Mental Health Division

2014 Annual Report
Mental Health Division: A Model of Community Policing

Our Mission
To provide a professional, humane, and safe response to individuals with behavioral health problems and to the homeless.

Our Purpose
To develop and oversee the department's multifaceted strategies for responding to individuals with behavioral health problems and the homeless, and to provide guidance in the areas of policy and procedures.

Success Through Collaboration

Our Community Partners
Mental Health Mental Retardation Authority of Harris County
Mental Health America of Greater Houston
Harris County District Attorney's Office
Harris County Sheriff's Office
National Alliance on Mental Illness
Ben Taub General Hospital
One Voice Texas
Mental Health Division Management
(left to right) Sergeant Roger Espinoza, Investigations; Sergeant Joseph Ramirez, Crisis Intervention Response Team; Lieutenant Patrick Plourde; Captain Wendy Baimbridge; Sergeant Steve Wick, Homeless Outreach Team; Sergeant Rodney Hill, Crisis Intervention Response Team; Sergeant Julio Silva, Crisis Intervention Response Team. (Not pictured Sergeant Ramon Perez, Training and Administrative Units.)
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Responding to individuals in serious mental health crises continues to be a complex and challenging issue facing law enforcement today. These issues are complex because we are interacting with individuals with severe behavioral health problems and challenging because of a lack of mental health resources.

The Houston Police Department, collaborating with community mental health professionals and advocates, is allocating unprecedented manpower and resources to ensure Houston officers respond as professionally, humanely, and safely as possible to individuals in serious mental health crises. As a result, Houston has become the leading law enforcement agency in the State of Texas and one of the national leaders in this effort. Houston has provided crisis intervention training to thousands of law enforcement and behavioral health professionals across Texas and the nation, and was one of six police departments nationally selected by the United States Council of State Governments as a learning site for specialized programs for responding to the mentally ill.

Houston has a multifaceted response strategy for responding to individuals with behavioral health problems that includes five programs that are outlined in this annual report. Although we are leading in this specialized area of law enforcement, we continue to work diligently with our community partners to improve our response by developing innovative model policing strategies for the City of Houston.

Wendy Baimbridge
Wendy Baimbridge, Captain
Houston Police Department
Mental Health Division
Starting as a pilot program in 2011, the Homeless Outreach Team (HOT) experienced a year of tremendous milestones in 2014. The team has significantly expanded, tripling the number of outreach teams addressing the issue of homelessness. Current staffing includes one sergeant, four officers, and three case managers from the Mental Health and Mental Retardation Authority (MHMRA) of Harris County.

With expansion, HOT required additional equipment to allow the teams to go out to the homeless in the street. Through community support the team was able to acquire additional equipment. Grants from the Frees and Simmons Foundations aided in acquiring a Mercedes Sprinter van equipped with a wheelchair lift, computer work station, printer, and portable Automatic Fingerprint Identification System (AFIS). Additional funding from the Albert and Ethel Herzstein Charitable Foundation purchased a 4-wheel drive pickup truck to assist in transporting an ATV purchased with additional funding from the Houston Police Foundation. The ATV and pickup truck allow the team to access homeless encampments in the woods and on the bayous of the city and have allowed HOT to assist other divisions when the need arises.

The expansion of HOT has allowed the team to expand its outreach capability through expansion of hours and the area in which it operates. The team has been able to be more responsive to requests for assistance from patrol divisions, the Mayor’s Office, City Council, local stakeholders, and other agencies.

Shepherd's in Blue

HOT has received national and international recognition for their collaborative approach to addressing the homeless issue utilizing community policing strategies. Through funding from the Frees...
Foundation, and Funders Together to End Homelessness-Houston, HOT was featured in a documentary spotlighting the work of the team. The team and video have been featured in the media in stories in the Huffington Post and on Leftist.com. The video is also being used in various classes at the Houston Police Academy as an example of community policing strategies.

Model of Collaboration

A pivotal point in HOT’s success has been the employment of collaborative strategies to expand their operations and increase the employment of community policing strategies. Three case managers employed with MHMRA’s PATH program are embedded with HPD personnel in the Homeless Outreach Team unit and collaborate with other community partners to provide social services to the homeless. Officers and case managers interact with the homeless on the street and in their encampments providing a conduit to benefits and services. Some of the numerous service providers involved are the Star of Hope Mission, SEARCH Homeless Services, Salvation Army, US Vets, Main Street Ministries, Department of Public Safety, Social Security Administration, MHMRA, and Harris Health. As of October 2014, their collaborative efforts have resulted in the housing of 487 individuals.

Identification

One of the primary problems of the homeless is the lack of identification, either by theft or loss. It is difficult to receive services without identification. HOT has worked with the Texas Department of Public Safety and the Social Security Administration and has developed a process for obtaining replacement identification for the homeless. This collaborative effort has resulted in the change of status of an estimated 150 clients from “homeless to housed.” Further, many other individuals have been able to obtain employment, medical care, substance abuse treatment, mental health treatment, and other benefits through the reestablishment of their identity.

Helping a veteran get his life and family back

Sergeant Steve Wick with Bob, a U.S. veteran who was homeless and an alcoholic. At one point Bob was arrested 32 times in a two-month period for public intoxication. HOT formed a relationship with Bob and offered to help him with his addiction and homelessness. After many months, Bob said he was finally sick-and-tired of being sick-and-tired and accepted the team’s offer for help. HOT was able to get Bob into an alcohol detoxification program at the VA Hospital. He has completely turned his life around, reconciling with his wife and children, gaining employment, and now running marathons.
Chief Charles A. McClelland, Jr.

"I'm very, very proud of all the officers that serve on the HOT team. They are very dedicated and they are very passionate about this issue. When you are doing non-traditional policing and providing a service to the community that many law enforcement agencies don’t engage in, you must have employees who are very passionate and care about the issue."

Dr. Steven Schnee

"It is a true collaborative partnership. This could not be done without both sets of players, the mental health systems and the law enforcement systems, coming together communicating, planning, working together over time, evolving together over time."
Senior Officer Jaime Giraldo
and Gary

For years Gary was a chronic alcoholic and homeless. He lived in his teepee (background) under a bridge close to downtown Houston. One day, Gary finally wanted off the streets and HOT was able to get him into housing. After completing a nine-month substance abuse treatment program, Gary is currently employed and living in a transitional housing program. He continues to make strides in his recovery and hopes to save enough money to one day buy a piece of land that he can retire on where he will grow vegetables and raise animals.
Sergeant Steve Wick responded to a suicide-in-progress call in the 900 block of Clay. Upon arrival, Sergeant Wick saw a woman sitting on the ledge facing out of the tenth floor of a parking garage. Sergeant Wick started a conversation with the woman, trying to convince her to come down from the ledge. The distraught woman told Sergeant Wick that she wanted to die because her ex-husband did not allow her to see her children and there was nothing anyone could do for her.

"The distraught woman told Sergeant Wick that she wanted to die because her ex-husband did not allow her to see her children and there was nothing anyone could do for her."

A short while later, Crisis Intervention Response Team (CIRT) Officer Roman Conchola and his clinician partner Michael Erickson arrived at the scene. They joined Sergeant Wick in trying to convince the woman to come down from the ledge. The officers and clinician talked to the woman for more than an hour in the rain. The woman finally agreed to come down from the ledge and the officers carefully approached her and helped her off. Officer Conchola transported her to the NeuroPsychiatric Center for stabilization and treatment.
### Additional Statistics

<table>
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<td>Emergency detentions</td>
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<td>Identification assistance</td>
<td>160</td>
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</table>

"Houston has the largest homeless population in Texas and the eighth largest in the nation."

- Houston Mayor Annise Parker

"20 to 25 percent of the homeless suffers from some form of severe mental illness. In comparison, only 6 percent of Americans are severely mentally ill."

- National Coalition for the Homeless
Roles and Responsibilities

Senior Officer Frank Webb and Officer Rebecca Skillern (right) are the Mental Health Division’s trainers. Together, they provide Crisis Intervention Training (CIT) to all police department personnel (patrol, jail, emergency communications, cadets), to include training law enforcement and mental health personnel across the region, state, and nation through the Council of State Governments Learning Site Program. Additionally, Officers Webb and Skillern give community presentations, coordinate the department’s CIT Officer of the Quarter awards program, publish a quarterly divisional newsletter, and maintain the department’s Mental Health Division website.

Section 2: Training

Impacting the department, region, state, and nation

40-Hour Training/ April 2014 Mental health training in South Padre Island, Texas, through the Council of State Governments Learning Site Program. Personnel from the South Padre Island Police Department and regional agencies attended.
Learning Site Trainings

Through 2014, Houston has provided 18 40-hour mental health trainings classes as a Learning Site to other agencies across the region, state, and nation. One class was in Mankato, Minnesota and one class was in Tuscaloosa, Alabama. The remaining classes were across Texas.

Learning Site Visits

Through 2014, Houston has conducted five site visits: Durham, NC and Denver, CO in 2011; Milwaukee, WI in 2012; King County WA and Knoxville TN in 2014. There were no site visits in 2013.
40-Hour Training/ December 2014 Mental health training in Seguin, Texas, through the Council of State Governments Learning Sites Program. Personnel from the Seguin Police Department and regional agencies attended.

Learning Site Information Requests

Houston receives requests for training videos, curricula, program information, and consultations.

Agencies Trained Through Learning Site

Several law enforcement and mental health agencies attend each of the 40-hour training classes provided through the Learning Site program.
Site Visit/ February 2014 (left to right) Deputy Val Kelly, King County Sheriff’s Office; Senior Officer Frank Webb, HPD; Captain Scott Strathy, King County Sheriff’s Office; Chief of Police Charles A. McClelland, Jr., HPD; Deputy Josephine McNaughton, King County Sheriff’s Office; Officer Rebecca Skillern, HPD; Executive Assistant Chief Michael A. Dirden, HPD; Captain Wendy Baimbridge, HPD.

Personnel Trained Through Learning Site Program (non-HPD personnel)

Houston trains personnel from a variety of law enforcement agencies/jurisdictions.

<table>
<thead>
<tr>
<th>Year</th>
<th>Personnel Trained</th>
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<tr>
<td>2011</td>
<td>176</td>
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<tr>
<td>2012</td>
<td>401</td>
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<tr>
<td>2013</td>
<td>357</td>
</tr>
<tr>
<td>2014</td>
<td>452</td>
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</table>
**Post-traumatic Stress Disorder**

(left) Senior Officer Frank Webb and Officer Rebecca Skillern presented a workshop on Post-traumatic Stress Disorder (PTSD). The workshop focused on both military and law enforcement officers who have PTSD. Because of the stigma, many do not admit they have a problem and thus do not seek treatment. The presentation allowed open and honest discussion on this issue and the importance of breaking the stigma against mental illness in the military and in law enforcement.

**Alzheimer's Disease**

(right) Senior Officer Doug Anders of Houston's Mental Health Division presented a workshop titled "The Alzheimer's Epidemic - A Challenge for Law Enforcement." The aging of our population provides new challenges to law enforcement and the community as more of our citizens develop this disease. The workshop provided information on the illness, policies developed by the IACP, missing persons response, and resources available to law enforcement who respond to individuals with Alzheimer's.

**Public/Private Partnerships**

(left) Ann MacLeod, LPC-S, NCC, MHMRA of Harris County (left); Lillian Aguirre Ortiz, MSW, One Voice Texas; and Sergeant Steve Wick, Houston Police Department, conducted a workshop titled "Taking it to the Next Level: The Potential Benefits of Public/Private Partnerships." The trio talked about the innovative, collaborative solutions developed in Houston/Harris County for working with people with behavioral health needs.
Mental Health Division Spearheads Effort to Form Statewide Organization

The Crisis Intervention Training (CIT) program is the foundational program nationally recognized for helping law enforcement personnel respond to individuals in serious mental health crises. In addition to an International CIT association, several states have their own organizations.

Efforts have been made over the past few years to start a CIT organization in Texas. Officer Rebecca Skillern started working on the daunting challenge of networking across this large state and building the Texas CIT Association. Officer Skillern started her efforts in 2012. She worked with law enforcement and mental health partners from San Antonio, Dallas, Fort Bend County, Plano, San Marcos, and others. Officer Skillern, who was voted the first President, and continues in that role today, worked with other founding members to formulate articles of incorporation, bylaws, designation as a 501(c)(3), a mission statement, an organizational chart, offices, committees, website, Facebook page, and more.

Inaugural Conference

The Association has made great progress, holding its inaugural conference in San Antonio in April 2014 (more on the conference on the next page). Law enforcement and mental health personnel from across the state attended.

And the keynote speaker was Frederick J. Frese, Ph.D. Dr. Frese is a psychologist who has specialized in the area of schizophrenia for over 33 years. Diagnosed with the illness when he was 26, he has worked tirelessly as a practitioner and advocate for consumers and their families.

Thirty years ago, Dr. Frese was locked up in an Ohio mental hospital, dazed and delusional, with paranoid schizophrenia. Twelve years later, he became the chief psychologist for the very hospital system that confined him!
Sr. Officer Doug Anders and Program Director Ann MacLeod, LPC-S, NCC - Care Homes

Sr. Corporal Herb Cotner, Dallas P.D. - Introduction

Sr. Officer Frank Webb - PTSD

Sergeant A.D. Paul, Plano P.D. - Special Needs

Dr. Fred Frese - Keynote Speaker - Schizophrenia

Dr. Jeffery C. Metzger, MD, FACEP, Dallas P.D. - Excited Delirium
(left) Sergeant Kenny Li

Before being promoted to sergeant, Officer Kenny Li responded to a suicide-in-progress call at an office building. A male walked up to the fifth floor, sat on a narrow outside ledge, and threatened to jump off. Officer Li started talking to him and listened as the man told Officer Li of several past and present problems that led him to the ledge. Officer Li talked to the man for approximately 20 minutes and talked him off of the ledge.

(right) Officer Jason Macha

Officer Jason Macha received a call involving a missing person. The reportee was the husband who stated his wife attempted suicide several times in the past by going to an area hotel and overdosing on prescription drugs. He believed she was attempting this again. After calling several hotels, Officer Macha located the wife and, after receiving no response, forced entry into her hotel room. She was on the bed and despondent. Officer Macha shook her in an attempt to wake her and she gasped, sucking in air. Jason was told by the doctor at the ER that his shaking her probably saved her life.

(left) Senior Officer Jacques Bland

Officer Bland received a call involving a woman with a knife running in traffic on Loop 610 at the North Freeway. Trucks and cars were swerving to avoid her and 18-wheel trucks had brakes squealing and smoking. Officer Bland ran into traffic to save her. Officer Bland was nearly hit several times but was able to tackle her and take her into safety.

(right) Officer Corey Harrington

Officer Harrington talked a woman from jumping off a freeway bridge. The woman was schizophrenic and depressed and hearing voices telling her to kill herself. She stated she wanted help but the voices were too strong to overcome. Officer Harrington was very patient and gained the woman's trust by assuring her he was there to help.
"POSTs should make Crisis Intervention Training (CIT) a part of both basic recruit and in-service training."

- Interim Report of The President’s Task Force on 21st Century Policing
  March 2015

"The single most significant common denominator shared among communities that have successfully improved the criminal justice and mental health systems' response to people with mental illness is that each started with some degree of cooperation between at least two key stakeholders - one from the criminal justice system and the other from the mental health system."

- Criminal Justice/Mental Health Consensus Project
  Council of State Governments
  June 2002
  Executive Summary, Section IV, p. xx

"The Houston Police Department is an exemplary law enforcement agency that has successfully developed collaborative partnerships. Houston's Mental Health Division, as a learning site, provides invaluable assistance to other jurisdictions that are interested in developing a specialized policing response model."

- Nicola Smith-Kea, M. Sc., M.A., Policy Analyst, Law Enforcement Program,
  Council of State Governments Justice Center
"Our Crisis Intervention Team is one of the shining stars in the police department and it's an example of doing the right thing in the right way and how that can make our city safer."

- Houston Mayor Annise D. Parker

"This [CIT] is the essence of community policing."

- Houston Police Chief Charles A. McClelland, Jr.

"The essential difference between suspect encounter training, that officers traditionally receive, and how to approach the mentally ill is the need to be non-confrontational. Such a requirement to, in effect, switch gears is diametrically opposed to the way officers are routinely expected to control conflict. The same command techniques that are employed to take a criminal suspect into custody can only serve to escalate a contact with the mentally ill into violence."

- Police Magazine, "Handling the Mentally Ill: There are no shortcuts for officers"  
  March 1, 2000, by D. P. Van Blaricom
Section 3: Investigations

Firearms, chronic consumers, and boarding homes

Firearms

Texas Representative Allen Fletcher and Texas Senator Joan Huffman authored Senate Bill 1189, which was sponsored by Houston’s Mental Health Division and signed into law September 2013. The law authorizes a peace officer, who takes a person into custody for an emergency detention, to immediately seize any firearm found in the person’s possession. Once seized, Officer Charlah Woodard, Houston’s Firearms Investigator, does the following:

- sends a certified letter of the seizure to the consumer it was seized from and a family member or point of contact;
- conducts an Alcohol Tobacco and Firearms trace of the firearm and conducts an National Crime Information Center/Texas Crime Information Center check;
- contacts the probate court and requests the disposition of the case;
- if the person was not committed, provides written notice to the person that the firearm may returned to him/her;
- if the person was committed, provides written notice that the person is prohibited from owning, possessing, or purchasing a firearm and that the person may petition the court that entered the commitment;
- if prohibited, the firearm may be released to the person’s designee or sold and the proceeds will go to the person.

**Teamwork Averts Possible Mass Shooting**

In April of 2014, Senior Officer Merry Rubin received a call to the Mental Health Division from a young lady who stated her brother was experiencing homicidal thoughts. Officer Rubin gathered information from the caller and informed Officer Woodard of the situation. Officer Woodard learned the brother had been abusing benzodiazepines along with taking medications for his mental illness. Further investigation learned the brother had selected a location and stated he wanted to shoot more people at that location than any other mass shooting in history. Officer Woodard contacted one of the Mental Health Division’s Crisis Intervention Response Teams (CIRT), the brother’s doctor, and his psychologist. Working together, they were able to track and locate the brother, detain him, and bring him to a hospital for emergency psychiatric evaluation. The brother was subsequently placed on the Mental Health Division’s Chronic Consumer Stabilization Initiative (CCSI) under intensive case management and is monitored on a weekly basis. As a result, he is on his way to becoming a manager at the store he has been working at for 10 years and has a positive outlook on life.

Officer Woodard worked on 85 firearms cases in 2014, six of those being felony cases.

**Chronic Consumer Stabilization Initiative**

As with criminal activity, a small percentage of individuals with mental illness account for the majority of police calls-for-service. These are the individuals who continually go into serious mental health crises requiring repeated police intervention. Rather than continuing this reactionary cycle, the Chronic Consumer Stabilization Initiative (CCSI) takes a community policing, proactive, collaborative approach to help keep these consumers from going into crisis, thus helping these individuals and reducing police intervention.

**Expansion of Program and Implementation of Violent Consumer Initiative**

In 2014, the CCSI program expanded from 50 consumers to 67 and from four case managers to six. Also, a Violent Consumer Initiative (VCI) was implemented for those consumers who had one or more violent episodes involving the police or who made attempts or threats to carry out a mass shooting or who planned to harm another person.

**Program Statistics**

<table>
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<tr>
<th></th>
<th>6 months prior to being placed on the CCSI program</th>
<th>After 24 months on the CCSI program</th>
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<tbody>
<tr>
<td>Hospital Days</td>
<td>137 days cost = $183,225</td>
<td>22 days cost = $34,726</td>
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<tr>
<td>Police Contacts</td>
<td>95 police contacts cost = $14,022</td>
<td>13 police contacts cost = $1,919</td>
</tr>
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</table>

Houston Police Department response to 51 clients - an 86% reduction. Note: Assuming 1.5 hour average CIT call clearance and two officers dispatched per policy.

Total hospital days at NeuroPsychiatric Center and Harris County Psychiatric Center for 51 clients - an 83% reduction.
CCSI Case Study

Ruth Jones is a 54-year-old female with a diagnosis of schizoaffective disorder. Ruth was on the CCSI program from March 21, 2009, through October 19, 2011. During this time she was hospitalized approximately 30 times. She was placed back in the program on January 7, 2013. Since being back on the program, she has only been hospitalized four times, the last hospitalization April 29, 2013. Currently, she is going on two years with no hospitalizations and she is compliant with her medications and has no reported side effects. Ruth sees a private doctor and is seen every three months. She lives alone and has been in her apartment for one year. Ruth is seen every Thursday by her CCSI case manager.

Boarding Homes Enforcement Detail

The Boarding Homes Enforcement Detail (BHED) through diligent work has increased the number of boarding homes in compliance with the new City of Houston Boarding Homes Ordinance. Enforcement of the ordinance has resulted in standardization and improvement of living conditions for residents in homes, which were not under monitoring or supervision of state agencies. Officers have reported that the homes the detail focuses their attention on have had lower calls-for-service volume and more compliance.

BHED personnel realized that the elderly and persons with cognitive disabilities are one of our most vulnerable populations. As a means of addressing the needs of these overlooked and at-risk individuals, the Mental Health Division is spearheading the effort to develop a Senior Justice Assessment Center (SJAC). The SJAC will include representatives of the Houston Police Department, Harris County District Attorney’s Office, Harris County Sheriff’s Office, Harris County Medical Examiner’s Office, City of Houston Health Department, Mental Health Mental Retardation Authority of Harris County, Texas Department of Aging and Disability Services, Adult Protective Services, Harris County Health System, and the University of Texas Health Science Center. The goal of the center is to develop a coordinated response to the needs of seniors and persons with cognitive impairments who are the victims of abuse, neglect, or financial exploitation.

MHD Recognized by State Department

Officers from the Investigative Unit, BHED, CIRT, and clinicians from MHMRA were recognized by the Department of State for assisting the Criminal Intelligence Division (CID) in an investigation involving a resident of a boarding home who made terroristic threats against U.S. State Department agents.

With knowledge of the suspect from previous investigations, officers from CID filed felony charges against the individual based on the nature of the threats against the agents. MHD personnel that included the BHED, CIRT, and MHMRA clinicians executed the warrant without incident and took the suspect into custody.
<table>
<thead>
<tr>
<th>Category</th>
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<td>Cases Assigned</td>
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<td>Cases Cleared</td>
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<td>Code Violation Warnings Issued</td>
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<td>Agency Referrals</td>
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<td>Offense Reports</td>
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<td>Supplemental Reports</td>
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<td>Citizen Contacts</td>
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Section 4: CIRT

The department's highest-level response to individuals in serious mental health crisis

The Crisis Intervention Response Team (CIRT) is Houston's co-responder program partnering a Houston CIT officer with a masters-level licensed professional clinician from the Mental Health Mental Retardation Authority (MHMRA) of Harris County. The following are the objectives of CIRT:

- Assist officers with CIT-related calls
- Conduct CIT-related investigations
- Respond to SWAT calls as a resource
- Handle the most serious CIT calls

Houston has ten full-time units. To our knowledge, Houston has the largest co-responder program with the officer and clinician riding together as partners of any single police department in the nation.

Case Study #1:

Saving the Life of a Consumer Having a Heart Attack

On February 14, 2015, CIRT Officer Kathryn Vogelsang responded to a helpline referral about a suicidal consumer. Officer Vogelsang arrived and she and
her clinician partner evaluated the consumer and found that he was indeed suicidal and in crisis. Officer Vogelsang checked the consumer and found he had three warrants (one felony and two misdemeanors) out of Nebraska. The originating jurisdiction replied with a confirmation and an extradition request. Officer Vogelsang asked a patrol unit to assist her. The officers on the patrol unit were Officer John Vogelsang and Probationary Police Officer (PPO) Robert Carlile. The patrol unit helped in booking the mental health consumer into the Harris County Jail for the outstanding warrants.

During the booking process, the consumer stated he had a heart condition and did not feel well. The consumer told the officers he forgot to take his heart medication and began deteriorating quickly. Officer John Vogelsang called for an ambulance. While waiting for the ambulance, Officer John Vogelsang looked for a defibrillator as Officer Kathryn Vogelsang and PPO Carlile laid the consumer on the floor and attempted to keep him calm. Officer John Vogelsang and Clinician Pedra Ane returned with the defibrillator. PPO Carlile and Clinician Pedra Ane placed the defibrillator pads on the consumer as he went into cardiac arrest. The defibrillator read the consumer’s heart condition and determined an electric shock was required. The device delivered one shock which resuscitated the consumer for only a short while when he went unconscious again and the defibrillator indicated chest compressions should be initiated. Officer K. Vogelsang immediately began compressions. The ambulance arrived a short time later and took the consumer to the hospital where he survived the cardiac event.

Harris County Judge J. Wallace, whose court the officers were in when the consumer went into cardiac arrest, stated all officers had a hand in saving the consumer’s life and personally expressed her gratitude.

Case Study #2: Threat of Suicide

CIRT Officer David Rose and Clinician Partner Amber King responded to a request for assistance by a Houston Police Department patrol officer at a gas station. The officer told the CIRT unit a male had been seen drinking two Dr. Pepper bottles full of gasoline and threatened to blow himself up with a lighter.

The man appeared as an empty shell with very little interaction or emotion. He had a lack of concern for his well being and he had a history of Schizoaffective Disorder and Post-traumatic Stress Disorder. Officer Rose and Clinician King transported the man to Ben Taub General Hospital for emergency psychiatric evaluation.
Case Study #3: Woman Threatening to Commit Suicide

CIRT Officer Jason Garcia and Clinician Partner Chris Estes received a call involving a female perched atop the bridge trusses overlooking the San Jacinto River. She was making gestures indicating she was planning on jumping. She made statements such as "I’m going to jump off this bridge." She was also chain-smoking and at one point threw her lighter off the bridge. She stopped communicating shortly after throwing her lighter away and placed her head between her legs. With the sun going down and a rainstorm approaching, Clinician Estes made a calculated decision to try and manipulate the consumer subtly by having a group of officers, who were in the vicinity of where the consumer was, light up cigarettes, begin smoking, and circle around acting in a nonchalant manner allowing the female to see and smell the smoke. One officer idly flicked his lighter off and on in an unconscious manner. After only a couple of minutes, the female suddenly left the trusses and approached the group of smoking officers requesting a cigarette, which was given to her once she was handcuffed. She was transported to the NeuroPsychiatric Center for emergency psychiatric evaluation.

Crisis Intervention Response Team 2014 Statistics

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<tr>
<th>Task</th>
<th>Count</th>
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<td>On-View Investigations</td>
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<td>Supplements</td>
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<td>Emergency Detention Orders</td>
<td>1688</td>
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<td>Voluntary Committals</td>
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<td>Referral Follow-Ups</td>
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<td>SWAT Scenes</td>
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<td>Arrests</td>
<td>34</td>
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<tr>
<td>Jail Assessments</td>
<td>61</td>
</tr>
</tbody>
</table>
"Law enforcement agencies should engage in multidisciplinary, community team approaches for planning, implementing, and responding to crisis situations with complex causal factors."

- Interim Report of The President's Task Force on 21st Century Policing
March 2015
Section 5: Statistics

CIT Calls-for-Service

CIT Reports Reviewed

CIT Reports Catalogued in Database

CIT Cases Investigated
Section 5: Statistics

### Completed Suicides

<table>
<thead>
<tr>
<th>Year</th>
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<th>2011</th>
<th>2012</th>
<th>2013</th>
<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>62</td>
<td>122</td>
<td>92</td>
<td>120</td>
<td>80</td>
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</table>

### Taser Incidents

<table>
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<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>30</td>
<td>30</td>
<td>24</td>
<td>43</td>
<td>37</td>
</tr>
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</table>

### SWAT Involved Incident

<table>
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<tr>
<td>Value</td>
<td>9</td>
<td>9</td>
<td>9</td>
<td>19</td>
<td>11</td>
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</table>

### Military Veterans

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<thead>
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<th>2013</th>
<th>2014</th>
</tr>
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<tbody>
<tr>
<td>Value</td>
<td>145</td>
<td>257</td>
<td>231</td>
<td>323</td>
<td>356</td>
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</table>

### Post-Traumatic Stress Disorder

<table>
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</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>44</td>
<td>143</td>
<td>162</td>
<td>201</td>
<td>259</td>
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### Homeless

<table>
<thead>
<tr>
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<th>2014</th>
</tr>
</thead>
<tbody>
<tr>
<td>Value</td>
<td>528</td>
<td>1,019</td>
<td>1,150</td>
<td>1,394</td>
<td>1,559</td>
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</table>
Admitted to Ben Taub General Hospital

Admitted to Veterans Administration Hospital

Admitted to St. Joseph’s Hospital

Admitted to Other Hospitals

Jail Diversions

Incidents Involving a Weapon
Section 6: Awards

Officer Rebecca Skillern
Instructor of the Year

Officer Rebecca Skillern received the Instructor of the Year Award at the Police Week Awards Luncheon in May 2014. Officer Skillern, with her training partner Senior Officer Frank Webb, trained hundreds of personnel (law enforcement, corrections, mental health) in 2014 through the United States Council of State Governments Learning Site Program. Within the department, Officer Skillern provided the Texas Commission on Law Enforcement’s Mental Health Peace Officer class to 274 cadets and veteran officers, taught a State-mandated Intermediate CIT class to over 1,000 personnel, taught an eight-hour class on mental illness to almost 300 new-hire jail personnel, taught a four-hour class on suicide prevention to veteran jail personnel, and teaches a class on mental illness/Houston’s MHD to new dispatchers and call-takers.

Officer Reginald Dunn
CIT Officer of the Year

Officer Reginald Dunn also received his award during the Police Week Awards Luncheon in May 2014. Officer Dunn is a Crisis Intervention Response Team (CIRT) officer and one of the most productive, leading the division in 2013 in two critical areas: calls-for-service (727) and emergency detentions (241). One of the calls responded to by Officer Dunn and his clinician partner Michael Hawkins was a call from the Houston FBI office asking for assistance regarding a posted YouTube video where a mentally disturbed individual made threatening statements about carrying out a "Sandy Hook" style elementary school shooting. The video included rants and raves indicating the individual was depressed, angry, and paranoid. Officer Dunn and his partner interviewed the man and transported him for emergency psychiatric evaluation.
Since the program’s inception in 1999, CIT officers have voiced concerns about facilities that house individuals with disabilities. The list of concerns has varied and ranged from inadequate training of facility personnel/staff, numerous calls-for-service to certain locations, financial swindles, physical abuse, neglect, and covert misrepresentation to victims’ loved ones.

Once assigned to the Mental Health Unit, Senior Police Officer (SPO) Doug Anders began the arduous task of developing and writing a city ordinance to regulate such facilities. After three years of persistence on this extremely complex issue, SPO Anders succeeded in having the City’s first-ever Boarding Homes Ordinance passed and adopted by City Council on July 24, 2013. SPO Anders accomplished this feat by collaborating with several community entities: Houston City Council, Houston Fire Department, Houston Health Department, Administration and Regulatory Affairs, Public Works, Disability Rights Texas, Adult Protective Services, Texas Department of Aging and Disability Services, and the Harris County District Attorney’s Office.

The ordinance created a registration process, which incorporates access to the facilities by the Houston Police Department Mental Health Division (MHD), background checks for staff and caregivers, annual fire inspections, a mandatory fire evacuation plan, mandatory record-keeping, and a requirement to report criminal activity and deaths. Thanks to the efforts of SPO Anders, the City and police department have a fundamental tool to help elevate the quality of life for individuals living in these facilities.

In May of 2013, the Mental Health Unit was elevated from unit to divisional status. Sergeant Mixon transferred into the division with the goal of setting up and establishing HPD’s newest addition to the organizational chart. He began the arduous tasks of:

- Drafting new Standard Operating Procedures for the division
- Amending existing procedures to mirror new responsibilities
- Writing circulars noting legislative changes pertaining to mental health
- Assisting with the interview processes to fill existing positions and new allocations
- Establishing various monthly reporting mechanisms for internal and external accountability
- Helping to develop the divisional budget
- Directing and supervising the scanning of five years of paper files
- Providing vital assistance with the update of General Order 500-12, Persons Affected with Mental Illness

Officers who were assigned to the MHD prior to the transition from unit to division have positively commented on the seamless transition and how the change has enabled them to work solely on operations because administrative duties were reassigned. The formation of the MHD would not have been possible without the hard work, dedication, and close attention to detail displayed by Sergeant Mixon.
### Senior Justice Assessment Center

The Mental Health Division (MHD) identified a need to address the growing problem of elder abuse. In 2015, the division will attempt to develop a Memorandum of Understanding between the following agencies: Adult Protective Services, City of Houston Department of Health, Harris County District Attorney’s Office, Harris County Sheriff’s Office, MHMRA of Harris County, Texas Attorney General’s Office, University of Texas Health Science Center, and Harris Health. The MHD will work during 2015 to collaborate with these agencies to form a multidisciplinary team to provide expert and comprehensive case examination, documentation, consultation, and prosecution of elder and dependent adult cases involving victims of abuse.

The intent is to base Houston’s program on similar programs in Los Angeles County, San Francisco, and Orange County (CA). The MHD plans to visit Los Angeles County in the summer of 2015.

### 9-1-1 Diversion Project

The MHD will work to fund and pilot the 9-1-1 Diversion Project. This project will place crisis hotline personnel from the Mental Health Mental Retardation Authority of Harris County in the Houston Emergency Center. It is believed a percentage of CIT calls can be handled over the phone by crisis hotline counselors rather than dispatching a patrol unit. This program is similar to the successful Patrol Desk Unit.

### United States Council of State Governments Learning Site Program

Work to make Houston the most active of the six national learning sites.