

July 19, 2022

Erie County Legislature
92 Franklin St, 4th Floor
Buffalo, NY 14202

Re: Establishing a Community Responder pilot for behavioral health and basic needs

Dear Honorable Members:

In September of 2020, members of this honorable body introduced a resolution titled "Supporting a New Approach to Coordinating & Providing Mental Health Professionals & Social Workers for Assisting Law Enforcement in Crisis Situations & 911 Calls" which, in part, called for developing a new model for responding to mental health crises and other community behavioral health needs.¹ The resolution also committed to holding hearings in the Public Safety and Health and Human Services committees on this issue. In March 2021, the Erie County Police Reform Citizen Taskforce issued in its final report a recommendation that "within the next six months, Erie County should implement a Crisis Service Response Team comprised of mental health professionals."² According to an October 2021 memo from Commissioners Jancewicz and O'Brien of Central Police Services and Mental Health respectively, from January-April 2021 Erie County piloted a 911 call diversion program with Crisis Services to redirect appropriate crisis calls to mental health counselors instead of dispatching police, which was to become permanent in January 2022. Among other recommendations, the memo stated that the county should continue "to promote the establishment of behavioral health teams," in addition to the existing teams embedded in the Buffalo, Cheektowaga, West Seneca, Town of Tonawanda and NFTA police departments and in addition to the Mobile Outreach units at Crisis Services.³

As residents, peer advocates, community organizers, social workers and mental health professionals, we applaud the initial steps taken in the previous two years to acknowledge the grave necessity for a new approach to behavioral health needs in Erie County. In line with the above recommendations, we respectfully ask the Legislature to consider the next step in reimagining the public response to behavioral health needs: piloting a Community Responder program to be dispatched to 911 calls where a police, fire, or EMS response is inappropriate.

¹ Submitted by Legislators Gilmour, Chimera & Baskin, available at https://www2.erie.gov/legislature/sites/www2.erie.gov/legislature/files/uploads/Session_Folders/2020/17/20INTRO.17-5.pdf

² Police Reform Citizen Taskforce, "Final Report and Recommendations Relating to the Erie County Sheriff's Office Patrol Division," March 2, 2022, page 27. Available from <https://www3.erie.gov/sites/default/files/2021-02/Police-Reform-Task-Draft.pdf>

³ James Jancewicz and Mark O'Brien, "Memorandum regarding Non-Law Enforcement Response to Mental Health Calls," October 8, 2022, page 2, available from https://www2.erie.gov/legislature/sites/www2.erie.gov/legislature/files/uploads/Session_Folders/2021/19/21COMM.%2019E-16.pdf

Community responder programs have proliferated in municipalities across the country since the 2020 uprising for Black lives highlighted the danger of over-utilizing police as first responders. A community responder is a first responder, dispatched by 911, who is trained to handle calls that are non-violent and non-criminal in nature, primarily resolving issues using de-escalation and problem-solving skills. Many, but not all, calls for service have a mental or behavioral health component. For example, in Denver the community responder team responds to all 911 calls coded as assists, welfare checks, trespass/unwanted person, intoxicated person, suicidal series, indecent exposure and syringe disposal.⁴ More practically, this looks like responding to complaints like someone changing clothes in an alley, or sleeping in a stairwell, someone talking to themselves on a street corner, or consuming alcohol in public - situations where health professionals and a peer are needed, not law enforcement. Unlike Crisis Services or police behavioral health teams, the call does not have to qualify as a crisis in order to be dispatched, thus preventing many lower-level problems from escalating into crises. Central Police Services data shows that in any given year around 10% of 911 calls are coded as "Assist," which suggests that such a team in Erie County could alleviate a significant portion of all calls, freeing police resources to focus on higher priorities.⁵

While it is often referred to as a crisis response team, this model is actually what the much-lauded CAHOOTS program in Eugene, Oregon follows.⁶ Other municipalities with this model include Denver, CO, Albuquerque, NM, Olympia, WA, Atlanta, GA, Durham, NC, Portland, OR, San Francisco, CA, and New York, NY, to name a few. In most of these examples, responders are sent out in teams of two or three: a peer, a mental health professional, and a medic, and are equipped with a van and basic medical, hygiene, and care supplies such as food and clothing. Most teams report that a majority of calls involve transportation to treatment facilities or shelters and assisting unhoused persons with basic needs. The transportation aspect is a particularly important service that is not currently provided by law enforcement, behavioral health teams or Crisis Services teams who rely on ambulances and police cars to transport people to hospitals or jail when a situation cannot be resolved on-site, which is not only traumatizing but a waste of county resources. Many programs show enormous cost savings by sending community responders instead of police, EMS or fire.

The advantages of community responder teams including crime prevention, better health outcomes and improved police-community relations are too numerous to encapsulate in one letter. We look forward to hearing feedback and ideas from the Legislators about this model which has the potential for tremendous positive impact in our communities. We ask that this issue be put before the appropriate committee of the Legislature and that we would be given the opportunity to fully present our pilot proposal.

⁴ STAR Program Evaluation, January 8, 2021, available from https://wp-denverite.s3.amazonaws.com/wp-content/uploads/sites/4/2021/02/STAR_Pilot_6_Month_Evaluation_FINAL-REPORT.pdf

⁵ Police Reform Citizen Taskforce, "Final Report and Recommendations Relating to the Erie County Sheriff's Office Patrol Division," March 2, 2022, page 162. Available from <https://www3.erie.gov/sites/default/files/2021-02/Police-Reform-Task-Draft.pdf>

⁶ Eugene Police Department, "CAHOOTS Program Analysis 2021 Update," May 17, 2022, available from <https://www.eugene-or.gov/DocumentCenter/View/66051/CAHOOTS-program-analysis-2021-update>

Sincerely,

Amy Cross-Viola, LCSW, Social Welfare Action Alliance of Buffalo

Colleen Kristich, LMSW, Partnership for the Public Good

Emma Fabian, MSW, AVP of Harm Reduction, Evergreen Health

Kartika Carr, Government Affairs Manager, Best Self Behavioral Health

Naomi Taylor, Harm Reduction Specialist, Evergreen Health

Nicolalita Rodriguez, LMSW, CHW, Director & Founder, Little People's Victory

Phylcia Brown, Executive Director, Black Love Resists in the Rust

Shannon Higbee, CEO, Recovery Options Made Easy

Sydney Browne, High Road Fellow, Cornell University

Tanvier Peart, Director of Policy Advancement, Partnership for the Public Good