

From: [Eric Levitt](#)
To: [CityCouncil-List](#)
Cc: [Yibin Shen](#); [Gerry Beaudin](#); [Lara Weisiger](#); [Nishant Joshi](#); [Eric Levitt](#)
Subject: Requests for more information on Mental Health Response
Date: Wednesday, June 9, 2021 3:26:06 PM
Attachments: [_Crisis Management Program FINAL \(002\).pdf](#)
[Felton FY21-22 BHERS 24 7 Contract Proposal Summary v-FN \(002\).pdf](#)
[Felton FY21-22 BHERS Contract Proposal Summary v-FN \(005\).pdf](#)
[fireprop Exhibit B \(002\).pdf](#)
[fireprop Exhibit C \(002\).pdf](#)

Mayor Ezzy Ashcraft & City Council:

I received a City Council member request for background information on the 2 proposals for alternative Mental Health Response on the June 15th City Council meeting.

I am forwarding you the information for your review.

Thanks

Eric Levitt
City Manager

Crisis Management Program Recommendation Report

To: Eric J. Levitt, City Manager

Executive Summary

In response to recent events and demand for restructuring of law enforcement agencies the City of Alameda is reevaluating the methods of response to mental health emergencies.

Alameda Fire Department has developed an alternative response model to calls for assistance for mental health emergencies including persons in need of 5150 services.

The fire department model consists of trained AFD personnel staffing a “fire squad” on a 24/7/365 basis that will provide services within the City related to mental health emergencies, exclusive of violent individuals. The squad will be able to provide transport to Alameda County agencies that offer other services including processing and transporting 5150 clients.

Daily staffing would include one Firefighter Paramedic and one Firefighter EMT specially trained in behavioral health issues and crisis intervention techniques.

Staffing for the program will require six additional Firefighters, one Social Worker/Clinician and one Management Analyst to staff a crisis management unit, and to develop, implement, and manage the program.

Startup cost include the purchase of a vehicle, basic medical equipment and supplies, PPE, and training.

Alameda County EMS Medical Director, Dr. Karl Sporer supports the program concept as an Alameda County pilot program within the specifications that we are outlining here.

Background

Current practices for behavioral health emergencies, public health concerns, and the crisis surrounding homelessness are outdated and place incredible demand on public services. Additionally, recent events have prompted a call from the community for the restructuring of public safety, law enforcement and governmental policies.

Law enforcement officers have been tasked with handling many of these calls, however, training for officers in dealing with mental health emergencies has been inadequate and police agencies ability to handle these calls has been further exacerbated by recent civil unrest across the nation.

Due to these conditions recruitment and retention of law enforcement officers has been difficult in the City of Alameda and throughout the region.

Law enforcement officers and private ambulance personnel are not trained in behavioral health assessments, and the end result is that clients are not transported to the most appropriate services such as crisis stabilization units or treatment facilities.

Currently behavioral health clients in Alameda are transported to local emergency rooms or the County Mental Health Hospital for services, these services are often not the most appropriate and provide little assistance to address the clients long term needs.

Behavioral health clients are often not referred to other more appropriate facilities for care. Transporting behavioral health clients via 911 ambulances in instances where medical attention is not necessary is costly and further strains the capabilities of the Alameda 911 system.

The Alameda Fire Department is in a unique position to address the needs of Alameda by building upon our existing infrastructure available through our Community Paramedic Program and the department's EMS Division.

Established in 2015, the CP pilot program has served Alameda's elderly, chronically ill, homeless, victims of domestic violence, and people experiencing behavioral health conditions for five years.

The pilot program has been funded with grants, private healthcare funds, and support from the City of Alameda. Legislation awaiting the Governor's signature to transition the program from pilot status to permanent may provide additional funding for Community Paramedicine.

The opportunity to build upon established programs can be the right opportunity to address the needs of the community as the delivery of public safety services continues to evolve.

Discussion

Fire department staff has reviewed the necessary requirements to establish and operate a "Crisis Management Program" that would respond to, treat, and transport non-violent members of the community in need of mental health services to other Alameda County services more appropriate for the client's needs.

Staff has meet with and reviewed available options with the Alameda County EMS Medical Director and the agencies decision makers and confirmed their support for the program in the form of an expansion of the existing Community Paramedicine pilot program.

A Crisis Response Program with a crew responding to calls for mental health services would require approximately six months to prepare and establish to ready as a part of the Alameda Fire Department's set of services.

The start-up process would include the following requirements to ensure full service can be provided beginning as early as January 1, 2021.

- Agreement to engage in Pilot Program with Alameda Firefighter's Association
- 100 hours of behavioral health and crisis intervention training provided by Alameda County EMS Agency to an initial 40 members of the department in the Firefighter rank.
- Establish response protocols and procedures to be reviewed and approved by the Alameda County EMS Agency.
- Establish quality assurance and improvement policies.
- Dispatching policies and services established and provided by Alameda Police Department dispatch.
- Purchase of equipment and supplies, (detailed in attached start-up budget).
- Establish a pilot program agreement with Alameda County EMS Agency.

100 hours of training in behavioral health and crisis intervention can be provided by Alameda County EMS office. The County Medical Director, Dr. Karl Sporer has offered the pre-existing program training to the City of Alameda. The training covers:

- Response to Mental Health Emergencies
- De-escalation Techniques
- Initiation of 5150/5585 Hold Processing

Staff has met with representatives of the Alameda Firefighters Association and agreed in concept to the addition of duties related to a Crisis Management Program within the existing framework of job expectation of their membership.

Alameda Fire Department EMS Division will be tasked to develop all protocols and procedures working with Alameda County EMS Agency oversight. The office has previously developed all of the response protocols and policies for the Community Paramedicine Program using the same collaborative model.

The Fire Department EMS Division will be tasked to develop the Quality Assurance and Improvement processes. The division routinely develops these processes for the Paramedic Program within the Suppression Division.

Dispatch procedures will be established jointly with the Alameda Police Department with input from the Alameda County Regional Emergency Communications Center.

The department has bids for all equipment necessary for the development and implementation of a Crisis Management Program within the existing infrastructure of the Fire Department. Initial start-up costs are detailed in the attached budget.

Alameda County EMS Medical Director, Dr. Karl Sporer has reviewed the concept of a fire department response to mental health emergencies and has offered to provide a Pilot Program status to Alameda Fire Department, upon review of a completed program model, protocols, and response procedures.

Staff has secured tentative approval for a Crisis Management Program within the existing EMS structure of the Alameda Fire Department with required stakeholders. Additionally, we have established a realistic budget to implement and operate such a program. Finally, we have experience and expertise in the development of a pilot program within Alameda County.

The Alameda Fire Department is able to comply with the established protocols and certifications to establish a Crisis Management Program and has experience establishing a successful program under the Alameda County EMS Agency oversight. The established pilot program, Community Paramedicine and the proposed enhancements to the pilot already have initial support from the County Medical Director and EMS Agency Director.

It may be possible to fund the program from existing Fire and Police budgets. There may also be the possibility to receive grants, funding from GEMT, and other cost recovery means from private insurance companies.

Financial Impact

The cost to establish a Crisis Management Program in the 2020-21 FY budget requires funding in the amount of \$1,079,282 allocated to the Fire Department (3200) for startup and six months' salary and benefits expenses. (Exhibit A)

Recommendation

Implement and support a Fire Department Crisis Management Program which will reduce the rate of involuntary detentions and increase the efficacy of linking clients to the necessary appropriate services.

Establish the primary mission of the Crisis Management Unit to respond to nonviolent, non-combative behavioral health emergencies for clients that are cooperative and compliant to direction and have no medical complaint to provide immediate attention to issues as they arise.

Create a staffing model that enables assessment and transport to a broad range of services, including Crisis Residential Treatment Facilities, sobering centers, shelters, and other services 24 hours a day. To conduct outreach and wellness checks for the homeless and provide transportation to detox/rehabilitation centers and shelters. To follow-up on at risk clients after discharge from hospitals and provide referrals and introductions to appropriate resources.

Equip the Crisis Response Unit with technology and resources that integrates with Alameda County's data collection systems and provides up-to-date client history to best serve their needs.

Provide all equipment, as detailed in the attached budget proposal, to ensure client and provider safety, including a specially equipped vehicle with an enclosed rear seat area including client barrier and rear doors that do not open from the interior. Equip the vehicle with communication equipment, BLS medical equipment and supplies, and proper storage for the firefighter SCBA and PPE.

Provide staffing to operate a Crisis Management Office within the EMS Division which will include:

- Six professionally trained Firefighter Paramedics/EMTs also available to respond to fires and rescue calls.
- One Management Analyst responsible for all grant writing and administration, budgeting, associated cost recovery, and statistical data collection and analysis.
- One Social Worker/Clinician responsible for follow-up care on cases handled by the Crisis Management Unit, referrals, consultation, and advisory capacities to other community needs.

Provide a quality assurance and improvement program through the existing fire department EMS Coordinator RN.

Target the implementation of the program for January 1, 2021 staffed with properly trained Firefighter Paramedics and EMTs. Staff the Crisis Management Unit in the same 24 hours a day schedule as the fire suppression and ambulance transport programs.

Provide the Crisis Management Office oversight and direct supervision under the existing Deputy Chief of Support Services.

Respectfully Submitted,


Ricci Zombeck, Acting Fire Chief

Exhibits:

- A. FY 2020/21 Cost
- B. Annual Operating Cost
- C. Budget Narrative

Contractor Name: Felton Institute	Appendix: A-1
Program Name: Behavioral Health Engagement Response Specialists (BHERS)	Contract Term: 07/01/21 – 06/30/22
Proposal for: City of Alameda Mayor’s Office and City of Alameda Community Development Department	Funding Source: TBD (County and City Funds)

Program Summary: Felton Institute, now headquartered in the City of Alameda, is proposing the Behavioral Health Engagement Response Specialist (BHERS) program to provide mental health and homeless response services to those living with persistent behavioral and mental health challenges. A critical component of this program is providing mental health training for partner stakeholders including the City of Alameda Community Development Dept, Alameda Fire Dept, Alameda Police Dept, and Community Paramedics. **The program as designed would provide direct services and on-call response 24 hours daily 7-days week (24/7).** The Felton night canvassing will run from 7pm-7am daily with a vehicle moving throughout the City of Alameda’s most challenging communities to provide immediate response.

BHERS’ budget is \$1,266,871 for 24/7 services. See the attached budget detail and program description below.

Felton Institute is SF’s largest outpatient mental health provider serving Families and individuals of all ages with varying levels of mental and behavioral health challenges. We have over 50 programs in five counties and many of them are mental health and social justice directed. Felton has provided mental health services in Alameda County for over 11 years. Following this summary is a list of our social justice programs in San Francisco and Alameda Counties.

***In Alameda County,** our Center of Reentry Excellence (CORE) program is a one-stop hub of reentry services for all justice-impacted individuals returning to their community from jail or state prison. Our CORE team collaborates with these agencies to create the web of care providers: Success Center, Safe Place, Bay Area Legal Aid, SAGE Program via BACS, Swords to Plowshares, Operation Comfort, Options Recovery Services, CURA & Cherry Hill, Alameda County Food Bank, and SAHA to name a few.*

***San Francisco Enforcement Collaboration,** our outreach teams work with SF Law Enforcement through an initiative called Healthy Streets Operation Center, HSOC. The FEST team is dispatched via 311 to various calls involving consumers experiencing BH, SUD, and Chronic Homelessness.*

To foster a stronger relationship with SFPD, we scheduled MI and Harm Reduction trainings at one of SFPD central locations. The collaboration with SFPD helped with “buy in” from Law Enforcement, erasing some of the stigma associated with harm reduction, restorative justice, and criminal justice reform. This approach also helped us identify folks within the SFPD that were more open to using a social justice approach when engaging with individuals with BH issues. These types of meaningful engagements with Law Enforcement further led to our outreach teams building rapport with SF Sheriff Dept, Park Police, and SFGH Campus Police.

Described above are active examples of the collaborative work we are doing on both sides of the bay to address the BH and MH needs of community members.

We look forward to supporting, enhancing and addressing any gaps in your current service action plan.

1) Identifiers:

Program Name: Behavioral Health Engagement Response Specialists, BHERS
 Program Address: 1005 Atlantic Avenue, Alameda, CA 94501
 Telephone/FAX: 415-474-7310 x 777 / 415-931-0972
 Website Address: ***.felton.org

Person Completing this Narrative: Curtis Penn, M.P.A., Division Director
 Email Address: cpenn@felton.org

2) Goal Statement:

The goals of this **Behavioral Health Engagement Response Specialists** program are to 1) Respond to critical MH and BH emergencies and non-emergencies on an on-call basis to de-escalate critical events and

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provide coordinated/sustained services; 2) Support, enhance, and address gaps in City contracted mental health and homeless engagement services; 3) Offer and provide Motivational Interviewing, WRAP, and Harm Reduction trainings to Alameda Police Dept, Alameda Fire Dept and Community Paramedics, other service partners; 4) Work with identified homeless, substance abusers and mentally ill clients to improve functionality, tracking and engagement; 5) Work with existing City of Alameda programs, departments and CBO providers to complement and enhance their efforts in supporting mental health client populations.

3) Target Population:

The target population of the program is adults who have a history of chronic homelessness, behavioral and mental health issues as well as a history of substance use and/ underlying medical conditions. Participants will be referred by the City of Alameda Community Development Dept, Alameda Police Dept, Alameda Fire Dept and Community Paramedics and other system of care stakeholders. The population has needs relating to educational and employment deficits, history of complex trauma, chronic use of substances, long or short-term mental health issues, and criminogenic behaviors (may include anti-social attitudes, associates, and thoughts).

Modality(s)/Intervention(s):

Service Type: Mental Health and Behavioral Health Crisis Response and Promotion, Community Client Services, Mental Health Promotion

4) Methodology

a) **Staffing:** The Felton team will be comprised of 3.5 clinical staff and 5 well trained, case managers who often have lived experience which supports effective engagement. Our staff are supported by our wrap around service systems that provides a continuum of care to address problem solving and support as a process not a Band-Aid.

b) **Engagement criteria and process.**

During the Felton Intake process, it is determined if participants have a safe place to live, enough to eat, and medical care for acute conditions, before proceeding to assessment.

After the assessment, the (Clinical) Case Manager will meet with the participant to discuss treatment goals. The initial Individual Intervention Plan will be a collaborative effort between the participant and the Case Manager. Depending upon the needs and goals of the participant, the Case Manager may refer the participant to the Felton BHERS Case Manager for clinical assessment and targeted therapeutic interventions, such as Cognitive Behavioral Therapy (CBT), or CBT for Psychosis.

As case management progresses, other providers may become part of a multidisciplinary team supporting the participant, perhaps including the Outreach Worker, psychiatric professionals, and physical health or other essential service providers who are linked with the participant, and who’s services require coordination and a team approach to collaboration with the participant.

This plan will follow a strength’s-based, participant centered approach, in which the participant is the primary driver of the treatment goals.

c) **Service delivery model and how each service is delivered.**

Felton BHERS offers participants an individualized case management and clinical program specifically designed to meet the needs of low-level drug offenders who are often using substances and/or have mental illness. The program’s key components include: Case Management, Clinical Case Management (which includes mental health services and crisis intervention), and Community Outreach and Engagement, toward having each participant meet improved functionality objectives noted above (Objectives and Measurements), and successfully

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transition to a lower level of service and supports. Services are provided by case managers, clinical case managers, and outreach workers (peer case aides). Engagement—and particularly re-engagement after a treatment relapse—is best accomplished through gentle persistence, personal connections with staff, maintained even through a period of no or little contact with the team, by being willing to help participants at whatever their level of readiness. Core program activities may need to be delivered in non-office settings, wherever participants may be found. As needed, medication-related assessments and consultations can be provided by a psychiatrist or psychiatric nurse practitioner – either from within the Felton continuum of care, or through a local community-based provider.

In addition to the above direct services, the program conducts staff training and community outreach (promotion) activities as indirect services.

The program partners with several housing, substance abuse, and primary care partners to ensure that all basic and significant needs of the participants are met.

The program will actively recruit staff to fulfill the cultural and linguistic needs of the population, and clinicians in other Felton Institute programs may provide additional support as needed.

BHERS Team’s Method of Collaboration and Engagement

Intersectionality – using a four-prong quadrilateral approach.

1. Training
 2. Utilizing existing web of services
 3. Motivation and Engagement via a Diverse Staff
 4. Barrier Removal
1. In utilizing a multi-disciplinary approach BHERS Team will co-facilitate trainings involving Motivational Interviewing, Harm Reduction, and Wellness Recovery Action Plan (WRAP), to Law Enforcement Staff and surrounding Law Enforcement partners. These trainings can occur monthly at Felton’s Main Office, 1005 Atlantic Ave and/or a location of Law Enforcement’s upper management choosing.
 2. BHRES Team will incorporate their existing web of services and linkages to community stakeholders within the City of Alameda providing a cohesive community engagement model that supports a holistic continuum of care. BHRES web of services include but are not limited to the following:
 - A) Success Center - Employment Support; B) Safe Place - Justice Impacted Women Experiencing Domestic Violence; C) Bay Area Legal Aid - Clients needing Green Cards & ITN Cards; D) SAGE Program via BACS - Clients needing assistance getting SSI Benefits; E) Swords of Plowshares - Clients who are Veterans; F) Operation Comfort - Clients needing 14 Day Quarantine Stays; G) Options Recovery Services, CURA & Cherry Hill - Clients needing Detox and SUD’s; H) Alameda County Food Bank - Food Support; and I) SAHA - Connect clients to affordable housing
 3. The BHRES Team is made up of a diverse group of individuals many with lived experience who have an intimate knowledge of the homeless and mental health population. Our ability to relate and resonate with this population provides us with added dimension that is needed to motivate and engage a population through the different stages of change that will result in positive outcomes. BHRES Team will meet participants where they are incorporating a pro-active and re-active approach:

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- Physically going out to homeless encampments to build rapport and provide MH assessments.
 - Engaging with business owners, proprietors, and stakeholders in the community in addressing their concerns.
 - Engaging with CBO’s who offer short- and long-term MH-services to consumers.
 - Provide 24/7 coverage and visibility in the community and areas that are most concerning to residents and community stakeholders.
 - BHERS Team can connect participants to Wrap Around services, (e.g., SSI, UI, Hospital Care, GA, Cal-Fresh, Employment, SUD’s Treatment, ICM, Education and Vocational training) that are part of our internal service linkage network, e.g., CORE, M2M and SMI throughout Alameda County that serve the MH population.
 - BHERS Team will provide rapid response to dispatches and deployments received from 911/2-1-1 calls to provide BH assessments, de-escalation, and assistance with non-Law Enforcement and non-EMS situations.
4. BHERS Team will also focus in removing barriers for individuals with salient MH issues by providing direct linkages to Felton’s continuity of care via our internal mental health specialist and clinical teams within Justice Services. We utilize MI, Harm Reduction and Psychotherapy modalities and general health care in addressing barrier removal. BHERS Team will have a direct impact in the decreasing the number of participants with chronic medical conditions, SUD’s, MH and chronic homelessness in the city of Alameda.

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Annual Operating Cost

Exhibit B

Personnel	Management Analyst	\$145,182	1 Position
	Social Worker/Clinician	\$157,534	1 Position
	Firefighter / EMT/PM	\$1,025,010	6 Positions @ \$170,835 each
Operations	Vehicle – Chevy Tahoe		
	BLS Equipment/Supplies	\$500	
	SCBA		
	PPE		
	Technology	\$1,000	
Training	Behavioral Health	\$66,840	100 hrs. @ \$66.84 Avg. OT / 10 employees
Office	Supplies	\$500	
	Total	\$1,396,566	

**Alameda Fire Department
Crisis Management Program
Budget Narrative**

Management Analyst	Program management, grant writing and administration, budgeting, associated cost recovery, and statistical data collection and analysis
Behavioral Health Crisis Intervention Assoc.	Provide follow up care on cases handled by the Crisis Management Unit, as well as referrals, consultation and advisory capacities to other community needs
Firefighter / EMT & PM	Respond to nonviolent, non-combative behavioral health emergencies for clients that do not need to be restrained and have no medical complaint, address community concerns by conducting outreach and wellness checks for the homeless, provide transportation to detox/rehabilitation centers and shelters.
Vehicle	Response unit fully equipped with Code 3 upfit, radios, flashlights and secured compartment/divider
BLS Equipment/Supplies	LifePak 1000 ECG (w/case, monitor, electrodes), BLS Bag/G3 Breather, Stethoscope, BP cuff, BVM, Oxygen tank & regulator, Nelcor SpO2
SCBA	Self-Contained Breathing Apparatus
PPE	Personal Protective Clothing
Technology	Surface Pro/Case/Keyboard
Training	100 hrs. provided by Alameda EMS Agency at no cost to City
Office	2 workstations, desktop computers and phones for Management Analyst and Behavioral Health Crisis Intervention Associate.