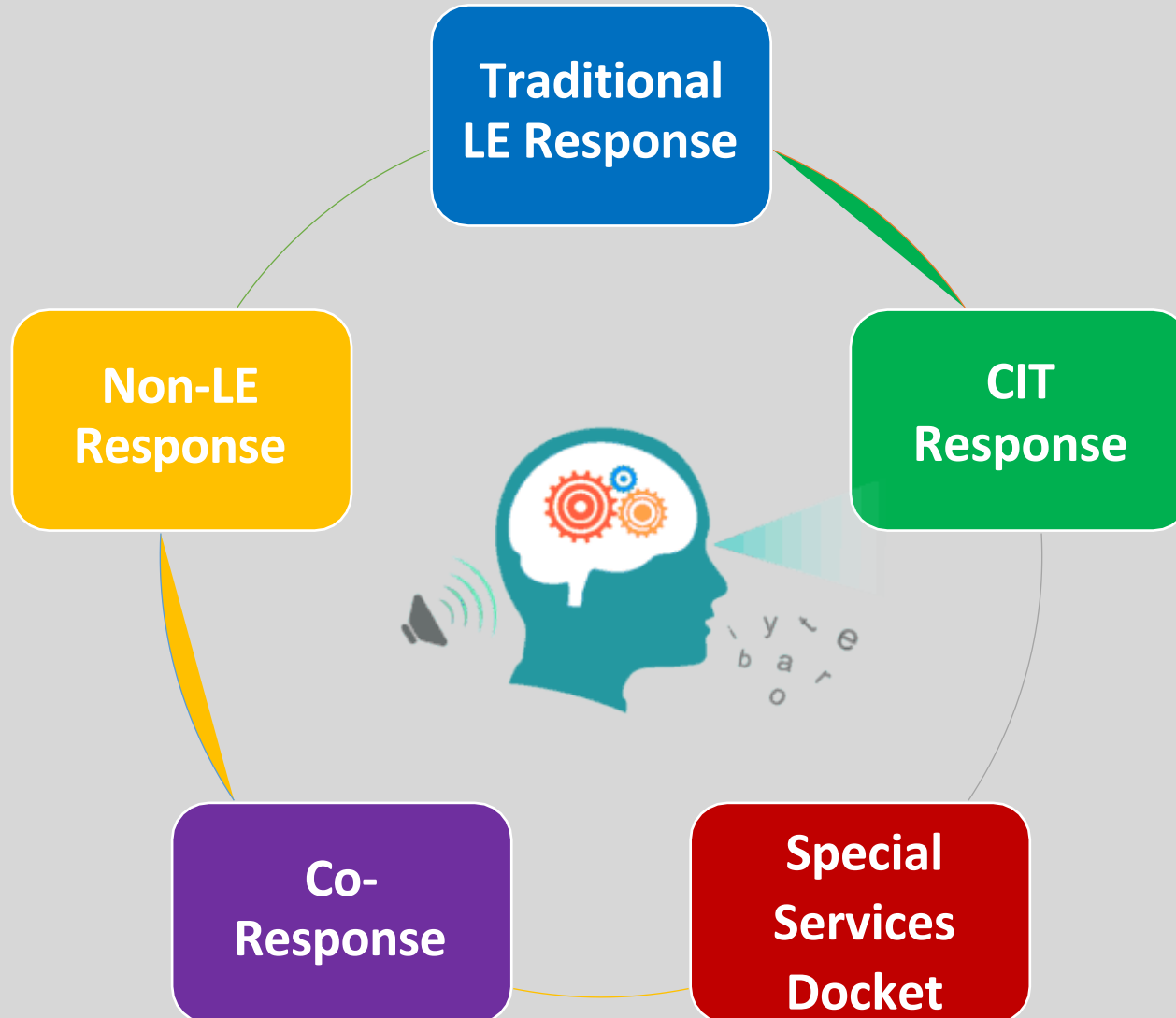




Tulsa Police Department

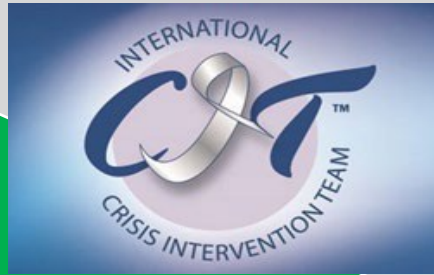
Mental Health Response





Traditional Response

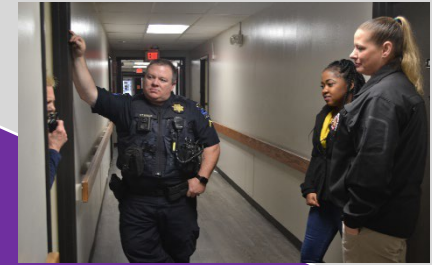
- Patrol Officer X 2 trained in mental health at the Tulsa Police Academy and annual inservice training
- Determines public safety threat
- Determines if a crime has occurred
- Determines if person should be taken into protective custody under 43A O.S.- The Mental Health Law



CIT Response

- Patrol Officer who has 40 hrs of additional training in Crisis Intervention Team (CIT) Training
- Determines public safety threat
- Determines if a crime has occurred
- Determines if person should be taken into protective custody under 43A O.S.- The Mental Health Law
- Approximately 190 officers trained

CITinternational.org



Police Co-Response

- Patrol Officer Responds with a Mental Health provider
- Determines public safety threat
- Determines if a crime has occurred
- Determines if person should be taken into protective custody under 43A- O.S.- The Mental Health Law

Training and Knowledge of Resources Increase



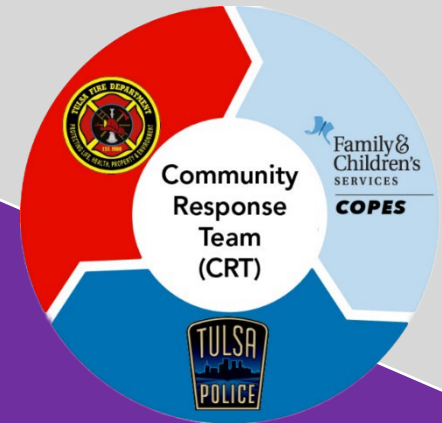
COPES in 911

- F&CS COPES embedded in the 911 center 5 days a week
- Receives non-violent mental health calls
- Stabilize in place over the phone or send a COPES team for an in-person response



iPAD Pilot

- Patrol Officers on evening and overnight shifts voluntarily participate
- iPAD connects to COPES or Counseling Recovery Services (CRS)
- Officer determines public safety threat for in-home assessment
- Determines if a crime has occurred
- Determines if person should be taken into protective custody under 43A- O.S.- The Mental Health Law



CRT

- TPD, TFD, & F&CS COPES co-respond in same vehicle
- CRT monitors 911 calls
- Patrol Officer determines public safety threat
- Determines if a crime has occurred
- Determines if person should be taken into protective custody under 43A- O.S.- The Mental Health Law



Connect & Protect

- F&CS COPES embedded in each patrol division during evening shift 5 days a week
- LMPH co-responds with patrol officers to 911 calls
- Officer determines public safety threat for a community-based assessment
- LMPH provides community-based intervention, assessment and navigation

COMING
SOON
2023



F&CS in COT Jail

- F&CS embedded in the COT jail for a set number of hours per week
- The clinician provides jail-based assessment, linkage and navigation



What Typically Happens?



Stablized in
place



Hospital



The Tulsa
Sobering Center



Jail

No Crime

- **Determines public safety threat**
- **Determines if person should be taken into protective custody under 43A O.S.- The Mental Health Law**
- **Mental Health resources**

Pre-booking Diversion

- **A crime has occurred but instead of being arrested the person is diverted to a mental health facility, the TSC, or stabilized in place with follow up**
- **Persons can still be cited or arrested later if charges are filed**
- **The crime is a non-violent low level offense**
- **Officers do not determine legal competency**

Post-booking Diversion

- **A crime has occurred and the person was arrested**
- **The offender is not charged but a civil process for MH treatment is filed or**
- **The offender enters the COT special services docket or the Tulsa County Alternative Court program**
- **The COT special services docket partners with the MHAOK for supportive services**
- **These crimes typically involve felony offenses, violent misdemeanors, and misdemeanors with victims**



CITY OF
Tulsa
A New Kind of Energy.

MENTAL HEALTH AND SPECIAL SERVICE RESOURCES

Mental illness has turned into a global health challenge with cities across the nation looking to find ways to help address mental health needs in their communities.

Along with trusted outside agencies and nonprofits across the city, the City of Tulsa is taking a proactive approach by embedding community initiatives within existing City departments and services to help Tulsans in mental health crises.



**10 PROGRAMS CONNECTING
CITIZENS TO SERVICES**



**IF YOU COME ACROSS A
PERSON EXPERIENCING:**

- + A non-life-threatening mental health crisis, **call 988**
- + A life-threatening mental health crisis, **call 911**

CITY OF TULSA PROGRAMS:

- + **911 Community Outreach Psychiatric Emergency Services (COPES)** — A COPES clinician who is embedded at the 911 dispatch center to help triage non-violent calls to a trained clinician who can get them the help they need.
- + **Community Assistance Referral and Education Services (CARES)** — A program that connects Tulsans with supportive services to address their medical, physical, and mental health needs while reducing their dependence on calling 911.
- + **Connect and Protect Grant** — A grant that provides co-response services, embedding a mental health clinician at a Tulsa Police Department patrol division from 1:45 p.m. – 12 a.m. on weekdays.
- + **Community Response Team (CRT)** — A first responder rapid response team that works together to de-escalate individuals in a mental health crisis.
- + **Project Blue Streets** — A medical clearance protocol for emergency personnel to identify appropriate treatment for those struggling with mental health issues.
- + **Sobering Center** — A jail diversion program designed to offer an alternative for adult men and women detained for public intoxication.
- + **Special Services Docket** — A jail diversion program offered at municipal court for individuals who have committed low-level offenses to be paired with a case manager.
- + **Tulsa Fire Co-Response Program** — A program that serves as a blend of CRT (but without a police officer) and CARES models where a Tulsa Fire Department paramedic and a COPES clinician respond to mental health-related calls on weekdays, where they provide a medical evaluation, a clinical assessment and a Home Fire Safety assessment if needed.
- + **Tulsa Police iPad Pilot Program** — A program where 30 Tulsa Police officers from evening and overnight shifts have an iPad that directly connects individuals to a COPES clinician or to Counseling and Recovery Services (CRS), and when appropriate, the clinician can do a telehealth assessment or help navigate care.
- + **Tulsa Police Mental Health Unit** — A six-person unit that provides support and training to police patrol operations and serves as community liaisons to facilitate a professional, humane and safe response to citizens in a mental health crisis or experiencing chronic behavioral health issues and to those experiencing homelessness.

TULSA SOBERING CENTER

Jan 2022

Through

Dec 2022

No Filters Applied

Detox	Count	%
Admitted	58	7.7%
Screened	104	13.7%

Substance	Count	%
Alcohol	571	75.3%
Meth	126	16.6%
Heroin	2	0.3%
Cocaine	1	0.1%
Inhalants	1	0.1%
Opioids	16	2.1%
Benzos	5	0.7%
THC	22	2.9%
Unknown	12	1.6%

Veteran	Count	%
Yes	78	10.3%
No	680	89.7%

Homeless	Count	%
Yes	403	53.2%
No	355	46.8%

Race	Count	%
CAU	452	59.6%
AA	132	17.4%
NA	79	10.4%
Hisp	88	11.6%
Asian	3	0.4%
Other	4	0.5%

Age	Count	%
18-27	141	18.6%
28-37	201	26.5%
38-47	190	25.1%
48-57	155	20.4%
58-67	67	8.8%
68-77	3	0.4%
78-87	1	0.1%

Division	Count	%
Glcrease	185	24.4%
Mingo	238	31.4%
Riverside	327	43.1%
Other	4	0.5%

Disposition	Count	%
Ride	160	21.1%
Taxi	504	66.5%
EMSA	15	2.0%
TPD	17	2.2%
Other	4	0.5%

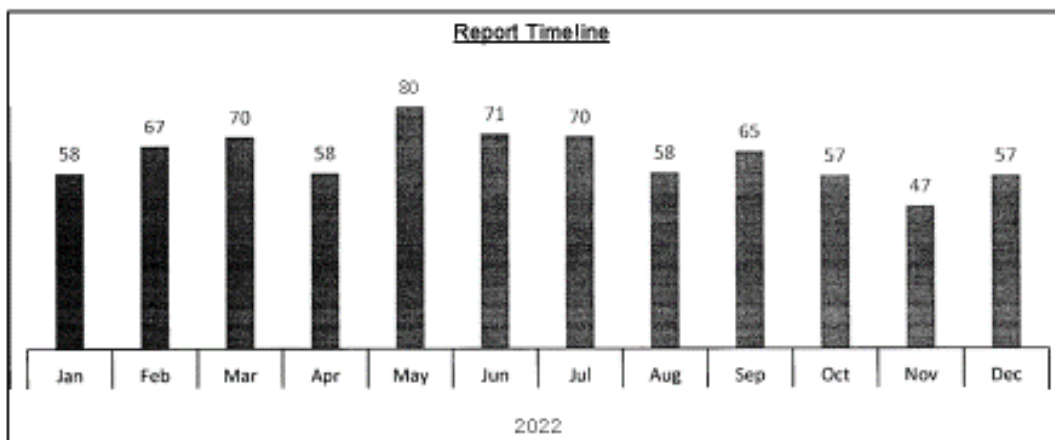
Weekday	Count	%
Sun	132	17.4%
Mon	106	14.0%
Tue	99	13.1%
Wed	76	10.0%
Thu	99	13.1%
Fri	110	14.5%
Sat	136	17.9%

Visits	Count	%
1st	533	70.3%
2nd	82	10.6%
3-4	60	7.9%
5-9	55	7.3%
10+	28	3.7%

Gender	Count	%
Male	590	77.8%
Female	168	22.2%

758

100%

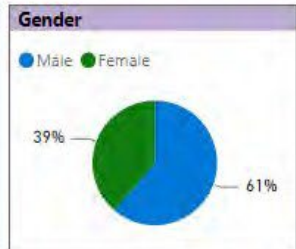
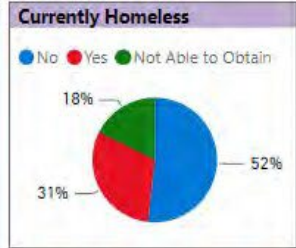


CRT Monthly Report

Dec 2022

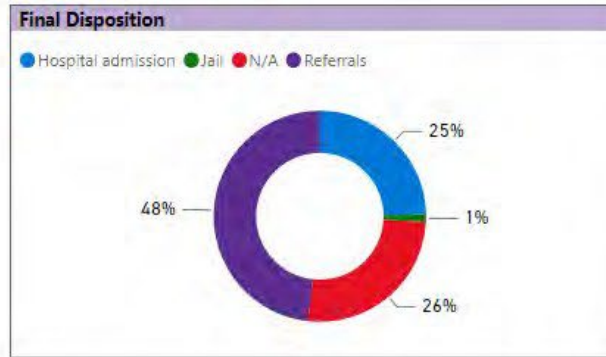
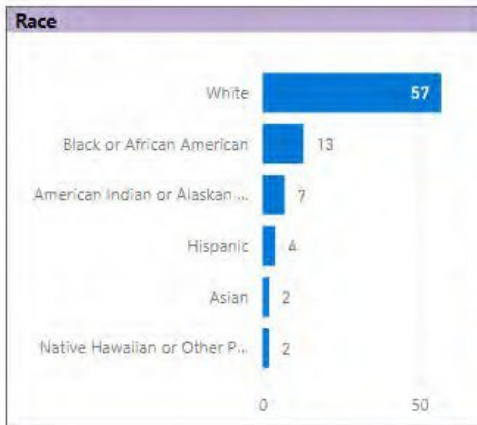
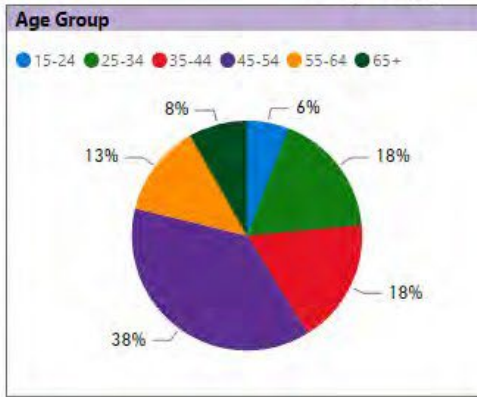
Events
85

Clients
83



TOP 10 Zip code (Residence)

Zip Code	Count
74127	20
74104	5
74136	5
74107	4
74105	3
74112	3
74126	3
74103	2
74133	2
74135	2
74137	2
74145	2
Total	53



Referred to Hospital

Hospital	Count	%
CCC	16	76%
St. Francis Main	3	14%
Hillcrest Main	1	5%
St. John Main	1	5%
Total	21	100%

*N/A Disposition is due to unable to locate client or unable to obtain information

Primary Reason for Call

Reason	%
Suicidal	40%
Other/Referral	29%
Psychosis	21%
Substance Abuse	4%
Violence	4%
Depression/Anxiety	2%
Total	100%

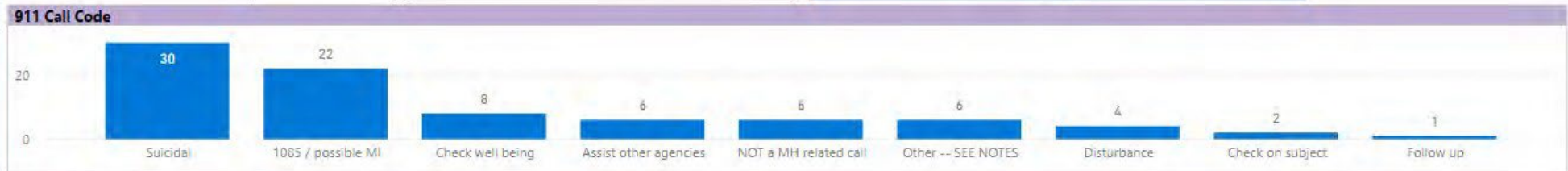
Secondary Reason for Call

Reason	%
Other/Referral	33%
Psychosis	24%
Depression/Anxiety	20%
Suicidal	9%
Substance Abuse	7%
Violence	7%
Total	100%

Emergency Unit Released

Unit	Count
Police Unit	110
Fire Unit	13
EMSA	27

Received Navigation Services
94%



Below are the TPD iPad usages for the month of December 2022.

Caller	Call Time	End Time	Call Duration	Answered By	Huntgroup	Call Status
SB7 Tulsa PD 062	12/25/2022 15:19	12/25/2022 15:35	0:16:12	Alice B	F&CS Crisis Hotline	Completed
SB7 Tulsa PD 069	12/25/2022 22:52	12/25/2022 23:18	0:26:16	Lindsey H	F&CS Crisis Hotline	Completed
SB7 Tulsa PD 001	12/29/2022 11:12	12/29/2022 11:22	0:10:11	Lisa T	F&CS Crisis Hotline	Completed



Snapshot: Day Shift Mingo Valley Division, April 2022

MVD Shift Two April 2022

Calls for Service Involving Homeless and Mentally Ill (10-85)

	Total Calls	Total Call Time	Homeless Calls	Homeless Call Time	10-85 Calls	10-85 Call Time	% of Homeless/10-85	% of Time Spent on Homeless/10-85 Calls
Division-wide Total	3057	2047:19	487	267:27	411	257:52	29.4%	25.7%

David Squad	Total Calls	Total Call Time	Homeless Calls	Homeless Call Time	10-85 Calls	10-85 Call Time	% of Calls	% of Time Spent
Squad Total	1075	717:28	252	134:03	155	86:00	37.9%	30.7%

Edward Squad	Total Calls	Total Call Time	Homeless Calls	Homeless Call Time	10-85 Calls	10-85 Call Time	% of Calls	% of Time Spent
Squad Total	1110	694:32	148	86:37	145	85:56	26.4%	24.8%

Frank Name	Total Calls	Total Call Time	Homeless Calls	Homeless Call Time	10-85 Calls	10-85 Call Time	% of Calls	% of Time Spent
Squad Total	872	635:19	87	46:47	111	85:56	22.7%	20.9%

Notes & Disclaimers

- The total call time cannot be calculated on calls with no "cleared" time
- The call times for CFS involving both homeless and 10-85 were divided in half between the two call types

Outreach and Camps



Camp clean ups by COT and TPD Bike & River Patrol Unit

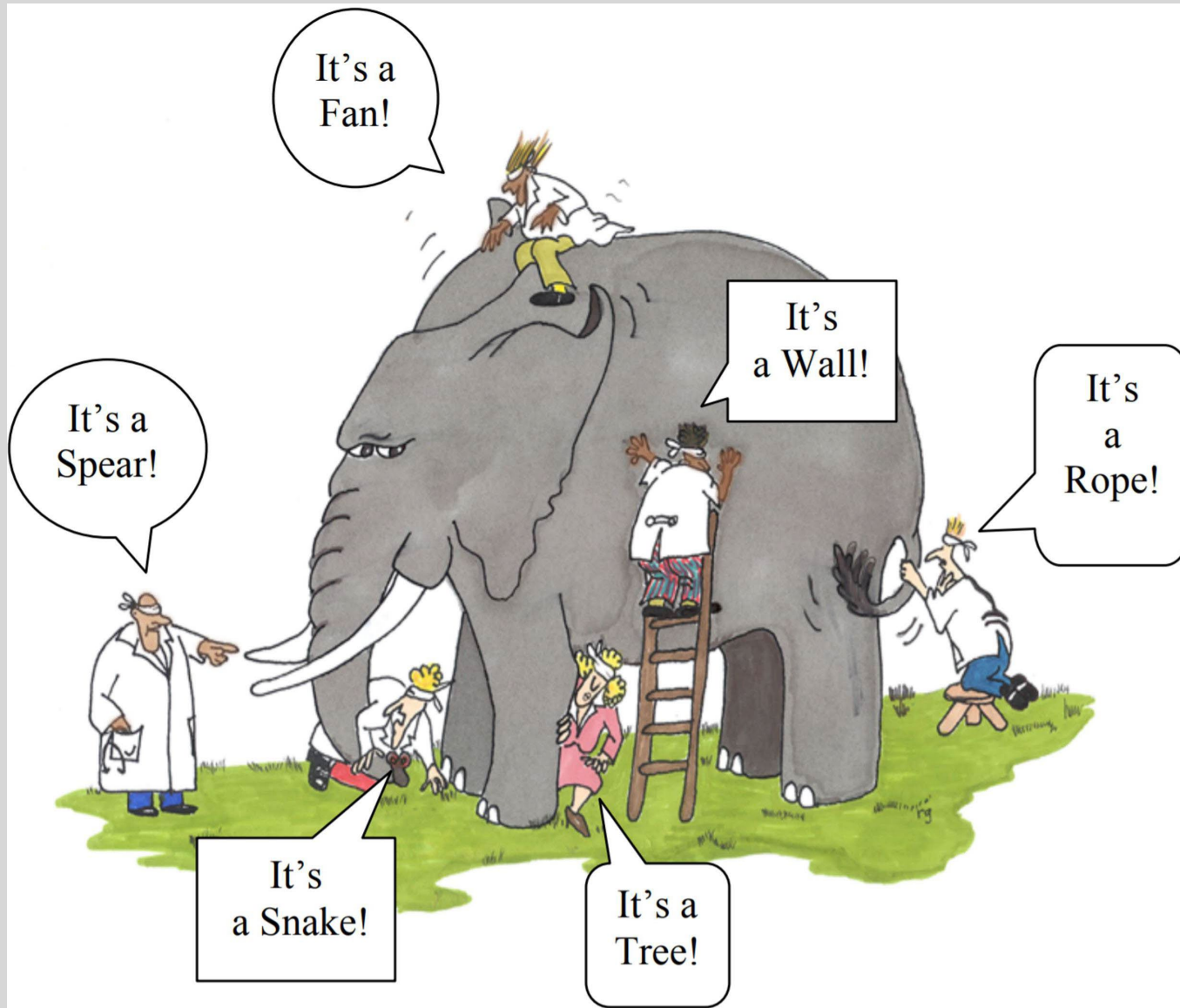
- 200 camps since October 2021
- 2.5 tons of trash per clean up
- Over \$100,000 spent per year in fees and personnel
- Public health and safety risk
- Biohazards, needles, human waste
- Stolen property

Coordinated Outreach

- TPD is a member of AWH4T
- Monthly meetings with Housing Solutions to discuss areas for outreach
- Monthly outreach with TPD B&RP and F&CS outreach team to targeted areas along the river



Let's talk about the elephant



Operation Direct and Connect Comparison

Operation Numbers		
	2018	2019
Locations		
Complaints TPD Received Through 311	NA	211
Locations Officers Covered	NA	282
Individuals		
Individuals Interviewed	188	177
Same Individuals Interviewed over Both Operations	11	
Days of Operation	9	8
Self-Reported Mental Health	85%	64%
Self-Reported Substance Use	67%	78%
Housing		
First Became Homeless in Tulsa	64%	45%
Came to Tulsa Homeless	38%	55%
Chronic on BNL	11%	8%
Legal		
Opportunity to Clear Municipal Warrants -Special Docket	51	N/A
Individuals with Open Misdemeanor Charges/Warrants (not arrested)	63	35
Individuals with Open Misdemeanor Charges/Warrants (arrested)	0	33
Individuals with Open Felony Warrants (arrested)	5	21
Registered Sex Offenders	2	5
Misdemeanor Warrants Served	0	34
Citations Delivered	0	57
Services		
Came to Tulsa to Receive Services	8	11
Transported for Services to F&CS or Sobering Center	33	0
Rapid Response Calls Made by TPD	0	7
Follow-Up Outreach Attempts	188	40
Connected Outreaches	47%	10%
Items Recovered		
Shopping Carts	0	61
Trash Cans	0	44

¹ 2018- Date for Special Services Docket; 2019- Discretionary Non-Arrest

² Outreach from 10/9/19-11/5/19

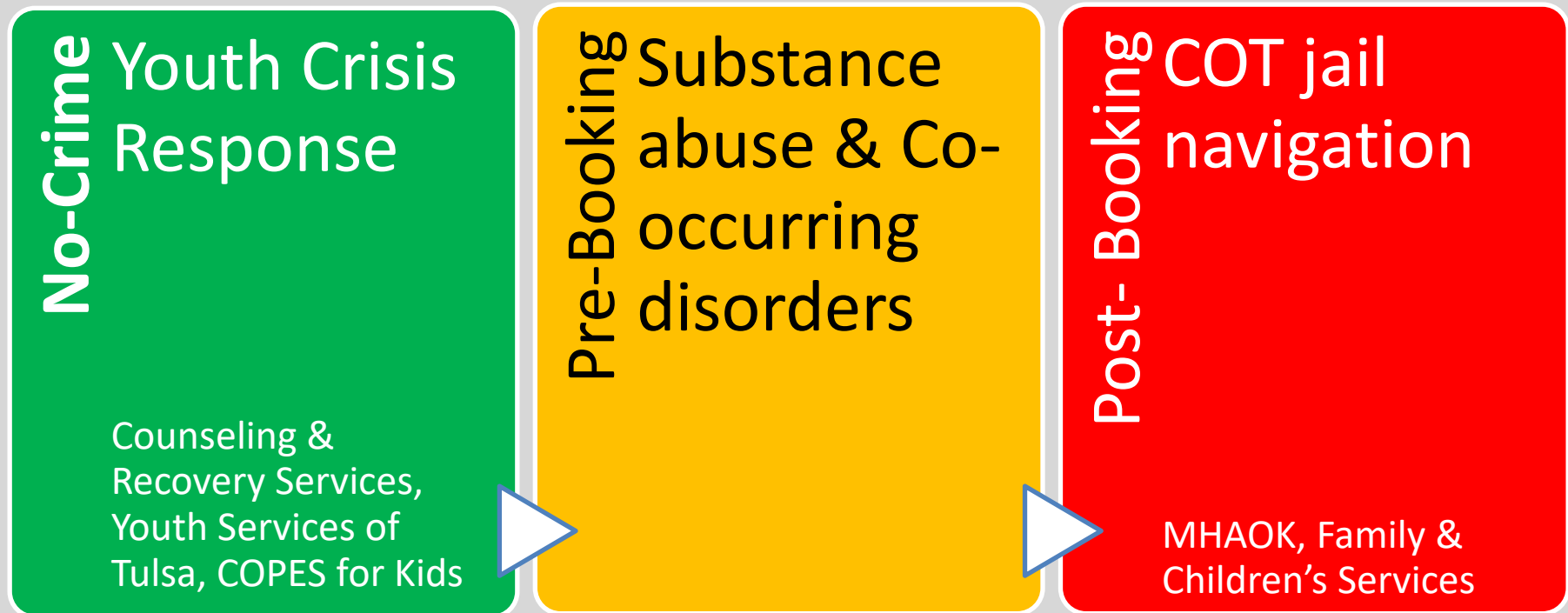
Demographics		
	2018	2019
Age		
Median Age	44	43
Race		
Caucasian	68%	71%
Native American	18%	10%
African American	13%	16%
Hispanic/Latino	1%	3%
Asian	1%	1%
Gender		
Female	23%	27%
Male	77%	75%
Transgender	0%	0%
Veteran Status		
Veterans	16%	5%

Department of Corrections		
	2018	2019
Crime Convictions		
DOC History	NA	112
Violent Crimes	NA	73
Possession	NA	5

Who are we talking about?

Criminals who are mentally ill and/or homeless	Vs	People who are mentally ill and/or homeless who commit crimes
Public Safety Response		Public Health Response
Treatment in Custody		Pre-Booking Diversion
Re-Entry Support		Post-Booking Diversion
In all cases, victims of crime are a priority		

TPD Diversion Priorities



Refer to Healthy Minds presentation for current gaps, needs, and partners

Pre-Booking Diversion

What can we do different?

2022 Oklahoma Statutes

Title 43A. Mental Health

§43A-3-429. Emergency service patrols.

Universal Citation: [43A OK Stat § 3-429 \(2022\)](#)

- A. Counties and municipalities may establish emergency service patrols. A patrol consists of persons trained to give assistance in public places to persons whom the patrol has reasonable grounds to believe are intoxicated. Members of an emergency service patrol shall be capable of providing first aid in emergency situations and may transport intoxicated persons to their homes and to and from approved treatment facilities and alternative facilities.
- B. Standards for the establishment, training and conduct of emergency service patrols shall be adopted by the county or municipality and approved by the alcohol services and drug abuse planning body for that region. These standards shall comply with the standards of the regional emergency medical services plan.

ODMHSAS
guidance

Public Intox
ordinance
change

Partners

COT working
group

Grants

TPD Continuum of Crisis Response

Captain Shellie Seibert, Mental Health Coordinator, TPD; NAMI Tulsa Board

