

City of Alexandria

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City of Alexandria, Virginia

MEMORANDUM

DATE: MAY 3, 2022

TO: THE HONORABLE MAYOR AND MEMBERS OF CITY COUNCIL

THROUGH: JAMES F. PARAJON, CITY MANAGER /s/

FROM: KATE GARVEY, DIRECTOR, DCHS

DON HAYES, CHIEF, APD

RENEE GORDON, DIRECTOR, DECC

DOCKET TITLE:

Alexandria Co-Response Pilot Program Update.

ISSUE: Update on the Alexandria Co-Response Pilot Program (ACORP).

RECOMMENDATION: That City Council receive ACORP's Initial Evaluation Report.

BACKGROUND: The Alexandria Co-Response Pilot Program (ACORP) officially launched on October 1, 2021. Since then, over one hundred and forty ACORP interventions have occurred, the outcomes of which have exceeded staff expectations, resulted in favorable outcomes for the persons served, and helped staff from the Department of Community Services (DCHS), the Alexandria Police Department (APD), the Department of

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Emergency and Customer Communications (DECC) and the Office of Performance Analytics (OPA) refine and align the work to help inform the ongoing development of the City's behavioral health crisis response system.

<u>DISCUSSION</u>: With assistance from OMNI Institute, ACORP's initial evaluation report includes a first look at the program's data and outcomes. Initial findings indicate the following:

- Since October 1, 2021, 958 total behavioral health-related calls have been received by 911 call takers at DECC.
 - o Of these, 145 were responded to by ACORP;
 - o 52% of these calls were for "unusual behavioral" or threats/harm to self;
 - o Most calls responded to by ACORP were resolved on-scene (45%), with ACORP providing resources or referral to a community service (20%), or resulted in a voluntary transport to another community service like a hospital or shelter (16%);
 - o Only 3% of calls that ACORP responded to resulted in arrest;
 - o Only 13% of calls that ACORP responded to resulted in an involuntary transport to the hospital for further mental health evaluation;
 - Of the ACORP calls that met the criteria for an arrest, 71% were diverted away from arrest and referred into the treatment system or other community supports.
- The ACORP team has facilitated strong communication between behavioral health, law enforcement, and other community partners to better serve persons in crisis in the community. This strong collaboration positions the City well as it moves forward with redesigning the behavioral health crisis system as required by Virginia's Marcus Alert Legislation.
- Call trends show that there is a greater community need than can be met by the ACORP team in its current capacity.

As noted in the ACORP Initial Evaluation Report, data collection and analysis continue. It is anticipated that the first Annual ACORP Evaluation Report will be completed after one full year of ACORP operations.

ATTACHMENT: ACORP Initial Evaluation Report, May 2022

STAFF:

Debra Collins, Deputy City Manager
Kate Garvey, Director, DCHS
Don Hayes, Chief, APD
Renee Gordon, Director, DECC
Liz Wixson, Director of Clinical and Emergency Services, DCHS
Gabriel Duer, Division Chief, Emergency and Crisis Response, DCHS
Courtney Ballantine, Acting Captain, Community Relations Division, APD
Doug Campbell, Deputy Director, Department of Emergency and Customer Communications
Beth Murdock, Senior Performance Analyst, OPA
Dr. Megan Hencinski, ACORP Therapist Supervisor, DCHS
Tommy Evans, ACORP Police Officer, APD
Liam Miranda, Performance Analyst, OPA
Dana Wedeles, Special Assistant to the CMO