

### INTRODUCTIONS

- Who I am
  - Mental Health State Experience
  - Experience as CEO Psychiatric Facilities
  - Assessment Experience
  - State MH Authority
  - Consulting Company—several Alaska projects (1115 Waiver design, providers, MUNI)
- Why I am here
- What I have been asked to do

# INDEPENDENT ADVICE REGARDING MH FIRST RESPONDER PROGRAM

- Crisis Now is the context. 4 components—call center, MCT, crisis observation and stabilization facilities
- Drill down into one component of Crisis Now—Mobile Crisis Team
- We are calling this component the Mental Health 1<sup>st</sup> Responder System
- Provide series of policy, acccountability, model, & financing options for Assembly consideration
- Review existing resources within Municipality

#### ADVICE = OPTIONS

- What are options for assigning overall accountability of 1<sup>st</sup> Responder System?
- How many 1<sup>st</sup> Responder models are out there?
  - O What are strengths and limitations of each option?
  - O What are costs per option?
- What components of the models already exist in Anchorage?
- What are the design options for the Anchorage 1<sup>st</sup> Responder System?
- How many financing options are there?
  - O Which option is sustainable?

| Task                          | October       | November      | December      | January | February | March         |
|-------------------------------|---------------|---------------|---------------|---------|----------|---------------|
| Accountability<br>Options     | $\rightarrow$ |               |               |         |          |               |
| Existing<br>Resources         | $\rightarrow$ | $\rightarrow$ |               |         |          |               |
| Models &<br>Design<br>Options | $\rightarrow$ | $\rightarrow$ | $\rightarrow$ |         |          |               |
| Financing<br>Options          |               | $\rightarrow$ | $\rightarrow$ |         |          |               |
| Begin<br>Operations           |               |               |               |         |          | $\rightarrow$ |

#### DEFINITION

 Mobile Crisis Team—mobile services that provide behavioral health emergency care to individuals experiencing a behavioral health crisis in the community.

#### FIRST RESPONDER MODELS

- Alternative Emergency Response Models
- Co-Responder Models: Co-Responding with Police, Fire Dept.,
   EMS

### ALTERNATIVE EMERGENCY RESPONSE MODELS

- International Model—PAM Stokholm, Sweden
  - Psychiatric Emergency Response Team
  - o 1st Mental Health Ambulance
  - o Since 2015
  - 2 psychiatric nurses and a paramedic
- Mental Health First—Sacramento, CA
  - o Early 2020
  - Consists of hotline & mobile crisis response
  - Staffed by volunteers—crisis intervention specialist, medic, and a safety liaison

# ALTERNATIVE MODELS, CONT'D

- CAHOOTS—Eugene/Springfield, OR
  - 31-year old program
  - Mobile crisis intervention team
  - Alternative to police response for non-violent crimes
  - Part of Eugene's emergency response communications system
  - Staff—EMT or Nurse and Crisis Worker (must have several years' MH experience).

# CAHOOTS, CONT'D

- Diverts public safety workload—in '19, handled 17% of EPD's calls
- Responds to approximately 24,000 calls/year
- 4 crisis vans, 50 employees, operates 24/7
- Provides immediate stabilization, assessment, information/referral, & advocacy services.
- Saved City of Eugene average of \$8.5 million/year between '14-17.

# CAHOOTS, CONT'D

- Implemented or being considered in over a dozen localities throughout the country
  - Denver, CO—Support Team Assisted Response (STAR)
  - Olympia, WA—Crisis Response Unit
  - Oakland—Mobile Assistance Community Responders (MACRO)--delayed
  - Considering: 3 other communities in OR, New York City, Hartford CT,
     Albequerque NM, & Indianapolis

#### CO-RESPONDER MODELS

- Law Enforcement/MH clinician co-responder models
  - Milwaukee, WI—Crisis Assessment Response Team (CART)
  - Houston, TX—Crisis Intervention Response Team (CIRT)
  - El Paso County, CO—Behavioral Health Connect Co-Responder Unit (BHCON)
  - Johnson County, KS—Mental Health Co-Responder Program
  - Kitsap County, WA—BH Outreach Program

## CO-RESPONDER MODELS, CONT'D.

- Law Enforcement/MH clinician co-responder models
  - De Kalb County, GA—Mobile Crisis Unit
  - Pima County, AZ—Mental Health Support Team (MHST)
  - Los Angeles, CA—Systemwide MH Assessment Team (SMART)
  - Springfield, MO—Virtual-Mobile Crisis Intervention (V-MCI)
  - International: Victoria, Australia—Police Ambulance and Clinical Early Response (PACER)

## CO-REPONDER MODELS, CONT'D

- Fire Department, Law Enforcement and BH Clinician Models
- Colorado Springs, CO—Community Response Team (CRT)
- Plymouth County, MA—Plymouth County Outreach
- Albuquerque, NM—Crisis Outreach and Support Team (COaST)
- Mental Health Association of Nebraska—Respond, Empower, Advocate, and Listen (REAL)

# CO-RESPONDER MODELS, CONT'D.

- Fire Department, Law Enforcement and BH Clinician Models
  - Denver, CO—Crisis Intervention Response Unit
  - Stokholm, Sweden--PAM

# CURRENT CRISIS RESPONSE APPROACHES IN ANCHORAGE

- Anchorage Safety Patrol (ASP-AFD)—focus on intoxicated individuals, transport to Anchorage Safety Center until sober
- Crisis Intervention Team (CIT-APD)—CIT trained police officers
- Mobile Intervention Team (MIT-APD)—focus on homeless population
- CORE Team (AFD)—focus on EMS high utilizers

#### BOTTOM LINE

Lots of Models

Next Step is Deep Dive to Assess/Reduce Number

Then Provide Options for Consideration

# THANK YOU AND STAY TUNED