



VICTORIA POLICE DEPARTMENT

Memorandum

TO: Victoria & Esquimalt Police Board

FROM: Chief Cst. Del Manak

DATE: October 26, 2017

SUBJECT: Update: ACT Pilot Program

Background

In the fall of 2016, the Victoria City Council and the Township of Esquimalt Council agreed to a request from the Victoria Police Department (VicPD) to fund a pilot program for two additional Assertive Community Treatment (ACT) team officers for one year with the possibility of extending it to two years if the success and utility of the program could be measured and demonstrated. The increase in funding enabled the police department to increase the number of ACT officers dedicated to the program from one to three. In our view, this expansion has already had an immediate positive effect on the teams, the community of service providers and the clients requiring care.

Implementation of New ACT Officers

The addition of the two new ACT officers occurred in phases. The first officer was added in July 2016 as part of a six month trial period prior to the formal approval of the additional officers. This position remained in place following the approval for funding in early 2017. The second officer was added to the team at the end of April 2017. In total, the police officer contingent has only been at full strength for less than six months.

VicPD has worked very closely with our Island Health partners from the onset to design and maximize the most efficient deployment model for three officers spread across four teams, while at the same time providing support to the other three outreach mental health teams; STEP, 713 Outreach and the SAMI Team. We are now able to attend case conferences at Seven Oaks where in the past we have not had the resources to do so. This is important considering a very high percentage of Seven Oaks clients reside in both Victoria and Esquimalt.

As the model has evolved, we have identified that expanding police officer support of the ACT teams six or even seven days per week could be advantageous. We are currently working towards this goal which must take into consideration Collective Agreement and staffing considerations. This move must be coordinated with the ACT teams who to date have been running at minimum capacity through weekends. Starting in September, we extended the ACT officer hours to 8:00pm. They now cover from 6:30am to 8:00pm five days a week. We are continuing to assess the most practical shifting model to again maximize efficiencies to ensure the greatest amount of support to the ACT teams and ACT clients.

The funding request for the ACT pilot was \$240,000 for 2017. We are projecting that the actual cost as of December 31, 2017 will be approximately \$212,000. The remaining \$28,000 was not spent as the pilot was not fully approved until February 2017 and the new ACT officer was not in position until late April.

Conditions and Requests from ACT Officer Pilot Project Approval

At the time that Council approved the request to fund the pilot program for a one to two year period, a motion was adopted that VicPD would undertake an effort to work with a neutral third party to develop metrics to assist in evaluating the effectiveness of having the two additional officers. At that time it was recommended that VicPD work with the Coalition to End Homelessness' Social Inclusion Advisory Committee (SIAC) and the Victoria Downtown Service Providers Advisory Committee (DSP) to develop those metrics. The impact of the new ACT officers was to be assessed in three broad areas subject to any necessary changes:

- Impact on public/community
- Impact on health and mental health systems
- Impact on the individual served

Program Assessment Efforts

Following the approval of the pilot project, VicPD contacted both SIAC and the DSP to open this dialogue for the creation of an assessment process. Unfortunately, both the SIAC and DSP respectfully declined any interest in developing metrics to measure the effectiveness of ACT. This left VicPD and Island Health with the need to identify another means to create an evaluation framework. Our preference was to identify an independent third party to work with us, and preferably conduct the evaluation independent of VicPD and Island Health. We immediately began work on this project.

VicPD, in collaboration with Island Health, approached Dr. Costigan at the University of Victoria (UVic) Faculty of Psychology and asked if UVic would be willing to undertake a study on police integration with ACT with an eye to developing neutral third party metrics for measuring the utility of such an approach. UVic responded very positively and are currently undertaking an initial qualitative study with a goal of informing a larger study which would commence later in the year. Dr. Costigan and her team began work on developing the study which required, among other tasks, Human Research Ethics Board approval. The first of the proposed two-part study is currently underway. We are anticipating some preliminary information prior to final budget approvals for 2018 and it is our hope that the full UVic study will be complete prior to budget decisions for 2019.

The UVic study is, in our view, the best possible way to objectively evaluate police involvement in ACT. However, this approach means that additional time is needed to design, complete and report out on the results of the study. A summary of the UVic study prepared by Dr. Costigan is attached to this report for information and to provide more detail of the study underway. I encourage a full read of this summary.

Overall Summary of Outcomes

While we await the results of the UVic Study, VicPD undertook several steps to be able to report qualitative and quantitative data to the extent possible in the interim period. In doing so, we identified early that we were lacking some important data metrics that would be useful not only for the broader evaluation of the program, but also day-to-day program operation. We therefore enhanced our own ability to gather meaningful statistics to allow us to create better informed practices. This includes introducing new metrics for all frontline staff in capturing those calls for service that have a mental health component to them. Additionally, we have put processes in place to better capture data associated with ACT officer contacts with ACT clients. We have also entered into a partnership with the Vancouver Police to utilize their innovative Early Warning System software. This software allows us a more robust process for analyzing our data to facilitate the early identification of individuals who may be approaching personal crisis. This information can then be shared through our already existing information sharing agreements with Island Health which we anticipate will result in better overall outcomes.

While not as robust as the UVic study currently underway, we present the following information which we hope will provide some insight into the progress of the program and some of the successes noted thus far. While not all positive outcomes can be directly attributed to the addition of the additional ACT officers, these additions represent the only major change for the ACT program during this time period which indicates a reasonable correlation between the new officers and the positive changes noted.

Impact on public/community

- The expanded capacity of the ACT teams has raised the level of confidence on the part of supportive housing providers who are now more likely to accept high needs tenants if they are supported by the ACT teams and police. In one such case, the housing provider indicated that unless the client was taken onto one of the ACT teams they would have to evict the person from housing as their behaviour was such that it was disrupting and endangering the other residents in the facility. The ACT teams agreed to accept this client only if police could be a part of that client's care plan.
- Of the 10 clients accepted onto the teams as a result of direct referrals from the VicPD officers, four of those persons consistently represented the top five call generators for police. Their involvement in the ACT program has reduced these calls.
- Overall there has been an 11% decrease in calls for service related to ACT clients. Data surrounding individual involvement in ACT continues to show that involvement in the program reduces calls for service related to some call types. In others there has been a slight increase. It is not uncommon for calls for service to increase during initial participation in the program while individuals are under closer supervision and are being stabilized. The significant increase in new clients has had an impact in this regard. We expect to see a corresponding decrease as the pace of new client involvement slows.
- ACT officers are more regularly interacting with frontline officers and becoming involved in investigative files related to ACT clients. This process ensures that criminal behavior of clients can, where appropriate and necessary, be addressed through the Victoria Integrated Court which is better situated to address the individual needs of ACT clients compared with the normal court process. The feedback thus far from all involved as been very good.

Impact on health and mental health systems

- The ACT teams have been able to take on the additional 10 clients stemming from police referrals, many of whom have very high needs or present as potentially violent and unpredictable. This was not the case prior to the additional police resources being available through the pilot.
- The ACT teams have come to rely on accessible police resources and as such have actually started to develop care plans that include the participation of police. There are 34 clients whose care plans require police involvement. This is the first time that police have been incorporated into formal care plans as prior to this the resources were simply not available. Prior to the increased police resources this did not occur.
- There is an average of 19 contacts by ACT officers with ACT clients per week. This kind of detailed data collection started commensurate with the start of the third ACT officer meaning that direct comparisons are difficult. However, it is estimated that the contacts are distributed equally among the three ACT officers. These contacts are time consuming and represent only a part of the ACT officer's responsibilities. Yet it is these pro-active contacts that can reduce call for service to police later.
- Anecdotal feedback from the ACT team managers and physicians suggests that the addition of the new officers has greatly enhanced their ability to accept higher needs clients and improved their ability to provide care to some of the most challenged individuals in our communities.
- As the preliminary data suggests, both hospital visits and acute care usage for ACT clients has been notably reduced over a one year period. The reductions are 20% and 49% over one year respectively. However, given the short (six month) period in which the ACT positions have been fully staffed, we are reluctant to attribute these reductions directly to the ACT officers. We would prefer to wait for this to be explored further through the UVic study although the reduction in these numbers is seen as a very positive sign.
- New data collection methods have allowed us to determine that approximately 19% of police calls for service that resulted in the creation of a police General Occurrence report appeared to have a mental health component to the call. This information is valuable to police and health officials in evaluating the extent to which mental health is impacting communities, at least from the perspective of calls for service to the police. While not solely ACT related, this data is proving to be beneficial to ongoing discussions around community mental health services.

Impact on the individuals served

- With the addition of the second ACT officer, there was a notable increase in the number of police referrals to ACT meaning that more individuals are likely to be brought into the program to receive services. From July 2016 to January 2017, there were 19 referrals in total, compared to six for all of 2015. This increase was mostly the result of only one additional ACT officer at that time. With the addition of the third officer, referrals continue to rise and as of July 2017, ACT and 713 Outreach have received a total of 30 referrals from police alone. Of the 30 referrals from police, 10 people have been accepted onto the teams which are now at capacity.
- 425 ACT clients being served by for teams representing an increase from 344 the previous year. 163 ACT clients currently live in the City of Victoria and 38 live in the Township of Esquimalt. 25 persons are currently of no fixed address (NFA) but float between jurisdictions spending much of their time within VicPD's jurisdiction. These numbers are constantly changing.

Conclusion

VicPD and Island Health are eagerly anticipating the results of the UVic study into the involvement of ACT officers in the program. In the meantime, the available data appears to suggest that the ACT officers are having positive impacts for community, the health care system and the clients themselves even though the program has only had all three officers in place for less than six months. We hope that the Councils will remain supportive of this very important program as the study continues. We continue to collect information that will support this program's value and look forward to recommendations from the UVic study as to what other data we should consider collecting in the future.

Summary provided by Dr. Costigan of the UVIC Department of Psychology:

Initial investigation of Assertive Community Treatment (ACT) teams in Victoria

Investigators:

Catherine Costigan, PhD, Erica Woodin, PhD, and Kari Duerksen, BSc of the University of Victoria and John Braun of Island Health

Summary:

We are conducting a preliminary examination of the *Assertive Community Treatment* (ACT) teams in Greater Victoria, with a focus on the role of police officers on these teams. No research to date has specifically addressed the role of police officers on ACT teams. Therefore, this study will provide an initial look at the perceived benefits and drawbacks of having officers integrated onto ACT teams, as well as recommendations for improvement.

We are conducting confidential interviews with ACT team clients and ACT team members (e.g., case workers, physicians, nurses, probation officers, psychiatrists, officers themselves). We are nearing completion of our interviews with ACT team clients, and will then start to interview ACT team members. The interviews will be transcribed and coded for emergent themes and the results will be shared with the ACT teams and Victoria Police Department.

With the exception of John Braun, the research team is not affiliated with the ACT program or the Victoria Police Department. Mr. Braun's role is to provide contact information for ACT team members to the other investigators. UVic researchers are conducting all of the interviews and analyses. Because we are not affiliated with ACT teams or the police, ACT clients and team members are free to share their honest perspectives. Interviews with ACT clients have taken place in private spaces within neutral locations in the community (e.g., the Downtown Community Centre, Our Place), where we hope clients have felt comfortable. We have also encouraged honest responding by letting ACT clients know that ACT team members will not know which clients participated – their contributions are anonymous. The perspectives of ACT team members are also confidential. No participant will be identified by name in our final reports. We will present a summary of what we have learned across all of the interviews.

In our report, we will be able to give an overall impression of perceptions regarding the value of police officers on ACT teams and the challenges related to their involvement. In addition, we will provide details about specific ways in which police officers are having positive and/or negative impacts on the lives of ACT clients and the functioning of ACT teams. Finally, we will share any suggestions for how police officer involvement could be improved or enhanced.

Timeline:

We hope to have all of the interviews completed by the end of November. We will then analyze the data and hope to have a report to share in January or February 2018. The results of this initial investigation will identify important metrics to incorporate in a subsequent larger evaluation of the impact of police officers. The design of this larger investigation will be shaped collaboratively with relevant stakeholders as we discuss the findings of the current investigation.