Police, Technology, and CIT
Closing the Information Gap and Providing Diversion Options

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Speakers

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Agenda

- Case Study: RideAlong + Seattle Police Department
- Building support for technology initiatives
- Measuring success
- Where to start with tech initiatives in your area
- Questions: moderated + audience Q&A
Case Study: RideAlong + Seattle PD
We spend $27.8b annually.

(on those with severe mental health issues in the criminal justice system)
Technology to enable actionable information in the field

Promote diversion with tailored alternatives to jail and ER referrals

Make everyone safer by giving officers context

Close the information gap between officers and case managers
Understand

What’s the pain point?
“The hardest part of a crisis call is if there's no crime... it's community caretaking...but we still want to know what to do.”

-Seattle Police Officer, During User Interviews
A small group of people generate a disproportionate number of calls. (Seattle Police Department)

3% of crisis call subjects → 16% of crisis call
Research
How would a tool fit with existing work?
We did research with 10% of Seattle patrol officers.
We developed the tool in small steps.
Some Key Insights

• Integrate with the 911 dispatch system
• Optimize design for patrol car computers
• Make paperwork useful
• Close the real-time communication gap between officers and case managers
• Look for opportunities to add more value
Build on existing work

What work is already being done manually?
Original Response Plan
(created by the Crisis Response Unit in Word, saved as PDF, distributed through the bulletin system)
73% decrease in police hours

(12 subjects, 4 months after introducing response plan in 2015)

Prior to the introduction of RideAlong
Existing information

What data is already being collected?
## Crisis Templates

### Behaviors (Check all that apply):
- Neglect of Self Care
- Disorientation / Confusion
- Unusually frightened or scared
- Hopeless / Depressed
- Suicide behaviors, threat/attempt
- Out of touch with reality
- Other
- Disorganized speech / communication
- Disorderly / disruptive behavior
- Belligerent/uncooperative, angry
- Bizarre, unusual behavior
- Mania
- Hallucinations / Delusions

### Threats / Violence / Weapons:
- Did subject use / brandish a weapon? [ ]
- Type of weapon (check all that apply)
  - Knife
  - Gun
  - Other (Specify)
- Did subject threaten violence toward another person? [ ]
- If so, to whom?

### Incident Injuries:
- Were there any injuries during the incident? [ ]
- If yes, please describe:
Recording on every call:

- 12 mo. of data in June 2016
- 10,000 filled per year

- Observed behaviors
- Call dispositions (outcomes)
- Use of force
- Arrests
- Case manager contacted?
Our opportunity: leverage existing data to make it actionable in the field
Information Sources

Quantitative
- Record Management System
- Crisis Intervention Template

Qualitative
- RideAlong ("Tailored Plan")
Designed for patrol cars

Integrated with the 911 dispatch system (CAD)
20 CRISIS Calls (in the last year)

Behaviors
- Hopeless/Depressed: 14 (70%)
- Disorganized Speech: 13 (60%)
- Disorder/Confusion: 7 (35%)
- Belligerent/Uncooperative: 3 (15%)

Possible Demeanors
- Baseline: Easily distracted, avoids eye contact
- Elevated: Erratic movements, shouts threats

Officer Safety
- History
- ASLT. TO LAW ENFORCEMENT: Spat at an officer (01-10-1998)
- WEAPONS: Had 9mm pistol at house (06-08-2005)
- Often armed with a sharp instrument

Triggers
- Don’t send female officers
- Don’t call TANNEN “Biff”
- Try calling him “B-tan.”

De-escalation
- Specific Techniques
  - Veteran
    - Call him “Sarge.” It helps him focus.
    - Mention his dog.

- General Best Practices
  - Make one request at a time
  - Attempt to re-orient to current place and time - Grounding Techniques

Response Plan

1. If no Emergent Detention criteria, offer MCT, then Crisis Solutions Center

The Morrison
509 3rd Ave
Seattle, WA 98104
DESC - Supportive Housing

Last Manual CRT Update
06-01-2016

Know one of TANNEN’s triggers or hooks? Is he trending?
Notify CRT

If no Emergent Detention criteria, offer MCT, then Crisis Solutions Center

- If TANNEN is contacted and does not meet Emergent Detention criteria, offer MCT; followed by the Crisis Solution Center for stabilization. Gregory has a very involved family. He has an extensive history of suicide attempts; mostly via overdose. He lacks the coping skills and impulse control to deal with everyday problems. TANNEN is very likely to attempt suicide again. When TANNEN starts to get depressed, he will stop eating and drinking; he also becomes nonverbal, almost catatonic. TANNEN is an ever-changing regimen of medication to try and stabilize his condition; they have had a varying effect.

2. If suicidal: use MCT and/or call case managers

- If responding to a CRISIS call involving TANNEN and he claims to be suicidal, consider: attempt to utilize MCT; call his case managers at DESC (Johanna Smith). If after hours, call the Crisis Clinic for support in avoiding hospitalization. He often acts aggressively and makes suicidal statements and gestures when he is overwhelmed and frustrated. He would benefit from MCT contact, when appropriate, to provide resources and alternatives to going to area emergency rooms. DESC staff are on board with this response plan.

- Contact case manager, mother, or father
  - Mother (Angela Tannen) and Father (Bruce Tannen) should be contacted. Both have been educated on the smart 911 system to better help first responders.

Emergency Contact
- Johanna Smith
  - Case Manager
  - DESC SAGE
  - Available 9am-5pm, Outside of hours, call Crisis Clinic
  - (206) 505-1111 ext. 103

Emergency Contact
- Bruce Tannen
  - Father
  - (206) 553-2222

Emergency Contact
- Angela Tannen
  - Mother
  - (206) 123-4578

Background Information

RideAlong | August 2017 | CIT International, 8/17/2017 | info@getridealong.com
With the software tool, officers have in-car access to:

- Background context and de-escalation tips for specific people in crisis
- Referral options for local healthcare providers when on the scene
- Contact information to engage the person’s existing support network
We piloted the app last summer.

We launched to all patrol in Seattle this summer.
Seattle will defer $10m annually.

(annual estimates of resources that can be re-allocated from past response plan impact and mental health costs in Seattle)

- $500k in police hours deferred
- $6.5MM in jail & hospital visits
- $3MM in lawsuits
Building support for technology initiatives
Who needs to be bought in?
For us:

- Service providers
- Community members
- Command staff
- Patrol officers
Service providers

- Interviewed case managers
- Interviewed leadership from local service providers and hospitals
- Visited homeless shelters and other facilities
Community

- Interviewed individuals who would potentially be included in the app
- Engaged groups like the ACLU and NAMI from pre-development onward
- Presented to Seattle’s Community Technology Advisory Board
Command Staff

- Bi-monthly presentations during development
- Shared research feedback and recommendations
- Put the software in the larger mental health context
- Ongoing reports on impact metrics and pilot success
Patrol officers

- Presented at roll calls across all precincts and watches
- Weekly phone calls with 15 officers piloting the app
- Integrated design feedback quickly
- Going on ride-alongs (car and bike)
Measuring Success
Key Metrics

1. Call Outcomes (Disposition)

2. % Relevant Calls RideAlong Gets Used On

3. # Police Hours Deferred

4. 7-day Active Users (Distinct)

5. Officer Satisfaction
We were able to close the call quickly. With the response plan, we knew exactly what to try. The other officer said the last time he was there, they spent two hours at this guy’s house.

-Seattle Police Officer, RideAlong Field Testing
General Approach
Think about:

- How will a technology solution fit into your larger crisis intervention work?
- Who needs to be bought in?
- Can you leverage existing data?
- Have you identified your high utilizers?
Identify pain points:

- What manual work are people already doing?
- How can a solution fit into existing workflows?
- Are there small, immediate steps you can take?
Moderated Questions
(25 minutes)

Audience Questions
(15 minutes)
Speakers

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