Alternative Response Unit

City Council July 15, 2024

Deputy Chief Eric Moore
Division Chief Paige Bowie
Human Services Director Jessica Lobedan









Background



October 2021

Staff presented suite of mental health first responder models for Council consideration



February 2023

Launching mental health response unit formally integrated into City three-year workplan

San Leandro Safe created to support collaborative efforts between Human Services, Fire, and Police

March 2022

Mental health provider selected



February 2024

Program Overview

- Collaborative pilot program between ACFD, the City of San Leandro, and community providers to more efficiently utilize the relevant health care services to meet the behavioral health and medical needs of our community
- ARU will provide an alternative immediate response to individuals that are experiencing a mental health crisis
- ARU will provide real-time assistance to individuals with non-violent mental health and substance abuse needs who would otherwise be left to enter into the 911 system or be placed on a psychiatric hold

Program Goals

- Reduce police response to 911 calls related to behavioral health requests
- Deliver an appropriate and timely response to behavioral health calls that meet the individual's needs
- Decrease the number of unnecessary emergency room visits
- Bridge and facilitate service connections for individuals









Program Details

- 18-month pilot program
- Coordination between Fire, Human Services, Police, and community providers
- Based out of San Leandro fire station
 - Unit will be mobile during operating hours
- Available 40 hours/week, 4 days/week in 10-hour shifts
- Access to two beds at a medically supported emergency shelter











Staffing



- Alternative Response Unit will be staffed with:
 - 1. ACFD State Licensed Emergency Medical Technician (EMT) or Paramedic;
 - 2. Licensed Nurse Practitioner or other licensed medical practitioner or mental health professional; and
 - 3. Community Health Outreach Worker
- Staffing model allows for:
 - Direct patient care
 - Ability to prescribe and follow up on treatment/referrals made
 - Case management
 - Part of a multi-disciplinary team with established mental health providers to provide care, prescription, or follow-up assessments as needed

Dispatch

- The San Leandro Police Department Communications Center (dispatch) will triage all calls for service
- Calls that meet criteria for the ARU will be forwarded by SLPD Dispatch to the Alameda County Regional Emergency Communications Center (ACRECC)
- To access, individuals should call emergency or non-emergency Police



Eligible Scenarios

- An individual is experiencing suicidal thoughts
- An individual is thinking of harming themselves or has minimally harmed themselves
- A person is in emotional distress
- Families, neighbors or individuals are arguing or in need of mediation

Eligible Scenarios, continued

- An individual is known to, or there is a strong suspicion that they are, experiencing hallucinations, psychosis, or other significant mental health symptoms
- People are coming to the attention of others because of their behavior (e.g., shoplifting, panhandling, trespassing, yelling) and there is suspicion or knowledge that substance use, mental health issues, intellectual disabilities, autism, homelessness or other human service needs are driving this behavior

Exclusionary Criteria

- Medical Emergency: The caller or subject of a call is experiencing a medical emergency
- Unknown/Non-Present Subject: The caller does not know the subject of the 9-1-1 call AND is not near the person at the time they make the 9-1-1 call
- Gun on premises: The caller or subject of the call is known to have a gun in their home or on their person
- **Physical Threats Made:** The caller or subject of the call is making direct physical threats of harm to others at the time of the 9-1-1 call

Exclusionary Criteria, continued

- Current or Known History of Physical Violence: Physical person-on-person violence is happening at the time of the 9-1-1 call or the subject of the call has a known history of being physically violent
- **Property Destruction:** The caller or subject of the 9-1-1 call has destroyed someone else's property or is currently destroying (their or anyone else's) property
- Current Self-Harm: The caller or subject of the call is currently harming themselves and is using a weapon to do so
- Current Suicide Attempt: The subject of the call is currently attempting suicide
- Threatening Suicide with Plan and Weapon Means: The caller or subject of the call is threatening suicide, has a plan to kill themself and the means to do so, and the means include a weapon (e.g., knife, gun)

Metrics

- Goal #1: Reduce police response to 911 calls related to behavioral health requests
- Goal #2: Deliver an appropriate and timely response to behavioral health calls that meet the individual's needs
- Goal #3: Decrease the number of unnecessary Emergency room visits
- Goal #4: Bridge and facilitate service connections for patients

Alternative Response Team

- February 2024, mental health provider selected
- In late July 2024, the Alameda County Board of Supervisors will receive ACFD's vendor recommendation for subcontractor of mental health services on the ARU
- The vendor selection will become public once the Alameda County Board of Supervisors approves the agreement

Next Steps

- ACFD to seek BOS approval of vendor late July, 2024
- ARU to begin operations late 2024 or early 2025
- Ongoing community and staff education and training

Questions?