

**Mental Health Response Advisory Committee Meeting
December 14, 2015 Highlights
Community Room: 3rd District Police Department**

Present: **Chair:** **William M. Denihan**, ADAMHS Board of Cuyahoga County
 Co-chair: **Ed Eckart**, City of Cleveland

Committee Members: **Michael Baskin**, NAMI Greater Cleveland; **Mary Bazie**, Hitchcock Center for Women; **Jennifer Blumhagen**, Applewood Centers; **Sgt. Melissa Dawson**, Cleveland Police; **Duana Deskins**, Cuyahoga County Prosecutors Office; **Judge Hollie Gallagher**, Cuyahoga County Court of Common Pleas; **John Garrity, Ph.D.**, Director of QI/Evaluation & Research; **Rev. Benjamin F. Gohlstin, Sr.**, ADAMHS Board & United Pastors in Mission; **Orlando Grant**, Life Exchange Center; **Valeria Harper**, Chief Operating Officer; **Larry Heller**, Greater Cleveland Congregations; **Kyle Miller**, Sisters of Charity Health System; **Thomas Minshull**, United Way; **Derek Moore**, Cleveland Municipal Court; **Mark Munetz, MD**, Northeast Ohio Medical University Ohio Criminal Justice Coordinating Center of Excellence; **Marie Nemec**, Cuyahoga County Probation, **Susan Neth**, FrontLine Service; **Deputy Chief Joellen O'Neill**, Cleveland Police; **Scott Osiecki**, Director of External Affairs; **Rosie Palfy**, Cuyahoga County Office of Homeless Services Advisory Board; **Judy Peters**, The Centers; **Yvonne Pointer**, City of Cleveland; **Charles See**, Community Reentry; **Tej Singh**; **Edward Stockhausen**, Mental Health & Addiction Advocacy Coalition; **Judge Joan Synenberg**; Cuyahoga County Court of Common Pleas; **Luis Vazquez**, Cuyahoga County Office of Reentry; **Mike Woody**, NEOMED-CTCCOE.

Consent Decree Monitor: **Matthew Barge**, Police Assessment Resource Center.
 Dr. Randy Dupont, The University of Memphis

Community Police Commission Liaison: **Kathleen Clegg, MD**, University Hospitals

Public: **Yolanda Armstrong**, Big Brothers Big Sisters; **Rosemary Creeden**, FrontLine Service; **Tara Foxworth**, Hitchcock Center for Women; **Meghan Patton**, Cuyahoga County Court of Common Pleas; **Meredith Turner**, Sen. Sherrod Brown's Office; **Thomas Williams**, Data Research Specialist; **Beth A. Pfohl**, Grants Officer

- Mr. Denihan opened the meeting with introductions at 9:00 a.m. and gave a special welcome to Consent Decree Monitors Matthew Barge and Dr. Randolph Dupont. He also mentioned that Charles See was working with the monitors and made special note that Dr. Kathleen Clegg was present and representing the Community Police Commission.
- The Committee approved the November 9, 2015 meeting summary which was accepted as written.
- Consent Decree Monitor - Matthew Barge, Vice President of the Police Assessment Resource Center (PARC) updated the group that he and Randolph Dupont, Ph.D., University of Memphis, have been meeting with people involved with the Consent Decree over the past 10 – 11 weeks. He stated that he is impressed with the amount of progress and collaboration he has seen in people working together to solve issues. Dr. Dupont added that Cleveland is lucky to have the social service structure that is currently in place along with the partnerships between the social service system and the City and County.
- Mr. Barge explained that the monitor's role is not to micromanage, but to offer quality control, compliance with the Consent Decree and filing progress reports to Federal Judge Solomon Oliver. The monitor prefers to participate early and often with the groups working on the issues so that time is not wasted and work does not have to be redone. He wants to make meaningful change and not just set goals to implement action steps over the next four to five year period.

- Mr. Barge and Dr. Dupont clarified that they are working on a timeframe of what tasks need to be completed, in what order and the date due. This timeframe will be complete during the first quarter of 2016.
- Part of the timeframe includes a plan for Crisis Intervention Team (CIT) implementation and they are looking for assistance from the Mental Health Response Advisory Committee (MHRAC) to develop this timeline as well as a project plan.
- Mr. Barge and Dr. Dupont agreed with a suggestion made by Judge Gallagher that sub-committee co-chairs need to meet to share information and address implementation issues. Both stated they will be in Cleveland and available for working sessions with sub-committees around the same time as the January 11, 2016, MHRAC.
- Judge Synenberg suggested that we do not wait for the timeline to provide training to officers and staff of the CBCF about using disparaging language. Deputy Chief O'Neill stated that is already included in general police orders and she will look into it. The suggestion was passed on to the Training Committee. Mr. See stated that he will share the dates and times for a series of workshops that community reentry has scheduled in 2016.
- Mr. Barge expressed that although the MOU is in place between the City of Cleveland and the ADAMHS Board, there needs to be a partnership with the police and the public and that the public needs to know about the partnership. Deputy Chief O'Neill clarified that the police are very involved with the process. Mr. Denihan and Mr. Eckart agreed that the community, police and the ADAMHS Board are critical elements and that relationships are being made that will remain in the future. Mr. Denihan stated that the Consent Decree, MOU, CIT Peer Review and the MHRAC report are tools to ensure that progress is being made.
- Dr. Dupont suggested that we look at the "pink slip" process and determine if the police should be involved as in other parts of Ohio and if so to consider developing a training. He also suggested that we focus on the way referrals are made to social service agencies and police should be encouraged to utilize the agencies and that CIT should reflect the range of services. He expressed that the officers are well-meaning and that many do not know of other options available to them.
- Ed Stockhausen, Chair of the Community Involvement/Engagement Committee, added that his group has a suggestion for a police district specific referral card for officers. Dr. Dupont said he has seen the card and thought that it was great but suggested the addition of more religious and other non-profit organizations.
- Mr. Barge and Dr. Dupont explained that a Needs Assessment will be conducted to gather data from citizens and officers from the Cleveland Division of Police. This assessment will help to develop the CIT project plan by gathering information, such as do officer officers know how to classify a crisis and the effectiveness of core policies. This will help to determine if a new policy should be unveiled at the same time as an updated CIT stat sheet. Judge Gallagher asked about the Needs Assessment. Dr. Dupont suggested that it could be part of a survey that the monitor will be doing, we could do a separate survey and have focus groups with providers, people in need of treatment, etc.
- Mr. Denihan stated that Cleveland is lucky to have Mr. Barge and Dr. Dupont involved in this process based on their experience with other cities and that this is an extraordinary opportunity for our community. He also expressed that the CIT program will continue run during this process and changes will be made as needed.

- Ms. Palfy inquired as to the MHRAC report due date of January 31, 2016. Mr. Barge clarified that the January 31, 2016 report due date is not specified in the Consent Decree, but it is part of the Memo of Understanding between the City of Cleveland and the ADAMHS Board of Cuyahoga County. Mr. Denihan added that the report will focus on what we currently have and what we are suggesting and will help the monitors in developing the timeframe and project plan.
- Mr. Eckart provided an update on the Federal Justice and Mental Health Collaboration Program Grant and explained that Cleveland was selected for the development of a Mental Health Response Team pilot program in the 2nd Police District that would allow civilian mental health professionals to be on the scene in case the police need special assistance with diffusing a mental health situation. This program would operate 7 days a week for 8 hours in the late afternoon to early evening. Mr. Denihan stressed this team is not to replace or reduce the responsibility of CIT officers on daily calls. The team is for special circumstances that require mental health professionals. City Council voted to accept the funding and the ADAMHS Board will provide a match. The pilot should be up and running within the first quarter of 2016.
- Mr. Denihan asked Mr. Woody to provide highlights from the CIT Peer Review. Mr. Woody started by explaining that CIT is in 86 of Ohio's 88 counties and that 8,500 officers in Ohio have been CIT trained. He clarified that the CTCCOE was asked to provide a peer review of the CIT program in Cleveland. He stressed that the results would not have been as positive if the review included all of Cuyahoga County. Highlights for improvement included the need for smaller class sizes, focus on training voluntary officers and development of a recognition program.
- A discussion of the recent CIT training of the new cadet class followed. Some believed that it goes against the CIT model that recommends the need for volunteer officers with three to five years of experience. Dr. Dupont mentioned that the consent decree does not specify if cadets could be trained. Deputy Chief O'Neill mentioned that Carole Ballard reported that the cadet class was eager to learn about CIT. Deputy Chief O'Neill will be following-up with the cadets after the probationary period to obtain feedback about the class and if the training was useful before they hit the streets.
- Rev. Gohlstein remarked on the lack of faith-based organization in the MHRAC. He said that there are over 2,000 religious institutions in Cuyahoga County with about 1,200 in the City of Cleveland.
- Mr. Denihan asked each sub-committee chair to provide a report.
 - **Community Involvement/Engagement Committee:**
 - Mr. Stockhausen reported that the committee has been meeting regularly and has been very busy developing and submitting five recommendations and action steps that include:
 1. Develop and Maintain Resource Guides for CDP Officers and for the General Public:
 - Develop and Maintain a Resource Guide for CDP Officers: Provide all CDP officers with hard and electronic copies of a resource guide that identifies important behavioral health resources and agencies in their district.
 - Develop a "Pocket Guide" for Cleveland residents with tips for interacting with the Police: Provide community members, both young and old, with a CPD approved information wallet card about the rules of interacting with police officers during questioning in different circumstances; as well as tips on road safety, child safety and personal safety.

2. **Build and Nurture Community Connections, especially with Behavioral Health Providers:** Establish and nurture relationships between CDP officers, behavioral health providers, and the community by organizing events and connecting through community meetings throughout 2016.
 3. **Connect through Social Media:** The CDP, each district's Community-Police Relations Committee, and local mental health and addiction agencies need to connect on Facebook and other social media platforms in order to stay informed of what is happening in each other's worlds.
 4. **Consider Creating & Airing Public Service Announcements:** It is important to inform the public about the work that is being done in relation to the Consent Decree. The public will want to know about Crisis Intervention Team (CIT) training, how CIT improves public safety, and how they should talk make it clear to 911 dispatchers when a mental health or drug addiction crisis is involved in an emergency situation.
 5. **Streamline and Increase Cross-Communication among Consent Decree and Community Committees:** The MHRAC should work with the CDP, the City of Cleveland, the City of Cleveland Department of Community Relations, and the Community Police Commission to identify ways to reduce redundancies, increase the value of work, and strengthen the network of parties interested in the Consent Decree's success. Already, there seem to be many moving parts, and it is not always clear who is working on what projects or if there is sufficient communication between all these groups.
- Ms. Peters added that community input is needed in aggregate by all committees to develop the plan.
 - Dr. Dupont added that the plan also needs to include developing individual relationships between the citizens and police. He suggested that case managers could have relationships with police so that the officer would be able to contact the case manager to let him or her know that something is going on with the client. He said that this has worked in other cities and there are ways to ensure HIPAA compliance.
 - Ms. Palfy suggested that we ask police officers for input. She has heard that officers would rather spend time on the streets than completing forms. Dr. Dupont said that this will be addressed during the needs assessment. Deputy Chief O'Neill stated that his process has begun and that feedback is being considered in the integrating the CIT Stat Sheet and the police report process. She also mentioned that communicating with officers is part of the duties assigned to Captain Purcell, the new CPD CIT Coordinator. She added that they will be sending a Survey Monkey to gather additional feedback from officers. Dr. Dupont suggested integrating officers into the MHRAC.

○ **Data Committee:**

- Dr. Garrity reported that the committee has been meeting every two weeks and held a conference call with Dr. Dupont to discuss his review and suggestions on the CIT Stat Sheet.
- A draft of the Preliminary Summary of Crisis Intervention Team Statistics Sheets were shared and reflected data collected from 2014 and 2015. Highlights included:
 - 1,048 forms were completed from January 1 2014 – September 2015.
 - 939 indicated call source, 324 (31%) originated from family, 119 (11%) from EMS and 371 (35%) came from other sources.
 - 255 (24%) involved mental illness, 144 (14%) involved threats, 89 (9%) involved suicide.
 - Verbal De-escalation was achieved in 809 (77%) of the cases, and No Response was reported for 186 (18%).
 - Excluding handcuffs, use of force was reported in 9 (less than 1%) of the cases.
 - None/Unknown Subject injuries were reported for 865 (83%).
 - None/Unknown Officer Injuries were reported for 889 (85%), and Not Recorded for 146 (14%).
 - Under Disposition, 262 (25%) were voluntary to Saint Vincent's ER, and 423 (40%) were voluntary to private hospitals, 198 (19%) were marked other, and EMS handled 159 (15%).
 - Mental Health Service Referrals were made for 178 (17%) of the cases.
 - CPD transported 113 (23%) cases to Saint Vincent Charity Hospital, 44 each (10%) to both Lutheran Hospital and MetroHealth Medical Center, 30 (6%) to Fairview Hospital, and 20 (4%) to University Hospital, while 174 (35%) were not recorded.
 - 972 (93%) of the citizens were residents of Cleveland.
 - 616 (59%) were Male and 429 (41%) Female.
 - 668 (64%) were between the ages of 26 – 64 years, 228 (22%) were between 18 – 25 years and 116 (12%) were between 0 – 17 years.
 - Race is not recorded on current sheets; although detailed physical descriptions are included, accurately assigning race by these is not possible.
 - Officer time at hospital was recorded about 40% of time and was usually a half hour, or a quarter hour.
 - Officer's experience at hospital was recorded 42% of the time with the majority reporting excellent to good experiences.
- Ms. Harper suggested that based on the statistics we need to consider older adolescents while making recommendations.
- Ms. Palfy suggested that we include a place on the CIT Stat Sheet to reflect death of a client.

○ **Diversion Committee:**

- Ms. Neth reported that the Data Committee continues its process mapping strategy to create a pictorial of initial contact with the police to make suggestions on the best point or points that diversion could occur.
- The Committee will be suggesting the development of a Drop-off Site other than St. Vincent Charity Hospital Psychiatric Emergency Room that would be able to triage, screen and determine the best course of action and include residential and stabilization beds. Not all people would go to the new Drop-off Site. The public and families would also be able to visit this site to gather information and resources. The

site may have representatives from providers and the CPD. The committee also discussed the development of a checklist for officers to use to determine at what point a client would be taken to St. Vincent or the Drop-off Site.

- **Policy Review Committee:**
 - Judge Gallagher reported that the committee met on December 3.
 - The committee developed guiding principles for the committee and reviewed over 20 policies from other cities to develop a chart that lists what they would like from each policy to be included in our policies.
 - A discussion was had regarding what should come first the policies or the CIT Stat Sheet, which led to the recommendation that all sub-committee chairs and co-chairs should meet to ensure that goals and tasks are aligned in order to avoid any duplication of efforts.
 - The committee will meet again in February.

- **Training Committee:**
 - Mr. Miller reported that the committee reviewed and discussed the monitor's reports from Portland and Philadelphia that stated that not all officers are appropriate for CIT or well suited to deal with individuals suffering from mental illness and the need to expose new recruits to CIT training before serving, along with refresher courses throughout the course of career.
 - The committee suggests that there are enough CIT officers available during shifts to handle multiple mental health situations at the same time.
 - Dr. Dupont mentioned the smaller class sizes of the true CIT model and identified the larger class sizes in Cleveland but understands the pressure we are under.

- **Next Meeting:** Monday, January 11, 2016, Life Exchange Center, 13407 Kinsman Avenue, Cleveland, OH 44120.

- The meeting was adjourned at 11:05 a.m.