



Village of Oak Park, IL

Essential Calls for Service Evaluation – Final Report



Submitted by:

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Table i: Project Work Plan Updates

Version	Date	Update Reason
1	05/18/2022	Initial Version
2	07/05/2022	Sections 4-7 renumbered. Alternative CFS research added to the report in Section 4.0.

1.0 Introduction

Many police agencies in the U.S. have been struggling with increasing call for service (CFS) workloads, while simultaneously facing ever-tightening budgets and unprecedented attrition and vacancy rates. As a result of these challenges and national trends calling for police response reform, many communities and police departments have started to consider revisions to the traditional police CFS response model.

Considering alternatives to police CFS response is not new; in fact, many agencies already use some form of CFS diversion, whether through a telephone response unit (TRU), online reporting, mobile apps, or the use of non-sworn personnel. What is different and new in the most recent discussion of CFS response alternatives is an understanding that this conversation is not simply about providing these alternatives as possible options—it is about considering fundamental changes to how police departments do business, including identifying collaboration opportunities with other organizations, and in some cases outsourcing certain CFS types entirely.

Despite growing interest among police agencies in identifying alternatives to the traditional police CFS model, many have struggled to engage in an objective process that can produce appropriate and acceptable results. In some cases, suggested revisions have been met with resistance from staff, elected officials, and community members.

To help objectively evaluate alternatives to the traditional police response model (and other operational areas), the Village of Oak Park (Village) issued a request for proposals (RFP) for an operational assessment of the Oak Park Police Department (OPPD) in October 2020. BerryDunn was selected to conduct that work.

The best-practice approach to evaluating alternatives to the traditional police CFS model should expand the level of collaboration beyond the walls of the police department. The 21st Century Policing Task Force final report explains:

Law enforcement agencies should work with community residents to identify problems and collaborate on implementing solutions that produce meaningful results for the community...and; Do things with residents in the co-production of public safety rather than doing things to or for them.¹

Making changes to the traditional police CFS response model is an involved process that requires a thoughtful approach. BerryDunn has developed a collaborative Essential CFS Evaluation process that considers numerous critical factors, to produce data that police staff, community members, and elected leaders can rely upon in making critical decisions about future public safety needs. This report outlines BerryDunn's approach to this process, and presents the findings of the evaluation conducted for the Village and the OPPD.

¹ Final Report of The President's Task Force on 21st Century Policing – http://www.cops.usdoj.gov/pdf/taskforce/taskforce_finalreport.pdf

2.0 Essential CFS Evaluation Process

BerryDunn's Essential CFS Evaluation model is outlined below. BerryDunn followed this process in conducting this evaluation. The results of the process are provided in Section 3.

2.1 Essential CFS Evaluation Work Plan Steps

BerryDunn followed the Essential CFS Evaluation work plan steps listed below:

1. Facilitate initial discussions with OPPD and project team
2. Finalize and distribute Essential Police CFS Evaluation tool internally
3. Distribute Essential Police CFS Evaluation tool externally
4. Conduct community feedback sessions
5. Staff and stakeholder interviews
6. Data analysis
7. Develop Preliminary CFS Evaluation Report
8. Discuss CFS Evaluation and response

2.2 Essential CFS Evaluation Discussion

Determining possible alternatives to traditional CFS police response requires substantial data collection and analysis to inform and guide outcomes and recommendations. The work plan above briefly outlines BerryDunn's collaborative approach to collecting and analyzing this type of data.

One aspect of BerryDunn's process involves analyzing the computer-aided dispatch (CAD) data for the police department. This determines CFS types to be evaluated, and also quantifies the level of annual work effort in full-time equivalent (FTE) sworn officer positions. For purposes of this analysis, calculating the value of a single FTE for patrol officers involves starting with the standard number of annual work hours (2,080), removing non-work time (e.g., vacation, sick leave, training), and calculating 30% of that value (which is the percent of time an officer is expected to be engaged in CFS activity), which for the OPPD is approximately 525 hours (30% of 1750 total working hours). Quantifying the data in this way helps determine the potential impact various CFS alternative responses could have on agency workload. If the FTE level is negligible, this data reveals that diverting a CFS category will likely provide little workload relief and add little value to the department and the community (although there may still be other reasons to divert some CFS types).

In addition to CAD data analysis, BerryDunn also uses a customizable CFS Evaluation instrument to collect quantitative data. This instrument is used to solicit data from members of the police department and various professional stakeholders, possible CFS response resources, and the community. Tables 2.1 and 2.2 reflect the numerous evaluative points of the instrument,

which present a full range of areas to be considered in making decisions about future police response.

Table 2.1: Essential Police CFS Evaluation Method

CFS Activity	Police Mandate	Risk/Potential Danger	Immediate Response	Type: Crime, Traffic, Service	Other Resources Available	Alternative Response	Volume in FTEs	Community Value	Custom Field
Alarm									
Theft									
Domestic									
Medical									
Mental Health									
Traffic									

Table 2.2: Essential Police CFS Evaluation Legend

Category	Rating	Explanation
Police Mandate	Yes, No	Legal requirement for response
Risk/Potential Danger	High, Possible, Limited	As assessed by call type and category
Immediate Response	Yes, No	24/7 response necessary/expected
Type: Crime, Traffic, Service	Category	CFS category assigned
Other Resources Available	Yes, No, Limited, TBD	Current, to some extent, or possible
Alternative Response	Yes, No	TRU or online reporting options
Volume in FTEs	Calculated Value	Based on CAD analysis
Community Value	Calculated Value	Based on community input (1-5)
Custom Field	TBD	TBD

Lastly, BerryDunn’s process includes individual and group interviews with members of the department, stakeholders, service providers, and the community. This feedback is used to validate and support outputs from the quantitative data, and to guide and shape final recommendations. As part of this project, BerryDunn held several meetings with the Village

community and relevant stakeholders. The information and feedback collected during those meetings is provided in this report.

3.0 Essential CFS Evaluation Results

This section describes the results of the quantitative and qualitative data collection and its analysis.

3.1 Quantitative Data Collection

The initial CAD dataset BerryDunn reviewed contained 233 CFS types. BerryDunn placed these CFS types into a Microsoft Excel spreadsheet for evaluation by department staff. At BerryDunn's request, the OPPD assigned several patrol officers, line-level patrol supervisors, and other sworn officers to complete the evaluation form. A total of 31 sworn staff completed the assessment using the evaluation legend provided (see Table 3.1 below).

Table 3.1: Survey Legend

Category	Rating	Explanation
Police Mandate	Yes, No (Y - N)	Legal requirement for response (or reporting)
Risk/Potential Danger	High, Possible, Limited (H - P - L)	As assessed by call type and category
Immediate Response	Yes, No (Y - N)	24/7 response necessary/expected
Type: Crime, Ordinance, Traffic, Service	Category (C - O - T - S)	CFS category assigned
Other Resources Available	Yes, No, Limited, TBD (Y - N - L - T)	Current (Y or N), Limited (to some extent), or TBD (possible)
Alternative Response	Yes, No (Y - N)	Telephone Response Unit (TRU) or online reporting options
Volume in FTEs	Calculated Value (CAD DATA)	Based on CAD analysis
Importance Rating 1 – 10 (10 = Most Important; 1 = Least Important)		
Police Department Value	Calculate Value (Internal)	Based on department input (1 – 10)
Acceptance Rating 1 – 5 (5 = Most Accepting; 1 = Least Accepting)		
Community/Stakeholder Value: Open to Alternative Response (Phone/Online)	Calculated Value (External)	Based on stakeholder input (1 – 5)

3.1.1 Data Coding Protocols

After the assigned sworn officers completed their ratings and submitted them, BerryDunn merged the responses for data analysis and reporting, using the data coding protocols detailed below.

- **Police Mandate:** If any responses contained a Yes (Y), that category was coded with a Y. Otherwise, a No (N) was coded.
- **Risk/Potential Danger:** Coded with the most frequent risk label (H-High, P-Possible, or L-Limited).
- **Immediate Response:** If any responses contained a Y, that category was coded with a Y. Otherwise, an N was coded.
- **Crime, Ordinance, Traffic, Service:** Coded with the most frequent label (C-Crime, O-Ordinance, T-Traffic, or S-Service).
- **Other Resources Available:** If any responses contained a Y, that category was coded with a Y. Otherwise, an N was coded. If any response contained an L (Limited) or T (To be Determined), a T was coded. All narrative comments were copied from the response.
- **Alternative Response:** If any responses contained a Y, that category was coded with a Y. Otherwise, an N was coded. All narrative comments were copied from the response.
- **Police Department Value:** Responses were averaged and rounded to the nearest whole number.

Of the original 233 CFS types, 37 incidents had no volume in CAD. An additional 15 CFS types were determined to be non-CFS events (e.g., foot patrol, community policing, follow-up). Accordingly, the 37 CFS types with no CAD volume, along with the 15 non-CFS types, were excluded from further evaluation.

BerryDunn provided the merged CFS Evaluation data (with the above items removed) to the OPPD administration for additional coding (the full data list is provided in Appendix A: Table A.1).

3.1.2 Administration Coding Criteria

OPPD administration was asked to provide additional coding using the criteria below, with full consideration of the combined responses from operational personnel.

Criminal/Ordinance Incidents:

- Does this CFS type require an in-person officer response?
- Could this CFS type possibly be handled in person by a non-sworn staff member?
- Could this CFS type possibly be diverted to a TRU or an online reporting portal?

Non-Criminal Incidents:

- Does this CFS type require an in-person officer response?
- Could this CFS type possibly be handled in person by a non-sworn staff member?
- Could this CFS type possibly be diverted to a TRU or an online reporting portal?

- Does this CFS type require a police response at all (assuming another resource can be identified)?
- Is it possible that this CFS type might not always require a police response?

Category Removal:

- Are there any categories of CFS types that do not apply to the OPPD, or that cannot otherwise be diverted?

3.1.3 Administration Coding Outputs

OPPD administration reviewed 86 criminal/ordinance CFS types. Of those, 63 were determined to require an officer response (e.g., aggravated assault, robbery, sexual offenses). Similarly, the OPPD administration reviewed 95 service incidents (including traffic). Of those, 56 CFS types were determined to require an officer (e.g., hold up alarm, road rage, suicide). Due to categorical similarities (e.g., burglary to auto and theft from auto; found property and turned in property), the remaining 62 CFS types were merged into 46 categories.

BerryDunn then developed an online survey from the evaluation data gathered, for community and stakeholder review of the remaining CFS types. A link to this survey was posted online on the Social Pinpoint project site, and the Village communications team promoted the survey opportunity through its various social media platforms. BerryDunn also directly emailed the survey link to a list of twenty-four stakeholders identified by the Village and OPPD. The survey was active online for approximately three weeks. BerryDunn received 124 viable survey responses (one response was blank). Responses were averaged and have been provided in Table 3.2 below.

3.1.4 Quantitative Data Results Discussion

There are two sections to the data in Table 3.2. The data under the blue headings have been pulled from the OPPD CFS Evaluation dataset (see Appendix A: Table A.1). The data under the green headings have been averaged from the survey responses.

In addition to the group separations, the survey data have been split into three categories:

- Community Service Officer (CSO) response (non-sworn)
- TRU/Online response
- Alternative response

For the CSO, TRU, and online categories, the number shown reflects the average of the respondents' level of acceptance to an alternative response (with 5 being the most accepting and 1 being the least accepting).

Table 3.2: Survey Results

	Police Mandate	Risk/Potential Danger	Immediate Response	Type: Crime, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value	Community Service Officer (response averages)	TRU/Online (response averages)	
CFS Type									Stakeholder	Stakeholder	Alternative
Abandoned Auto	Y	L	Y	O	Y	Y	0.70	3	4		
Accident - Property Damage	Y	L	Y	T	Y	Y	3.73	6	3		
Assist Fire Department *	Y	P	Y	S	Y	Y	1.82	6	3		
Assist the Public * !	Y	L	Y	S	Y	Y	1.93	5	3		
Check Conditions/Possible Problem!	Y	P	Y	S	Y	Y	0.69	4	3		
Criminal Damage to Vehicle	Y	P	Y	C	N	Y	0.19	7	3		
Falls and Fall Reports *	Y	L	Y	S	Y	Y	0.18	4	4		
Fire Alarm	Y	L	Y	S	Y	Y	0.14	5	3		
Found/Recovered Property *	Y	L	Y	S	Y	Y	0.85	3	4		
Motorist Assist	Y	L	Y	S	Y	Y	0.25	5	3		
Noise Complaint	Y	L	Y	O	Y	Y	0.50	4	3		
Parking Complaint *	Y	L	Y	O	Y	Y	4.12	3	4		
Rowdies	Y	P	Y	S	Y	Y	0.08	6	2		
School Crossing	Y	L	Y	S	Y	Y	0.32	5	4		

* - Compressed category

! - Indicates a category that may include multiple CFS types, including mental health, unhoused, or juvenile

	Police Mandate	Risk/Potential Danger	Immediate Response	Type: Crime, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTE's	Police Department Value	Community Service Officer (response averages)	TRU/Online (response averages)	
CFS Type									Stakeholder	Stakeholder	Alternative
Suspicious Incident!	Y	P	Y	S	Y	Y	0.40	6	2		
Telephone Threat	Y	L	Y	C	Y	Y	0.01	4	2		
Tobacco Enforcement	Y	L	Y	O	Y	Y	0.02	3	4		
Traffic Control	Y	L	Y	S	Y	Y	0.41	5	4		
Violation of Local Ordinance	Y	L	Y	O	Y	Y	0.11	5	3		
Graffiti	Y	L	Y	C	Y	Y	0.23	4	4	4	
Lost Property*	Y	L	Y	S	Y	Y	0.22	4	4	4	
Theft From Auto*	Y	P	Y	C	T	Y	0.87	7	3	3	
Theft of Bicycle	Y	P	Y	C	Y	Y	0.17	6	3	4	
Theft of Property Under \$500 *	Y	L	Y	C	Y	Y	0.67	5	3	4	
Damage to Property *	Y	P	Y	C	Y	Y	0.77	6	3	3	
Animal Complaints - Other	Y	L	Y	O	Y	Y	0.17	3	4	4	
Animal Bite	Y	L	Y	O	Y	Y	0.07	4	3		
Barking Dog	Y	L	Y	O	Y	Y	0.02	2	4		
Identity Theft *	Y	L	Y	C	Y	Y	0.53	5		3	

* - Compressed category

! - Indicates a category that may include multiple CFS types, including mental health, unhoused, or juvenile

	Police Mandate	Risk/Potential Danger	Immediate Response	Type: Crime, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTE's	Police Department Value	Community Service Officer (response averages)	TRU/Online (response averages)	
CFS Type									Stakeholder	Stakeholder	Alternative
Telephone Scam	Y	L	Y	C	Y	Y	0.01	4		4	
Station Report	Y	L	Y	S	Y	Y	1.19	5		4	
Sick or Injured Animal	Y	L	Y	S	Y	Y	0.03	3	4	3	X
Stray Animal	Y	L	Y	S	Y	Y	0.41	3	4	3	X
Bond/Bank Run *	Y	L	Y	S	Y	Y	0.22	2	2	2	None
Landlord Tenant Dispute	Y	P	Y	S	Y	Y	0.07	5	3	3	X
Lock In/Out	Y	L	Y	S	Y	Y	0.10	3	4	3	X
Repossession	Y	L	Y	S	Y	Y	0.00	3	3	3	None
Train Complaint	Y	L	Y	S	Y	Y	0.00	3	4	4	X
Information for the Police	Y	L	Y	S	Y	Y	1.37	4	4		None
Mental Health !	Y	P	Y	S	Y	Y	0.03	6	4		X
Neighbor Dispute	Y	P	Y	S	Y	Y	0.18	5	3		X
Panhandler !	Y	L	Y	S	Y	Y	0.15	4	4		X
Suspicious Substance	Y	P	Y	S	Y	Y	0.00	5	3		X
Unconscious/Fainting	Y	L	Y	S	Y	Y	0.10	6	3		X

* - Compressed category

! - Indicates a category that may include multiple CFS types, including mental health, unhoused, or juvenile

	Police Mandate	Risk/Potential Danger	Immediate Response	Type: Crime, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTE's	Police Department Value	Community Service Officer (response averages)	TRU/Online (response averages)	
CFS Type									Stakeholder	Stakeholder	Alternative
Vagrant !	Y	L	Y	S	Y	Y	0.22	4	3		X
Vehicle Fire	Y	P	Y	S	Y	Y	0.05	6	3		X

* - Compressed category

! - Indicates a category that may include multiple CFS types, including mental health, unhoused, or juvenile complaints.

The survey response data in Table 3.2 generally reflect moderate to strong acceptance levels for alternative CFS responses, with many categories receiving an average response of three or four (with one being least accepting and five being most accepting). Not surprisingly, some incidents that appear to require a sworn officer response, such as rowdies or suspicion, received lower alternative CFS response acceptance scores, averaging a two response.

Based on work done around the country, along with alternative CFS research, BerryDunn is aware that many of the incident types provided in Table 3.2 have been successfully diverted to external resources, non-sworn police staff, or to TRU or online resources. Even though some of the survey categories produced relatively low average scores, the OPPD should be able to divert many of the listed CFS types, including some with relatively low response scores. In turn, this will reduce workloads for sworn staff, and in all likelihood, increase the OPPD's effectiveness in providing service to the community. Despite these likely outcomes, the OPPD should pay attention to the low scores—particularly those that averaged a two. It may be best not to divert CFS types with these lower scores immediately, or at a minimum, the OPPD may need to take additional precautions to help increase community comfort in the alternative processes the department intends to put into place.

In addition to the overall ratings for non-sworn, TRU, or online response, the bottom section of Table 3.2 also reflects CFS types that could be diverted to resources external to the police department. Table 3.3 provides suggested alternative response resources, based on community and stakeholder feedback.

Table 3.3: Resource Suggestions (Community)

Category	Suggested Resources
Landlord Tenant Dispute	Village, Oak Park Housing Authority, Community Relations, Social Worker, Legal Representation, Mediation,
Lock In/Out	Village Works, Locksmith (Village-funded), AAA, Fire Department, Housing Department
Mental Health	STARS Program (like Denver), Social Worker, Mental Health Expert, Thrive, Mental Health Crisis Team, Other Health Paraprofessional
Neighbor Dispute	Social Worker, Community Relations Department, Mediator
Panhandler	Social Worker, Housing Forward
Sick or Injured Animal	Animal Control, Animal Care League, Wildlife Control
Stray Animal	Animal Control, Animal Care League
Suspicious Substance	Social Worker, Mental Health Professional, Fire Department
Train Complaint	Train Conductor/Train Worker, Department of Public Health
Unconscious/Fainting	Health Professional, Fire/Ambulance, Department of Public Health
Vagrant	Social Worker, Housing Forward
Vehicle Fire	Fire Department

Table 3.4 provides suggested alternative response resources from police department staff for the same categories provided in Table 3.3. This data was collected from the initial 31 officers who completed the CFS Evaluation; duplicate suggestions have been consolidated.

Table 3.4: Resource Suggestions (Department)

Category	Suggested Resources*
Landlord Tenant Dispute	Community Relations; CSO, Fire Department; Social Worker; Parking Enforcement; Neighborhood Services
Lock In/Out	CSO; Fire Department; Community Relations; Social Worker
Mental Health	Thrive Counseling Services; CSO; Fire Department; Parking Enforcement; Community Mental Health Services
Neighbor Dispute	Online; Chicago Center for Conflict Resolution; CSO, Fire Department; Parking Enforcement; Community Relations; Neighborhood Services; Thrive; Social Worker
Panhandler	CSO; Thrive; Social Worker; Parking Enforcement; Housing Forward
Sick or Injured Animal	Animal Control; CSO; Fire Department; Thrive; Social Worker; Parking Enforcement
Stray Animal	Animal Control; CSO; Fire Department; Thrive; Social Worker; Parking Enforcement
Suspicious Substance	Fire Department
Train Complaint	METRA Police; CSO; Fire Department; Thrive; Social Worker; Parking Enforcement; Railroad Police
Unconscious/Fainting	Fire Department; Thrive; Social Worker; Parking Enforcement
Vagrant	CSO; Fire Department; Thrive; Social Worker; Parking Enforcement; Social Services; Housing Forward
Vehicle Fire	Fire Department; CSO

*Responses have been edited to reflect suggested deferral resources.

3.2 Qualitative Data

To capture additional details regarding alternative CFS response, BerryDunn conducted several fact-finding discussions. These included in-person interviews with OPPD staff (at all levels), in-person interviews with professional partners (e.g., fire department, EMS) and other stakeholders (community activists, mental health providers), and in-person and virtual meetings with the Village community. The purpose of these sessions was to introduce the Essential CFS Evaluation process, and to solicit input from all relevant stakeholders on which CFS could/should be diverted, and what resources might already exist or need to be created to facilitate a shift in the traditional CFS response model. The following sub-sections summarize the feedback collected during this process.

3.2.1 Department Responses

Patrol staff at the OPPD expressed concerns over workloads for sworn staff, and accordingly, they are open and interested in developing solutions that reduce workload volumes for patrol. Department staff identified several possible alternative CFS resources including:

- Thrive (mental health)
- Community Mental Health
- Community Relations Department at the Village
- Ambulance/Fire
- Housing Forward
- Oak Park Township Youth Service

During staff discussions, several complaint types were mentioned as possible options for CFS diversion:

- Mental health
- Unhoused
- Traffic complaints
- Graffiti
- Potholes/street repair
- Animal complaints
- Neighbor disputes
- Non-criminal incidents
- Criminal incidents not in progress

Notably, many of the above-listed categories align with existing alternative response models used by other communities and law enforcement agencies.

Staff also indicated they were in favor of non-sworn response, but indicated that there were too few CSOs to manage this volume, and too few resources for animal control (although this would improve if animal control and CSOs duties were combined). Staff also reported they were open to online reporting under the right circumstances. Staff shared the following concerns regarding alternative CFS response:

- Training for TRU. There is a need for specific structure and questions for TRU and online reporting to help ensure collection of the required information.
- Monitoring of online and TRU reports to keep track of them will be critical.

- There is a need for a process for assigning follow-up, where appropriate.
- Elderly people or others may not respond well to an alternative reporting system.
- CSOs do not currently have access to the records management system (RMS).
- There is a lack of dedicated and equipped CSO vehicles.

3.2.2 Stakeholder Responses

Like OPPD staff, the stakeholders BerryDunn spoke with were open to alternative response, particularly those stakeholders who are already providing services (e.g., Thrive, Community Mental Health, Fire Department, and the ambulance service).

The Fire Department and ambulance service indicated that developing clear expectations for when police response is needed would be particularly helpful, and could avoid situations in which the police are dispatched unnecessarily, but also help ensure they are dispatched when their presence would be valuable.

With regard to mental health/crisis response, both Thrive and the Community Health Board indicated support for alternative processes (Thrive is currently a co-responder under contract with the Village). There was no clear consensus regarding a co-response (police and mental health professional/team) versus independent response to mental health/crisis incidents; however, both groups seemed willing to discuss options.

Stakeholders also mentioned alternative response for working with the unhoused population, including the use of Housing Forward. Based on stakeholder conversations, expanding the services/staffing of this group may be an important consideration.

3.2.3 Community Responses

The idea of an alternative response to CFS was new to some of the community members that BerryDunn spoke with. As BerryDunn explained the breakdown of CFS types that could possibly be diverted—those that were not in progress, not serious, and typically included minimal follow-up or evidence—community members seemed open to such a shift. During these conversations, community members suggested specific CFS types for diversion; namely, calls regarding mental health and the unhoused, medical calls, non-violent neighborhood disputes, or minor civil complaints. BerryDunn asked about CSO response to CFS types within the above-described parameters, and community members were open to the idea, but noted safety concerns as a factor for consideration.

Not unexpectedly, some community members suggested that although they could understand the reasoning for diverting certain CFS—or for sending a CSO—some indicated they would be more comfortable with a sworn officer response—even when the new protocols might dictate otherwise. Some suggested alternative response should be optional, citing those without internet service or the elderly as examples of persons who might object or not have access to an alternative process.

The community members interviewed suggested animal control, ambulance and fire services, Housing Forward, and Thrive as specific resources that may be able to help with diversion of various CFS types.

3.3 Essential CFS Data Summary

Both internal and external direct engagement efforts revealed clear support for an alternative response to CFS (given the appropriate CFS type and circumstances), specifically for using a TRU or online reporting. There was also support for diverting certain CFS volume to trained non-sworn personnel. Those interviewed supported the development of hybrid or independent response models for certain CFS types (e.g., mental health, medicals, fire-related, unhoused). The level of support was stronger internally among the OPPD, but those interviewed externally indicated increasing levels of acceptance for these response shifts, as they learned more about the reasoning and the types of CFS that would be diverted to alternative processes.

Through a series of quantitative evaluation processes, 46 CFS types were isolated for internal alternative response consideration. Of that number, 15 CFS types were also identified as having the potential for external response. These CFS types were placed in a survey, which was distributed to the community and key stakeholders identified by the Village and the OPPD.

Similar to direct engagement discussions, the survey responses suggested clear support for alternative CFS response, including TRU, online, and non-sworn response. The survey also generated suggestions for possible diversion of certain CFS types.

Despite the clear support for alternative responses, there is a visible pattern of which CFS types are more acceptable to divert, and those which have minimal support for diversion. Accordingly, the OPPD should take these acceptance scores into account in considering alternative CFS response adjustments.

4.0 Alternatives to Traditional Police CFS Research

One of the scope items identified in the RFP for this project involved conducting industry research on the traditional police CFS model, including an examination of other models. The RFP posed the following questions:

- What new alternatives to responding to CFS exist or are emerging in the field?
- What are comparable cities across the nation doing?
- Is there data available on the success of these alternatives?

This section provides information from research on alternative CFS responses from selected models in use throughout the U.S. The information in this section has been collected from public sources. A summary of the models is also provided in Appendix B: Table B.1.

4.1 Introduction

The questions outlined above suggest researching alternative CFS models to help the Village determine the most cost-effective, appropriate, and/or innovative process for the OPPD to engage to manage mental health incidents and other CFS not requiring a sworn police response. The goal was to identify an alternative system that provides high quality CFS response for non-police-required services, particularly for those in need of mental health services, whether those resources are internal or external to the OPPD. Although alternative CFS response is commonly discussed in reference to mental health incidents (almost exclusively), nearly all active models that BerryDunn researched or is familiar with involve a hybrid approach which places mental health CFS within a spectrum of incidents that could be diverted to alternative resources.

In reviewing the literature presented in support of this effort to determine the most cost-effective and appropriate ways to deal with mental health and other CFS, many of the reviewed publications and authors/researchers argue that the impetus for change started in 2020 with the murder of George Floyd. While Floyd's murder was an event that appropriately garnered worldwide attention and generated calls for police reform, historic and related research suggests that the police/mental health crisis, in particular, started long before recent events. Some have even suggested that over the last decade, the systematic closing down of publicly-funded hospitals and other service reductions for people suffering from mental illness are largely responsible for the increasing challenges experienced by police personnel in managing these crisis events. So, although it may be accurate that Floyd's murder has been a catalyst for broader changes in CFS response, many agencies have been using alternative response for a long time. In fact, one of the most well-known models, Crisis Assistance Helping Out on the Streets (CAHOOTS), has been in place for thirty years.

Despite the longevity of the CAHOOTS program, most models BerryDunn researched are relatively new, and accordingly, there is little data to validate program effectiveness. While there are various models in use, the three most common types appear to be: (1) officer crisis intervention team (CIT), (2) co-responder, and (3) vendor/third-party response (definitions and explanations of these models are included in Appendix C: Table C.1). Each method has various

degrees of positives and negatives depending on the needs of the community, and each is affected by workload demands, available staffing, and budget conditions.

4.2 Alternative CFS Response Models

This subsection highlights research information and CFS response data that BerryDunn collected for this project. BerryDunn has also summarized known information about several alternative CFS models in Appendix B: Table B.1.

4.2.1 Mental Health Statistics

Over the past 30 years, law enforcement has been inundated with CFS related to individuals experiencing a mental health incident or crisis. In the process, law enforcement officers have become de-facto social workers in responding to CFS involving suicidal ideation, self-harm, and individuals who are in mental distress. Many of these individuals are also chemically dependent, homeless, and/or are transient and live off the grid, increasing the likelihood that their mental health needs are underserved.

Research suggests there are larger populations of those in need of mental health services in larger urban areas; however, this does not mean that smaller law enforcement agencies have any less of a challenge. Although certain data indicate a greater need in urban areas, there is no data that suggests certain community types (e.g., urban, suburban, rural) will experience a specific CFS percentage that tracks with national statistics or averages. In short, the volume of need is not predictable based on community size, but rather, it is assessed based on the needs of each unique community.

One noted problem specific to mental health incidents is that mental health behaviors are often criminalized, and these subjects are commonly arrested and placed into the criminal justice system. Incarceration, whether at the local or state level, often further isolates individuals in need of mental health services. As an example of the prevalence of mental health incidents, the American Psychological Association (APA) estimates that approximately 20% of available patrol officer time is spent dealing with individuals affected by a mental health crisis in some manner. Further, a 2018 study conducted by A. C. Watson, and J. D. Wood estimates that 6-10% of the CFS the Chicago Police Department responds to involve individuals with a mental health need.²

In addition, information presented by Mental Illness Policy Org. highlights the increases in mental health response by the New York City Police Department (NYPD). Reportedly, in 1976, the NYPD responded to an estimated 1,000 CFS for those in emotional distress. Those numbers rose to 20,843 in 1980; 46,845 in 1985; and to 64,424 in 1998. In a paper authored by Arthur Cotton in 2017 that explored mental health response issues facing law enforcement, the author found that an estimated 5-10% of CFS he reviewed were mental health related.³ Although these studies point to a significant service need, reliable data on this volume is not available.

² Everyday police work during mental health encounters: A study of call resolutions in Chicago and their implications for diversion - PMC (nih.gov)

³ <https://shsu-ir.tdl.org/bitstream/handle/20.500.11875/2285/1723.pdf?sequence=1&isAllowed=y>

One significant complication to an accurate and true representation of how many CFS are mental health related involves inconsistent and inaccurate data collection and coding (a national condition and one BerryDunn also observed with the OPPD). For example, some incidents are coded as criminal activity, some are coded as a medical-related, and others are coded as service-related (and numerous other inaccurate code categories). Moreover, many legitimate criminal, medical, or service incidents have mental health connections, even if a mental health crisis did not prompt the interaction, and even if professional mental health staff did not report to the scene. These coding issues—and failures to document a mental health connection with any CFS—create problems in developing a clear picture of the volume of mental health needs in any geographic area. This impacts the ability of the agency to quantify the need, which complicates the proper staffing level for alternative CFS response. Additionally, even if a particular agency codes these incidents in a manner that can be used to identify volumes, the lack of national standards in data collection and reporting makes cross-comparisons impossible, further complicating development of an appropriate staffing model.

It is also worth noting that as indicated above, mental health challenges are often interwoven into other police CFS responses. Accordingly, agencies considering alternative CFS response should do so with an understanding that many CFS that do not originate or present as having a mental health connection, may involve one. Capturing and coding this data could be an important aspect of developing a broad understanding of the need for mental health services.

4.2.2 Methods of Service

A review of contemporary research across law enforcement in the United States, Canada, and Australia provides three primary styles of response to dealing with mental health crisis CFS. The first is the CIT model, which originated in Memphis, Tennessee. In this model, law enforcement officers are provided with a 40-hour training course on how to interact with individuals in mental distress. This model still involves a law enforcement response, and officers handle everything from the start of the call to final disposition. Despite this focused training, there have still been problems related to unnecessary use of force (UOF), escalation, and criminalization of behavior in those CFS involving mental health issues. The overall cost of CIT training is somewhat varied, but costs around \$800 per officer.

A second primary model involves co-response, in which law enforcement is partnered with private/government social workers who respond as a collective unit to deal with those calls identified as someone experiencing mental health distress or crisis. Co-responding officers commonly do so in plain clothes to soften their presence, and they generally respond with a social worker or other professional staff member. Most often, these units are secondary responders who are summoned after a primary police department unit has arrived and assessed the situation. Many co-responder units only work Monday through Friday, typically from 8 a.m. to 4 p.m. As part of this model, some agencies have also started to staff social workers and mental health professionals in dispatch centers, to help triage the CFS, and to help dispatchers determine appropriate uniformed response, diversion to CIT units, or diversion to other officers or social workers.

A third primary model involves private vendors who are contracted or hired by community agencies to respond exclusively to mental health CFS, or welfare checks and other identified CFS. These teams typically include non-sworn civilian personnel, and generally include a two to three person response, most commonly in a van that is equipped with general service items for the team's use, and/or food, water, or other essentials, so they can provide some modicum of services to those who do not want additional or formal intervention. The most notable examples of this model include CAHOOTS in Oregon, Support Team Assisted Response (STAR) in Denver, and Canopy in Minneapolis. There are other programs that mirror this model in several ways; however, some of those programs target specific populations (e.g., unhoused) and/or do not have a mental health service focus.

BerryDunn notes here that there are innumerable variations and iterations of models (particularly for mental health and mental-health-related incidents) either in use, or proposed for implementation. However, succinctly, these models can be broken out into three main categories:

- Use of specifically trained sworn police personnel (CIT)
- Use of a co-response model with the police and professional personnel trained as social workers and/or mental health staff
- Contracted services, which operate largely independent of the police department, but which may request assistance based on certain conditions

Given the challenges associated with mental health CFS response, and recognizing that many CFS may include mental health issues that were not apparent at the time of the CFS, BerryDunn recommends that departments consider CIT training as a mandate for all primary responding police personnel. This is true regardless of whether or not the department chooses an alternative response model for CFS and known mental health incidents.

4.2.3 Staffing Models

In reviewing the literature, websites, and related public information, there are a very limited number of 24-hour response teams; this is typically due to cost issues and workloads, but may also be affected by difficulty in securing and retaining qualified staff. Generally, 24-hour response teams appear to be isolated to large urban areas such as Eugene, Oregon, and Minneapolis, Minnesota. For Denver's STAR program, the original pilot included a staffing model for only Monday through Friday, 8 a.m. to 4 p.m., with only one van working the entirety of the patrol response area. Stakeholders found this unacceptable, increased funding, and expanded the service hours to include longer days and the entire week; however, they do not staff a 24-hour model.

For smaller communities, staffing one or two daily shifts with professional co-responder personnel may provide for diversion of a significant volume of mental-health-related and other CFS, while balancing overall costs.

4.2.4 Funding

Most of the funding sources for these projects appear to be direct line items created by governmental entities, or collaborative grants/partnerships with other government partners (i.e. county/state hospital with local law enforcement). CAHOOTS is a private collaboration between the White Bird Clinic, the City of Eugene, and the Eugene Police Department. Based on BerryDunn's research, expended resources/funds related to co-responder and contract/vendor services demonstrate a positive relationship between allocated budget dollars and services rendered, which allows law enforcement officers more time to respond to non-mental-health issues. Despite this apparent/reported correlation, there is no known data that specifically quantifies and demonstrates this perceived/reported benefit.

In addition, it is worth mentioning that one of the challenges with the third-party vendor/contractor response model is the turnover and burnout of employees. This has become an even more significant issue recently, as some communities have had difficulty finding qualified candidates to fill these positions. It should also be noted that the vendors/contractors still commonly rely on police to respond first to an incident, and many regularly call police to respond to an incident because they feel unsafe, and/or because dispatching the co-responder unit was inappropriate, based on inaccurate or incomplete 911 information, or a misunderstanding of the person taking the call.

4.2.5 Grants

There appears to be an increase in federal government grants that can be used toward creating units that deal with mental health issues. Federal grants have been available through the Bureau of Justice Assistance (BJA) and the National Institute of Justice (NIJ), for example. In some cases, grants have also been issued for sustaining alternative mental health services. There have also been community block grants, private foundation grants, and grants through the U.S. Department Health and Human Services. BerryDunn has not identified any specific federal grant opportunities at this time. Village staff have informed BerryDunn of a possible grant available through the State of Illinois.

Health care insurance providers, as well as hospitals, have also been contacted by communities recently to help with funding of units to deal with mental health problems, and to triage patient entry into their own medical systems. Managing these conditions in the field frees up emergency rooms, and helps hospitals dedicate time to other emergent needs. Additionally, depending upon qualifications and services provided, it may be possible to recover some costs through direct insurance billing.

4.2.6 Creation of Unit

BerryDunn's research and experience suggests that there are some keys to developing a successful unit to deal with mental health issues. These include:

- Developing a solid leadership foundation between all partners/stakeholders to utilize this new engagement methodology

- Standardized policies and procedures which demonstrate the duties, roles, and responsibilities (including communication center protocols)
- Clear contracts for services between partners that also demonstrate duties, roles, responsibilities, and costs
- Appropriate data coding, reporting, and analysis, to evaluate program success

There are also indications in the literature that workers assigned to these units should be offered and afforded the chance to seek mental health support through various means, and minimally, through an employee assistance program (EAP) model. This is important because many of these workers, like law enforcement personnel, experience secondary trauma in managing these incidents.

As with any program of this size and nature, continued programmatic review should be conducted to help ensure that performance metrics are clearly being met. There are various reasons for this, but chief among them is to demonstrate that the programs are successful and producing intended and expected results. Program evaluation can also assist in identifying process and policy improvements.

Despite the need for such programmatic review, there is very little research data with which to conduct a cost benefit analysis in the utilization of these programs. Although CAHOOTS has been operating for thirty years, and available data suggest it is successful, there has never been a full program review of the CAHOOTS model (or any other model BerryDunn identified in the literature).

4.2.7 Criminal/Violent CFS with Mental Health

In all instances, research suggests that CFS with a criminal or violent nexus should continue to be managed by sworn law enforcement personnel, regardless of any known or suspected mental health overtone. This is also consistent with the Essential CFS Evaluation BerryDunn conducted for the OPPD.

4.3 Conclusion

The research is clear that utilizing alternative CFS response methods has the potential to produce important benefits that include:

- Freeing up sworn law enforcement time to manage other pressing CFS
- Providing more appropriate mental health interventions to those in crisis
- Reducing trauma (and UOF) for those in need of services

By all accounts, diverting CFS to other resources, internal or external, relieves a portion of the work burden typically managed by sworn officers. Given the service demands faced by a growing number of police departments, this is an important benefit.

Similarly, it is inarguable that including professionally-trained social workers and/or mental health workers in an alternative CFS model improves the interactions between those in crisis and responding personnel. Additionally, because of their focused vocation, professional staff are better equipped to provide counseling and connections to other resources, and they are more adept in de-escalating tense situations involving mental health circumstances.

The common alternative response models include:

- Use of specifically trained police personnel (CIT)
- Use of a co-response model with police and professional personnel who are trained as social workers and/or mental health staff
- Contracted services, which operate largely independent of the police department

Departments can experience one or all of the above-listed benefits (among others) by engaging either a co-responder or contracted services model. However, cost remains a factor. Despite the potential for the above-listed benefits, there is a lack of data to confirm or refute the financial benefits of alternative CFS response models. Although it is well-established that certain non-sworn police personnel could manage certain CFS at a reduced cost, utilizing professional staff and/or engaging contracted services may not necessarily reduce costs to the City/department. This can be affected by the model used and the volume of service demands. Arguably, however, even if cost-reductions do not result from implementing an alternative CFS response model, aligning responding personnel with appropriate CFS types will likely produce positive outcomes more consistently.

Although there are notable benefits to alternative CFS response, it would be cost-prohibitive in all but the largest communities for departments to staff an alternative response program that operates 24-hours per day. This is because, for smaller communities (including the Village of Oak Park), there is not enough workload volume to support development of a 24/7 alternative service response unit. In most cases, overnight personnel would be idle and underutilized. For these communities, utilizing a part-time/hybrid model is likely a more cost-effective solution.

Despite the noted cautions about cost, providing the right public safety services to those in need, and utilizing the best resources available, may be a preferred course, even if there are no direct cost savings.

5.0 Essential CFS Evaluation Summary

There are several desired outputs from this Essential CFS Evaluation process which include determining:

- CFS types that should not be diverted and should continue to receive a direct police response
- CFS types that should/could be eliminated from police response, and who could be a possible resource to take on these responsibilities
- CFS types that should/could be diverted to a non-sworn police resource (such as a CSO or animal control) for response
- CFS types that should/could be diverted internally within the police department, either to a TRU or online reporting
- CFS types that should/could involve a hybrid response between the police department and another resource

As part of this review, the police department assessed which CFS will continue to receive an officer response—whether legally mandated, due to possible risk, and/or because of their inherent authority and responsibility as sworn officers. The process also produced data that supports determining which CFS should be diverted to another resource completely, and which could be managed either by non-sworn staff, or through an alternative response program such as a TRU or online reporting. The process also identified opportunities for hybrid/collaborative responses to certain CFS, particularly those related to mental health and unhoused populations.

Although this process has categorized CFS in alignment with the desired outputs above, there is much work for OPPD to do to finalize and operationalize these findings. This includes:

- Developing policies and procedures, both internally and externally (with partner agencies)
- Developing protocols for dispatch and other staff who are at the intake level for CFS
- Training police department staff on these new processes
- Educating the community about these changes
- Receiving approval from government leaders on proposed changes

The OPPD should use the information from this Essential CFS Evaluation process to work collaboratively with all appropriate stakeholders to advance any proposed changes to the CFS response model.

6.0 CFS Recommendations

Based on the totality of the information gathered for the OPPD, including research on alternative CFS models, BerryDunn makes the following recommendations for modifying its CFS response model:

- Provide CIT training to all primary police response personnel
- Develop a comprehensive alternative CFS response plan and seek approval from the Village Board on the new model
 - The plan should consider additional professional non-sworn staff (e.g., mental health worker, social worker), as well as hybrid/collaborative response, contracted response, and on-call response models
- Establish a TRU
- Add non-sworn personnel (similar to CSOs) to staff the TRU, and to manage other in-person responses that do not require a sworn officer
 - Staffing for the TRU and non-sworn services should consistently cover two shifts per day
- Develop CAD CFS types that clearly categorize certain incidents (e.g., mental health, unhoused) so that these data may be easily monitored in the future
- Evaluate hybrid and collaborative responses for appropriate CFS types, and identify whether there are existing resources for response, or if these need to be created and/or augmented
- Develop policies and procedures for the diversion of CFS to the TRU, non-sworn personnel, and other external resources; procedures should consider customer preferences and provide accommodations for those, whenever requested
- Train agency personnel, dispatch, and community partners on the new model
- Provide community education on the new model, including the various reporting capabilities, and how to provide feedback
- Monitor the success of the new model and make appropriate adjustments
 - Program monitoring will rely heavily on documentation of all alternative CFS response; any agreements or contracts with external resources should include a requirement for data collection, and reporting the results to the Village

7.0 Budget Implications

7.1 Staffing

To consistently staff one person in a TRU for two shifts per day, and to consistently staff one person for field response for two shifts per day (four non-sworn staff per day), the OPPD would require approximately eight positions. Using a cost factor of \$25/hour for each position, and a 50% overhead cost, the annual cost for each non-sworn staff member would be approximately \$86,000. The annual staffing cost for eight positions would be approximately \$690,000.

Although this number is substantial, the cost is roughly 50% of the expense for a sworn officer.

BerryDunn is not suggesting replacement of sworn positions with non-sworn personnel. Based on BerryDunn's evaluation of numerous data, the OPPD is likely appropriately staffed, although personnel allocations and vacancies may be contributing to workload imbalances. Adding non-sworn staff will not eliminate this imbalance, but it will partially mitigate overall workloads and reduce the total number of personnel required to manage CFS volumes in patrol.

7.2 Equipment

It is likely that the OPPD would require two new/refurbished vehicles for non-sworn staff to use. The OPPD may be able to use recycled police vehicles, which would reduce the initial capital outlay for the vehicles, but there will still be equipment costs for each vehicle, and they would also need to be factored into the fleet replacement cycle. Start-up costs for equipping these vehicles should be minimal, but are estimated at approximately \$10,000, which includes a radio, computer, custom graphics, and a cage (for animal control).

7.3 Outsourcing

The costs for possible outsourcing of certain CFS types are more difficult to estimate; these could vary greatly based on numerous factors (e.g., availability of personnel, equipment, facilities). Possible CFS types that might be managed externally would likely fall into a handful of primary categories:

- Mental health/crisis
- Unhoused
- Juvenile issues (non-criminal)

One of the challenges is that these CFS types are not clearly isolated within CAD, and as a result, they cannot be easily quantified. Generally, CFS volume for these categories might be found in one or more of the following CAD CFS types:

- Assist Public
- Check Conditions/Possible Problem
- Mental Health

- Panhandling
- Vagrant

If all of the CFS volume for these types was related to the primary categories (which is not likely), the total required FTEs for this volume would not exceed three. This means that if all of this volume was outsourced, three full-time people could theoretically manage the workload; however, that is not the case.

The primary incident types (mental health, unhoused, juvenile) do not occur within the confines of a 40-hour work week. These incidents occur sporadically throughout the day, without respect to the time of day or day of the week. Having resources available to consistently manage this volume twenty-four hours a day, and seven days a week, would require six staff members for just one position.

In short, the volume is not significant enough to warrant hiring personnel to fully manage these CFS types, and doing so would be cost prohibitive. A more likely model would include:

- Adding personnel (likely 1 – 2 mental health/social workers) to assist the OPPD, either collaboratively or independently
- Contracting with external sources (e.g., Thrive, Community Mental Health, Housing Forward) to support CFS response, either collaboratively or independently
- Developing a process for on-call resource response, using internal or external resources

As an example, adding two full-time mental health/social worker positions would likely cost the Village approximately \$300,000 (based on a \$100,000 salary and 50% benefits cost). These two resources would likely not be more expensive than a sworn officer, but would have a specific skillset, and would be dedicated to alternative response CFS. BerryDunn estimates that these resources might manage 40-50% of the volume for the targeted CFS types (e.g., mental health, unhoused, juveniles); however, quantifying this volume is not possible at this time, due to limitations in the OPPDs CAD dataset.

Additionally, contracting could be done on a retainer basis or on a per-response basis. If the Village pursues hiring personnel, it is likely that the outsourced CFS volume would decline substantially. Accordingly, it might be in the best interests of the Village to engage a per-response cost method until the outsourced volume stabilizes, and the level of outsourcing needs can be determined.

The above provides only one possible model for moving forward, and is offered as a means to understand potential staffing costs. The OPPD will need to examine all recommendations and possible costs carefully as part of its strategy to develop any alternative CFS response model.

Appendix A

Table A.1: CFS Evaluation Data

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
911 HANG UP	Y	P	Y	S	T	Y	0.26	8
ABANDONED AUTO	Y	L	Y	O	Y	Y	0.70	3
ABDOMINAL PAIN PROBLEMS	Y	L	Y	S	Y	Y	#N/A	3
ACCIDENT PERSONAL INJURY	Y	P	Y	T	Y	N	2.16	9
ACCIDENT PROPERTY DAMAGE	Y	L	Y	T	Y	Y	3.73	6
AED ACTIVATION	Y	L	Y	S	Y	Y	0.00	5
AFD	Y	L	Y	S	Y	Y	0.00	5
AGGRAVATED ASSAULT	Y	H	Y	C	Y	Y	0.11	9
AGGRAVATED BATTERY	Y	H	Y	C	Y	N	0.53	9
AGGRAVATED VEHICULAR HIGHJACK	Y	H	Y	C	Y	N	0.36	10
ALLERGIES ENVENOMATIONS	Y	L	Y	S	Y	Y	#N/A	3
ANIMAL BITES	Y	L	Y	O	Y	Y	0.07	4
ANIMAL BITES ATTACKS	Y	P	Y	O	Y	Y	X	5
ANIMAL COMPLAINTS OTHER	Y	L	Y	O	Y	Y	0.17	3

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
ARMED ROBBERY	Y	H	Y	C	Y	Y	0.66	10
ASSAULT	Y	P	Y	C	T	Y	0.08	8
ASSAULT OR SEXUAL ASSAULT	Y	H	Y	C	Y	Y	0.01	10
ASSIST FIRE DEPT	Y	P	Y	S	Y	Y	1.82	6
ASSIST OTHER PD	Y	P	Y	S	Y	Y	1.04	6
AUTO TAKEN WITHOUT CONSENT	Y	L	Y	C	Y	Y	0.02	4
BACK PAIN	Y	L	Y	S	Y	Y	#N/A	2
BANK RUN	Y	L	Y	S	Y	Y	0.12	2
BARKING DOG	Y	L	Y	O	Y	Y	0.02	2
BATTERY	Y	H	Y	C	Y	Y	0.98	8
BE ON THE LOOKOUT	Y	P	Y	S	Y	Y	#N/A	5
BIKE THEFT	Y	P	Y	C	Y	Y	0.17	6
BOMB THREAT	Y	H	Y	C	Y	Y	0.07	9
BOND RUN	Y	L	Y	S	Y	Y	0.10	2
BREATHING PROBLEMS	Y	L	Y	S	Y	Y	0.00	5
BURGLAR ALARM	Y	P	Y	S	N	Y	0.98	6

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
BURGLARY	Y	P	Y	C	Y	Y	1.03	9
BURGLARY REPORT	Y	L	Y	C	Y	Y	0.55	6
BURGLARY TO AUTO	Y	P	Y	C	T	Y	0.62	8
BURNS EXPLOSIONS	Y	H	Y	S	Y	Y	#N/A	8
CAR ALARM	Y	L	Y	S	Y	Y	0.02	4
CARDIAC RESPIRATORY ARREST	Y	L	Y	S	Y	Y	0.07	8
CHECK CONDITIONS	Y	P	Y	S	Y	Y	0.69	4
CHEST PAIN	Y	L	Y	S	Y	Y	#N/A	5
CHILD CUSTODY DISPUTE	Y	P	Y	S	Y	Y	0.09	5
CHILD SAFETY SEAT INSPECTION	Y	L	Y	S	Y	Y	0.00	3
CHOKING	Y	L	Y	S	Y	Y	0.00	7
CITIZEN ASSIST	Y	L	Y	S	Y	Y	0.17	5
CO DET ACT WITH ILLNESS	Y	P	Y	S	Y	Y	#N/A	5
CO DET ACT WITHOUT ILLNESS	Y	L	Y	S	Y	Y	#N/A	4
COMMERCIAL FOOT PATROL	Y	L	Y	S	Y	Y	0.16	4
COMMUNITY POLICING ASSIGNMENT	Y	L	Y	S	Y	Y	1.83	5

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
CONFUSED PERSON	Y	L	Y	S	Y	Y	0.06	6
CONVULSIONS / SEIZURES	Y	L	Y	S	Y	Y	#N/A	5
COUNTERFEIT CURRENCY	Y	L	Y	C	Y	Y	0.01	5
CRIMINAL DAMAGE TO PROPERTY	Y	P	Y	C	N	Y	0.62	7
CRIMINAL DAMAGE TO VEHICLE	Y	P	Y	C	N	Y	0.19	7
CRIMINAL SEXUAL ASSAULT	Y	H	Y	C	Y	Y	0.28	10
CRIMINAL TRESPASS TO LAND	Y	P	Y	C	N	Y	0.30	7
CRIMINAL TRESPASS TO VEHICLE	Y	P	Y	C	N	Y	0.05	7
CRISIS INTERVENTION	Y	P	Y	S	Y	Y	0.81	8
CUSTOMER DISPUTE	Y	P	Y	S	Y	Y	0.19	5
DAMAGE TO PROPERTY	Y	L	Y	C	Y	Y	0.15	5
DAMAGE TO VILLAGE PROPERTY	Y	L	Y	C	Y	Y	0.02	6
DEATH INVESTIGATION	Y	L	Y	C	Y	Y	1.40	8
DECEPTIVE PRACTICE	Y	L	Y	C	Y	Y	0.08	6
DIABETIC PROBLEMS	Y	L	Y	S	Y	Y	#N/A	4
DIRECTED PATROL	Y	L	Y	S	Y	Y	1.00	5

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
DISORDERLY CONDUCT	Y	P	Y	C	Y	Y	0.38	6
DISTURBANCE	Y	P	Y	C	Y	Y	1.13	7
DOMESTIC BATTERY	Y	H	Y	C	Y	Y	1.41	9
DOMESTIC DISTURBANCE	Y	H	Y	C	Y	Y	1.60	8
DRIVING UNDER THE INFLUENCE	Y	P	Y	C	N	Y	0.23	8
DROWNING DIVING SCUBA ACCID	Y	P	Y	S	Y	Y	#N/A	6
DRUG INVESTIGATION	Y	P	Y	C	Y	Y	0.40	6
DRYER FIRE	Y	P	Y	S	Y	Y	#N/A	5
ELECTROCUTION LIGHTNING	Y	L	Y	S	Y	Y	#N/A	6
ELEVATOR ALARM	Y	L	Y	S	Y	Y	0.09	4
ESCORT	Y	P	Y	S	Y	Y	0.37	5
EYE PROBLEMS INJURIES	Y	L	Y	S	Y	Y	#N/A	3
FALL REPORT	Y	L	Y	S	Y	Y	0.15	4
FALLS	Y	L	Y	S	Y	Y	0.03	4
FIGHT	Y	H	Y	C	Y	Y	0.38	8
FINANCIAL IDENTITY THEFT	Y	L	Y	C	Y	Y	0.10	5

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
FIRE ALARM	Y	L	Y	S	Y	Y	0.14	5
FIREWORKS	Y	L	Y	C	Y	Y	0.17	4
FOLLOW UP	Y	L	Y	S	Y	Y	5.64	5
FOOT PATROL	Y	L	Y	S	Y	Y	0.47	4
FORGERY	Y	L	Y	C	Y	Y	0.00	5
FOUND PROPERTY	Y	L	Y	S	Y	Y	0.80	3
GARBAGE CAN FIRE	Y	L	Y	S	Y	Y	0.01	4
GAS LEAK INSIDE	Y	H	Y	S	Y	Y	0.01	6
GAS LEAK OUTSIDE	Y	P	Y	S	Y	Y	#N/A	6
GRAFFITI	Y	L	Y	C	Y	Y	0.23	4
HANDWAVER	Y	L	Y	S	Y	Y	0.13	5
HARASSMENT	Y	L	Y	C	Y	Y	0.04	5
HARASSMENT BY ELEC DEVICE	Y	L	Y	C	Y	Y	0.10	5
HARASSMENT BY TELEPHONE	Y	L	Y	C	Y	Y	0.07	5
HEADACHE	Y	L	Y	S	Y	Y	#N/A	2
HEART PROBLEMS AICD	Y	L	Y	S	Y	Y	#N/A	4

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
HEAT COLD EXPOSURE	Y	L	Y	S	Y	Y	#N/A	4
HEMORRHAGE LACERATIONS	Y	L	Y	S	Y	Y	0.00	6
HIT AND RUN	Y	P	Y	C	Y	Y	1.23	6
HOLD UP ALARM	Y	P	Y	S	Y	Y	0.07	8
HOME INVASION	Y	H	Y	C	N	N	0.09	10
IDENTITY THEFT	Y	L	Y	C	Y	Y	0.43	5
ILLEGAL CONSUMPTION BY MINOR	Y	P	Y	O	Y	Y	0.01	7
IMPERSONATING A PO	Y	H	Y	C	Y	Y	0.00	8
INACCESSIBLE INCIDENT ENTRAP	Y	L	Y	S	Y	Y	#N/A	6
INFO FOR POLICE	Y	L	Y	S	Y	Y	1.37	4
INTOX SUBJECT	Y	P	Y	S	Y	Y	0.06	5
INVALID ASSIST	Y	L	Y	S	Y	Y	#N/A	3
INVOLUNTARY COMMITAL	Y	P	Y	S	Y	Y	0.09	7
JULIE DIG	Y	L	Y	S	Y	Y	#N/A	2
JUV INVESTIGATION	Y	L	Y	S	Y	Y	0.12	5
KIDNAPPING	Y	H	Y	C	Y	N	0.00	10

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
LANDLORD TENANT DISPUTE	Y	P	Y	S	Y	Y	0.07	5
LEAF FIRE	Y	L	Y	S	Y	Y	#N/A	4
LINE TROUBLE ALARM	Y	L	Y	S	Y	Y	#N/A	3
LOCK OUT OR IN	Y	L	Y	S	Y	Y	0.10	3
LOST ARTICLE	Y	L	Y	S	Y	Y	0.14	3
LOST CHILD	Y	L	Y	S	Y	Y	0.03	9
MABAS BOX	Y	L	Y	S	Y	Y	#N/A	4
MABAS INVESTIGATOR	Y	L	Y	S	Y	Y	#N/A	3
MEDICAL ALARM	Y	L	Y	S	Y	Y	#N/A	4
MEET COMPLAINANT	Y	L	Y	S	Y	Y	1.64	4
MENTAL HEALTH	Y	P	Y	S	Y	Y	0.03	6
MISSING ADULT	Y	L	Y	S	Y	Y	0.42	8
MISSING JUVENILE	Y	L	Y	S	Y	Y	0.28	8
MISSING RETURNED	Y	L	Y	S	Y	Y	0.07	6
MOTOR VEHICLE THEFT	Y	P	Y	C	Y	Y	0.39	7
MOTORIST ASSIST	Y	L	Y	S	Y	Y	0.25	5

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
NEIGHBOR DISPUTE	Y	P	Y	S	Y	Y	0.18	5
NOISE COMPLAINT	Y	L	Y	O	Y	Y	0.50	4
NOTIFICATION	Y	L	Y	S	Y	Y	0.07	4
ODOR INVESTIGATION	Y	L	Y	S	Y	Y	#N/A	4
OPEN DOOR	Y	P	Y	S	Y	Y	0.09	5
ORDER OF PROTECTION	Y	P	Y	C	Y	Y	0.04	8
OUTSIDE RINGER	Y	L	Y	S	Y	Y	0.02	5
OVERDOSE POISONING	Y	L	Y	S	Y	Y	0.03	7
PANHANDLER	Y	L	Y	S	Y	Y	0.15	4
PARKING COMPLAINT	Y	L	Y	O	Y	Y	4.09	3
PARKING ENFORCEMENT SI	Y	L	Y	O	Y	Y	0.03	3
PARTY COMPLAINT	Y	L	Y	S	Y	Y	0.02	4
PEEPING TOM	Y	P	Y	C	Y	Y	0.00	8
PERSON DOWN	Y	P	Y	S	Y	Y	0.12	8
PERSON WITH GUN	Y	H	Y	C	Y	N	0.22	9
POWER LINES DOWN/ARCING/SPARKI	Y	H	Y	S	Y	Y	#N/A	7

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
PREGNANCY CHILDBIRTH MISCARR	Y	L	Y	S	Y	Y	#N/A	5
PREMISE CHECK CALLED IN	Y	L	Y	S	Y	Y	0.14	5
PREMISE CHECK OFFICER INITIATE	Y	L	Y	S	Y	Y	4.80	4
PROB SOLV POLICING ASSIGN	Y	L	Y	S	Y	Y	0.00	5
PSYCHIATRIC ABNORMAL SUICIDE	Y	H	Y	S	Y	Y	0.12	8
PUBLIC INDECENCY	Y	P	Y	C	N	Y	0.17	7
PURSE SNATCHING	Y	P	Y	C	Y	Y	0.00	8
RECKLESS DRIVING	Y	P	Y	T	Y	Y	0.40	6
RECOVERED STOLEN AUTO	Y	L	Y	C	Y	Y	0.61	6
RECOVERED STOLEN PROPERTY	Y	L	Y	C	Y	Y	0.00	5
RELOCATED VEHICLE	Y	L	Y	S	Y	Y	0.00	3
REMOVE UNWANTED	Y	P	Y	S	Y	Y	1.24	5
REPOSSESSION	Y	L	Y	S	Y	Y	0.00	3
RESIDENTIAL FOOT PATROL	Y	L	Y	S	Y	Y	0.00	4
RETAIL THEFT	Y	P	Y	C	N	Y	0.76	6
ROAD RAGE	Y	P	Y	T	Y	Y	0.04	6

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
ROWDIES	Y	P	Y	S	Y	Y	0.08	6
RUNAWAY	Y	L	Y	S	Y	Y	0.13	7
RUSE BURGLARY	Y	P	Y	C	Y	Y	0.01	8
SCHOOL CROSSING	Y	L	Y	S	Y	Y	0.32	5
SCHOOL ENFORCEMENT	Y	L	Y	S	Y	Y	0.01	5
SCHOOL ZONE 1 SAFETY CHECK	Y	L	Y	S	Y	Y	0.03	5
SCHOOL ZONE ALL SAFETY CHECK	Y	L	Y	S	Y	Y	0.03	5
SCREAMING PERSON	Y	P	Y	S	Y	Y	0.07	7
SELECTIVE ENFORCEMENT	Y	L	Y	S	Y	Y	0.02	4
SELF INITIATED ACTIVITY	Y	L	Y	S	Y	Y	0.01	4
SEX OFFENDER REGISTRATION	Y	L	Y	S	Y	Y	0.04	6
SHOOTING	Y	H	Y	C	Y	Y	0.62	10
SHOTS FIRED	Y	H	Y	C	Y	Y	1.23	10
SICK OR INJURED ANIMAL	Y	L	Y	S	Y	Y	0.03	3
SICK PERSON	Y	L	Y	S	Y	Y	#N/A	4
SLUMPER	Y	P	Y	S	Y	Y	0.10	6

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
SMOKE INVESTIGATION	Y	L	Y	S	Y	Y	#N/A	5
SNOW COMMAND	Y	L	Y	S	Y	Y	0.00	2
SOLICITOR COMPLAINT	Y	L	Y	O	Y	Y	0.04	4
SPECIAL DUTY	Y	L	Y	S	Y	Y	#N/A	3
SPEED TRAILER	Y	L	Y	S	Y	Y	0.04	3
STAB GUNSHOT PENETRATING TRAUM	Y	H	Y	C	Y	Y	0.00	9
STABBING	Y	H	Y	C	Y	Y	0.02	9
STATION REPORT	Y	L	Y	S	Y	Y	1.19	5
STOVE FIRE	Y	L	Y	S	Y	Y	0.01	3
STRAY ANIMAL	Y	L	Y	S	Y	Y	0.41	3
STROKE	Y	L	Y	S	Y	Y	#N/A	5
STRONG ARM ROBBERY	Y	H	Y	C	Y	Y	0.19	9
STRUCTURE FIRE	Y	H	Y	S	Y	Y	0.27	8
STUCK ELEVATOR	Y	L	Y	S	Y	Y	#N/A	4
SUICIDE	Y	H	Y	S	Y	Y	0.08	8
SUSPICIOUS AUTO	Y	P	Y	S	Y	Y	0.96	6

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
SUSPICIOUS INCIDENT	Y	P	Y	S	Y	Y	0.40	6
SUSPICIOUS NOISE	Y	P	Y	S	Y	Y	0.07	6
SUSPICIOUS ODOR	Y	L	Y	S	Y	Y	0.00	5
SUSPICIOUS PERSON	Y	P	Y	S	Y	Y	1.30	6
SUSPICIOUS SUBSTANCE	Y	P	Y	S	Y	Y	0.00	5
TAMPERING WITH AUTO	Y	P	Y	C	Y	Y	0.12	7
TELEPHONE SCAM	Y	L	Y	C	Y	Y	0.01	4
TELEPHONE THREAT	Y	L	Y	C	Y	Y	0.01	4
TEST TICKET FIRE	Y	L	Y	S	Y	Y	#N/A	2
THEFT FROM AUTO	Y	L	Y	C	Y	Y	0.25	6
THEFT LOST MISLAID PROPERTY	Y	L	Y	C	Y	Y	0.08	5
THEFT OF LIC PLATE	Y	L	Y	C	Y	Y	0.05	4
THEFT OF SERVICE	Y	L	Y	C	Y	Y	0.05	6
THEFT OVER 500	Y	L	Y	C	Y	Y	0.23	6
THEFT UNDER 500	Y	L	Y	C	Y	Y	0.63	6
THREAT REPORT	Y	L	Y	C	Y	Y	0.08	5

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
TOBACCO ENFORCEMENT	Y	L	Y	O	Y	Y	0.02	3
TRAFFIC ARREST	Y	P	Y	C	Y	N	0.82	7
TRAFFIC CONTROL	Y	L	Y	S	Y	Y	0.41	5
TRAFFIC ENFORCEMENT	Y	L	Y	T	Y	N	1.14	6
TRAFFIC HAZARD	Y	P	Y	T	Y	Y	0.00	5
TRAFFIC STOP	Y	P	Y	T	T	N	1.36	7
TRAFFIC TRANSPORTATION ACCIDENT	Y	L	Y	T	Y	Y	#N/A	5
TRAIN COMPLAINT	Y	L	Y	S	Y	Y	0.00	3
TRANSFER PALLIATIVE CARE	Y	L	Y	S	Y	Y	#N/A	3
TRAUMATIC INJURIES	Y	L	Y	S	Y	Y	#N/A	7
TRUANCY	Y	L	Y	O	Y	Y	0.00	4
TRUCK ENFORCEMENT	Y	L	Y	T	Y	Y	0.01	3
TURNED IN PROPERTY	Y	L	Y	S	Y	Y	0.05	3
UNCONSCIOUS FAINTING	Y	L	Y	S	Y	Y	0.10	6
UNKNOWN PROBLEM	Y	P	Y	S	Y	Y	0.03	7
UNLAWFUL USE OF WEAPON	Y	H	Y	C	Y	Y	0.44	9

CFS Category	Police Mandate	Risk/Potential Danger	Immediate Response	Crime, Ordinance, Traffic, Service	Other Resources Available	Alternative Response (TRU/Online)	Volume in FTEs	Police Department Value
VACATION WATCH	Y	L	Y	S	Y	Y	0.01	4
VAGRANT	Y	L	Y	S	Y	Y	0.22	4
VEHICLE FIRE	Y	P	Y	S	Y	Y	0.05	6
VEHICULAR HIJACKING	Y	H	Y	C	N	N	0.26	9
VIOLATION LOCAL ORDINANCE	Y	L	Y	O	Y	Y	0.11	5
VIOLATION ORDER OF PROTECTION	Y	P	Y	C	N	Y	0.84	8
VIOLENT OFFENDERS REGISTRY	Y	L	Y	C	Y	Y	0.03	6
WARRANT ARREST	Y	P	Y	C	Y	Y	0.56	8
WASH DOWN	Y	L	Y	S	Y	Y	#N/A	1
WATER RESCUE	Y	L	Y	S	Y	Y	#N/A	5
WELFARE CHECK	Y	P	Y	S	Y	Y	1.51	5

Appendix B

Table B.1: Summary Research on Prevalent Alternative CFS Models in Use

City	Model	Data/Notes	Costs
Eugene, Oregon	CAHOOTS: Crisis Assistance Helping Out on the Streets Organization: White Bird Clinic. Alternative response, welfare checks, street, and dispatched-based workers. Each CAHOOTS response includes at least an EMT and a crisis response worker, and they may request assistance from police or paramedics as they see fit.	High level data suggests that 20%* of the CFS appropriately triaged are resolved without law enforcement intervention. *This percentage may be inaccurate. CAHOOTS has worked with 13 Cities during May/Jun 2021. Pilot programs are currently happening in Denver, Houston, Los Angeles, Portland, Oregon, and Rochester, New York. Common CAHOOTS response categories: • Check Welfare • Assist Public – Police • Transport • Suicidal Subject • Disorderly Subject • Traffic Hazard • Criminal Trespass • Dispute • Found Syringe • Intoxicated Subject	Funding source: Contract/appropriation from City of Eugene. Direct funding from police department and City budget. Cost is approximately \$1M annually
Houston, Texas	Mobile Crisis Outreach This is a new program that is in development and deployment.	Limited information and no published data. Changes proposed/enacted by the Mayor • Changed the Houston PD's policy on Body-Worn Cameras to allow for the release of video within 30 days • A ban on "no-knock" warrants for nonviolent offenses	Funding source: Proposed City funding: • Expand crisis case diversion. \$272,140 annually to hire four additional counselors. • Increase the number of Mobile Crisis Outreach Teams by 18 teams; hire 36 additional

		- Appointed a Deputy Inspector General of the new office of Policing Reform and Accountability - Signed an Executive Order to restructure the Independent Police Oversight Board (IPOB) and named a new board chair - Changed how the public can file complaints and access information on a newly designed website with five data dashboards regarding police transparency - Invest \$25 million in crises intervention over three years.	clinicians; local mental health authority will need funding to hire. \$4.3 million annually - Add six CIRT Teams, six additional counselors and six additional MHD at \$2.4 million annually - Implement Clinician Officer Remote Evaluation (CORE) proposal to provide tele-health technology to 80 HPD CIT Trained Officers on patrol. \$847,875 annually. - Fund Citywide Domestic Abuse Response Team with a victim advocate and forensic nurse examiner \$800,000 - \$1.2 Million annually.
Oakland, California	MACRO: Mobile Assistance Community Responders of Oakland - Community response program for non-violent 911 calls. - The goal is to reduce responses by police, resulting in fewer arrests and negative interactions, and increased access to community-based services and resources for impacted individuals and families, and most especially for Black, Indigenous, and People of Color (BIPOC)	Limited information and no published data. Response Categories - Intoxicated/Drunk in Public - Panhandling - Disorderly Juveniles – group - Disturbance Auto – noise, revving engine - Disturbance Drinkers - Loud Music – Noise complaint - Drunk – Oakland term - Evaluation for Community Assessment Treatment and Transport Team (CATT) response - Incorrigible Juvenile - Found Senile - Indecent Exposure	Funding source: City

		• Standby Preserve the Peace • Check Well Being • Sleeper Three teams on two shifts, day and swing, seven days a week with functioning hours of 07:00 – 15:00 and 15:00 – 23:00 18-month pilot program run by the Oakland Fire Dept. (OFD)	
San Francisco, California	CART: Compassionate Alternative Response Team Proposed alternative response program	Limited information and no published data. Proposed Response Categories • Person attempting suicide • Well-being check • Sit/lie ordinance violations • Aggressive panhandling • Homeless encampment • Trespassing • Suspicious person in a car • Suspicious person	Funding source: City (\$6M)
Minneapolis, Minnesota	Canopy Two-member teams respond to 911 calls about behavioral or mental health-related crises to provide crisis intervention, counseling or a connection to support services.	Limited information and no published data. 24hrs coverage	Funding source: Direct budget/contract with City of Minneapolis – (\$3M annually)
Memphis, Tennessee	CIT Trained Officers Officers respond without other individuals	Limited information and no published data. Research suggests higher use of force / deadly force with subjects in mental health crisis	Funding source: Direct funding/trainings costs already incorporated into the agency by / and through City budget allocations.
Denver, Colorado	S.T.A.R.	Limited information and no published data.	Funding source:

	Medical/Social Workers	24hrs Response Original M-F 8hrs with 1 responder van M-Sunday 16hrs 4 responder vans	Provided through a mix of Police / City / County and Health Services
Hennepin County, Minnesota	Embedded Social Workers Embedded in larger agencies as co-responders	Limited information and no published data. Day Shift 2019 Embedded PD/Social Workers Started 2020 Social Workers at dispatch 911 – Staffed 24hrs/day to determine and triage CFS	Funding source: County ballot initiative
Dakota County, Minnesota	Crisis Responder / Social Worker Assigned to 911 center and agencies	Limited information and no published data. 911 full coverage	Funding source: County budget
Boston, Massachusetts	BEST Co-responder; police w/trained master level degrees	Limited information and no published data. No information on shifts – but appears to be only assigned to two districts	Funding source: City funded
Victoria Police, Melbourne, Australia	Original Response by Police Follow up once determined mental health issues/mental health unit responded	Limited information and no published data. Shifts and unit assignments are not identified	Funding source: Government/Health System

Note: This list is not inclusive of all known models.

Appendix C

Table C.1: Alternative CFS Terminology

Term	Definition
Call for Service (CFS)	An action undertaken by a police patrol officer that starts with a call to law enforcement either via 911 or non-emergency number. Additionally any time a law enforcement officer proactively engages with the public for any action that requires documentation by the organization. <i>It should be noted that not all CFS are officially tracked as some officer(s) engage informally with people, and handle a public situation, which may or may not be a violation of police.</i>
Crisis Intervention Team (CIT)	A Memphis-created model in which law enforcement officers are provided training to specifically deal with those individuals in a mental health crisis
Co-Responder	A team of a mental health worker, and law enforcement officer whom are specifically trained to responded to CFS's related to mental health situations.
Alternative Response/Social Worker Teams	Non-licensed law enforcement professionals / i.e. social workers/mental health professionals responding to triaged calls for service for those engaged with a mental health crisis or need for intervention.
Welfare Check – Call for Service/CFS	Anytime law enforcement is called/contacted for a non-criminal intervention on an individual. Includes CFS of self-harm / missing individual / suicidal ideations