

COMPREHENSIVE NEIGHBORHOOD SAFETY STRATEGY
COLUMBUS SAFETY ADVISORY COMMISSION
DRAFT MEETING MINUTES
October 18, 2018



Commissioners Present:

Janet Jackson, Chair; Brooke Burns, Dr. Chenelle Jones, Dr. Vlad Kogan, Andrea Morbitzer, Pastor Jason Ridley, Erin Synk, Oleatha Waugh, Tiffany White, LaShaun Carter, Dr. Reginald Wilkinson

Commissioners Absent:

Matt McCrystal, Traci Shaw, Emily Buster, Tammy Fournier-Alsaada, Mary Wehrle

Staff Present:

Elon Simms, Bryan Clark, Lt Dennis Jeffrey , George Speaks, Jeff Furbee, Kate Pishotti, Cmdr Bob Meader, DC Tom Quinlan

WELCOME

Chair Janet Jackson called the meeting to order at 12:08 pm and welcomed the Columbus Community Safety Advisory Commission (“Safety Commission”) to the 10th meeting of the group. She thanked the commissioners for their commitment to this process, even though it means taking time away from work and family.

SAFETY COMMISSION MEETING MINUTES

Chair Jackson thanked Denise Bauer for her work on revising the minutes from the September 12 meeting and for the detailed work on the September 25 meeting minutes. Ms. Synk moved to approve the minutes from the September 12 meeting; seconded by Mr. Carter. Motion passed unanimously. Dr. Wilkinson moved to accept the minutes from the September 25 meeting; seconded by Mr. Waugh. Motion passed unanimously.

PRESENTATION FROM LT. DENNIS JEFFREY, CPD TRAINING ACADEMY

Lt. Dennis Jeffrey, a 23-year veteran of the police, with 17 years of that as a supervisor, now serves as the full-time coordinator of the Crisis Intervention Training (CIT) program for the Columbus Division of Police.

History of the CIT movement

CIT was started in Memphis, Tennessee after Joseph Robinson, a schizophrenic armed with a knife, was shot and killed by police after lunging at officers. After this situation and others like it, a group of mental health practitioners and community leaders came together to develop a program to train police officers

about persons afflicted with mental illness and how best to recognize and handle situations involving a mental health crisis, with the goal of keeping everyone safe.

Training Curriculum

CIT is a 40-hour course that covers the following topics:

- signs and symptoms of mental illness (taught by an OSU psychiatrist)
- risk management – representatives from Netcare, the crisis center in Franklin County, come in to talk about their operations
- youth and mental illness
- pink slips and probates
- dual diagnosis of mental illness and substance abuse
- Franklin County ADAMH board
- developmental disabilities and mental illness
- auditory hallucination simulation
- case manager ride-along
- cultural competency training from mental health perspective
- de-escalation skills
- PTSD and veterans
- role playing
- legal review – looking at case law impacting mental health issues

Additional Information

In 2017, CPD received more than 18,000 calls for service that involved a mental health component. These calls are identified by CPD dispatchers, who receive 8 hours of CIT training, to help identify these issues to better inform officers before they arrive on scene.

- 50% of the 18,000 calls resulted in transport to NetCare or a hospital emergency room
- Evaluation of every call - watch body cam footage
- In-service training is required for CIT officers
- Recognition and honors for outstanding service
- 426 CPD officers will be CIT trained by the end of 2018 (38%)
- New cadets are trained in CIT during the 16th week of field training (100 per year)
- 626 CPD officers will be CIT trained by the end of 2020 (56%)
- Shared 911 call and description of a situation that occurred at the High and EN Broadway Kroger lot
- One Mind Campaign – initiative focused on unified local communities, public safety organizations and mental health organizations so that the three become of “one mind”
 - develop and implement written policies that address law enforcement response to persons affected by mental illness and establish a clearly-defined and stable relationship with at least one community mental health organization
 - develop relationships with governments
 - demonstrate that 100% of sworn officers and selected non-sworn staff are

- trained in mental health first aid
 - demonstrate that 20% of sworn officers are trained and certified on the CIT team.
- Mobile Crisis Response Pilot (MCRP)
 - Started in June of 2018 and ending in December 2018, MCRP is a partnership with the ADAMH board, NetCare and CPD, where a CIT officer is placed in a cruiser with a mental health clinician seven days a week from 2p-12a, taking calls for service and doing follow-ups.
- Rapid Response Emergency Addiction Crisis Team
 - Collaboration between Columbus Fire and CPD in which a firefighter and a CIT officer perform overdose follow-up calls from 4p-9p, Monday - Friday.
- Naloxone Program
 - Started as a pilot in 2016 on the Hilltop and the South Side
 - CFD trained CPD in the deployment of Narcan (drug that reverses an overdose)
 - CPD officers can get to an overdose call within 90 seconds, whereas CFD may take 4-6 minutes to response.
 - Now a full-time program, during the pilot, there were 61 deployments of Narcan. In 2017, there were 281 deployments and there have been 388 so far in 2018. The problem is not going away, so we've equipped officers with a life-saving drug.
- AEDs in cruisers for quicker response to cardiac emergencies

Discussion points:

1. Q: How many of the 18,000 calls for service in 2017 involved juveniles?
A: Number will be provided at a later date

2. Q: Nationwide Children's Hospital is building a 200-bed facility to care for youth dealing with mental health issues. Has CPD started working with NCH around protocols?
A: Yes – working with NCH on several protocols, including linking parents with mental health providers to avoid getting CPD involved if they don't need to be

3. Q: President Obama's report on 21st century policing recommends that 100% of officers are CIT-trained, is that correct?
A: Yes, but that's based on officers volunteering to get trained – not mandating training – all new recruits, though, will be CIT trained before their training period is over.

4. Q: Is everyone receiving the 40-hour training class in CIT or a lesser version?
A: Yes, all officers now receive the full, 40-hr training
5. Q: With case management, you've said that 50% of cases could avoid jail time. Are you working with FCJD and FCSO to let them know that this person may have a mental health health challenge?
A: Intake forms at the jails have medical assessment component and we are working with many county agencies to coordinate after-care. Parole officers and emergency room security personnel are now receiving CIT training.
6. Q: What outcomes are being studied to evaluate the success of the MCRP project?
A: Numbers of follow-up contacts; NetCare is doing their own research, so we'll use that data as well; we are working with a grad student at OSU who is working on his thesis assessing this pilot.
7. Q: The MCRP runs from 2p-12a and the RREACT program runs from 4p-9p. Is this determined by calls for service and/or is this the best time to do follow-up calls?
A: Both – peak times for calls for service and follow-up calls to service providers can happen during the 2p-5p business hours.
8. Q: How do you teach empathy and perspective in light of the implicit biases that we all bring to the table in light of our life experience?
A: During the CIT training, attention is paid to cultural competency and bringing in professionals to talk specifically to these issues.
9. Q: How do you obtain officer feedback for those with CIT training. Is it effective and how can it be modified to improve it?
A: That is a deficiency in the program – we are working on interacting with officers involved in these calls to get their input.
10. Q: You listed PTSD and veterans as a training module for CIT, but inner-city children show the highest levels of PTSD in the US. Could that be included as well?

A: Yes.

11. Q: Is there any data from the last several years for officer-involved shooting and whether or not the officer involved was CIT-trained?

A: Not that I'm aware of, but I will look into it.

12. Q: Do patrol officers recognize the need for CIT officers called in when the situation escalates due to trauma caused by the interaction with the police, even though it might not have started out as a mental health call?

A: Yes, officers are trained to call for the resources they need to help the person in crisis, no matter the cause of the trauma. How do we slow down, get the person the help they need. That's really the goal at the end of the day.

13. Q: Of the 50% of the 18,000 mental health run calls in 2017, could we get statistics by age, race, gender to see who is actually being transported and who is receiving services in place?

A: Those numbers are available and will be provided to you.

14. Q: Do we have enough resources in Franklin County to deal with these calls?

A: We have a lot of great partners, but no, services and beds and not adequate to meet the needs of those we need to transport.

Chair Jackson thanked Lt Jeffrey for coming back a second time and for his very helpful presentation.

PRESS CONFERENCE

Bryan Clark made the commissioners aware of a press conference that occurred earlier in the day. A group of local faith leaders came to express their concerns about police/community relations and specifically the relations between the community and African-American CPD officers. At least one of the clergy members at the press conference has joined us here today for this meeting. We share the values that they brought to the table with these issues and we can all agree that we want safety for our families, for our neighborhoods and for our first responders.

Chair Jackson shared that she is committed to capturing input from African-American CPD officers during the commission's work, done in such a way that they feel comfortable and secure in sharing whatever their personal concerns are and we have been assured that there will such an opportunity to

gather that input. She extended her thanks to the clergy for coming forward, and to the Mayor and Director Pettus for their quick response to these concerns.

MATRIX CONSULTING

Bryan Clark reported on the progress of the City's contract with Matrix Consulting:

- The Mayor, as well as Director Pettus, Chief Jacobs, all the Deputy Chiefs, and a number of department directors directly involved in delivering comprehensive neighborhood safety strategy service and solutions, have met with Richard Brady, president of Matrix Consulting. These meetings, to Mr. Brady's mind, demonstrated that these leaders are open to change and thinking strategically around police/community relations, an important step in the process which many other communities do not share.
- Part of the final negotiated contract with Matrix Consulting was a series of community meetings, or focus groups, with community leaders and first responders, as well as statistically valid surveys of city residents, CPD employees, and several surveys of demographic groups of officers.
- Introduction of Matrix Consulting representatives: Devon Clunis and Ian Brady
 - Conducted over 350 studies for agencies all over the country, such as Fort Worth PD, Kansas City PD, San Jose PD, Austin PD and currently working with LAPD.
 - Approach to these studies includes a comprehensive look at the department, from staffing to building partnerships, from mission statements to interacting with the community, aiming to achieve an understanding of how services are provided and then gathering input from a large number of stakeholders.
 - We then work on implementation strategies for the forward-looking, community-building policies and programs we present in the final report.
 - Mr. Clunis described his time with the Winnipeg PD, from becoming an officer in a mainly white police department to being appointed chief in 2012, leading the department through transformational change, implementing community policing through social development, building bridges between police and community.
 - Scope of study:
 - developing an understanding of the police division that involves a number of interviews, starting with the leadership and continuing down to the line level so we really get a complete view of the attitudes and perceptions of the department.
 - anonymous, online employee survey to all members of the police division
 - extensive input from the community through a telephone survey, conducted by Gomez Research
 - focus groups, conducted by RAMA Consulting
 - data collection of the division, including cold call dispatch records, investigative cases, policies and procedures to get a clear picture of the operation of the department
 - comparative survey of other major metropolitan agencies to develop a set of best practices
 - develop analysis of staffing needs, community partnerships, internal support systems, policies, training and all other necessary functions
 - provide a final report

- What is the ultimate outcome the Safety Commission wants from this report? We would like your feedback on this keeping in mind these key questions:
 - are the staffing levels optimal, given that Columbus is a growing city?
 - could technologies improve service delivery?
 - does the organizational structure of the organization support the effective and efficient use of the resources?
 - are the correct processes in place to hire, train and deploy a diverse police force?
 - what mechanisms are in place or should be in place to ensure the accountability of staff and proper police practices?
 - what best practices and benchmarking efforts should be adopted in the police division to ensure CPD is truly meeting 21st century policing standards
 - is training sufficient to keep up with changes in policing?
 - is the department being transparent enough?
- The process is a 20-week working period – timeline provided

Discussion points:

1. Q: When recommendations are made, what is the track record of implementation?
A: About 80-85%, with some recommendations not being realized because of financial constraints.

2. Q: Will the commission receive a draft report to review prior to the final report being published?
A: Yes.

3. Q: Could we get some more information of the mechanics of the phone survey?
A: It will be a scientifically, statistically valid survey that will be done via landlines and cell phones, using zip codes to determine different communities and sampling requirements. More information will be provided to the commissioners as it becomes available.

4. Q: I would like to hear more about the social development programs you created as chief of police in Winnipeg.
A: Public forums for anyone willing to come and talk with me about what they wanted from police – not a single person said more policing – they talked about things like parenting classes, walking school bus, fixing playgrounds, etc. We then talked with officers about why they became police officers – to help people – so are we doing a

good job at that? And what are you hearing from citizens? They were given the opportunity to make suggestions and implement programs, giving them purpose and fulfillment in doing their jobs.

5. Q: Will we have an opportunity to review the survey questions for the focus groups?

A: Yes.

6. Q: Will a review of the intersection of law enforcement and the judiciary system be a part of this process?

A: No, this is outside the scope of this consulting contract.

7. Q: Will the final report be accessible, in terms of language, to the general public? And will it be translated for ESL populations?

A: Yes and no, translation is not part of the contract, but the city could consider doing that for its residents.

8. Q: How extensive will your research be in terms of hiring practices and diversity in leadership?

A: We have begun that research, looking at where people are being selected out of the process and if implicit bias and/or unintentional bias exists within the hiring process. The leadership diversity issue has been raised, so we will certainly be having those discussions.

9. Q: Will there be any engagement with community organizations, some of whom we created to deal with police/community relations?

A: Yes.

10. Q: What is your experience in the reaction of police agencies to receiving recommendations and referrals from outsiders and non-police folks?

A: From our conversation with leadership so far, we do not get a sense of any resistance to change, just a desire for excellence. I have very positive hopes for the outcome of this review.

11. Q: With the distrust that exist within the community, how do we go about building bridges and improving police/community relations?
- A: No matter where people live, they want to have a positive relationship and sometime we just need to lead them to that place.
12. Q: With the focus group, will you be intentional about involving the youth populations and examining their thoughts and opinions?
- A: Most definitely.
13. Q: How will you manage recommendations as they may impact the city's relationship with the FOP?
- A: We offer the best recommendations, regardless of the FOP contract, because we can't let that be an impediment to our best recommendations. It is incumbent on the city and stakeholders to work out those details and remove barriers.

Chair Jackson thanked the presenters from Matrix Consulting for their excellent presentation and thoughtful discussion around the scope of the work. We will schedule a time for them to come back and give the commissioners a progress report.

The commissioners will be advised of the dates for focus group meetings and will be welcome to attend. Discussion followed regarding the youth meetings and any further meetings to be schedule for the general public outside of invited members of focus group. Chair Jackson directed Mr. Simms to work out those details.

Our next meeting is Thursday, November 1 from 2p-5p, location to be determined.

Meeting adjourned by Chair Jackson at 2:35 pm.