

ALTERNATIVE PUBLIC SAFETY STRUCTURES AND OPTIONS

Presentation for:
Somerville City Council

By: Stephanie Guirand
The Black Response Cambridge

Important Questions

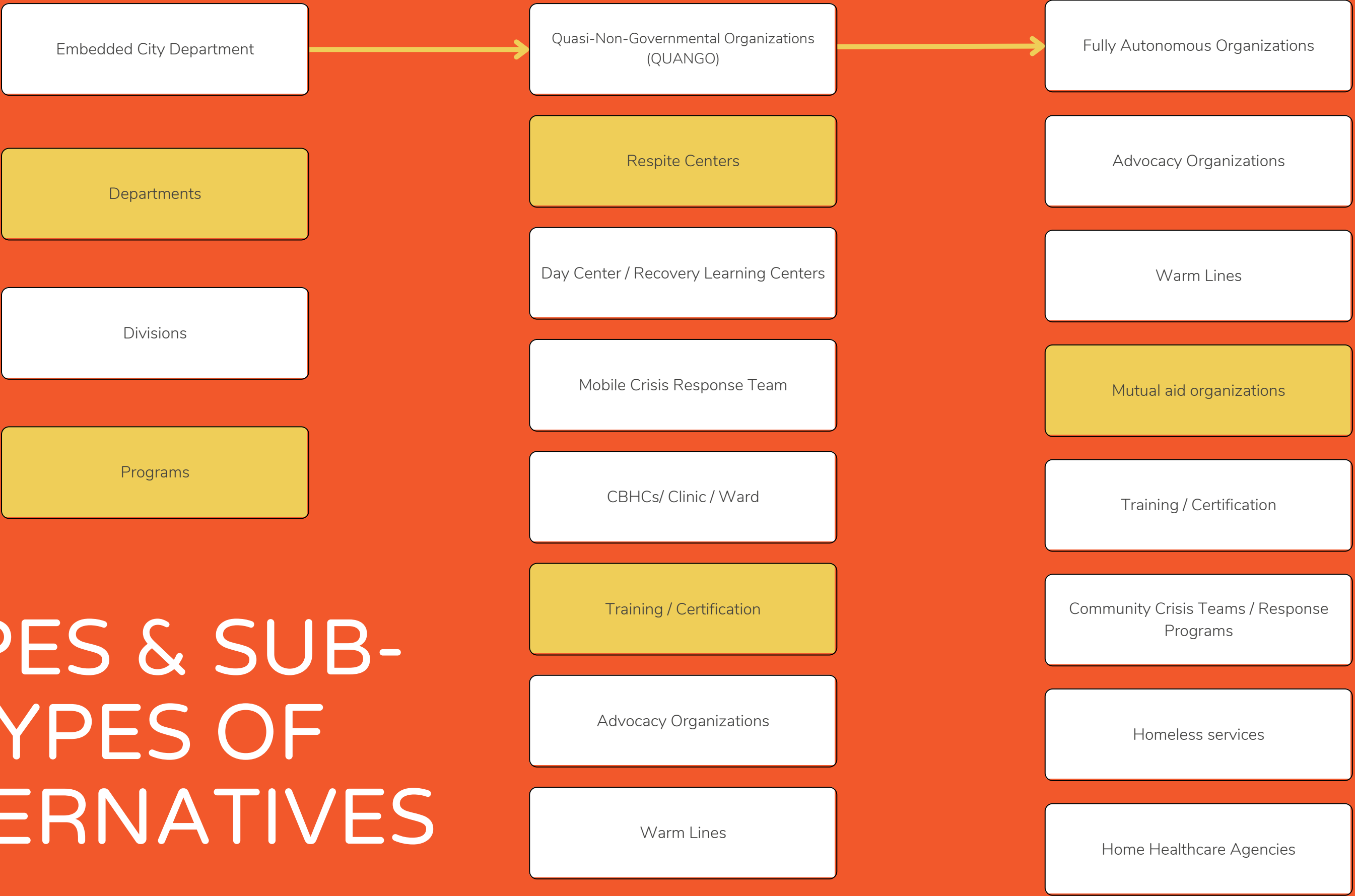
Are you developing an alternative
to Public Safety and Public Health
Response?



VS

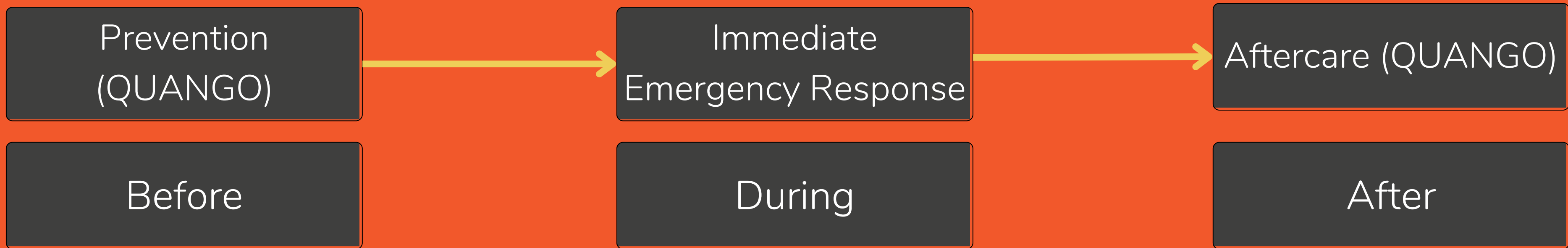


WHERE SHOULD THIS PROGRAM BE HOUSED?



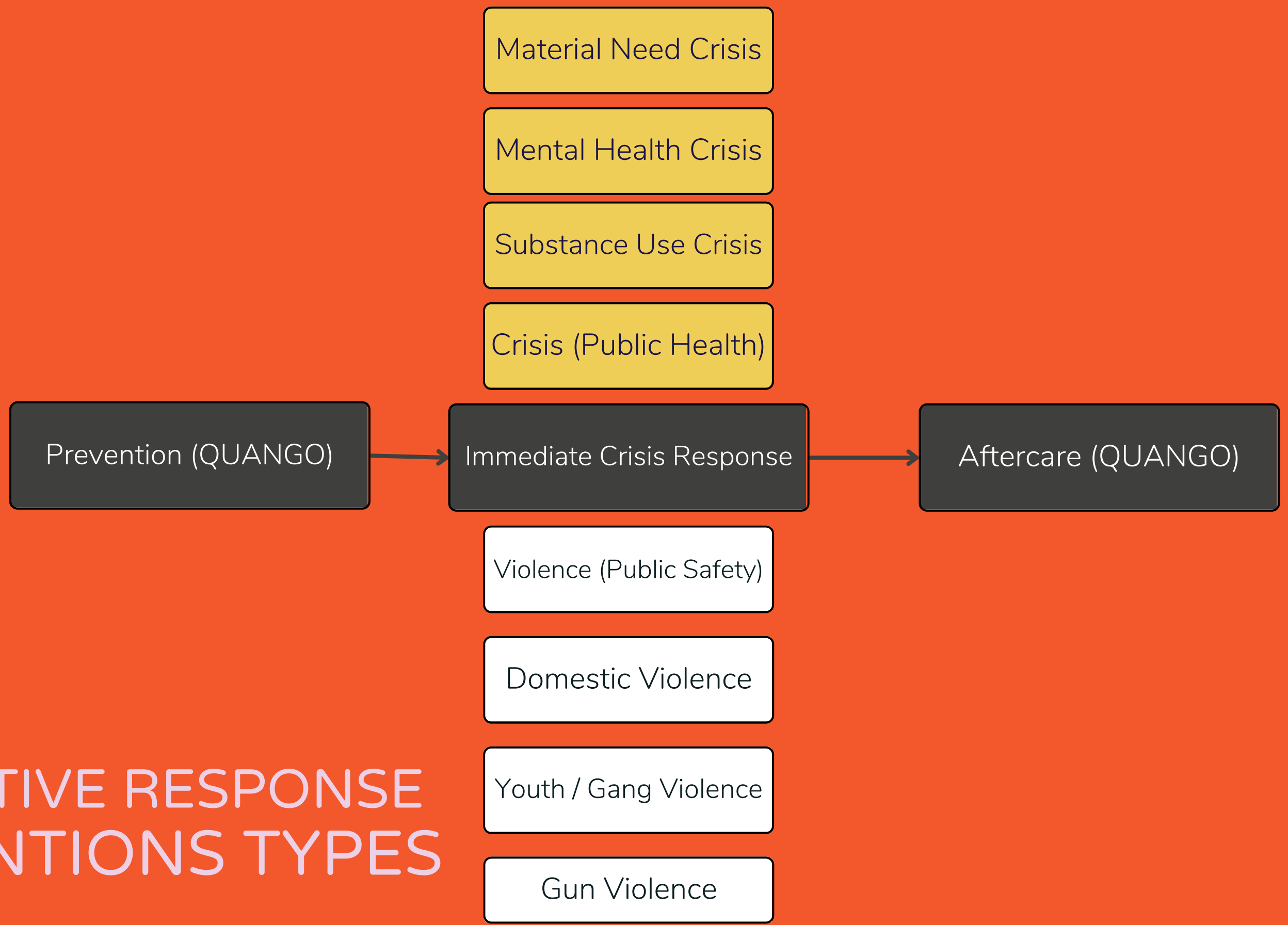
TYPES & SUB-
TYPES OF
ALTERNATIVES

AS WHICH POINT WILL THE ALTERNATIVE INTERVENE?



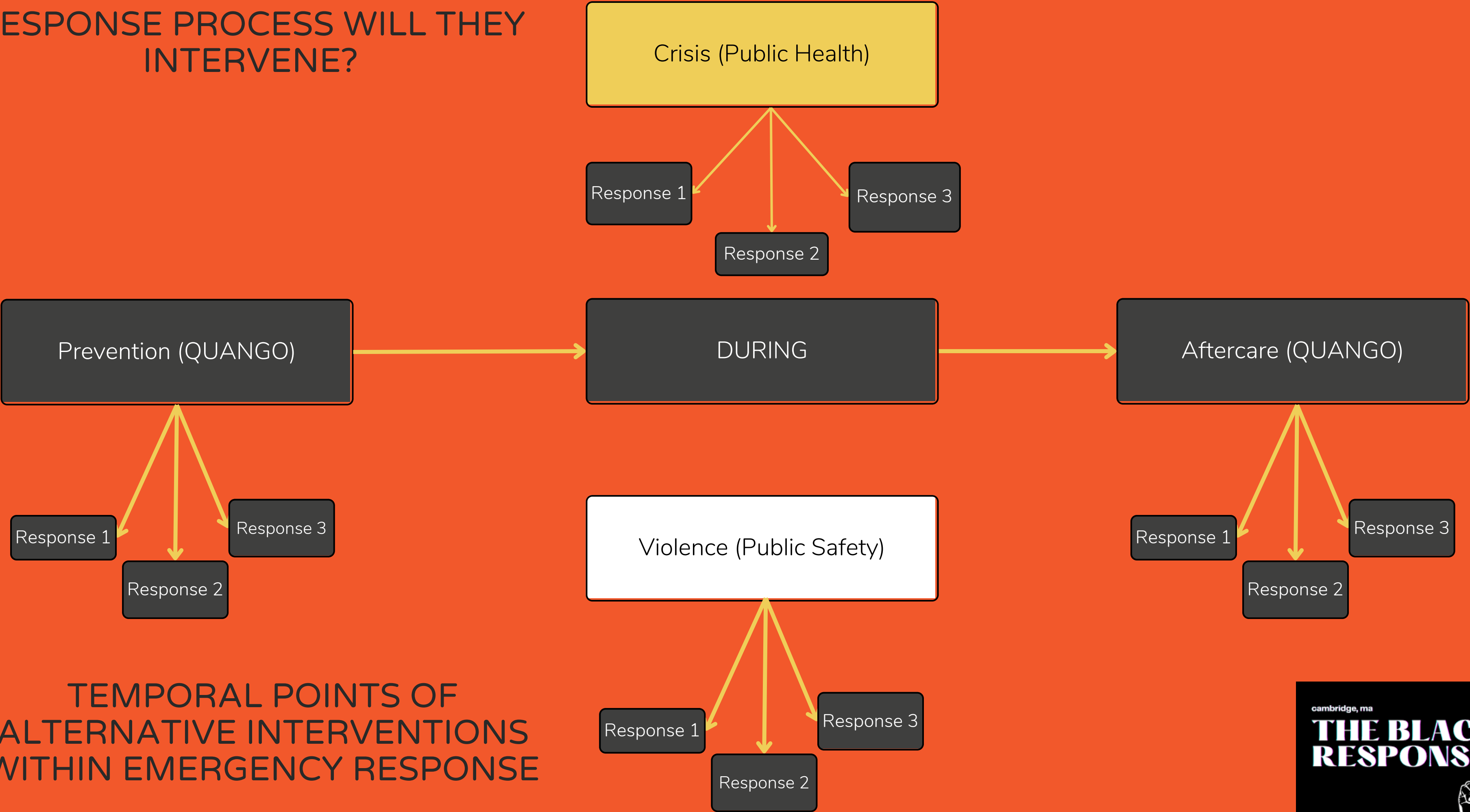
TEMPORAL POINTS OF INTERVENTION FOR ALTERNATIVES

WHAT WILL THE ALTERNATIVE INTERVENE IN?



ALTERNATIVE RESPONSE
INTERVENTIONS TYPES

AT WHICH POINTS IN THE
RESPONSE PROCESS WILL THEY
INTERVENE?



TEMPORAL POINTS OF
ALTERNATIVE INTERVENTIONS
WITHIN EMERGENCY RESPONSE

WHO SHOULD ALTERNATIVES SERVE?

People who need alternatives:

- Undocumented community members
- Formerly incarcerated community members
- People who survive poverty in public
- People who work in informal economies (under the table, sex workers, etc.)
- People who histories of trauma perpetuated by police or clinicians
- Residents who rely on government subsidies (Public housing residents, section 8 voucher residents, people on SNAP, RAFT or other services, etc.)

WHO FACILITATES ALTERNATIVE RESPONSE?

The Police

Clinician / Social Worker

Community Responder

TRAINING

Police Academy

Medical / Master's Degree

Peer Specialist Certification

THERE IS A SHORTAGE OF SOCIAL WORKERS IN THE
REGION, HOW WILL SOMERVILLE CONTRIBUTE THE
DEVELOPMENT OF THE WORKFORCE?

WHAT POWERS AND TOOLS DOES THIS ALTERNATIVES HAVE?

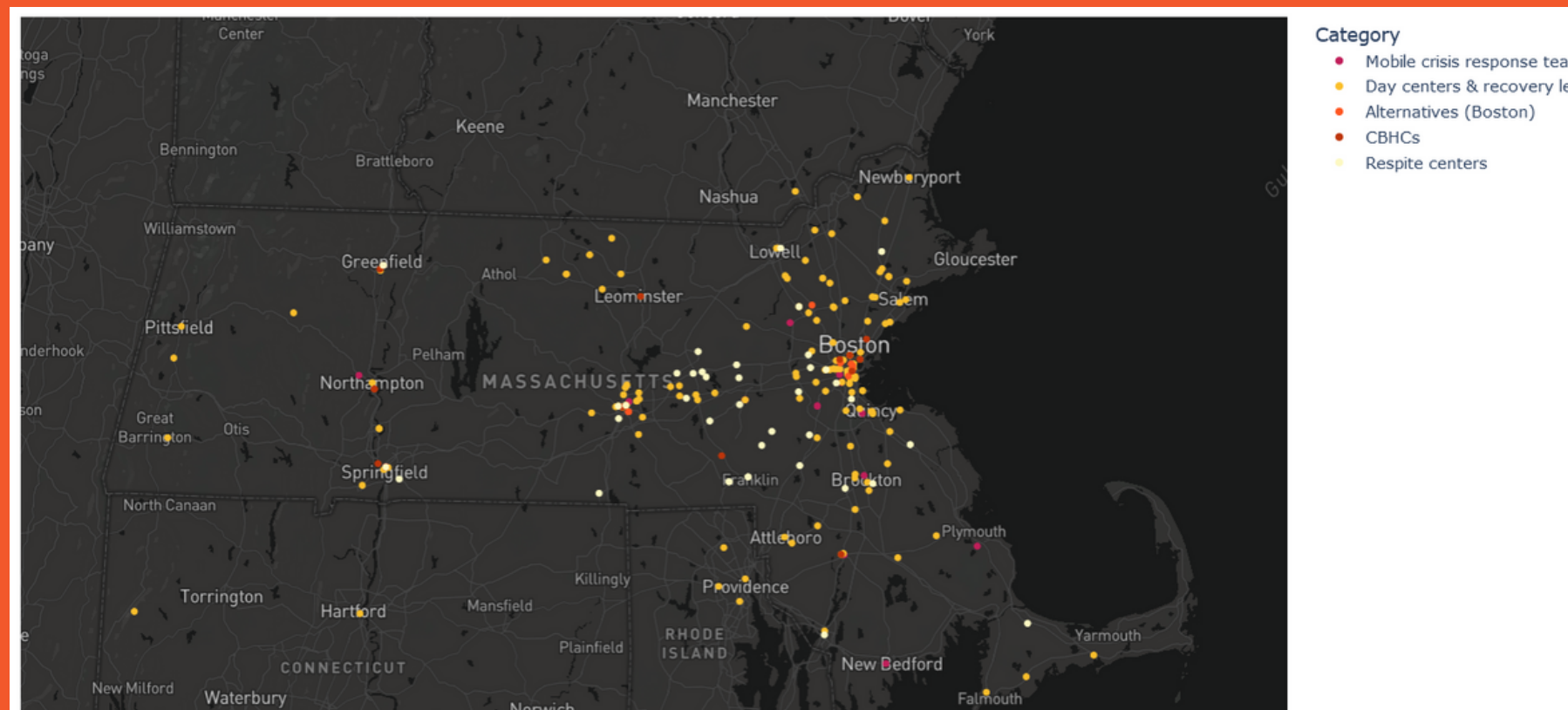
Powers:

- Write letters for temporary emergency accommodations or proof of residency / proof of connection to Somerville
- Reclassify a call or amend call / report record (from noise complaint to mental health crisis)

Tools:

- Information (about resources, services, etc.)
- Money
- Housing / shelter / voucher
- Food / coupon / voucher
- What are people asking for in Somerville?

WHERE DO ALTERNATIVES LIVE IN MASSACHUSETTS?



Alternatives in Massachusetts:

- Community Responders for Equity, Safety & Service (CRESS) in Amherst, MA
- Department of Community Care, in Northampton, MA
- All Lynn Emergency Response Team (ALERT), Lynn, MA
- Cambridge HEART, Cambridge, MA

Other cities and communities in discussion:

- Boston, MA
- Lowell, MA
- Brookline, MA
- Medford, MA
- Newton, MA

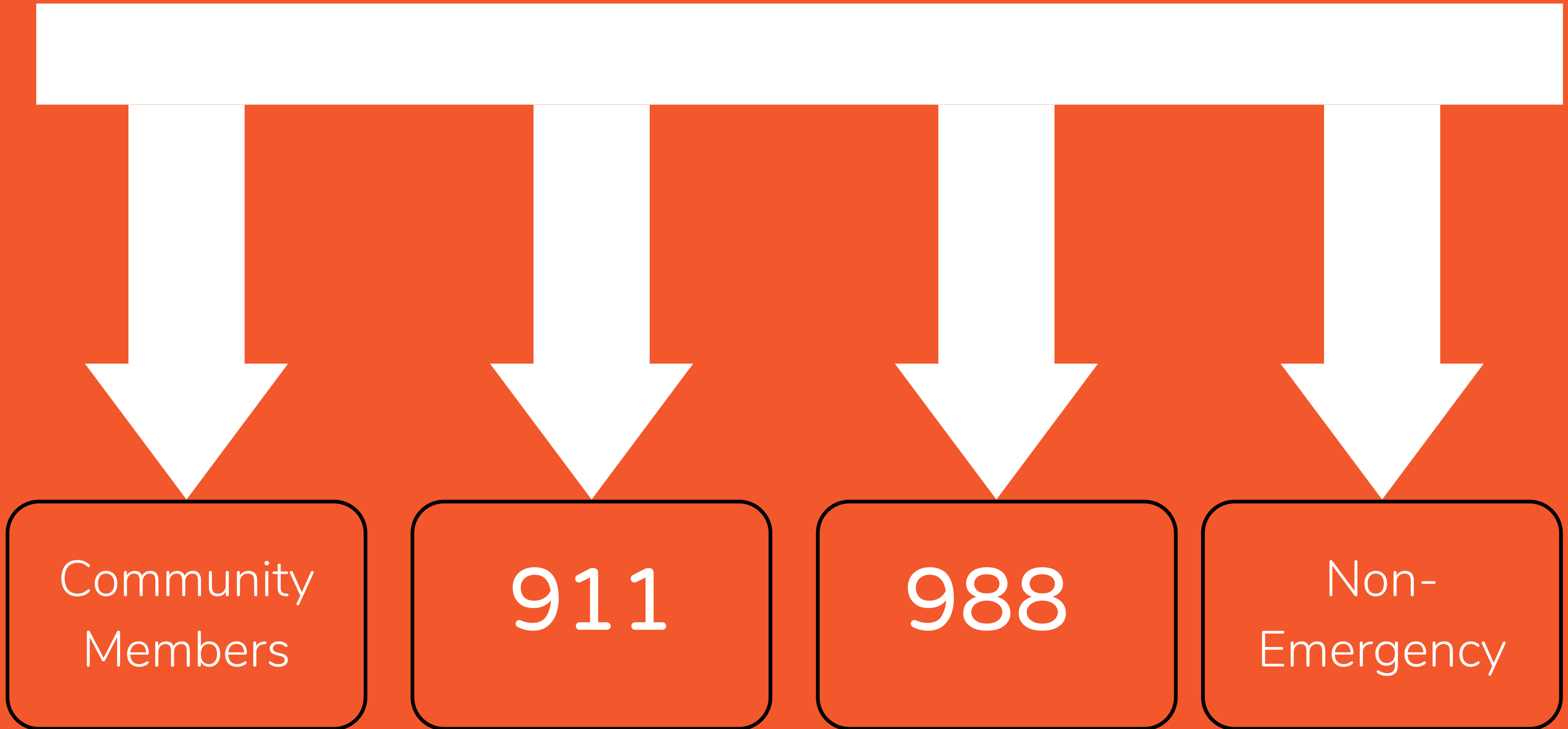
WHAT CAN SOMERVILLE LEARN FROM THE OTHER PROGRAMS?

Learn more:

<https://cloud.datapane.com/apps/M38YzG7/massachusetts-alternatives-dashboard/>

Where will the calls for this program come from?

WHERE WILL THE CALL GO?



HOW WILL THIS PROGRAM BE REACHED?



Ways for the community reach HEART:

- Direct phone line (phone number)
- Our website
- Text messaging (MSM)
- Social media (Facebook, Instagram, Twitter)
- Email
- In-person drop in times and/or community events
- Community outreach times (mobile outreach in communities).



The Massachusetts Behavioral Health Roadmap

24 hour Behavioral
health crisis hotline

25 Community
Behavioral
Health Centers

Mobile Crisis Response
Teams

988 Implementation in Massachusetts

988 Call Centers

Crisis Centers

Emergency Service
Programs (ESPs)

THE MASSACHUSETTS BEHAVIORAL HEALTH IMPLEMENTATION TIERS

Federal Government

Massachusetts State
Government

Municipal Governments

988

Behavioral Health Roadmap

Alternative Response
Teams


cambridge, ma

**THE BLACK
RESPONSE**



PUBLIC HEALTH - FOCUSED ON IMMEDIATE RESPONSE

DENVER STAR MODEL

Organization	Program Type	Staffing Certification / Licensing	Calls Types
<p>Denver Support Team Assisted Response (STAR)</p> <p>Please note that STAR is a co-optation of a community designed initiative called DASHR.</p> 	<p>Embedded City Department : STAR is dispatched through Denver 9-1-1 Communications. All of the civilian call takers and dispatchers at the communications center are trained to triage STAR calls and send the most appropriate available response. The calls are screened for safety and appropriateness.</p>	<p>Support Team Assisted Response (STAR) pairs a Mental Health Center of Denver (MHCD) mental health clinician with a Denver Health paramedic or emergency medical technician (EMT) to respond to low risk, low acuity calls coming into the 9-1-1 system. The team can provide medical assessment/triage, crisis intervention, de escalation, transportation and resource connection for community members in need.</p>	<p>STAR responds to low risk calls where individuals are not in imminent risk. STAR deals with low level behavioral health crises and issues that arise from public health needs and poverty. Some examples are, trespass calls, welfare checks, intoxicated parties and mental health crisis.(Source: Website)</p> <p>(HOW) WILL THIS PROGRAM BE ACCOUNTABLE TO THE COMMUNITY?</p>

WHAT KINDS OF CALLS WILL BE REALLOCATED TO THIS ALTERNATIVE?

CALL TYPES THAT ARE COMMONLY DISPATCHED TO ALTERNATIVE RESPONSE PROGRAMS

This is a list of common terms and does not include calls relating to mental health, evaluation, or suicide, although those situations often qualify for an alternative response.

- Welfare Check
- Down & Out/sleeper/Unsheltered individual/subject down
- Intoxicated person
- Panhandling
- Obstructing a business/sidewalk
- Refusing to leave a business/trespass
- Loitering
- Person in traffic/traffic hazard
- Disorderly person
- Public urination/Indecent exposure
- Public drug and alcohol use
- Incurigible youth/disorderly juvenile
- Found senile/confused person/disoriented person
- Disturbance/Nuisance complaint
- Noise complaint
- Neighbor conflict
- Family/relationship dispute
- Needles for pickup
- Death notification
- Chronic caller/repeat users
- Public assist
- Incomplete 911 call
- Police/Fire/EMS request assistance (up to 30% of calls some programs respond to)

QUANGO: CAHOOTS MODEL

Cahoots - The name, an acronym for Crisis Assistance Helping Out On The Streets. Its mission is to improve the city's response to mental illness, substance abuse, and homelessness.



Not a co-response

Structurally Housed

QUANGO: Cahoots is a program of the White Bird Clinic, a 501c3 paid through government contracts.

Call Source

Through 911 - in Eugene, OR or through Non-Emergency Line in Springfield, OR

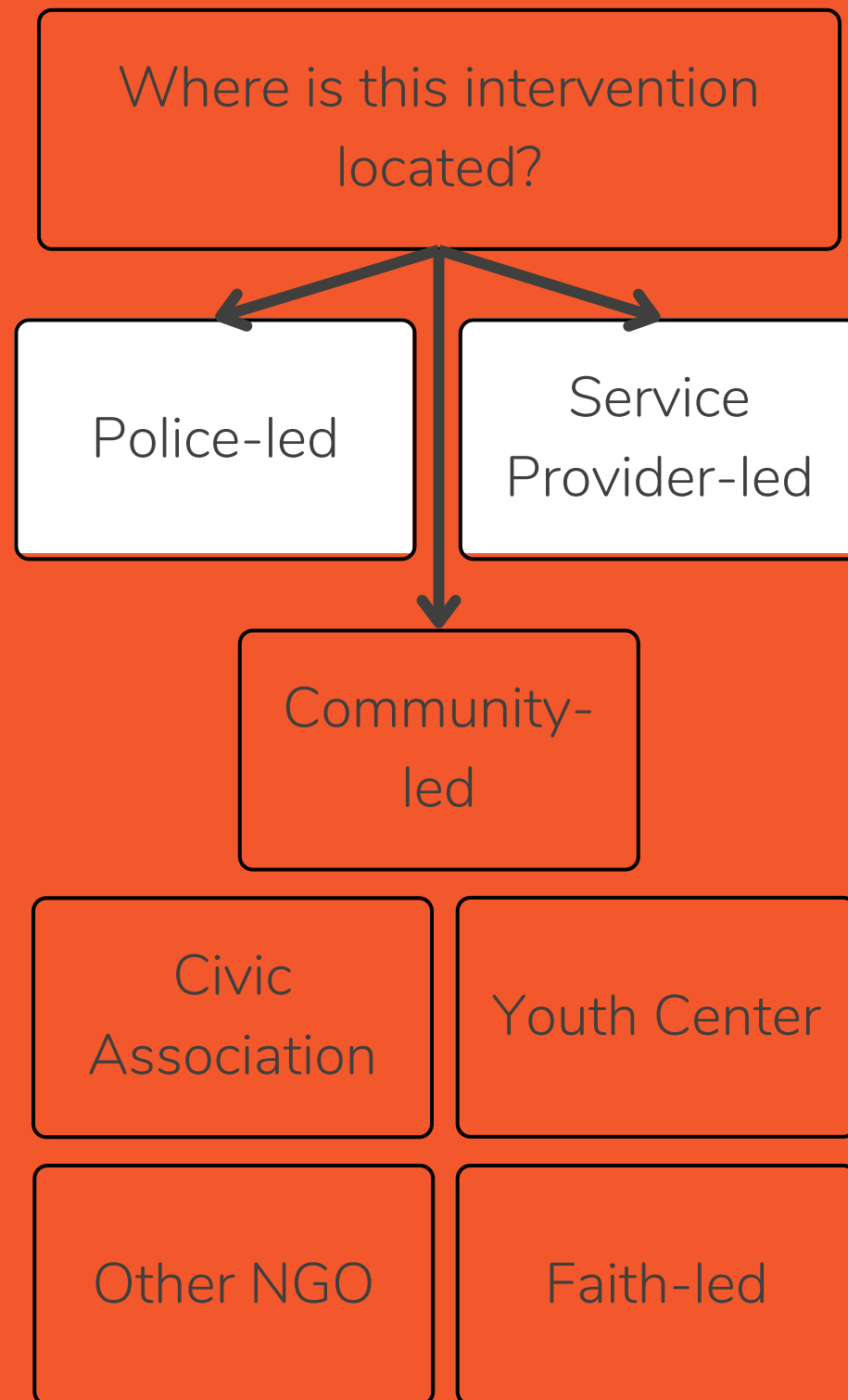
Temporal Point of Intervention

Mobile Crisis Response - They intervene during crises.

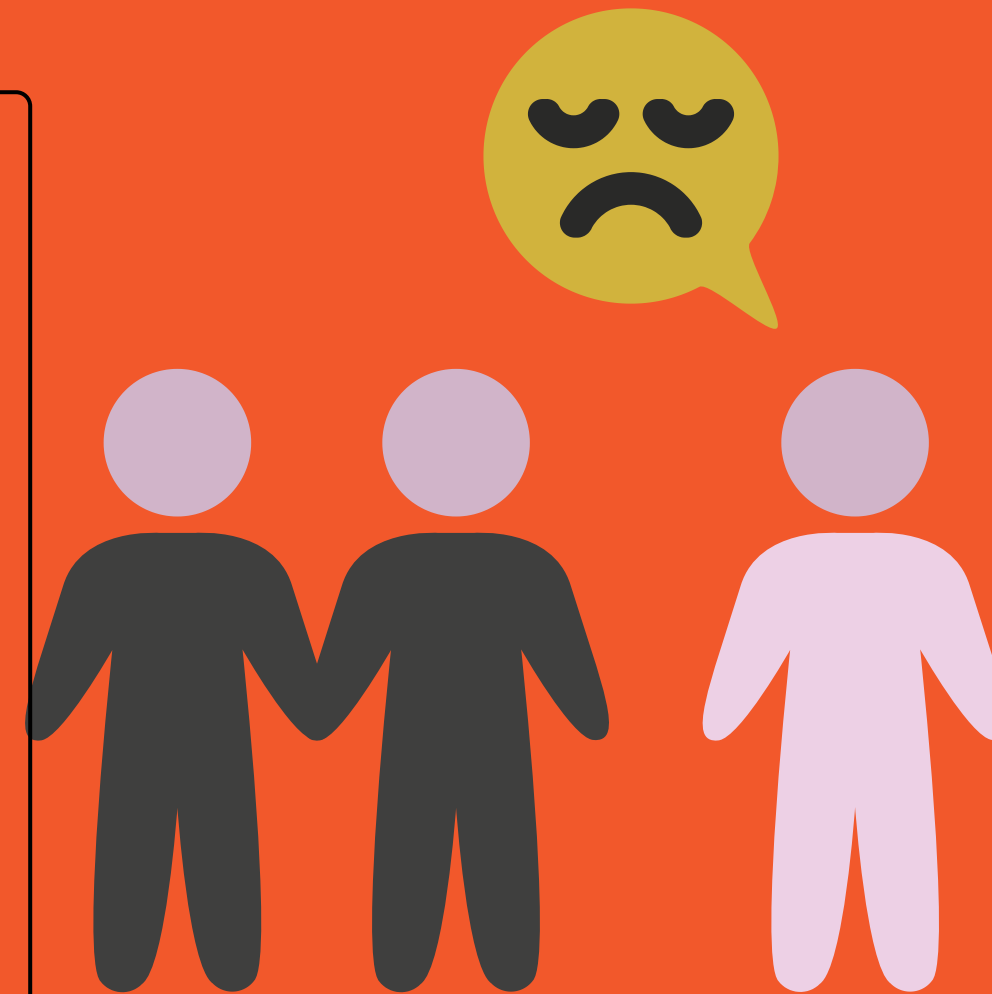
Responders:

Cahoots responder teams include a crisis intervention worker who is skilled in counseling and de-escalation techniques, and a medic who is either an EMT or a nurse.

QUANGO: VIOLENCE INTERRUPTER MODEL



Responders:
Community members with connections to, histories of, or are in danger of violence are trained to respond to violence in their communities. They put themselves in front of the violence as it is unfolding.



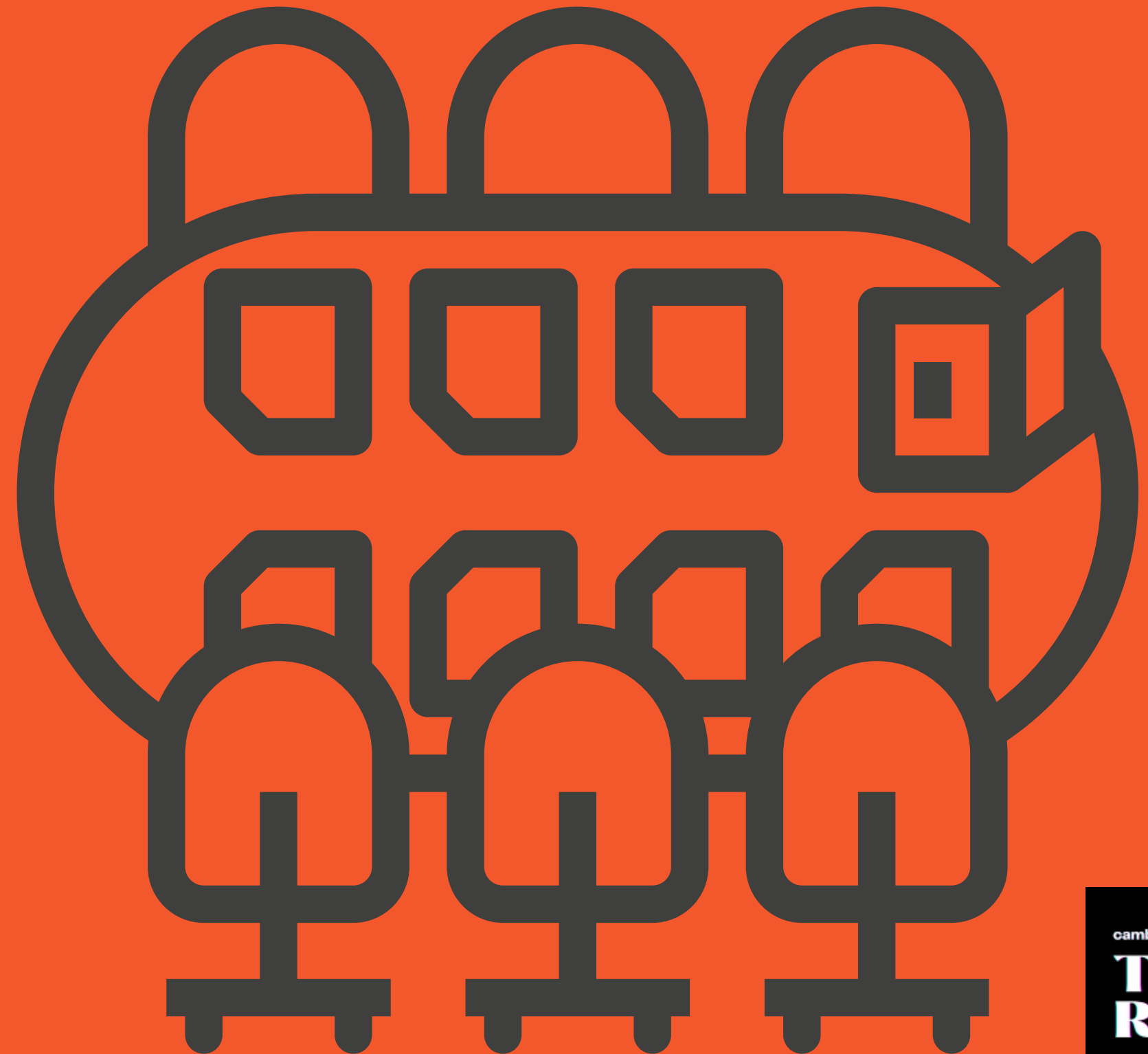
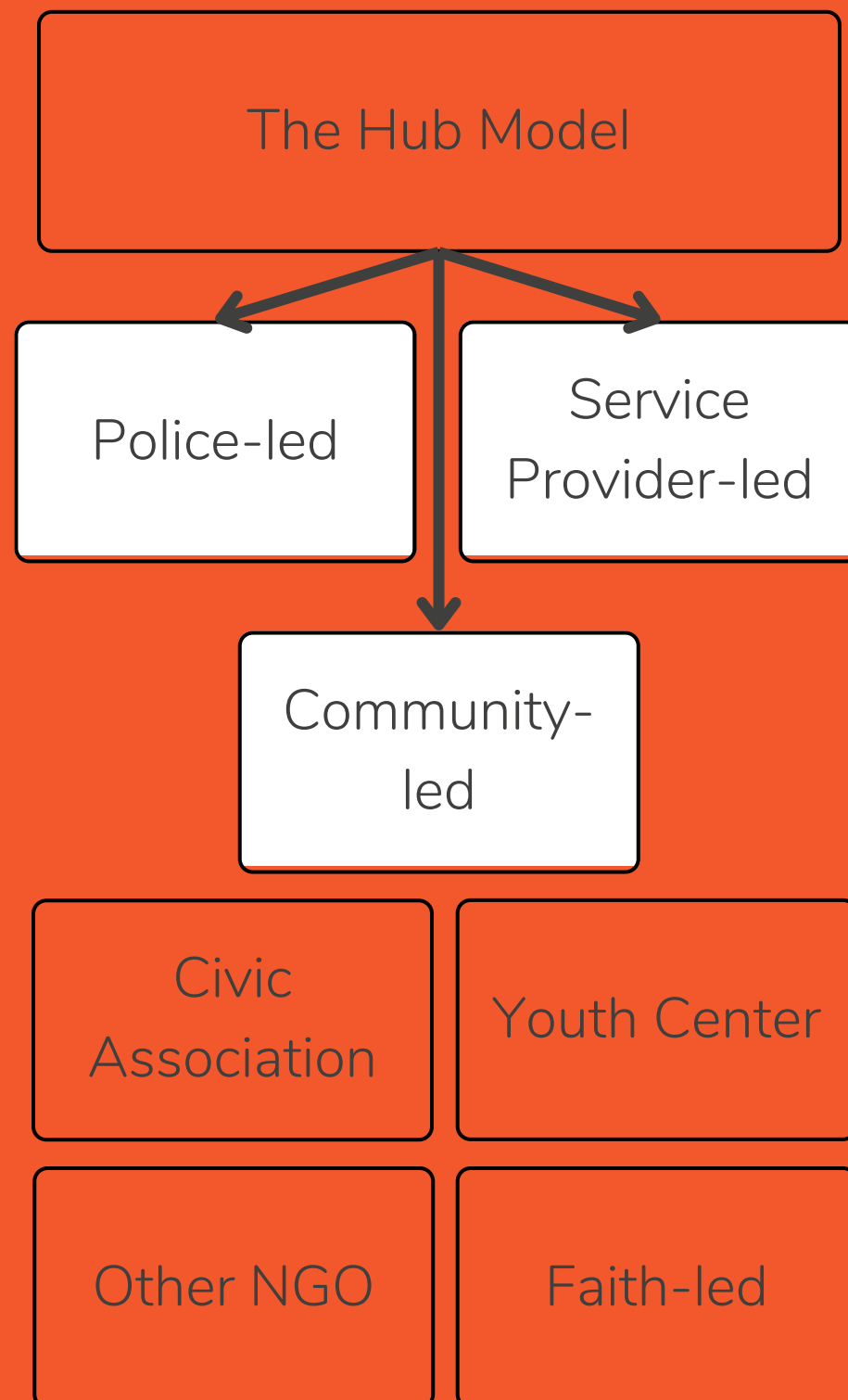
The violence interrupter model does not require specialized degree, just de-escalation and other locally determined training.

TRUST!!!!

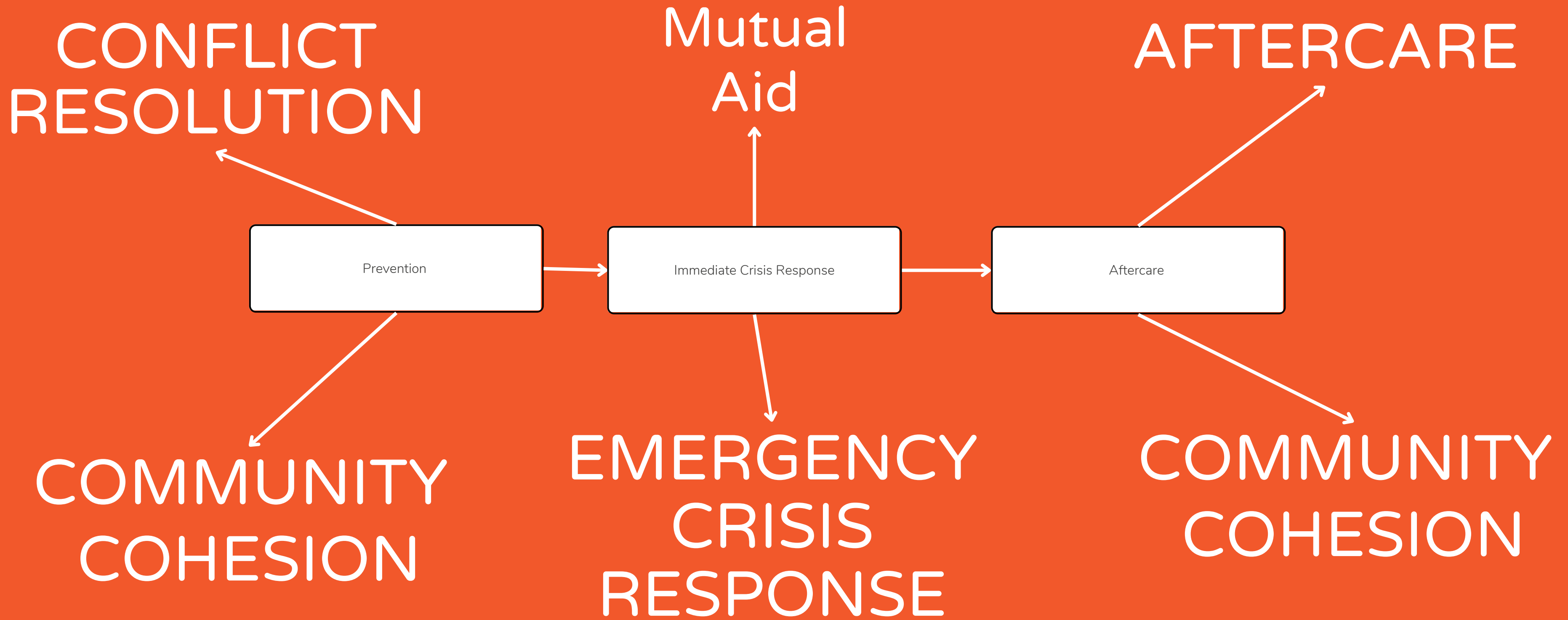
Who needs the trust?

The violence interrupter model does prevention and immediate violence response de-escalation.

QUANGO: HUB MODEL

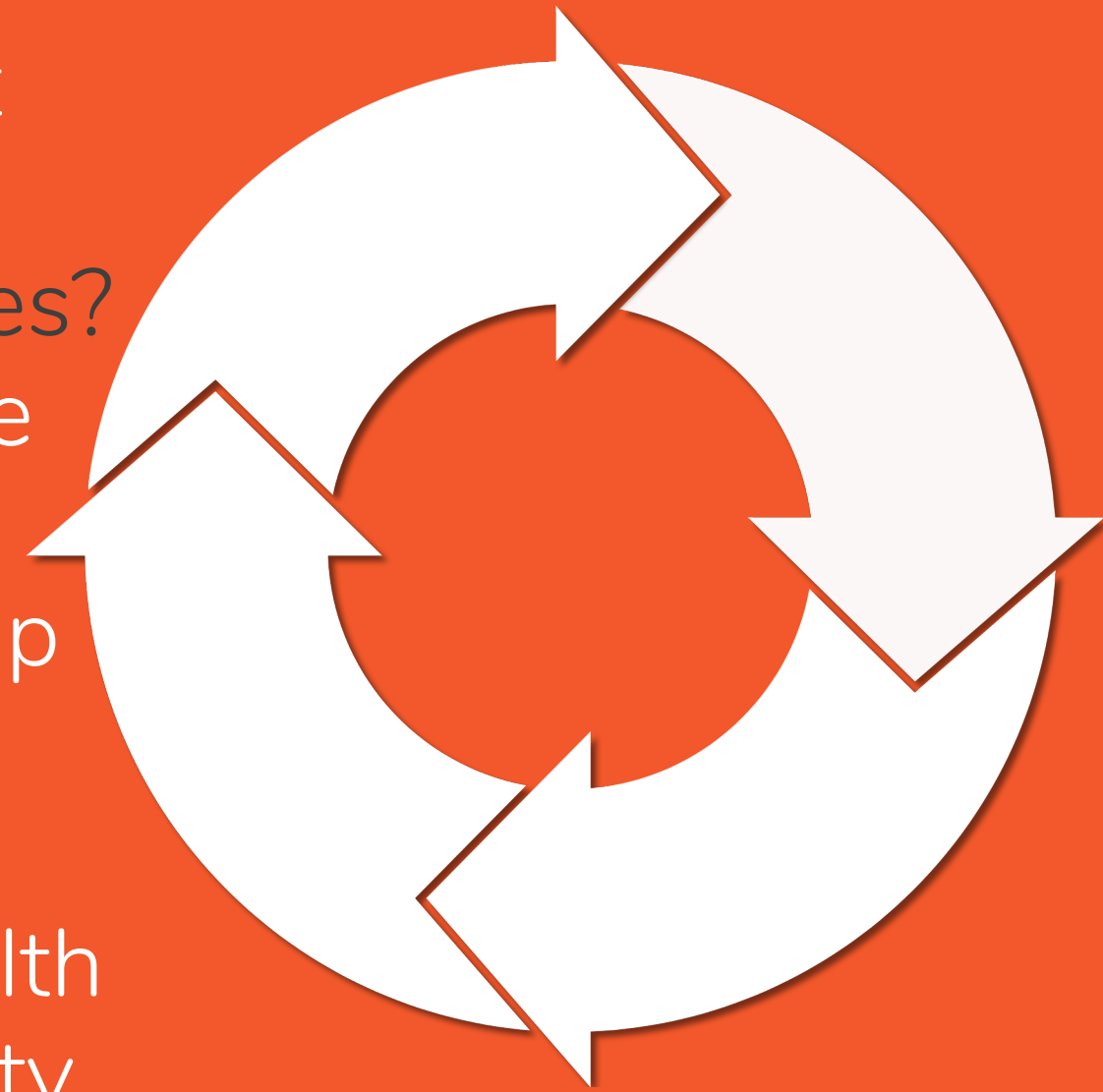


CAMBRIDGE HEART MODEL



PROCESS QUESTIONS

- How will this process move forward? A community centered process. (Surveys, interviews, focus groups, consultants, etc.)
- Who are the stakeholders? Vulnerable populations.
- Who has confidence in the existing systems? Who doesn't have trust in existing systems?
- What do marginalized communities know about alternatives? What does vulnerable populations need from an alternative program?
- Who is already doing this work? Community Outreach, Help and Recovery (COHR) / Cambridge Health Alliance (CHA)
- What kind of data exists? Who supplies the public safety data? The police department and department of public health
- What kind of data does Somerville want? Community Safety Data
- What is the evaluation plan for an alternative?



SOMERVILLE DESERVES
A PARTICIPATORY COMMUNITY PROCESS

CAMBRIDGE HEART'S PROCESS

- Participatory community-led process
 - Autonomous community organizations
- Educating community members about alternatives and what is possible
- Research methods (community education, surveys, focus groups, etc.)
 - Ethical methods considerations for bringing in the voices of the most marginalized
- Prioritized vulnerable populations

SOMERVILLE DESERVES
A PARTICIPATORY COMMUNITY PROCESS

THE END