

## Notes from Meeting Eight

Wednesday, January 27, 2021, 5pm–7pm, Online

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### Attendance

#### Working Group Members Present

- Aaron Amede, Resident
- Kathleen Babeu, Social Services Director
- Dana Baldwin, Behavior Health Liaison
- April Caricchio, Councilor
- Craig Freshley, Facilitator
- Greg L'Heureux, Finance Director
- Margarita Salguero-Macklin, Resident
- Timothy Sheehan, Police Chief
- Pedro Vazquez, Resident
- James Wilson, Fire Chief

#### Working Group Members Absent

- None

### Objectives

- Discuss and agree on a final draft of our recommendations.
- Review and finalize the table of contents for our report to City Council.
- Discuss and agree on measurable outcomes.
- Reflect and share comments about our overall process.

### Agenda

- 5:00      **Opening**
- Facilitator Craig Freshley will welcome everyone and explain the Zoom format and Meeting Agenda.
  - Craig will also remind us of some of our guidelines and where we are in the process of fulfilling our charge.
- 5:10      **Recommendations**
- We will review the latest draft recommendations (just revised based on the latest).
  - We will discuss changes and priorities and we expect to approve a final draft of the recommendations.

- 6:15      **Report Table of Contents**
- Any feedback on the Table of Contents that Craig Drafted?
  - We will discuss and refine.
- 6:25      **Measurable Outcomes**
- If any of our recommendations are successfully implemented, what measurable outcomes can we expect?
  - We will look at the advance survey data, discuss, and come to some conclusions about this.
- 6:40      **Next Steps**
- We will discuss expectations for reviewing and approving the final Report of Findings and Recommendations.
  - We will also discuss the City Council presentation scheduled for the evening of February 16.
- 6:50      **Closing Comments**
- Each member of the Working Group is encouraged to make a brief last comment such as a reflection on our entire process and/or a hope for the future.
- 7:00      **Adjourn**

## Opening Remarks

Facilitator Craig Freshley made the following remarks.

- Welcome everyone to the Eight meeting of the South Portland Police Services Review Working Group, January 27, 2021.
  - My name is Craig Freshley, the Working Group Facilitator
- First some important announcements about how this meeting will work.
  - Please note that this meeting is being recorded and that the recording will be publicly available. Chat comments will also be saved and will be publicly available. However, please don't expect me to pay attention to chat comments during the meeting.
  - If you are using a nickname or an alias we really appreciate it if you can "rename" yourself so everyone can easily see the actual names of everyone who has joined us today.
  - This meeting has closed captioning available
  - I have posted the Agenda in the Chat and have also posted a link where you can find the full version of the Agenda and several other documents related to this effort.
  - Although the general public is invited to watch, this is a meeting of Working Group members and public comments will not be allowed IN this meeting.

- In the Chat I have posted and email address that anyone can send any comment to.
- To ground us, let's take a look at our charge and where we are in this process.

## Purpose

Our purpose is to present the South Portland City Council with recommendations as to whether there should be changes to how certain calls for service are responded to by the City of South Portland.

## Duties

As part of its duties, the Working Group shall:

- First answer the following question before embarking on other duties: “There is a perception that some calls for service are escalated into a worse situation due to the response of a uniformed, armed police officer, and that these scenarios could be handled more appropriately by different personnel, such as a social worker. Is there evidence in South Portland that these types of calls result in an escalated response and that the individual(s) in need of assistance do not receive such assistance?” (The Working Group should reach consensus as to what defines an “escalated response”.) Statistics and examples should be used to help answer this question. The response to this question, along with other considerations (i.e. cost savings, relief on stress to police officers, and resident health and welfare) shall serve as the basis for undertaking the following duties:
  - Research other models of providing a response to certain calls for service that either may not require the presence of a police officer or involve both a police officer and other professional, such as a social worker.
  - Evaluate whether these other models would be beneficial and/or necessary in South Portland.
    - If so, provide a recommendation to the City Council. This recommendation should include a review of all options studied; the problem identified in South Portland that is intended to be addressed; the selected option and how it will address the problem identified as existing in South Portland; and an estimate of the associated costs to implement such a program. The recommendation should also provide a measurable outcome(s) for the City to track so that it can evaluate the effectiveness of this new program in addressing the stated problem.
    - If not, provide a review of all options studied and explain why the Working Group believes a problem does not exist or is not likely to exist in South Portland that would necessitate the implementation of such a model.

## Guidelines Reminder

Guidelines are in the Meeting Minutes of November 17, 2020

All notes are at: <https://bit.ly/3f95eFO>

## Advance Input on the Draft Recommendations

Craig collected advance input from Working Group members on a draft set of recommendations. He provided an advance survey with which there was 100% participation.

### Priorities

2. Contracted Provider of Mobile Crisis Services - 7
3. Fire Department Community Paramedics - 7
5. More Awareness of Available Services - 5
1. Police Department Alternative Response Personnel - 4
4. Continuous Training for Police - 4
6. Continuing Community Conversation - 2

### Nature of our Recommendations

Not a clear consensus between these two approaches:

- a. A “menu” of equal recommendations
- b. One or two top recommendations (with other options explained)

### Funding

- 4 said way less than \$250k
- 1 said less than \$250k
- 2 said spend at \$250k
- 0 said spend more than \$250k

## Draft Recommendations - Text

The red notes below relate to how we will write this up in our final report.

Based on the advance input, Craig prepared a draft write up of the recommendations, including an introduction.

We discussed the draft as a group and generally agreed to the following:

### Introduction

To reduce the number of crisis response calls that result in any type of escalation we are recommending a two-pronged approach: (1) Reduce the number of crises needing a Police response, (2) Continually improve methods of response to minimize chances of escalation when the Police are called. Our recommendation contains strategies that work on both of these fronts. The first three parts of our recommendation are the three most promising ways to get more professionals “on the street” helping people in need; people who might otherwise require a crisis call.

Be sure to mention “Getting people the assistance they need.”

Each of these approaches is designed to prevent crisis calls from being needed in the first place and divert people from the criminal justice system and into the social services system. Yet our recommendation also includes three other strategies; increased expertise among Police Officers, public education, and a continuing conversation about race. You might think of these as “education.” There is much to be learned and by bringing awareness to our employees and our public we can reduce crisis escalation.

We are recommending a variety of approaches requiring different levels of funding potentially available from different sources. While we were not charged to identify funding sources, several prospects surfaced in our discussions such as:

- Community Development Block Grant (CDBG)
- COVID-19 Economic Relief (See details in Appendix)
- Grants from private donors and community residents and businesses
- Hospitals that benefit from reduced Emergency Department visits

We encourage the City to be opportunistic and pursue funding available for any and all of these approaches.

Be sure to mention “To the extent that there is available funding.”

Lastly, although some of recommendations call for activities outside the Police Department this should not be taken as an indictment or criticism of our Police Department. Due to reasons largely unrelated to current behaviors and practices of our Police Department, some people in

crisis are afraid to engage the police and some people have needs more appropriately addressed by non-police, that's all.

## 1. Police Department Alternative Response Team

We recommend that the Police Department continue to pursue the Collaborative Alternative Response Team Pilot that it recently established in combination with the Behavioral Health Unit of Portland Police Department, with the current Police Department Behavioral Health Liaison, and with a contracted employee that Portland has from the Opportunity Alliance.

This approach would essentially add non-uniformed behavioral health capacity to the Police Department. Establishing such a three-person team allows for co-response, where a uniformed officer responds with a non-uniformed behavioral health specialist. Co-response is an opportunity for people to have a positive interaction with a police officer helping a person to have their basic needs met.

I revised the language above – additions and changes welcome.

I'm figuring to delete what's below. Right? There was no discussion or apparent energy for this at our last meeting.

~~If the Collaborative Alternative Response Team Pilot is not feasible, we recommend adding a second Behavioral Health Liaison to the Police Department personnel. This would be a trained mental health and substance abuse worker embedded in the police department, able to provide intervention, education, outreach, and case management. The Liaison functions independently and acts as a connection between South Portland residents and treatment services or facilities, will represent the Police Department in multiple settings, and will coordinate the Police Department's Peer Support program, all under the direction of the Community Response Unit chain of command.~~

Costs

- 100k/year (will take a few months to get started)

## 2. Contracted Provider of Mobile Crisis Services

This approach is to contract with one or more existing local providers such as Amistad or The HOME Team.

Each of these organizations has substance abuse and behavioral health professionals on staff and are able to answer calls anywhere in the South Portland area during daytime hours. They are each proactive with engagement, providing food, and transportation and referral to medical care, emergency shelter programs, and/or social service providers. They provide an alternative option to both emergency rooms and incarceration.

If South Portland contracted with one of these providers they could be called directly by clients, business owners, social service partners, and police officers working the street.

We would publicize widely that these services are available and the general public would be encouraged to call them directly. This is what's most likely to divert crises from the police to social services: someone in the general public seeing someone in need and knowing there's an alternative to calling 911. There are many stories of people who are afraid to engage the police, for whatever reason, so they don't want to call 911 even though they may be in crisis. This would provide a way for such people to reach out and receive services.

We have not gathered enough information to recommend a particular provider. We think it's important that whoever is chosen can provide a broad array of services and would be able to provide 24/7 services in the future if we were able to secure funding. We recommend a bid process with criteria and selection influenced by a multi-stakeholder group.

**Note that the contractor should not report to the Police Chief but could report to the Public Health Director or Social Services Director or another Department Head.**

#### Costs

- HOME Team
  - 2 people, 8 hours/day, 5 days a week: \$180k/year
  - If we split this with Falmouth (they are also exploring): \$90k/year
- Amistad
  - 2 people, 8 hours/day, 5 days a week: \$100k
  - (\$38-\$40k for a full-time position, plus \$2k-\$5k for misc. expenses)

### 3. Fire Department Community Paramedics

Supported by funding from the Keep Maine Healthy program, the Fire Department was able to administer a quasi-Community Paramedic Program that ran for 6 weeks in the fall. We recommend restarting this program as funding allows. It is particularly helpful while in the grip of the COVID pandemic and may become less critical post-pandemic.

City paramedics visited the homeless population during scheduled time periods at area hotels. While on site, they engaged them. While in contact they assessed and treated any minor ailments as well as provide education and resources they might have needed. This engagement resulted in a reduced need for Fire, EMS, and Police responses during the period of the grant.

#### Costs

- 3 days per week year-round: \$70,512
- 2 days per week year-round: \$44,408

#### 4. Continuous Training for Police

South Portland Police Officers are among the best in the state equipped to deal with mental and behavioral health issues. Every officer has received de-escalation training and mental health first aid. Yet there is always room for improvement and new techniques are always evolving. We recommend that the Police Department continue to invest in training and development to remain the best in the state at dealing with substance abuse and mental health issues. We further recommend that the Police Department engage the services of a training professional such as Matt Page-Sheldon.

Mr. Page-Shelton is a recognized subject matter expert on collaboration with law enforcement through initiatives and programming to provide outreach and emergent services to those suffering with SUD, Co-occurring Disorder, and mental health issues. He is the program director of one of the largest and most successful programs in the State of Massachusetts known as the Front Line Initiative. He also has a tremendous amount of experience having previously worked for the largest private provider (Beth Israel Lahey Health Behavioral Services) of mental health and substance use services in Massachusetts in the area of crisis management.

Cost

- A single 2-hour workshop on best practices: \$900
- Matt's time for 6 weeks at 20 hours/week: \$9,900

#### 5. More Awareness of Available Services

The more people are aware of ways to prevent and address crises other than calling 911, the fewer calls there will be to 911. Many resources exist in and near our city to help people in need. In addition to investing in new resources, let's maximize use of the resources already existing. See Appendix for List of Area Social Services.

We recommend that the City and area nonprofits ramp up public awareness campaigns to direct people to appropriate social services.

Cost

- None

#### 6. Continuing Community Conversation

We recommend that a regular conversation about race be institutionalized by our City. We are hoping that an area nonprofit will serve as the convener and we are hopeful that the discussion can be professionally facilitated.

Perhaps monthly or quarterly, we're imagining a conversation in a place that is welcoming to all and where all voices are encouraged. Deliberate outreach and encouragement to participate

should be directed towards homeless and people with substance use and mental health issues. Representatives from the Police Department and Social Services Departments should participate.

The primary purpose should be to understand different perspectives based on race, discuss how to improve understanding across racial divides, and to clarify mis-information or assumptions.

Cost

- None

## Draft Recommendations - Priorities

Based on the advance input and all our discussions, there was unanimous consent to the following:

We recommend a variety of approaches of two types

### More services to the streets

- Contracted Provider of Mobile Crisis Services
  - 100k/year (will take a few months to get started)
- Fire Department Community Paramedics
  - 50k/year or whatever we can get

### Continuing/Ongoing

- Continuous Training for Police
- Police Department Alternative Response Personnel
- More Awareness of Available Services
- Continuing Community Conversation about Racism

Put this in the introduction: "To the extent that there is available funding."

## Table of Contents

There was general agreement to proceed with the Table of Contents presented by Craig, as follows:

### Introduction

- Charge
- Members
- Website
- Schedule of Meetings

### Findings

- Our definition of “Escalation”
  - Mention call logs and body camera program
- Our definition of “The Problem”
- Many resources are already available (Details in the Appendix)
  - Provided by the City
    - Police
    - Fire
    - Social Services
  - Provided by Local Organizations
    - The Home Team
    - Amistad
    - Hospitals
  - Provided by the State
    - ICMs
    - Regional Crisis Services Center
- There are many models for alternative response
  - CAHOOTS
  - From the intern research

### Recommendations

????

### Appendices

- Working Group Operating Guidelines
- Relevant Polco Survey Results
- About Intensive Case Managers
- About the new regional Crisis Center
- List of Area Resources? [probably not complete]
- Intern Research on Other Models? [needs editing]
- COVID-19 Relief funding related to substance abuse and mental health [Excerpt from what Greg provided]

## Outcome Measures

Craig reported what Working Group members said about outcomes in the advance survey, as follows:

- **Tracking the data on interactions/outcomes** will certainly show the effectiveness of the recommendations. Another option would be to **compare behavioral health calls-for-service at the PD** to see if the recommended programs produce a reduction.
- The collection of data should **start with tracking dispatcher information**. What types of calls are coming in and where are they being directed to? From there we should be able to identify if they are being dispatched to correct service: police, fire or mobile crisis.
- It will be difficult to provide any comparison to previous outcomes, as we have no data. Ex: the resident removed by police from the motel. What was the outcome? Are we looking for measurable outcome of... the **benefit to the citizen?** My idea would be to define what we are measuring and develop a rubric to measure with.
- **Keep a data log of when the services are used and what the outcome was.** Compare the CFS data from the 6 months prior to implementing any new services with the first 6 months of using the new services.
- The challenge here is we were asked to determine if elevated responses were occurring. I feel we have determined that they do occur but are rare in locally. When they are they tend to involve those with mental health issues. Because of this information this group has side stepped and is recommending ways to help these people without using LE. The challenge is there is limited data already so measuring effectiveness is going to be hard. Other than **shear volume of contacts**, such as if we hire the Home Team, fund CEMTPs or provide more funding the Social Services and tracking how many people they interact with. But even this is just a number and not an indicator of success.
- Quarterly Review
- The city will be able to **quantify and report reductions in PD calls and compare to the calls which are handled by the new entity**. This can then be translated to a cost savings report. Additionally, we can provide **satisfaction surveys to the service recipients at the point of service** and quantify and report those results. The most significant metric ultimately will be **indications of a better quality of life** for the people in our city. **Reduced occurrences of suicide and overdoses** would be a desired outcome.

After discussion there was unanimous consent to recommend the following outcome measures:

- Volume of behavioral health calls handled by the Police Department before and after the new program
- Success in actually helping service recipients
  - Follow up interviews or feedback from service recipients
    - Qualitative in addition quantitative
  - Ask the providers how they evaluate performance
    - “Put it on them”
  - For City programs, track number of contacts
    - Increases indicate growing trust
- The City should explore how other communities (and programs such as CAHOOTS) track progress in similar programs

## Closing Comments

- Wish I could be more positive but it’s a very difficult funding situation.
- This whole process was quite positive.
- Wonderful that we could bring together a diverse group of professionals.
- We take pride in our police department and the professionalism of our police department.
- Every person in this group is working in the best interests of our people.
- Great being part of this group.
- Story of a positive interaction between a police officer and someone in crisis.
- So grateful to have spent this time with the folks in this group.
- This was very hopeful and I learned a lot.
- Appreciate being part of this group. Learned a lot.
- It’s an honor to work with such top notch city staff.
- The work Dana is doing is building connections and we will build on that.
- Hopeful that this report will show the in-depth and great work we have done.
- Our police department has been proactive and we appreciate that.

Adjourned at 6:58pm

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## Chat

Here is the record of Chat from the meeting:

17:07:18 From Craig Freshley to Everyone : ServiceCallComments@SouthPortland.org

All emails sent to this address will be shared with all members of the Working Group, the City Manager, and the Facilitator

17:07:34 From Craig Freshley to Everyone : All documents here: <https://bit.ly/3f95eFO>

18:20:44 From April Caricchio - City Councilor to Panelists : yes, great group and I am very grateful to be part of it