICE SMART POLICING

Legend

Concentration of Mental, Crisis Calls Responded to

- Very High (red)
- High (orange)
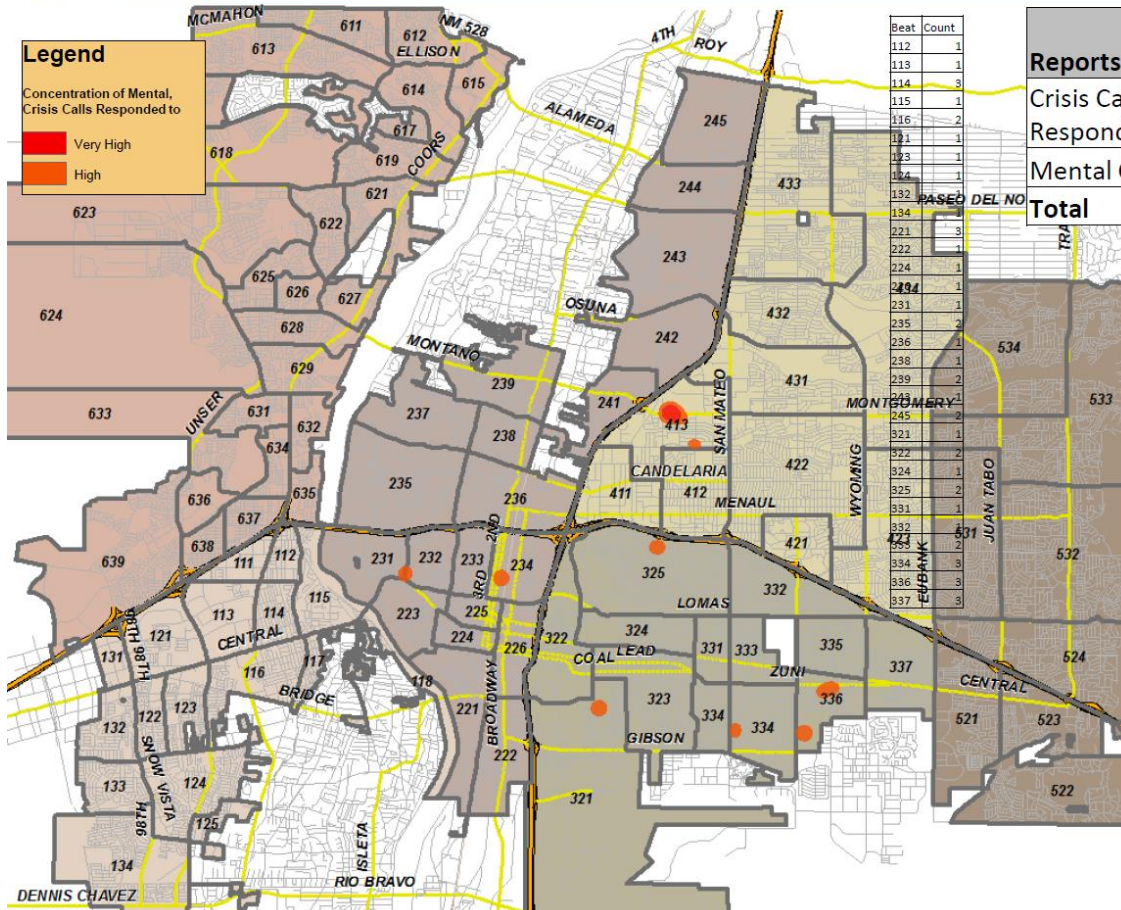
Reports	Last 7 Days	Mar. 1-14, 2016
Crisis Calls Responded to	34	43
Mental Commit	27	60
Total	61	103

CIT Transports (March. 1-8):
42

Beat	Count
112	1
113	1
114	3
115	1
116	2
121	1
123	1
124	1
132	1
134	1
221	3
222	1
224	1
226	1
231	1
235	2
236	1
238	1
239	2
243	1
245	2
321	1
322	2
324	1
325	2
331	1
332	1
333	2
334	3
336	3
337	3

Beat	Count
411	1
412	4
413	2
422	3
423	8
431	3
432	1
434	2
521	3
523	3
524	2
531	1
532	6
533	2
534	3
611	1
612	1
613	1
616	1
621	1
627	1
629	2
635	1
636	1
639	1

For Further Analysis Contact the Crime Analysis Unit at 768-4822

Power of an Analyst: Data Consistency

- **Field versus narrative**
  - Was a weapon used?
  - Type of weapon?

- **Knowing nuances of data**
  - 'Transport to'
    - Better accuracy if using CAD data vs. police reports
    - Transport locations are entered differently or not at all.
      - UNMH or UNM Psych or UNM Children's or UNM Mental Health

- **Currency of fields**
  - NM State Statute of Mental Commit
    - Officers can only recommend a psychiatric evaluation
  - Attempted Suicide versus Suicide
  - Naming conventions

Power of an Analyst: Education

- **Reporting standards**
    - What your crime analyst needs
        - Transport location name specified
        - Other necessary data
            - Veteran?

- **Annual training**
    - Resources available
    - How to read a crime analysis hotspot map
    - Importance of filling out fields available
    - Use correct incident type

APD Uses Data To:

To Continually Improve The Training, Safety and Effectiveness Of Police Officers Dealing With Individuals In Crisis

APD CIU Understands Why Data Is Crucial

Data can be used:
- To highlight and address deficiencies in training and interactions between law enforcement and people in crisis.
- To show which community programs are efficient or deficient and help guide government funding options.
- To highlight the importance of including community perspectives in training.
- To serve as the basis for Case-Based Learning.

Training Based On Community Involvement and Perspective Is Crucial

"Law enforcement training has been isolated and in-agency. We work for our community and should adapt to their values and needs. This creates buy-in and community ownership, reduces negative views and gains advocate support. We may overlook simple ideas because they are not based in the law enforcement model of thinking and training. CIT is a community program and not just an in-house training."

CIU Detective Mathew Tinney

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CIU's Detectives Use Case-Based Learning To Share Their Knowledge and Experience With Other Officers

CIU Detectives:
- Handle cases involving people who come in frequent contact with field officers.
- Have intimate knowledge of community systems and services.
- Can translate provider jargon to officers for a better understanding.
- Test skills and theories of communication daily and use personal experience to describe how to use the techniques.
- Review high profile and use of force cases with individual living with a mental illness and conduct follow up giving them first hand knowledge of what worked and did not work in the interaction.
- Better understanding of how hospital admission and law works from actual usage.
- Use of real cases creates acceptance and buy-in from field officers
- Are on-call to staff cases and work side-by-side with field officers.

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CIU Detectives Are Using Innovative Ways To Provide Case-Based Learning When and Where Partners Need It.
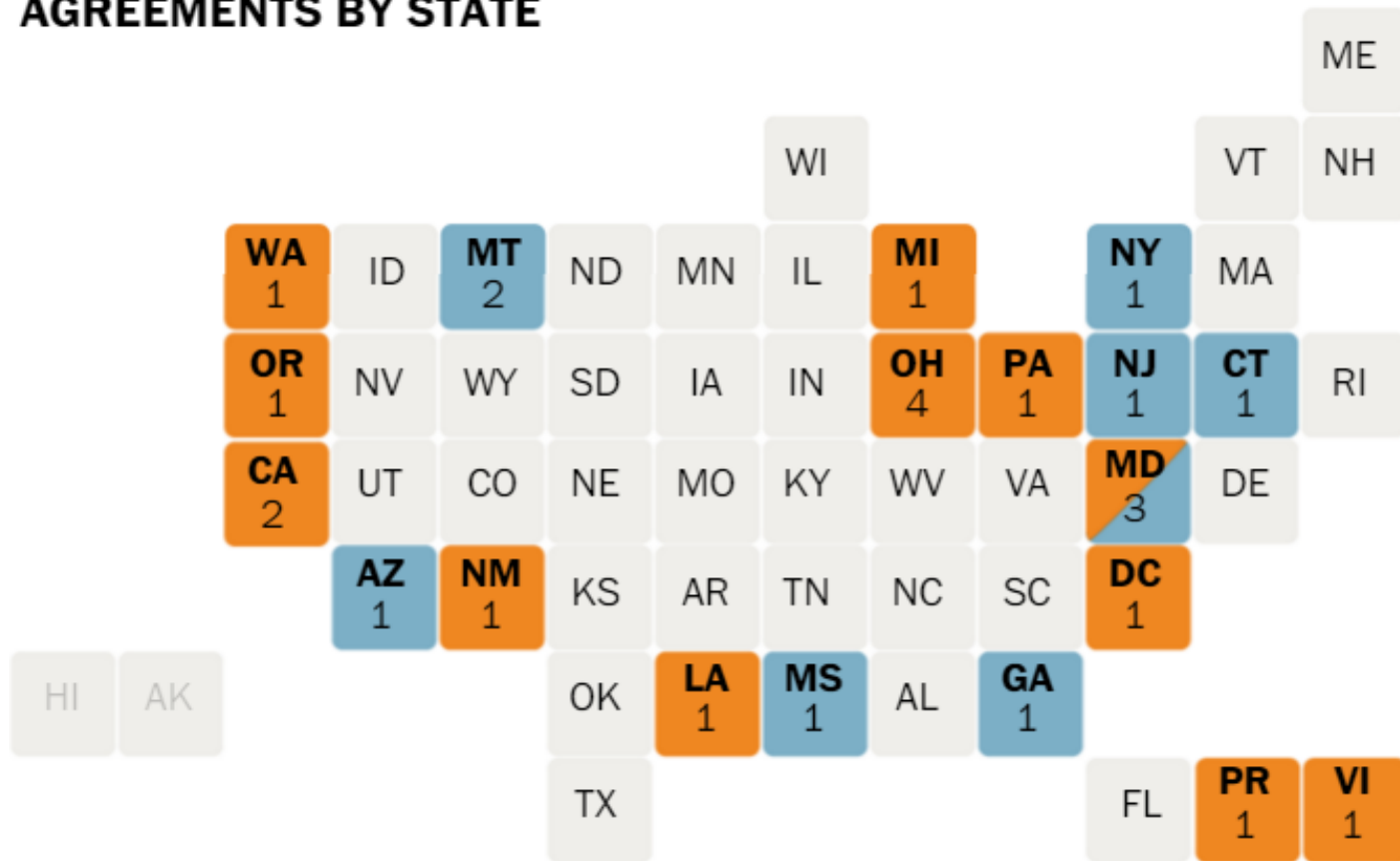
APD Uses Data To:

To Address The Requirements Of The City Of Albuquerque And Department Of Justice Agreement

Federal Interventions At Police Departments (1994-2015)

AGREEMENTS BY STATE

ME

WI — VT | NH

WA 1 | ID | MT 2 | ND | MN | IL | MI 1 | NY 1 | MA

OR 1 | NV | WY | SD | IA | IN | OH 4 | PA 1 | NJ 1 | CT 1 | RI

CA 2 | UT | CO | NE | MO | KY | WV | VA | MD 3 | DE

AZ 1 | NM 1 | KS | AR | TN | NC | SC | DC 1

HI | AK | OK | LA 1 | MS 1 | AL | GA 1

TX | FL | PR 1 | VI 1

"Since the Justice Department began investigating civil rights violations by police in 1994, it has forced 25 police departments to reform under the watch of independent monitors."

The Washington Post, 2015

Orange = Patterns of excessive force
Blue = Other civil rights violations

APD CIU RTCC

Source: Kelly, K, Childress, S., Rich, S. *Forced Reforms, Mixed Results.* Washington Post, November 13, 2015. Graphic by Denise Lu/The Washington Post

Crisis Intervention Is Critical For Albuquerque

"To maintain high-level, quality service; to ensure officer safety and accountability; and to promote constitutional, effective policing, APD agrees to minimize the necessity for the use of force against individuals in crisis due to mental illness or a diagnosed behavioral disorder and, where appropriate, assist in facilitating access to community-based treatment, supports, and services to improve outcomes for the individuals. APD agrees to develop, implement, and support more integrated, specialized responses to individuals in mental health crisis through collaborative partnerships with community stakeholders, specialized training, and improved communication and coordination with mental health professionals."

129.   APD shall collect data on the use of crisis intervention certified responders and CIU. This data will be collected for management purposes only and shall not include personal identifying information of subjects or complainants. APD shall collect the following data:

a)   date, shift, and area command of the incident;

b)   subject's age, race/ethnicity, and gender;

c)   whether the subject was armed and the type of weapon;

d)   whether the subject claims to be a U.S. military veteran;

e)   name and badge number of crisis intervention certified responder or CIU detective on the scene;

f)   whether a supervisor responded to the scene;

g)   techniques or equipment used;

h)   any injuries to officers, subjects, or others;

i)   disposition of the encounter (e.g., arrest, citation, referral); and

j)   a brief narrative of the event (if not included in any other document).

APD CIU RTCC

137. APD shall collect and analyze data to demonstrate the impact of and inform modifications to crisis prevention services. This data will be collected for management purposes only and shall not include personal identifying information of subjects or complainants. APD shall collect the following data:

a) number of individuals in the COAST and CIU case loads;

b) number of individuals receiving crisis prevention services;

c) date, shift, and area command of incidents or follow up encounters;

d) subject's age, race/ethnicity, and gender;

e) whether the subject claims to be a U.S. military veteran;

f) techniques or equipment used;

g) any injuries to officers, subjects, or others;

h) disposition of the encounter (e.g., arrest, citation, referral); and

i) a brief narrative of the event (if not included in any other document).

APD CIU RTCC

130. APD will utilize incident information from actual encounters to develop case studies and teaching scenarios for roll-call, behavioral health, and crisis intervention training; to recognize and highlight successful individual officer performance; to develop new response strategies for repeat calls for service; to identify training needs for in-service behavioral health or crisis intervention training; to make behavioral health or crisis intervention training curriculum changes; and to identify systemic issues that impede APD's ability to provide an appropriate response to an incident involving an individual experiencing a mental health crisis.
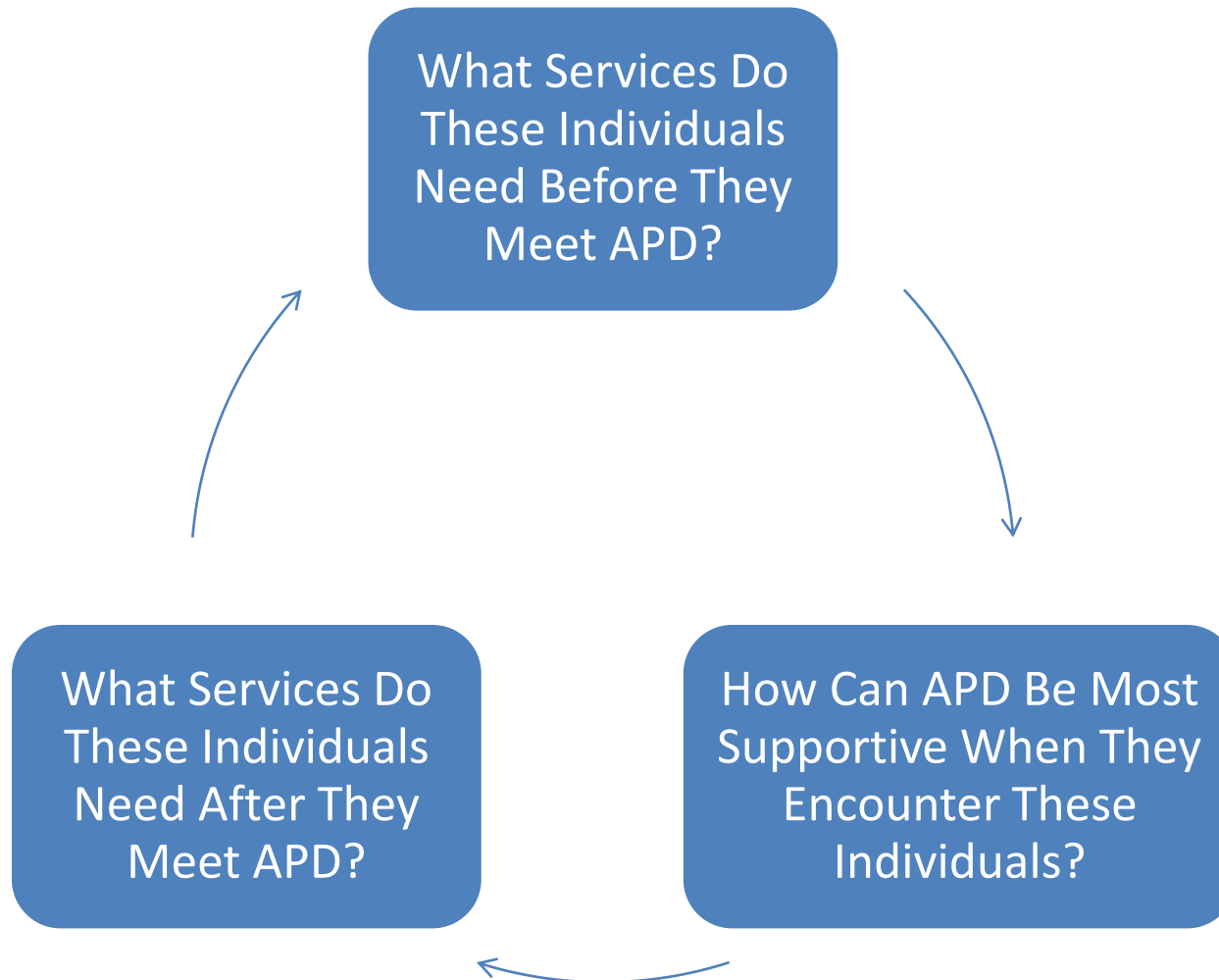
APD CIU RTCC

Mental Health Response Advisory Committee Monthly Report
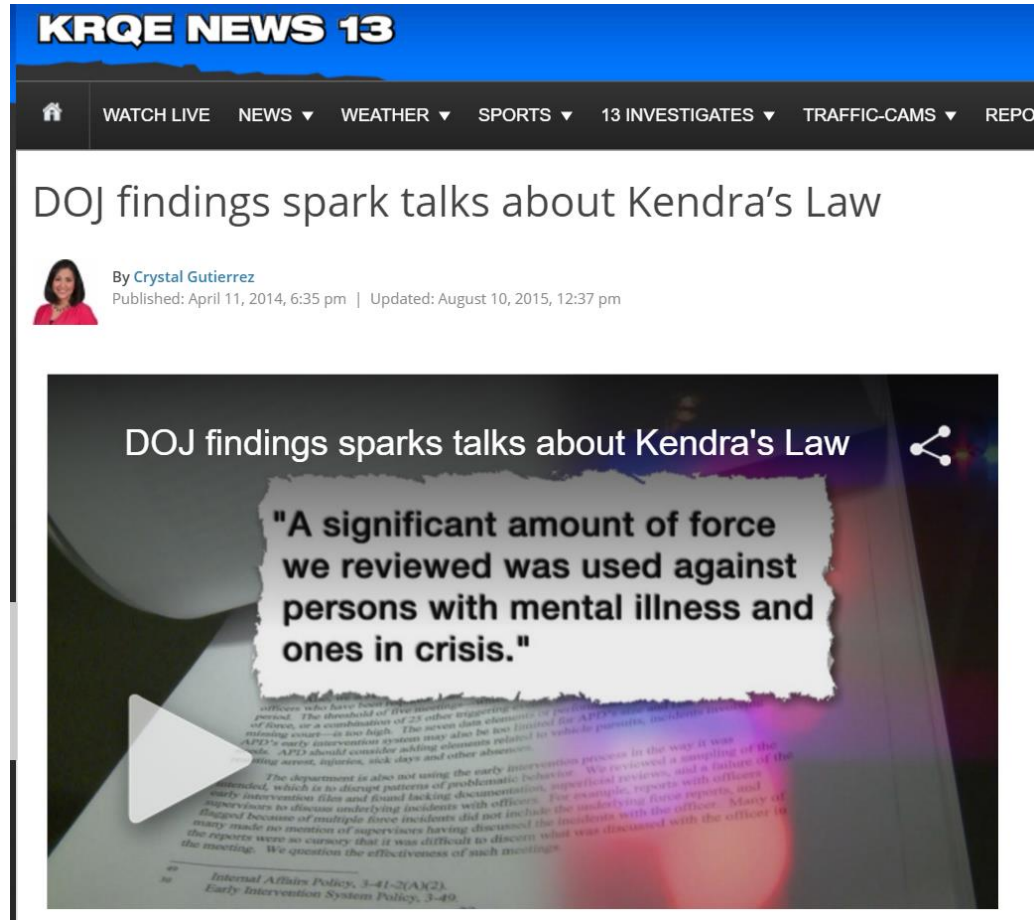## Table Of Contents

1. **Crisis Intervention Unit Organizational Chart**

2. **Key Data In This Report**

   I. **Number of Individuals On CIU case load.**
      i. Individual's age, race/ethnicity, and gender.
      ii. Were Individuals U.S. military vets?
      iii. Use of force during follow-up encounters.

   II. **Number of Individuals on the COAST case load.**
      i. Individual's age, race/ethnicity, and gender.
      ii. Were Individuals U.S. military vets?
      iii. Use of force during follow-up encounters.

   III. **Initial CIT-Related Encounters With APD Field Officers**
      i. Date, shift and area command.
      ii. Disposition of initial encounter (e.g. arrest, resolution, referral).
      iii. Subject's age, race/ethnicity, and gender.
      iv. Was subject armed & type of weapon?
      v. Was subject U.S. military vet?
      vi. Did a supervisor respond to the initial scene?
      vii. Technique or equipment used during initial encounter.
      viii. Any injuries to officers, subjects or others during initial encounter.
      ix. Use of force during initial encounter.

3. **Exploratory Data Analyses: Findings To Consider**

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How Do We Build A Community-Wide Behavioral Health System That Will Keep Individuals Experiencing Mental Health Crisis From Encountering APD In The First Place Or Becoming Repeat Cases?

What Services Do These Individuals Need Before They Meet APD?

How Can APD Be Most Supportive When They Encounter These Individuals?

What Services Do These Individuals Need After They Meet APD?

Kendra's Law

http://krqe.com/2014/04/11/doj-findings-spark-talks-about-kendras-law/

Where Do We Go From Here?

The Number Of CIT-Related Calls For Service Has Increased 47.9% Since 2010. It Is Very Likely Those Calls Will Continue To Increase

Actual CFS

Estimated CFS

Source: APD Real Time Crime Center; Crisis Intervention Unit
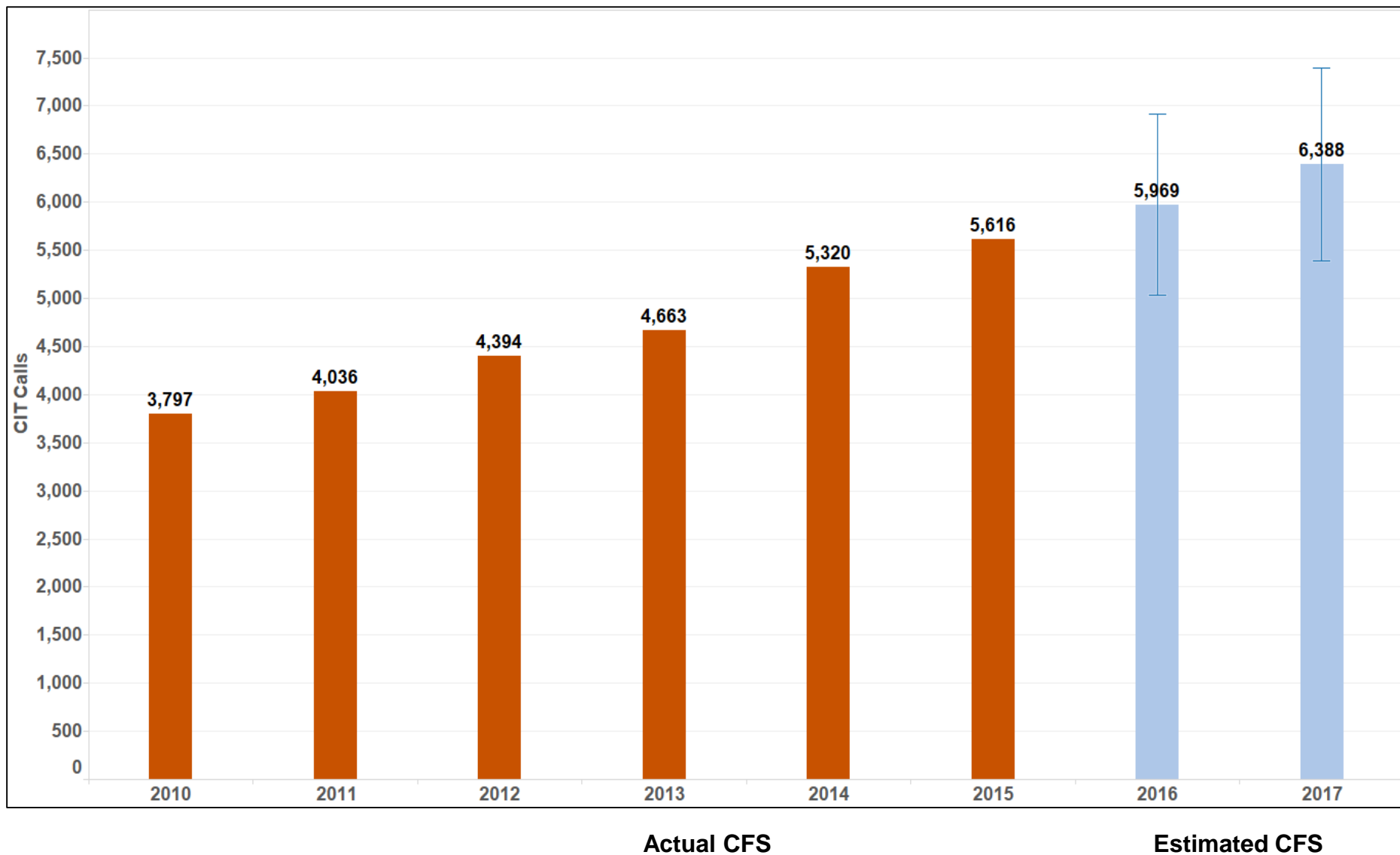
Albuquerque's Agenda For Improving Mental Health Services

Concrete Steps	Status	Impact Analyses
Passage of an Assisted Outpatient Treatment Law.	Passed in 2016	Needs To Be Conducted
Development of a robust system Including identifying patients most at risk, development of mobile crisis teams, expanding Assertive Community Treatment teams, and piloting Community Engagement Teams.	In Process	Needs To Be Conducted
Better coordination of care among the city of Albuquerque, Bernalillo County, behavioral health services, primary care sites and a crisis triage center.	In Process	Needs To Be Conducted
Closure of the gaps in the continuum of care by rebuilding intensive outpatient services, residential treatment, partial hospital and respite programs and other resources which have been dramatically reduced of the past 10 years.	In Process	Needs To Be Conducted
Administrative changes including updating the NM Mental Health Code to allow for better treatment coordination between the legal system, health care providers, law enforcement and first responders.	In Process	Needs To Be Conducted
Review of reimbursement and regulatory guidelines to allow for the flexibility needed to maximize existing services and increase capacity.	In Process	Needs To Be Conducted
Support for programs that work including Albuquerque Heading Home which provides housing for the homeless.	In Process	Needs To Be Conducted

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Crisis Intervention In Albuquerque: The Future

What Data Need To Be Developed?

- Outcome and Effectiveness Indicators From Follow-Up Units, Techniques And Approaches
- Indicators Of Training Effectiveness
- Perceptions About Interactions From Both Those Living With Mental Illness and From Police Officers

What Practices Need To Be Improved?

- Data Definitions
- Data Collection
- Record Maintenance
- Program Buy-In From All Areas Of The Department
- Sharing Of Information Both Within The Department And Among Other Key Community Partners

What Policies Need To Be Developed?

Clear Guidelines On How:
- Detectives, COAST And Field Officers Should Do To Collect And Maintain Better Data
- Dispatch And Other Call Takers Should Collect And Maintain Data
- Mental Health Providers And Emergency Facilities Collect And Maintain Data On Law Enforcement Interactions

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Better Data Means Harder Questions

Harder Questions →

How Do We Get Law Enforcement, Advocates, The Mental Health Community And Policy Makers To Work Together?

What Is The Impact Of Our Practices, Policies And Procedures?

What Are The Interactions Between Law Enforcement and Individuals Living With Mental Illness?

Better Data →

APD CIU RTCC

What Are Your Data Questions?
What Are Your Policy Questions?
What Are Your Political Questions?

Contact Information

Lt. Glenn St. Onge
(505) 924-6007
gstonge@cabq.gov

Sarah Masek
(505) 768-4822
smasek@cabq.gov

Peter Winograd
(505) 340-5664
peter.winograd.nm@gmail.com

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