We’re Both Here, How Do We Work Together?
A Collaborative Approach

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Brent Burgett
Objectives

• Understand the public safety trend responding to behavioral health calls
• Understand the alignment of behavioral health diversion to appropriate resource
• Recognize the value of innovative approaches
City of Mesa, Arizona

• 137 square miles
• 471,825 residents (2015)
• 85,000 winter visitors (2010)
• 75,000+ > 62 years of age
Mesa Fire and Medical Department

- Over 400 sworn employees
- 20 Fire Stations
- 3 Battalions
- 21 ALS Engines
- 5 ALS Ladders
- 2 Peak time Medical Response Vehicles
- 2 Civilian Transport Units
- Supported by Automatic Aide Partners
• The Mesa Police Department is a major city police department which employs over 1,200 employees, approx. 800 sworn and over 400 civilians.

• There are four patrol divisions; Fiesta, Central, Red Mountain, and the Superstition.
Central District
64,187 residents
12.32 square miles

Red Mountain District
142,697 residents
38.84 square miles

Fiesta District
98,000 residents.
15.62 square miles

Superstition District
163,110 residents.
70.70 square miles.
## Suicide calls, mental health pick-up orders, Misc. MH calls

<table>
<thead>
<tr>
<th>Year</th>
<th>Suicide CFS</th>
<th>MHD CFS</th>
<th>Misc. MH Calls</th>
<th>Total MH Related Calls</th>
</tr>
</thead>
<tbody>
<tr>
<td>2012</td>
<td>2430</td>
<td>NA</td>
<td>914</td>
<td>3344</td>
</tr>
<tr>
<td>2013</td>
<td>2575</td>
<td>NA</td>
<td>1001</td>
<td>3576</td>
</tr>
<tr>
<td>2014</td>
<td>2516</td>
<td>670</td>
<td>1026</td>
<td>4212</td>
</tr>
<tr>
<td>2015</td>
<td>2652</td>
<td>637</td>
<td>1130</td>
<td>4419</td>
</tr>
<tr>
<td>2016</td>
<td>3025</td>
<td>1278</td>
<td>1290</td>
<td>5593</td>
</tr>
<tr>
<td>2017</td>
<td>3475</td>
<td>1664</td>
<td>1173</td>
<td>6312</td>
</tr>
<tr>
<td>2018</td>
<td>3483</td>
<td>1887</td>
<td>1674</td>
<td>7044</td>
</tr>
</tbody>
</table>

## Total Calls for service Mesa Police Department

<table>
<thead>
<tr>
<th>Year</th>
<th>Dispatched Calls</th>
<th>Officer Initiated Calls</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>2011</td>
<td>165,686</td>
<td>153,169</td>
<td>319,462</td>
</tr>
<tr>
<td>2012</td>
<td>165,542</td>
<td>147,239</td>
<td>313,221</td>
</tr>
<tr>
<td>2013</td>
<td>164,379</td>
<td>126,073</td>
<td>290,853</td>
</tr>
<tr>
<td>2014</td>
<td>161,334</td>
<td>116,442</td>
<td>277,842</td>
</tr>
<tr>
<td>2015</td>
<td>164,261</td>
<td>143,829</td>
<td>308,090</td>
</tr>
<tr>
<td>2016</td>
<td>172,703</td>
<td>116,331</td>
<td>289,034</td>
</tr>
<tr>
<td>2017</td>
<td>174,417</td>
<td>126,623</td>
<td>301,040</td>
</tr>
</tbody>
</table>
Total Response Volume all Types 2010-2018

2010: 49049
2011: 53486
2012: 54707
2013: 55913
2014: 57519
2015: 62999
2016: 66174
2017: 67421
2018: 68650

2010-2018: 29%
CM BH Firehouse and ZOI Data through February 2018

Data from 1/12/15 to 2/28/2018
Average time on Scene: 1 hour 36 min
Turnout time Avg. : 1:52
Travel Time Avg. : 13:00
Shift Days in program: 1053

CAD DISPATCHES: 4462
5.5 Calls per Shift
3.5 Patients per Shift

EPCR'S: 3114

PATIENTS: 2638

CM 2204: 100
18 Shifts in January
CM BH Calls by Day of the Week

- Mon: 628
- Tue: 796
- Wed: 850
- Thu: 785
- Fri: 711
- Sat: 447
- Sun: 402
Payer Mix/Disposition

CM BH PATIENT PAYOR MIX JANUARY 2018

- MMIC/AHCCCS: 49%
- MEDICARE: 15%
- PRIVATE INSURANCE: 17%
- NO INSURANCE/UNK: 19%

Data compiled from

CM BH Run Disposition

- Transport to Behavioral Health Facility: 1189
- No Patient with Ticket: 477
- Treated/Transported with Medic Ride-in: 290
- APP Treat & Refer (CCU, CCS Only): 248
- Treated, Transferred Care to Transport...: 218
- Evaluated/Treated, Refused Transport...: 183
- APP Release (CCU/CCS only): 101
- Transport to Detox Facility: 89
- APP Treat & Release (CCU/CCS Only): 80
- Activity (CCU, CCS only): 64
- Refused Eval/Treatment/Transport...: 55
- Advise/Treat and Refer: 43
- APP Referral: 28
- Public Assist: 23
- Transfer Care to CM Medical: 16
- Treated, Transported by this MFMD unit: 12
- Transfer to ALS (SMFD) only: 3
- City of Mesa: 3
- Social Service: 1
### The Intersection of Diversion

<table>
<thead>
<tr>
<th>Hospital Diversion</th>
<th>Jail Diversion</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Increases time to get appropriate care</td>
<td>• Lack of access to treatment</td>
</tr>
<tr>
<td>• Increases cost to the patient, while delaying behavioral health stabilization</td>
<td>• Financial burden on Jails</td>
</tr>
<tr>
<td>• Overcrowding Emergency Departments with patients that can’t be transferred to behavioral health hospitals</td>
<td>• Increased terms of incarceration for those with Mental Health issues</td>
</tr>
<tr>
<td>• Not a therapeutic environment</td>
<td>• Internal strain to handle mental health crisis resulting in isolation or additional charges</td>
</tr>
<tr>
<td>• Increased risk for acquiring an infectious disease.</td>
<td>• Not a humane place to deal with mental health issues</td>
</tr>
</tbody>
</table>
Law Enforcement and the Mental Health Epidemic

- In 2016, 18.3% of the US population was diagnosed with some form of mental illness
  - 44 million US Adults

- In 2016, 4.2% of the US population was diagnosed with a serious mental illness
  - 10 million US Adults
  - 20,000 in Maricopa County

- Children are difficult to determine due to diagnosis guidelines, but the estimate is over 20% of the US population between 13-18 years old.

- Police struggle to identify how many calls are related to mental health.

- People who live with mental illness are 8 times more likely to be jailed.
Progress

1. CIT training for Police officers
2. CIT training opened to firefighters and dispatchers
3. CST training for firefighters
Crisis Intervention Team Training

• 40 hours of advanced training
• Understanding Psychiatric Disorders
• Traumatic Brain Injury
• Substance Abuse
• Dementia
• Resource Utilization
  • Homelessness
  • Crisis Services
  • Petition Process
Specialty Programs

MFMD Innovation CMS Grant
Behavioral Health Unit

Mesa Police Department Crisis Response Teams
Community Medicine Behavioral Health Unit 2013

- Captain Paramedic & a CPR Licensed Crisis Counselor
- Provide support to Law Enforcement
- Medical and mental health evaluation in the field
- Transport to most appropriate Behavioral Health Facility
- Connecting patient to community resources
- Counselor assessment may allow patient to remain home with a safety and follow-up plan
Community Care Initiative

911 Activation
13:01
Mesa Police Department and CM201: Patient has self inflicted cuts that require sutures.

CM 201 responds with repaired patients wound, gave tetanus shot, and wrote a prescription for an antibiotic.

CM 2202 mental health assessment and transported to Aurora Behavioral Health Hospital.

Definitive Care
14:45
Goals of the Crisis Response Team

- Improve Community Service
- Mitigate Liability
- Improve Public Safety
- Improve Collaboration with Mental Health Service Providers
- Reduce Use of Force Incidents
- Reduce Calls for Service
Crisis Response Team Members and Responsibilities

- Team Responsibilities
  - Service of mental health detainers
  - Monitoring persons with mental illness or cognitive impairment who pose a threat to themselves or others in effort to *divert from judicial system*.
  - Partnering with mental health providers, the court system, and the jail systems
    - The Seriously Mentally Ill (SMI) population spend 30 more days in jail than the rest of the population on average.

- *Training for CRT detectives includes proficiency in CIT, all advanced CIT, and FBI negotiator Training.*
Work that needs to be done.

When policies are drafted, there needs to be connectivity. We can’t keep working in silos. The policies can’t place unrealistic expectations on partnering agencies.

When training is delivered, we recommend soliciting approval from the partnering agencies.

There needs to be working partnerships at the street level. We encourage collaboration on every call. Let’s learn together.

Field providers must all slow down when appropriate. We are all action oriented and sometimes rush to bring resolution to a problem instead of taking our time and bringing appropriate resolution.
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