

Bucks County Human Services Co-responder Evaluation Report

December 2020 through June 30, 2021

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Bucks County Human Services Co-Responder Pilot Program

6-month evaluation

Executive Summary

Across the nation, co-responder programs that link the need for public safety and community well being have brought together law enforcement agencies and human service specialists to respond to community needs. The interface between policing agencies, mental/behavioral health clinicians and social service providers is implemented differently depending on community perception, needs, and resources. What they have in common are efforts to reduce the amount of time that law enforcement officers spend on responding to mental health crisis, to divert individuals with a mental or behavioral health crisis from the criminal justice system, and to connect individuals with appropriate services in the community.

In December 2020, the County of Bucks (PA) piloted one such program that integrates two social workers, identified as “Human Service Co-Responders”, with the Bensalem Township Police Department. The two co-responders will assist with cases, including but not limited to, aging, mental health and substance abuse. Under the pilot program, the Bensalem Township police will initially respond to a 911 call, and one of the co-responders will be called to the scene after the scene is deemed safe and if the officer deems it to be a social service call. From there, the officer may leave and the Human Services co-responder will help connect those in need with social services. The Human Service co-responders will also follow-up on calls for social services that are made directly to the Bensalem Police Department.

The evaluation team comprised of Patricia Griffin, Ph.D. (Assistant Professor of Criminal Justice at Holy Family University) and Michaela McGlynn, MA, LSW analyzed data from the Human Services co-responder activity log. The initial data available represents aggregate results of the co-responder team activities as well as individual level data on how the co-responder team interacted with each person served over a 6-month period. Preliminary evidence suggests positive effects of the Human Services Co-responder program in Bucks County.

Evaluation highlights include:

1. The co-responder team was more likely to connect with and serve ‘high utilizers’ (those placing 3 or more calls to 911) in need of support over time.
2. The co-responder team streamlined connection to community resources based off individuals’ needs directly and indirectly, over time.
3. A decrease in the time that Bensalem Township Police Officers spend responding to a situation that may need social services. (Note: While this analysis of six months of data for the pilot site is not enough to establish a positive or negative trend in the amount of time law enforcement officers spent on calls, their arrival on the scene and follow-up indicates the return of law enforcement and other first responders to patrol or other activities).

Evaluating the Co-Responder Pilot Program

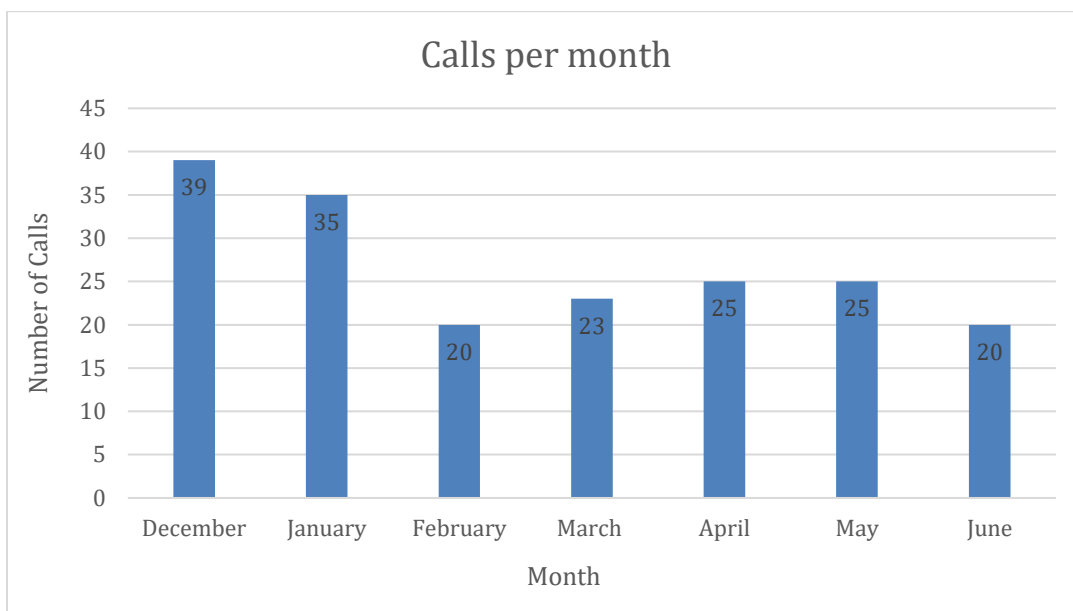
Reach: The volume of calls a co-responder team responds to and the number of people who are connected to those calls.

Guiding Question: How many residents with social service needs has the Bensalem co-responder program reached?

Key Finding1: The total number of calls received by the Bensalem Township police department during the period December 2020 through June 30, 2021 was 30,617. During this 6-month period, the co-responder team engaged with 132 persons associated with these calls. This included a total of 55 hours following initial officer involvement and approximately 130 hours of follow-up contacts.

Overall, the Bensalem co-responder team responded to 188 calls, which included 132 discrete individuals during the period December 2020 to June 30, 2021. Both the volume of calls and the number of individuals contacted by month are reported in Figure 1.

Figure 1: Volume of calls by month



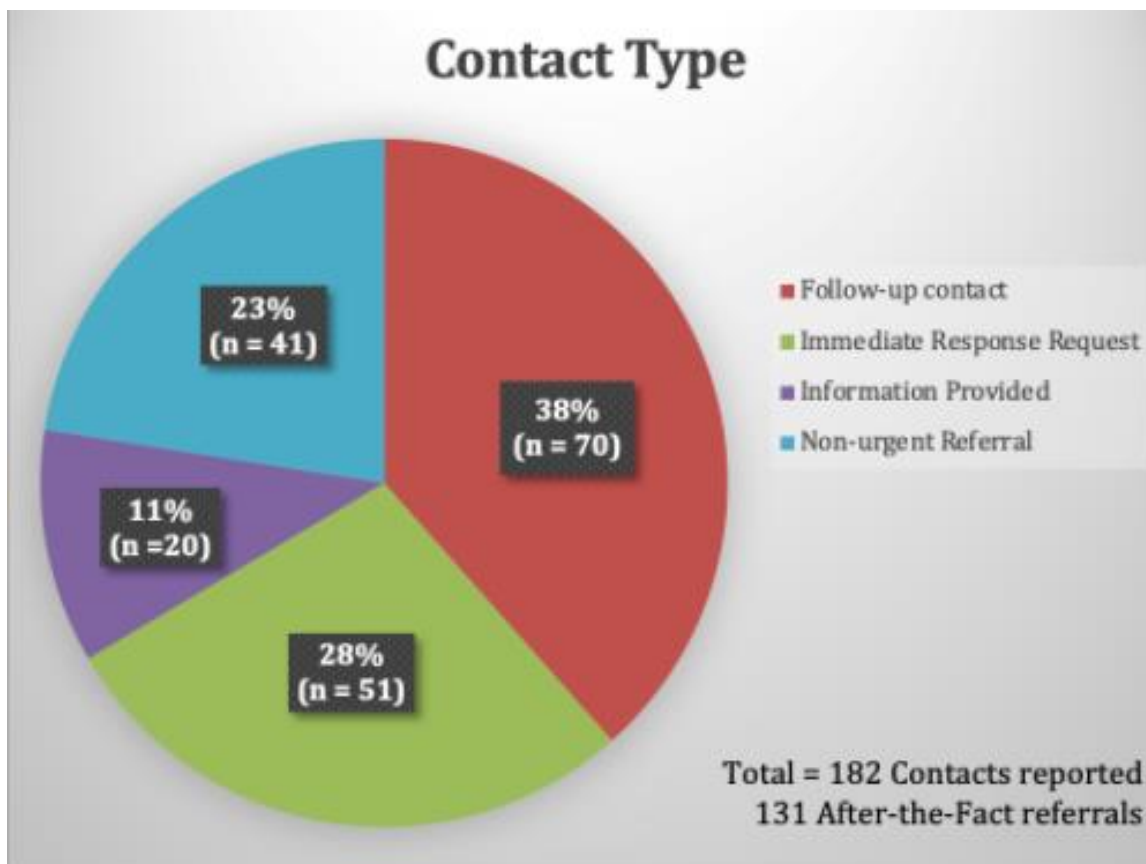
Note: The pilot program commenced with calls being entered on December 16, 2020.

Key Finding 2: After-the-fact referrals boost the reach of the co-responder program and are an important avenue to connect individuals with needed social services in the community. If these callers are left to 911 dispatch and policing response, they can be time consuming and compete with the department’s ability to respond to public safety. By freeing up officers’ time to address crime related activities, these referrals represent one of the significant contributions of the human services co-responder program.

Figure 2 describes the contact types between the co-responder and the discrete callers, including after-the-fact referrals. After-the-fact referrals include contacts between the human services co-responder and the community member following the initial hand-off from the police. Figure 2 illustrates that of the one hundred eighty-two individual contacts made by the co-responder team between December 2020 and June 30, 2021, 28% required an immediate response (n=51). Of the one hundred thirty-one after-the-fact

referrals, 38% (n=70) required a follow up contact by the co-responder team, 23% were for non-urgent referrals and 11% included providing information about social service resources in the community.

Figure 2: After-the-fact referral types



Key Finding 3: “High utilizers” make up a substantial portion of 911 calls for service to the police by individuals with a behavioral crisis or in need of social services. Assessing the pilot program’s reach among high utilizers over time is important. In this report, the label “high utilizers” has been associated with persons who placed 3 or more calls to 911¹.

In the 6-months prior to the launch of the pilot program, 20% of callers are identified as “high utilizers” whereas this drops to 2% of all callers after 6-months of the co-responder

¹ A review of the literature associated with human services co-responder programs in jurisdictions similar to Bucks County has utilized the 3 call threshold.

program. Figure 3 and Figure 4 depict the number of callers within each respective 6-month period – the six months prior to CR implementation, 26 individuals are identified as high-utilizers, having made 3 or more calls during that period. During the 6-month period that the CR program was implemented, only 2 of the callers are defined as high-utilizers.

Figure 3: Callers 6-month prior to CR implementation

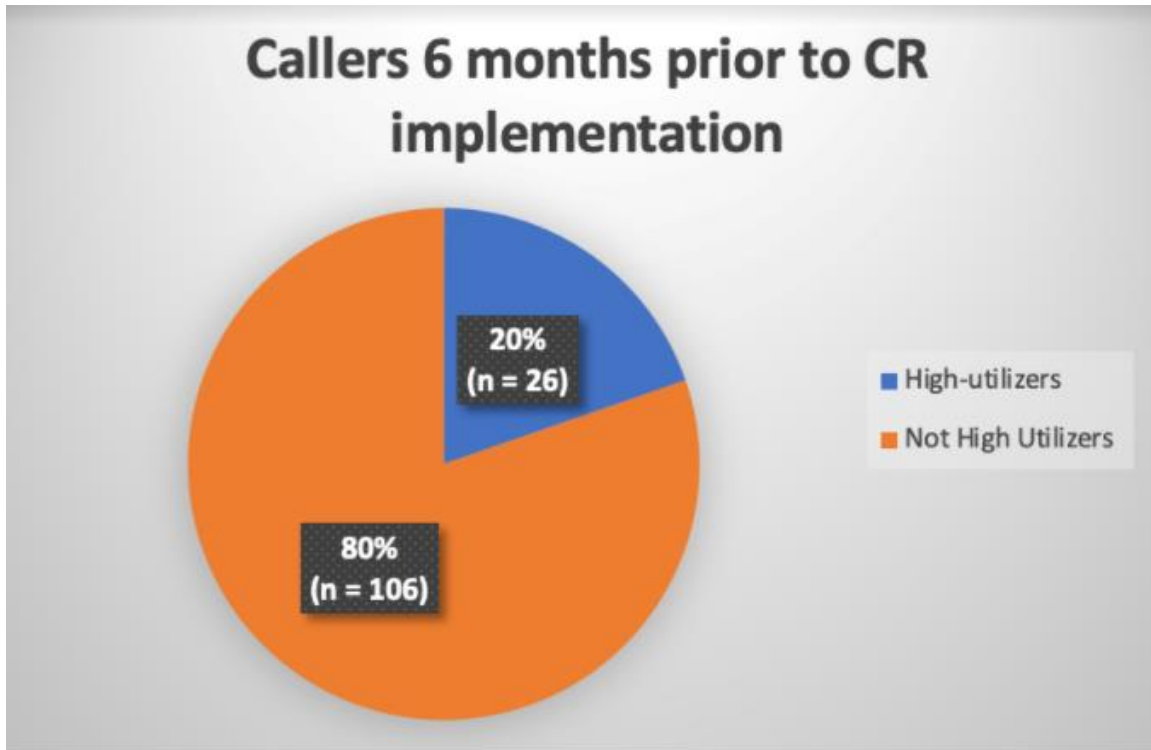
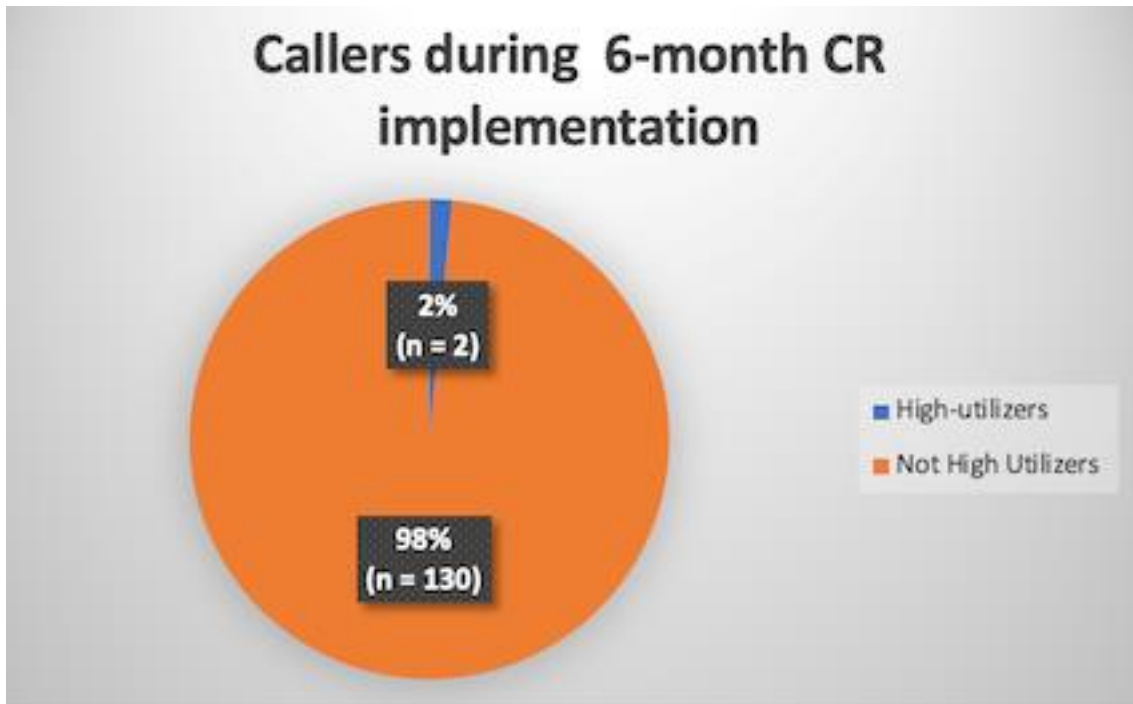


Figure 4: Callers during the 6-month CR implementation



This significant decrease in high utilizers over time could mean that high utilizer community members have been enrolled in services and are not likely to be the subject of an emergency call to police.

Effectiveness

Guiding Questions: In what ways have community members been connected to or have they accessed behavioral health and needed social services after engaging with the co-responder program? What percentage of all 911 calls routed to the Bensalem Township Police Department involves the Human Services Co-responder team? Has there been a decrease in police officer time spent responding to social service related calls?

Table 1: Demographic characteristics

Gender	
Females	64
Males	68

<u>Race</u>	
Asian	3
Black	30
White	92
Missing/ unknown	7
<u>Ethnicity</u>	
Hispanic	3
Non-Hispanic	123
Missing	6
<u>Age</u>	
0-18	21
19-40	43
41-59	26
60+	32
Missing	10

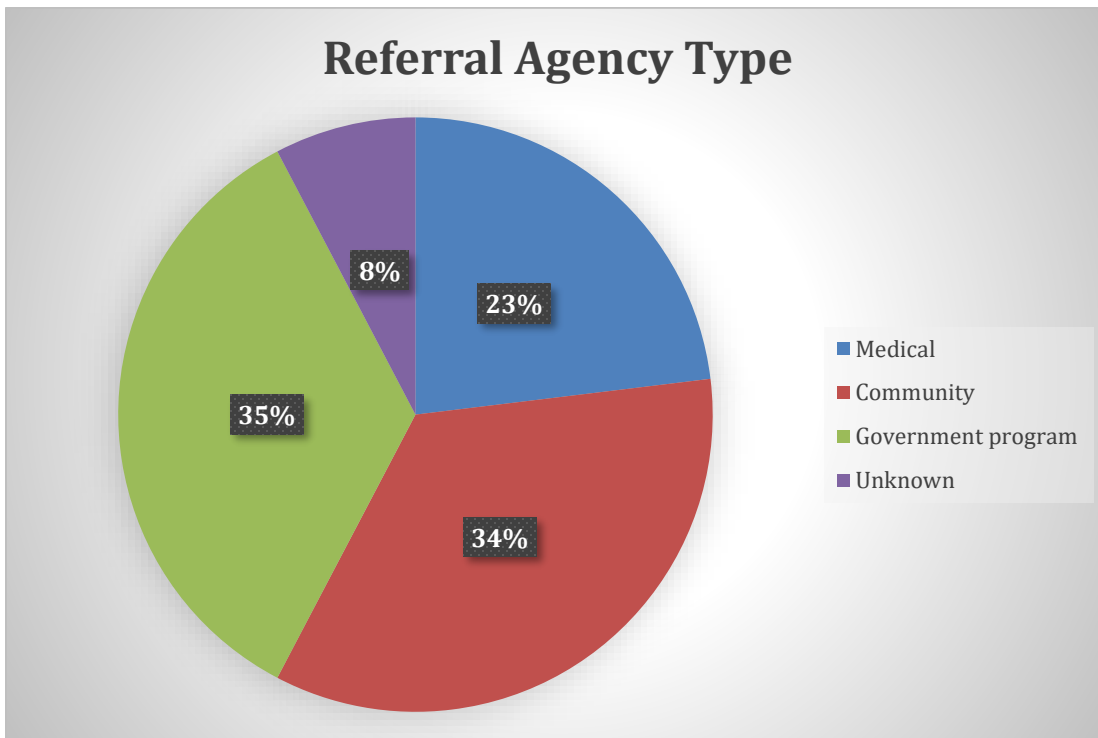
Table 1 reports the demographic characteristics of community members that the co-responders engaged with.

Key Finding 1: The co-responder team was likely to report success in diverting community members from formal actions (arrests, involuntary mental health holds, etc...). Diversions of formal actions by co-responders may result in better outcomes for individuals, especially if they are connected with behavioral health services in their communities. Data reported by the Human Services Co-responder team in Bensalem Township indicates that the majority of 911 calls for mental/behavioral health crisis ended in a voluntary placement by the individual involved (approximately 71) whereas 15 individuals (29% of referrals) were involuntarily placed on a mental health hold.

The co-responder data form reports that twenty-six different agencies were accessed or referrals made during the initial 6-month of the program. Figure 3 illustrates that

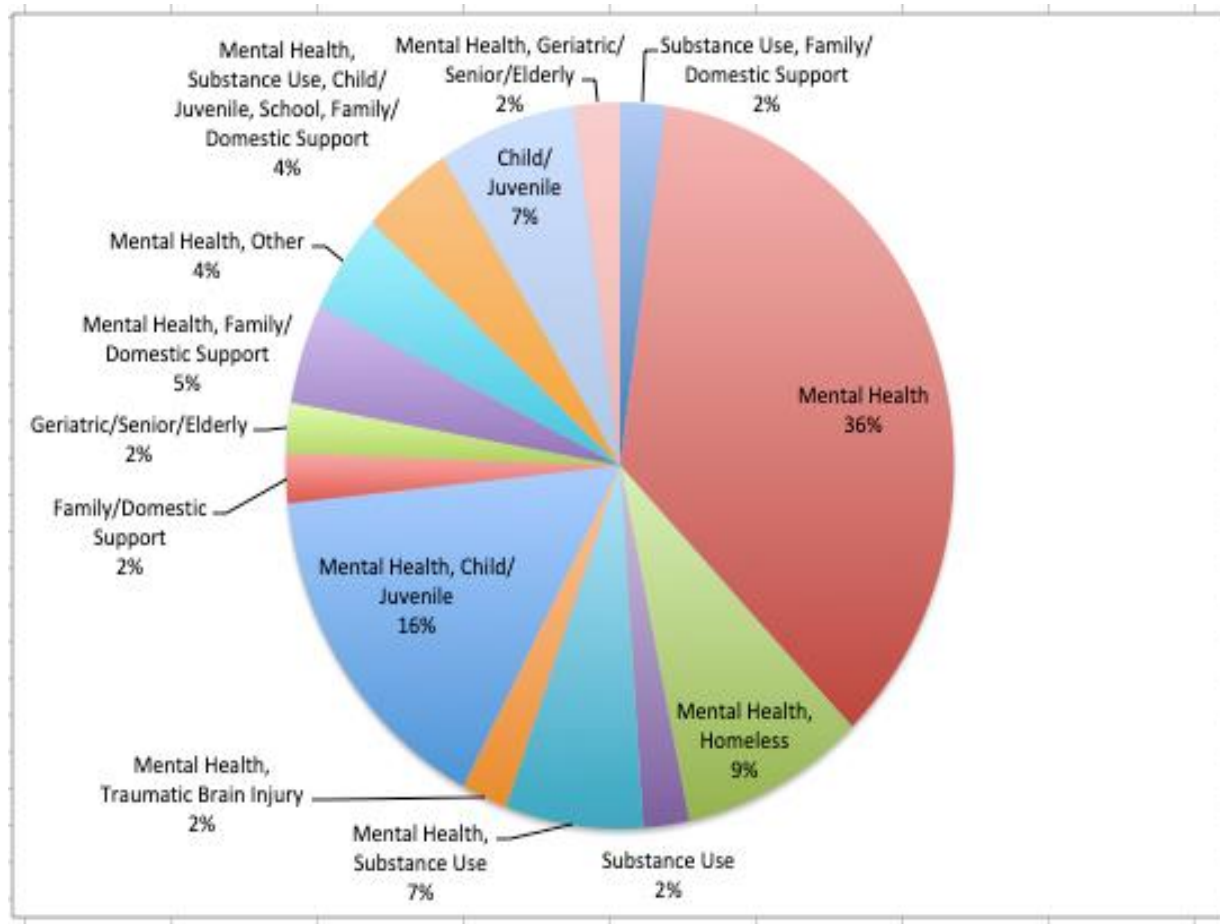
approximately 70% of the referrals were made to county governmental agencies (35%) and community-based (34%) social service agencies, while approximately 25% of the referrals were made to a medical entity (23%).

Figure 3: Types of referral agencies accessed



The Human Services Co-responder data collection tool further specifies the service needs and agencies where community members are referred. Figure 4 shows the breakdown of referral services. As indicated, the majority of referrals were for mental health followed by referrals for juveniles with a mental/behavioral health issue to Children and Youth Services. A list of the specific agencies is provided in Appendix A.

Figure 4: Referral Sources



Key Finding 3: One of the goals of a co-responder program is to reduce the amount of time that law enforcement officers spend addressing social service needs. The Human

Services Co-responder program has had a positive impact on reducing the amount of time that officers spend on non-crime calls for service. While the overall percentage of calls for mental/behavioral-type activities represents a relatively low percentage of all calls (< than 2%) for service to the police, the amount of time that police spend attending to non-crime problems is significant.

Under the Bucks County Human Services Co-responder program, the law enforcement officer is initially dispatched when a call for service is received. If the officer determines that the incident is associated with a mental/behavioral crisis, then a member of the co-responder team is notified. Data gleaned from the pilot program suggests that when a co-responder is subsequently called, in the majority of all cases (89%) the police officers are spending less than 30 minutes at the scene and in approximately 4% of the cases officers are spending 91 minutes or more at a crisis scene.

Conclusion

The County of Bucks Human Services Co-responder team model is a collaborative approach to behavioral health and social service crises that leverages police and human services professionals' expertise to reduce pressure on police and the criminal justice system, increase the diversion of people away from the criminal justice system and connect community members with needed community services.

Future evaluation will provide an opportunity to understand the effects that the co-responders have on individuals over time, including how people may use behavioral health services after engaging with co-responders. Additionally, the evaluation will examine barriers and pathways to implementation with community service providers.

Further, future evaluation will examine the barriers and pathways to implementation along with the impact on first responders' knowledge and attitudes toward people with



behavioral health conditions and whether the co-responder program has improved interaction between law enforcement and community members overall. Lastly, continued evaluation will seek to identify cost savings to the criminal justice and health care systems.

Appendix A: List of Referral Agencies

A Woman's Place	2
AAA (Aging)	6
Advocates for Homeless	1
APS	1
BCOC Street Outreach	2
Bridgeway School	1
Bucks LIFE (Peer Support)	2
CORA (Substance abuse)	1
CYS	1
Disability Rights PA	1
Dr. Luber (med mgmt)	1
Eaglesville	1
Family Services Return	2
FSA	1
Housing (BCOC)	1
Housing Link	1
Housing Link and PATH	1
Legal Aid	1
Life St. Mary	2
Mental health/ Therapy	1
NOVA	1
OP (SELF program)	1
Peer support (Bucks LIFE)	1
Philadelphia Community Center	2
PHP (Horsham)	1
PMHC Return	1
Returning to OP provider	1
SAP	1
St. Mary (LIFE)	1
Starting Point	1
Thriveworks	3

Note: The evaluation team combined exercised discretion to combine agency names where appropriate.