How Law Enforcement and Social Services Partnerships are Improving Mental Health Crisis Response

Through interviews with researchers, community leaders, and service providers, Wilder Research Executive Director Paul Mattessich examines pressing issues facing our communities today to offer insight beyond the numbers.

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Transcript

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Paul Mattessich:	Welcome to Talking Through The Numbers, a podcast produced by Wilder Research. Our goal? To provide insight on significant issues, combining sound information with expert knowledge to enrich our understanding of things that affect our communities and our world. I'm Paul Mattessich, executive director of Wilder Research. In this episode, our topic is law enforcement response to mental health needs. Four experts have come to the studio for our conversation. They represent law enforcement, research, program, service delivery, government systems. So, first of all, four expert guests, could you take a moment to introduce yourself further, tell our listeners who you are and what you do?
Emily Schug:	Thank you, Paul. I really appreciate the opportunity to participate today. My name is Emily Schug and I'm a deputy director with Dakota County Social Services. My scope of responsibilities includes management of our mental health and substance use disorder services, which includes a continuum of services for people who experienced a mental health crisis. And we've been over the last number of years had an opportunity to work with our law enforcement partners to develop new and innovative models of coordinated response that pairs mental health professionals from social services with dedicated community resource officers to connect with people following a crisis to really help build their connection to ongoing services and supports, and also build our community and system relationships.
Paul Mattessich:	Welcome.
Melissa Serafin:	And then I'm Melissa Serafin and I am a research associate with Wilder Research and my work primarily focuses on mental health and substance use. And last year we worked with the East

Metro Crisis Alliance to develop an evaluation framework for police mental health collaborations. So we gathered input from several agencies in Minnesota, mostly around the East Metro to discuss the goals of these types of collaborative efforts, indicators that could speak to program impact and then kind of best practices or tips for evaluating these types of programs. So essentially we are hoping that this document can be used by any program to guide the development of their own evaluation activities. And then I've also reported on some preliminary data from police mental health collaborations in the East Metro for Wilder's semi-annual reports for the East Metro mental health round table. This data has been pretty limited though, since these programs are relatively new.

Paul Mattessich: Thanks. Welcome.

Roger Meyer: Hi Paul. I'm Roger Meyer. I'm project director for the East Metro Crisis Alliance. We are a public private partnership in the East Metro counties of Ramsey, Dakota, and Washington, and we focus the system-wide change effort on improving the mental health and substance use crisis system with an effort to not only improve individual's recovery outcomes when they do have a mental health or substance use crisis, but also make sure that our systems are being used appropriately and effectively in responding to mental health crisis. So we've helped and been a part of supporting Dakota County's efforts and efforts in Ramsey and Washington county across our counties, our health systems, our emergency rooms, our law enforcement and improving our regions' mental health and substance use crisis response and glad to be here.

Paul Mattessich: Yeah. Thank you.

Brian Sturgeon: Thank you, Paul, for having me. My name is Brian Sturgeon. I'm chief of police for the city of West St. Paul. We have been partnering with many entities, especially Dakota County Social Services to address the needs of those experiencing mental health issues both ongoing and those issues that come up in a crisis. And we are very proud of our partnerships with Social Services and especially our embedded social worker program that we formalized in 2019. Over the last 10 to 15 years we've seen a dramatic increase in individuals with mental health issues and continuously use 911 to seek assistance and help. So we've worked and collaborated with not only Dakota County Social Services, but other entities as well in order to ensure that these individuals are receiving the long-term care and services that they need in order to thrive within the community and thus reducing the calls to 911.

Paul Mattessich: Well, thanks. Thanks everybody for introducing yourself. To help ground the discussion, is there a little more you might want to say Brian and Emily about how your programs actually work? Chief, would you want to say how you've changed some of the processes or activities that you do as part of developing this?

Chief Sturgeon: Sure. This is a program that been in the works for 10 years, I would say. 10 years ago or so we needed to find some other way to address the issues with these people experiencing crisis and mental health issues in our community. So we started slowly. We had members of the crisis response units from Dakota County Social Services come in to a monthly staff meeting with our

patrol supervisors administrative staff to go over our top users of our 911 services that have mental health or what we believe had mental health issues. So we would provide information, names of these individuals to the crisis response worker who would then go back and reach out to these individuals, make sure that they are aware of services that are available to them and also provide one-on-one support as well. And that sort of morphed into a pilot program, which was developed over 2018 that we implemented in 2019, where we have an embedded social worker within our department.

We have an officer that's assigned specifically to address individuals that have mental health illness that utilizes 911 services because of their illness. So that social worker and this officer work together to reach out to these individuals to provide support, and get the entities that best would suit this individual because in mental health, it's not only mental health, it's chemical addiction, it's homelessness, it's financial issues that individuals experience and it all compounds together.

And that's what a lot of times creates these crises that individuals then end up calling 911 when they are suicidal or they don't know what to do. So we work with our embedded social worker and we also work with many other private and public social service organizations in order to assess these individuals in managing their daily lives so they can be productive members of society. And so our ultimate goal is for them not to call 911, but to call another resource because law enforcement has a lot of responsibilities and we're seeing more and more of those responsibilities focusing on the frontline first responders for mental health. So we're trying to get the appropriate people to address the issues with these individuals and very good working relationship with all the people on the panel here today.

Paul Mattessich: Sure. And so maybe Emily, do you want to add any more details about how it works from your point of view, this process?

Emily Schug: Thank you. And Chief Sturgeon did a really nice job of explaining the model about how our embedded social worker and the dedicated officer really work together on a day-to-day basis and bring different skills and perspectives and information and approaches to working with people to do that outreach. And often that outreach because of people's trauma histories or kind of the significance and acuity of what they have happening in their life. A lot of times that really is a process that takes time of building trust and building connection. And so by having that team approach to that, and really taking as Chief Sturgeon said that holistic view of what might be important to somebody in terms of addressing their needs. Maybe starting with housing and then also looking at the underlying mental health or substance use issues, really taking that kind of whole person approach to that outreach and engagement.

So I think that that is a process that often takes time and trust building. And that in addition to the work that they're doing on that individual level, they're often spending a lot of time too just connecting with as Chief Sturgeon said, different service providers or community agencies, so that we really are building this network within the community to all be really working together on responses. So I think what's really been great about watching this partnership evolve and

develop has been really seeing those different approaches and perspectives and skills and knowledge and resources that the whole team can bring to the situation and how the community really feels that differently in terms of feeling a supportive response to what they're experiencing. So I think we've just seen this model build both at that individual level, but just what it's meant for the community. And I think from our residents, we're just hearing a lot of really positive feedback about how we're bringing different parts of the system together.

Paul Mattessich: Yeah. And we'll want to get in, in a little while, to some of those impacts and reactions. Roger, from your point of view, other things our listeners should know about this model, where it came from, whether these features common in other places, how does it all fit in?

Roger Meyer: Great. A couple of reactions to that. Dakota County was an early adopter of these models, but there are co-responder models popping up all over the Metro east, west, in greater Minnesota. And they're all based on the same premise, which is not really a great fit for a law enforcement-only response, that these individuals that are calling 911 don't necessarily benefit from a law enforcement only response. They benefit from a response that involves mental health services as Chief Sturgeon said, connection to social services.

So they all come from the same spot thinking that while they're calling 911, but what they're looking for and what the community can do better is responding to their calls. So I would just add that Dakota County was out early with this and other people have talked with them, took the model elsewhere and tried it out. And then really pleased when we started to bring in Wilder around that evaluation piece, because a lot of these programs are funded on a pilot basis. We want to know if they work. And so really kind of looking at numbers and stories to make sure that this is a more effective response and that people's recovery is improving based on the program.

Paul Mattessich: Sure. So you mentioned evaluation, maybe we can switch to that topic for a moment. How is it that we are evaluating this program? How are we trying to understand the impact, Melissa, do you have a perspective on that?

Melissa Serafin: Yeah, I can speak… I would like to hear Emily's thoughts, too. I think she can probably speak more specific to Dakota County. And like I mentioned, the data that we've had that we've used has been pretty limited, but I think one of the most important things we've already spoken to is about whether individuals are now getting connected to services that they were not connected to beforehand. And that was definitely a very strong theme from the convening and from the information that we gathered through the development of the framework. So I would definitely emphasize that. I think also we kind of touched on this as well, but shifting or reducing the burden of these types of calls away from law enforcement where law enforcement is not designed to necessarily respond to these types of incidents or encounters. So I think that was the second most common theme that came out of that effort.

Paul Mattessich: Sure. So as initial outcomes, shifting the burden, as well as enabling people to make connections sound like the first steps towards larger long-term impacts. Were there more things you would

add to how we're evaluating or what kind of outcomes are being measured or what we can look forward to learning Emily?

Emily Schug: Yeah, I'd be happy to share just sort of how we've approached evaluation and just the importance of that as we've developed these programs and models. So just in terms of where we started with evaluation too, we really spend a lot of time both from the county angle, but in partnership with our police law enforcement partners to of looking. When we started this of looking at other jurisdictions, being part of national, learning collaboratives that we're looking at this through the National Association of Counties through the Data-Driven Justice initiative, wherever we could find good examples of how people were both implementing, but also evaluating. And we really use that as the basis for looking at a local evaluation plan and just really important to us in Dakota County that as we're innovating, we are looking, we're taking a evaluation view of that too, when we use results based accountability framework for doing that.

So in Dakota County, we have developed a pretty robust program evaluation plan, and then we've been really fortunate to work with Wilder to be able to share that, and also be able to then look across different programs that are doing similar work to see how our evaluation plan compares and how we can look at similar indicators and data elements. So we're tracking a lot of data, including who we're reaching out to, how people are getting connected with services, what their experience is, what our partner's experiences are with this type of model.

We're looking to that point of seeing people get connected with the right services at the right time, looking at indicators, such as use of 911 pre and post and other justice system connection points. So we're trying a lot of things out in terms of what we're looking at. I think we're also learning qualitatively from our experiences. And so what we're learning both from a data and an evaluation perspective, as well as just day to day is constantly evolving. So I think we're going to learn a lot from our evaluation that we're working on now about what's important in terms of data collection and evaluation down the road too, but it's been I think especially in a pilot phase, just really, really important to be looking at those elements, both qualitatively and quantitatively, and then adjusting and changing both our model and our evaluation approach.

Paul Mattessich: Sure. So the ongoing learning is valuable. So Dakota County and South St. Paul police, it's a groundbreaking effort. There must've been some challenges since you're leading in this effort. What were major challenges that you encountered while developing and implementing this program?

Chief Sturgeon: I'll speak to that real quick. I think the one challenge was to get the buy-in from the officers. We took an officer from the street to dedicate him to working with social services and it took some time for our officers to understand the true mission and see the outcomes, the positive outcomes that it was having, on not only individual persons, but also the reduction of 911 calls from certain individuals. We did a large education campaign as well about our program to not only get buy in from our officers, but also the community as well. We did presentations out in the community. We did presentations to the city council during the formal meetings and during

open council work sessions, we've worked with local media to promote this. So we utilize lot of avenues in order to get the buy in, so to speak from the community and the officers as well.

Paul Mattessich: It sounds like a very impressive engagement effort with all the sectors who had to add to buy into it. Yeah.

Chief Sturgeon: Yeah, absolutely. Absolutely. And we've got a great social worker embedded with us. She's a part of our department, just like a police officer or support staff. So we worked with social services to find the right person that was able to take a lead on this.

Roger Meyer: I just want to add a little bit to that Chief Sturgeon. I was involved very early on in some other projects with Dakota County, and just watching the language change from one of a criminality mindset or a mindset of law enforcement to one of illness and acuity and health care is a huge deal. And so, so many kudos to the law enforcement leadership and the Dakota County leadership to make the stigma reduction we hear so much about was really an action to have a chief of police talk about somebody's behavior because of the acuity of their illness is truly a significant change from how this would have been talked about 10 years ago, 15 years ago. And so that culture change is real and impressive when it happens.

Paul Mattessich: The culture changed, the mindset change. Yes. Say, it's key to this that people are connected to services. Several of you mentioned that you seem to observe this occurring, but do you find that actually enough services exist to which you can refer people through this program? So if the social worker wants to help someone, they can actually get them to the needed service? Is the system working in that respect?

Melissa Serafin: I think that is the most important thing that I would really want to emphasize is that the success of these programs really does rely on the presence of existing resources and services to refer individuals to after they've been served by the program. This again was a big theme in the development of the evaluation framework, but often there's not enough resources. In 2019, there were seven Minnesota counties that had no mental health providers at all. And this is generally a bigger problem in greater Minnesota, but there are just gaps pervasive throughout our entire mental health system. We have a lack of psychiatry services, just a lack of clinicians, generally, clinicians are disproportionately white, there's a lack of culturally specific services. There's a lack of inpatient beds. We know that people sit in emergency departments for hours and even days.

So I think there's a lot of issues there. And I would suggest for, for programs, if you're thinking about setting up a program like this, and I think Dakota County seems to have done a really great job with this, but it's just kind of conducting an inventory. What is the capacity kind of trying to make an assessment in terms of what resources and services already exist? And I would love to hear Chief Sturgeon and Emily's thoughts on this, and I know Emily has spoken to this about how these programs can kind of serve as a bridge between that time. If someone does have to wait for services, this program can serve a really critical role in between that person actually accessing the services that they need.

Paul Mattessich: Sure. Other comments on that?

Emily Schug: I think Melissa, you said it really well. I think that's why these types of services are really important. These services that really their goal is to bridge to that ongoing support that may or may not be really readily available in the way that hopefully we will continue to build our mental health and substance use disorder system to really fill the role and the gap that it needs to fill. But these services are really important. These follow-up services, these services that can stick with people in a really engaged way as they navigate what is a really complex system of health care for people and, as you say, not always services that are really readily available. So, the service really seeks to kind of fill that gap and bridge people to that, to that service and continue to build that trust.

Roger Meyer: I would add a two components to that, which is, I think these programs do a great job of… The mental health and substance use system is very confusing. And it's unclear to a lot of people. What does happen when you go to an emergency department? What happens at a psychiatry appointment? What should I expect if I'm told to go to a crisis residential facility, and I think through these programs, law enforcement and the partners that are involved, build a stronger understanding of really what their options are and what services are available, and what's going to happen when you get a crisis team response and what's going to happen when you go to the emergency room. So I think that's part of these programs is the education and awareness building of all parties about what people do. And I think it helps identify what are the gaps for real. Once you start using all the existing services, it's much easier to understand where is there a gap versus where is there just a botched referral or something's going wrong?

Once you clean up all the referrals and get people directed to the right area, you do start to see the gaps in care that are needed because you can only serve someone if you can get them into the care they need. So they'll continue to use the 911 and the emergency services if they're not getting the ongoing care they need, and it's helped the Alliance identify what are those priority gaps that need filling now that we're really doing a way better job of connecting people to the services. So I wanted to add that in.

Paul Mattessich: Sure. Yep. That makes sense. So you've done this for a few years. You've operated in this innovative way for a relatively short period of time, but you have had some experience. Have you incorporated what you've learned each year in revising the program, trying to make changes for improvement? How has that gone?

Chief Sturgeon: Well, we're constantly evaluating what's working, what's not working, and making some changes on daily operations. Absolutely. And we're in partnership with this, with South St. Paul police department, and we work very closely as a team. Our department South St. Paul and Dakota County Social Services. So every day they're talking about, okay, what's working, what's not working, and we need to be flexible in order to make those adjustments in order to be more effective. And that was one good thing that I like about this program and the partners that we have is we're able to address those issues, come up with a game plan to implement a different avenue to achieve the goals that we need to achieve.

Emily Schug: I would echo that. I think learning and evaluating and evolving is just a day to day piece on this. And as our environment has really evolved and we've had to be really adaptable, especially in these last number of years as we've been doing this, obviously there has been so much happening that impacts, and it really increases the significance of the work that we're doing. And so I just credit to the team and the partners for their innovation and adaptability through really challenging times when community need and community trauma is really high too.

And an example of that, I think as we've focused on our efforts together, we've really thought about ways too, that we can expand what we're doing in this partnership to other parts of our continuum and including kind of more of our initial response piece. So we have this really strong partnership in the follow-up space and the community building space and outreach. And now we're really looking to expand that partnership to that initial response. And how can we partner just from that initial call and really start that engagement even further upstream? So I think we're just learning every day and we've got, again, great people in all of these different roles that are really committed to that sort of ongoing change and learning process.

Paul Mattessich: Sure. That sounds wonderful. So I'd be interested in hearing from any or all of you about what you feel you've learned, what lessons have occurred that you feel would be very important to share with your colleagues locally, statewide, nationally. Is there a particular lesson you learned in developing this over the past few years, that if you were talking to your peers, conference coming together, what would you tell them you learned that they should keep in mind?

Chief Sturgeon: I'll go first because I could talk about this for hours. One thing that the individual that wants to start a program similar to this, and we touched base with this previously as knowing what the capacity for your partners are. We have a better understanding now of what Dakota County Social Services is able to provide. We also know through our partnerships with private entities. We understand Dakota County can't provide the service, but this other provider can, or this other provider can't either, but we've got a third or a fourth provider that can provide these resources.

So the partnerships with both the public and private entities are so important to understand what they are able to provide and to listen to them, to understand what they feel is appropriate. Looking at other departments, understanding what happens in Boulder, Colorado, or what's happening out in Massachusetts, getting to understand and looking at their programs, what would work for here? Can we bring something here and to be able to adapt. We want to be innovative in this area. And we want it to be able to make changes and adapt and to understand what's going on in different parts, what's working and what's not working and to make adjustments. But again, number one is the partnerships with both the private and public social service entities to provide services to our community.

Paul Mattessich: And being really clear what they can do, can't do, and how you, how you interact with them. Sure. Others of you, a principle lesson you would identify that you'd want to share with your colleagues?

Roger Meyer:	I would agree wholeheartedly. And I don't know if it's add, but you go into these things and you have to assume good intent. Every one of these systems that you think is dropping the ball or is not doing their job, you have to let that go and assume good intent with your partners and understand that everybody is probably doing the best they can with the restrictions and the limitations they have. And it goes to Chief Sturgeon's point, really that the ability to share a clear understanding and expectations between partners in a trusted way so that there isn't a sense of playing hot potato with the client or you're calling me because you just don't want to deal with this.
	And really being a little bit vulnerable and open it up to the relationships that come and the trust that comes with candid conversations and this ability really to you just need to know what people's limitations are, help them work to the best of their limitations and identify other partners that need to be a part of these solutions, because it is not one system that can solve this. It's going to be all of the systems working together and that takes time and relationships to develop.
Paul Mattessich:	Sure. Yeah. Other thoughts?
Emily Schug:	And I think Roger and Chief Sturgeon really said that well and hit on a lot of things that I think are the key important factors. And the other thing that I would just add would be just the importance of listening to people with lived experience and really engaging with our community to hear what's important to them and to share what we're doing and get feedback on that. We've had great engagement with our local advisory council for mental health and just hearing from our residents and having them really build connection and trust. When we're in the community, they're asking how the social worker is doing, how the officer is doing. It's really been important to hear those voices and build those relationships at all of these different levels.
Roger Meyer:	I would add one more thing before Melissa hops in here. And that is, as you start out and as you're having these conversations, this kind of goes to the evaluation, but be clear about what problem you're trying to solve and then measure to that problem. The problem that's being solved by this is a problem of resource deployment at 911. It's a problem of individuals not being connected with care, but to really say those out loud to your partners and then say, well, how are we going to prove that this is worthwhile? Because so many of these are pilot programs, startup funding. Really, if you wait until you're two years in to say, oh, how did that go? You're behind the ball and there's a much harder case to make to your county board or to your foundation grant or to your funder that this was worthwhile and made a difference. So I think eyes wide open at the front end.
Paul Mattessich:	And having good data is important. Melissa?
Melissa Serafin:	Yeah. I was basically going to say the exact same thing. And of course I'm biased working in research and evaluation, but I do think that it's incredibly important and being really intentional about what goals is your program actually trying to work toward because there are several different models that programs could take, different community contexts. Like I mentioned

earlier, different sets of resources, different partners. It can be so varied. So I think it's really important to be really intentional about what the goals are, what types of indicators to collect and just collecting even just really simple data if that's all you can do, even if it's just the number of people served and whether they were referred to services or something like that.

And of course this is going to inform the development and kind of the evolution of these types of programs, but also like Roger was saying, it's really incredibly helpful for programs seeking funding or seeking expansions. So being able to say we had this many diversions from the emergency department and these diversions saved this amount of money, that can be a really impactful statement to make about the value of these types of programs. So I would definitely emphasize that. And I know kind of going back to what Emily was saying about lived experience, I know Dakota County has done a great job with collecting information and feedback from the people that they've served, which I think is incredibly important information and something that other programs may want to.

Paul Mattessich: Sure. Definitely. Let me just ask if we can take a moment and think about the typical person. Many of our listeners may know very little about this topic, or only vaguely about this topic, but they may have an interest in wanting to help their community improve. And they may have an interest in wanting to see law enforcement and social service agencies work better and more effectively, but they don't have a lot of time to devote to that. But is there a piece of advice you could give to the typical resident of a community about how they could be supportive of this kind of initiative?

Melissa Serafin: I think I would go back to just supporting mental health services and resources, whether it's voting or, I don't know, donating, or even just small little things that you could do to support our mental health infrastructure, which is sorely lacking like we've discussed.

Paul Mattessich: Sure.

Roger Meyer: I think that NAMI Minnesota is a great resource to find out more about what's happening in the mental health system. I think reaching out to them and looking at their website would be a great way to start finding out different programs that are available and different people they could talk to about the mental health system and learn more about co-responder models as well.

Paul Mattessich: Sure. Say we do need to wrap up shortly, but maybe as we close any thoughts that you have about what programs like this should do to ensure that they are successful and that they reached their outcomes, and this might be something you've already said and just want to repeat it, or it might be something you haven't had the opportunity yet, but if you were to advise other programs on what they really need to do to be sure they're successful, any advice, any thoughts you would have on what programs like this need to do to be sure they're successful?

Chief Sturgeon: I'll start. As Roger mentioned, understanding what you're trying to do. Have partnerships within your community and during this course of this pilot program, going in on three years now, continue to support it through education. Don't implement something and let it run its course.

Continuously evaluate the program, see what the needs of the community are. Have they changed? They might have changed from three years ago, what the initial needs of the community was. So constant evaluation, constantly embracing the program and supporting it and educating the community about it because that's what this is all about is we need to support each other in this endeavor.

Paul Mattessich: Sure. That makes a great sense. Any other thoughts from any of you?

Emily Schug: I think those are really great thoughts that I would echo and I think the other piece would just be to really embrace the unique perspectives and roles that we all bring from different system perspectives to this work. I think this is truly one of those examples where we're better at this doing it together because we all do bring a different lens and a different connection with the community. And that's all part of kind of best fulfilling our roles are on public service and public safety and building healthy communities. So I think it's been just a great opportunity to connect and have collective impact in an innovative way.

Roger Meyer: Great. Well said. I would just kind of agree and add that having the clarity about what the purpose of your program is and the flexibility to change it as you get it up and running. These programs are going to look different in each community because each community is different and they may be addressing slightly different needs in each community. And I think that just allowing that flexibility and building new partnerships as the programs evolve and adapting the programs to really make sure it's meeting the needs of the individuals served and the systems that are putting the program together.

Paul Mattessich: Well, thanks. Those seem like very wise words and inspiring words to end on our discussion of the topic in this episode. So thank you very much to all of you, our guests, Emily Schug, Melissa Serafin, Brian Sturgeon, and Roger Meyer. Please visit the Wilder Research website, www.wilderresearch.org for more information on this topic. And also you'll find links to other websites where you can learn more about the law enforcement response to mental health needs. So thanks again, everyone. And to our podcast listeners, if you have suggestions for a future podcast, please let us know. I'm Paul Mattessich from Wilder Research, and I look forward to talking through the numbers with you on other topics.

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