THE CHALLENGE:¹ In the City of Dallas, in recent years, there has been an increasing number of 911 calls from people who require mental health assistance. Traditionally, the response has been to transport these people to local emergency departments or, if medically stable, arrest and book them in the Dallas County Jail where they can receive psychiatric services. Between 2012 and 2015, the number of 911 mental health calls requiring an ambulance response increased by 59% (from 2,176 to 3,452 calls). The South Central Dallas Patrol District saw the bulk of that increase during 2012 and 2015 – from 382 to 706 calls, the equivalent of an 85% spike.

THE APPROACH:² In response to the growing need of assistance for 911 mental health calls, the W.W. Caruth, Jr. Foundation at the Communities Foundation of Texas partnered with the Meadows Mental Health Policy Institute (MMHPI) to assess the local needs and gaps in service. After reviewing the responses from 58 focus groups, comprised of nearly 400 Dallas Police Officers, 911 call data and hospital data, it was clear that a more succinct and coordinated effort was needed across the City to provide more targeted support for Dallas residents who are facing a mental health crisis but who do not pose an immediate public safety threat. In January 2018, the City of Dallas in collaboration with MMHPI and Parkland Health & Hospital System launched the Rapid Integrated Group Healthcare Team (RIGHT) Care Program. The RIGHT Care Program responds to 911 mental health calls in the South Central Dallas Patrol District. One law enforcement officer, a paramedic, and a licensed mental health clinician are embedded together in one response unit. The unit deploys together to assess the patient and then divert them away from jail or unnecessary hospitalization and towards immediate community-based behavioral health care.

THE RESULTS: The RIGHT Care Program has delivered positive results since its January 2018 launch. <u>Dallas Police Department</u> has experienced a 19% reduction in 911 mental health calls that require an ambulance response.³ <u>Parkland Health & Hospital System</u> has experienced a 9.3% reduction in the rate of people who return to the emergency department in zip codes where the RIGHT Care Program has been deployed.⁴ Finally, there has been a reduction in the arrests and apprehensions of people to whom the RIGHT Care Program teams have been dispatched.



December 20, 2018

INTRODUCTION

In October 2016, the trustees of the W.W. Caruth, Jr. Foundation at the Communities Foundation of Texas awarded a grant to Meadows Mental Health Policy Institute (MMHPI). This grant provided MMHPI the opportunity to partner with Dallas County and the City of Dallas, as well as a host of diverse stakeholders to implement the Dallas County Smart Justice Plan. The grant funds up to \$7 million over three years; \$3.5 million in year one and up to \$1.75 million each in years two and three.⁵

The grant allows for collaboration with City of Dallas leadership to explore and implement a plan that would provide law enforcement with solutions for diverting residents experiencing a mental health crisis – but who do not pose a threat to public safety – away from jail or the hospital and into community-based treatment. Data indicated that there were nearly 150,000 Dallas residents with severe behavioral health needs. The needs included severe cases of addiction and substance use.⁶

The assessment of law enforcement focus groups, 911 calls, and hospital data revealed that mental health crisis calls increasingly fell on local law enforcement for response. Because of the limited care options that law enforcement possess, these people were increasingly arrested and detained at the county jail or admitted to local hospital emergency departments. The greatest need was in the South Central Dallas Patrol District. Between 2012 and 2015, The South Central Dallas Patrol District experienced an 85% increase in mental health crisis calls requiring an ambulance response.

In January 2018, the <u>City of Dallas</u>, <u>Dallas Police</u>
<u>Department</u>, <u>Dallas Fire-Rescue</u>, MMHPI, and
<u>Parkland Health & Hospital System</u> launched the
<u>Rapid Integrated Group Healthcare Team</u> (RIGHT)
Care Program in the South Central Dallas Patrol

for affordable mental health services in Dallas. Too often, this responsibility falls on our first responders. Through this program, we partner with local mental health professionals to more strategically serve our residents and assist our first responders.

MIKE RAWLINGS
 Mayor of Dallas



Mayor Rawlings with Dallas Independent School District Police at the Mayor's Back to School Fair.

District. The RIGHT Care Program aims to address the needs of residents facing an immediate mental health crisis and is made up of a response team from three different disciplines.

The program, focused in the South Central Dallas Patrol District, assesses and diverts patients away from being detained in the county jail or

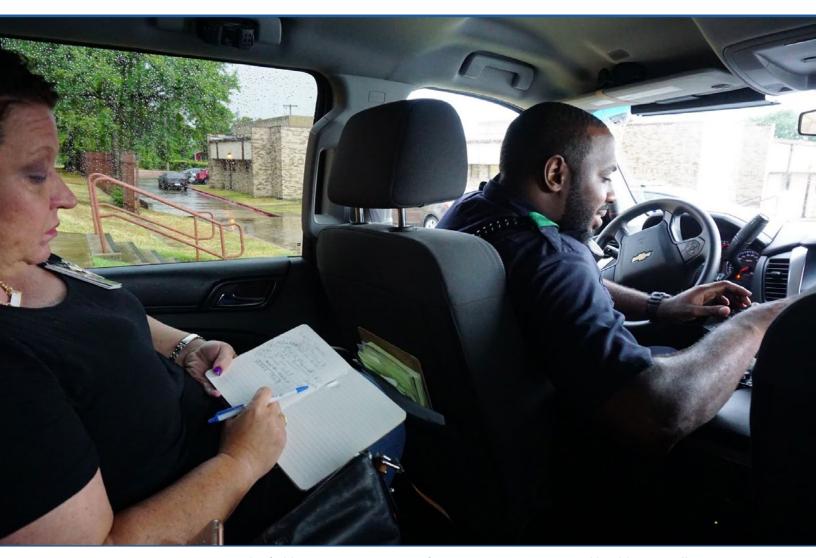
INTRODUCTION (CONTINUED)

admitted to hospital emergency departments. Instead, these patients are transported to more appropriate community-based service providers where they can receive care.

Genesis Gavino, Assistant to the City Manager and Chief of Staff of the City of Dallas and Results for America Local Government Fellow, highlighted this ongoing program within the City as an exemplar of how the City is using data and evidence to bring empathetic, efficient, and effective care to one of the South Central Dallas Patrol District's most vulnerable populations.

THE CHALLENGE^{7,8}

In the City of Dallas, in recent years, there has been an increasing number of 911 calls from people who require mental health assistance. Traditionally, the response has been to transport these people to local emergency departments or, if medically stable, arrest and book them in the Dallas County Jail, where they can receive psychiatric services. Between 2012 and 2015, the number of 911 mental health calls requiring an ambulance response increased by 59% (from 2,176 to 3,452 calls). The South Central Dallas Patrol District saw the bulk of that increase during 2012 and 2015 – from 382 to 706 calls, the equivalent of an 85% spike.



RIGHT Care team in the field entering case notes after answering a 911 mental health care call.

THE CHALLENGE (CONTINUED)

Additionally, between 2012 and 2015, the South Central Dallas Patrol District division experienced a 66% increase in 911 calls that resulted in emergency detention – an apprehension by a peace officer without a warrant. Emergency detention allows a law enforcement officer to apprehend and transport someone who they perceive to be either a danger to themselves or others. That person can be taken to an identified mental health treatment facility, often the county jail or hospital emergency department.

As the mission of police and emergency medical services personnel is to respond to public safety and law enforcement concerns, mental health emergency calls placed increasing demands on the two entities. A combined 9,000 hours a year were spent responding to and transporting residents facing an emergency mental health crisis.

These types of calls also impact Dallas County. In 2013, Dallas County spent more than \$47 million on housing, processing, and treatment for people living with mental illness. In addition, Parkland Hospital, the largest free-standing emergency department in the nation in terms of volume, was looking to reduce the number of triage patients experiencing a mental health crisis.

THE APPROACH

In 2018, the City of Dallas, the Meadows Mental Health Policy Institute (MMHPI), and Parkland Health & Hospital System (Parkland) launched the Rapid Integrated Group Healthcare Team, commonly known as the RIGHT Care Program, which is specific to the South Central Dallas Patrol District. The goal of the multidisciplinary approach is to divert people who have complex mental health care needs away from jails and hospitals and toward the behavioral health care system as soon as possible.

The RIGHT Care Program is designed to put paramedics and behavioral health care clinicians at the forefront of mental health calls that are reported to law enforcement. The health care first approach is designed to respond with care and compassion to a mental health crisis.

The RIGHT Care Program is a hybrid model based on the nationally recognized Colorado Springs Community Response team⁹ that includes a community paramedic, a mental health peace officer, a licensed mental health clinician, and the Crisis Call Diversion Program¹⁰ in Houston that houses a behavioral health clinician in 911 dispatch. This approach was deemed a good fit for Dallas because it builds off the existing Dallas Fire-Rescue Mobile Community Paramedic Program¹¹, which was established in 2014 as a multidisciplinary team of paramedics trained to assess the complex needs of chronic or repeat 911 callers.

After assessing local 911 call center data, focus group responses from law enforcement, and hospital trend data, the City of Dallas in collaboration with a committed group of diverse partners implemented an innovative, evidencebased, and data-driven approach to a costly and complex problem.

The RIGHT Care Program was fully launched in January 2018 in the South Central Dallas Patrol District. The RIGHT Care Program is a multidisciplinary approach that embeds in one unit, a law enforcement officer, a paramedic, and a licensed mental health clinician. This team of three deploys together to assess and divert people experiencing a mental health crisis in the community away from jail or unnecessary hospitalization and into more appropriate community-based behavioral health care as soon as possible.

The collaborative approach includes multiple steps from when a call is first received at

THE APPROACH (CONTINUED)

dispatch through the final phases of determining the best course of action for each individual caller.

- 1. A call center clinician from Parkland
 Hospital is physically present at the 911
 call center dispatch to field calls and assist
 with questioning. Trained clinicians can
 help prioritize calls, assess if the RIGHT
 Care Program team should be dispatched,
 and communicate to the team in the field
 with important details about the specifics
 of the call.
- 2. Upon arrival, first, law enforcement officers engage and establish if the situation is safe for the rest of the team. If the situation is deemed unsafe, the clinician and paramedic will not engage with the individual.

- 3. If the situation is deemed safe, then a DFR paramedic evaluates the patient to determine if there are acute medical issues which might manifest as a behavioral health issue.
- 4. If no medical exclusionary criteria are identified, then the mental health clinician enters to determine the patient's needs and where they will best be served in the community.
- 5. Finally, as a team, the group determines the most appropriate course of action. If possible, the primary choice is to assist the patient with securing treatment from a community-based mental health provider. Each team member has an equal say in the final decision.

The Role of Community Behavioral Health Providers

The RIGHT Care Program is designed to divert people experiencing a mental health crisis in the community from jail or unnecessary hospitalization and into more appropriate community-based behavioral health care as soon as possible. In order to accomplish the program's goals, the RIGHT Care team relies on a diverse range of community behavioral health providers and resources including Adapt Community Solutions, Centro

de Mi Salud, Child and Family Guidance
Center, Homeward Bound, Integrated
Psychotherapeutic Services, Metrocare
Services, Southern Area Behavioral Health,
and Transicare, Inc., that serve sub-crisis
mental health patients. These novel options
ensure that many residents who are facing
mental health challenges are served by
behavioral health providers while remaining
in their own communities.

TIPS FOR REPLICATION

- Create a Clear Organizational Structure: Each entity involved in a multidisciplinary initiative brings its own strengths to the team. It is important to develop a clear organizational structure and define roles and responsibilities. For example, within the RIGHT Care Program, the Meadows Mental Health Policy Institute (MMHPI) takes on an administrative role, ensuring that the program is being implemented with fidelity to the original design, is meeting benchmark goals and deliverables, and is producing meaningful outcomes. Meanwhile, Dallas Police Department (DPD) ensures that the program operates in accordance with state law and ensures 911 calls are answered in the order in which they are received, among other responsibilities.
- Facilitate New Initiatives with Adequate
 Funding: The W.W. Caruth, Jr. Foundation at the
 Communities Foundation of Texas facilitated the
 development and implementation of the RIGHT
 Care Program through a grant of up to \$7 million
 over three years. Each organization involved
 is responsible for a portion of the program's
 implementation and MMHPI provides the grant
 funding to DPD, Dallas Fire-Rescue, and Parkland
 Health & Hospital System for personnel and
 program support.
- Consider the Client when Designing
 Programs: To reduce the stigma associated with mental health illness, the RIGHT Care
 Program uses an unmarked vehicle rather than a marked squad car. Some patients in mental health crisis may have prior experiences with law enforcement and seeing a team arrive in a marked vehicle could trigger a negative reaction and make the response less effective.



RIGHT Care Team conducts follow up care to a client serviced a week prior during a 911 call for mental health crisis.

THE RESULTS

The RIGHT Care Program has delivered positive results since its January 2018 launch.

The Dallas Police Department (DPD) has experienced a 19% reduction in mental health calls to 911 requiring an ambulance response, comparing the period January 29, 2017 to July 30, 2017 with the same period in 2018. Additionally, the response time to clear the scene of a call has decreased dramatically. Prior to the program, mental health crisis calls required four officers and one sergeant to respond, taking an average of 70 minutes to complete each call. Because the RIGHT Care Program is made up of team members from multiple disciplines, the efficiency of the program has returned 42 full weeks, or the equivalent of one full time employee, back to DPD over the first eight months of the program.

There has been a reduction in the amount of arrests and apprehensions of people experiencing a mental health crisis. Since the launch of the program, the RIGHT Care Program has been dispatched to 2,000 mental health crisis 911 calls in the South Central Dallas Patrol District.¹⁴ Of those people experiencing a mental

health crisis, only 1% have been arrested for new offenses and, overall, 3% have been arrested due to outstanding warrants. Outcome data is currently being assessed, but when these results are compared to the 35% of incarcerated persons with mental health illness currently booked at the Dallas County jail, it is appears the RIGHT Care Program is diverting people away from jail and redirecting them toward community-based care resources.

Finally, <u>Parkland Health & Hospital System</u> has also seen a reduction in the rate of people who return to the emergency department. Although there are multiple influencing factors, comparing 2017 to 2018 data, Parkland saw a 9.3% reduction in emergency department re–admissions in the zip codes associated with where the RIGHT Care Program was deployed.¹⁶

Through this innovative and evidence-based multidisciplinary team approach, the City of Dallas has reshaped a small part of the healthcare system that deals with patients who have urgent mental health needs. Each stakeholder in the RIGHT Care Program is now better equipped to provide optimal care to those in crisis.

ABOUT RESULTS FOR AMERICA'S LOCAL GOVERNMENT FELLOWSHIP PROGRAM

Results for America's Local Government Fellows program was founded in September 2014 to provide an advanced group of local government leaders in diverse and influential cities and counties across the country the knowledge and support to implement strategies that consistently use data and evidence to drive policy and budget decisions on major policy challenges.

With the support and guidance of Results for America, the Local Government Fellows lead their governments toward advanced stages of data-driven and evidence-based policymaking in order to address major policy challenges in

their communities. The **16 cities** and counties represented in the Fellowship collectively represent more than **28 million** people and **\$148 billion** in local government spending.

RFA engages its local government fellows in:

- · Defining short- and long-term policy goals;
- Developing research partnerships with academics;
- Sharing best practices and demonstration projects;
- · Problem solving among peers;
- Receiving individual feedback and coaching; and
- Participating in a national network and peer cohort.

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PHOTOS

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Page 6: Christine Smith.

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ADDITIONAL RESOURCES:

- Watch the NBCDFW News 5 story for a local take on the RIGHT Care Program here: https://www.nbcdfw.com/news/local/Right-Care-Program-to-Help-Mentally-III-in-Dallas-419510143.html.
- Read the press release for the launch of the RIGHT Care Program here: https://www.texasstateofmind.org/wp-content/uploads/2018/04/01.22-
 RIGHTCareTeam_PressRelease_FMT_FINAL2.pdf.
- Learn more about Results for America's Local Government Fellowship at http://results4america.org.

ABOUT THE INVEST IN WHAT WORKS POLICY SERIES

This report is part of Results for America's Invest in What Works Policy Series, which provides ideas and supporting research to policymakers to drive public funds toward evidence-based, results-driven solutions. Results for America is committed to improving outcomes for young people, their families, and communities by shifting public resources toward programs and practices that use evidence and data to improve quality and get better results.



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