MENTAL HEALTH UNIT (MHU) OVERVIEW

The mission of the Madison Police Department Mental Health Unit (MPD MHU) is to provide a coordinated, professional and compassionate police response to individuals affected by mental illness and their families.

The MHU works collaboratively with partner agencies to achieve improved outcomes for individuals affected by mental illnesses or suffering a crisis by connecting them to needed services and diverting them away from the criminal justice system whenever possible. The goals of the Mental Health Unit are to improve safety for officers and all members of the community and reduce calls for police service related to mental health crises.

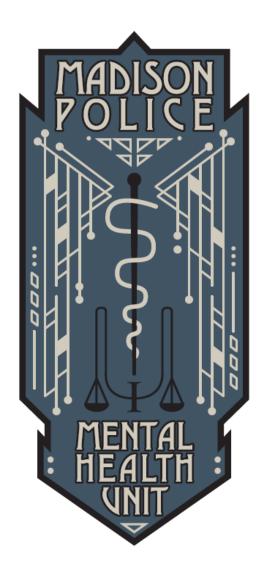
MHU's Values

Problem solving: We believe in identifying the underlying issues creating police calls and reducing them.

Collaboration: We engage with partners from across government, civil society, families and consumers to improve systems, relationships, and outcomes.

Diversion: We aim to reduce the involvement of criminal justice in mental health issues and the criminalization of mental illness.

Professional development: We seek increased knowledge and expertise within the unit and to share our knowledge and experience with the department at large.



MHU-LED TRAININGS IN 2024

The MHU Sergeant, Mental Health Officers (MHOs) and Law Enforcement Embedded Crisis Workers (LECWs) collaboratively developed and implemented two, eight hour, in-person trainings for Mental Health Liaison Officers (MHLOs) in 2024. At these trainings, we also hosted MPD's Community Outreach and Resource Education (CORE) Team, the Community Alternative Response Emergency Services (CARES) team, and three UWPD officers.

Our Spring 2024 training featured a Youth Resources focus; subtopics included: Dane County Youth Connect, Chapter 51 considerations for youths (Corporation Counsel), School-based and collaborative community safety (MMSD), an overview of Briarpatch services, and scenario-based training.

Our Fall 2024 training featured a Substance Use/Recovery focus; subtopics included: Substance Use Disorders under the DSM, Needs-based assessment (Tellurian), Community-based treatment options (Dane Co. Dept. of Human Services and Behavioral Health Resource Center), Peer specialist work (Safe Communities), Updates on the Madison Area Recovery Initiative, An introduction to aphasia (UW-Madison's Speech and Hearing Clinic), and scenario-based training.

MHU'S NATIONAL LEARNING SITE ACTIVITY IN 2024

In 2024, MPD's MHU was one of only fifteen Police-Mental Health Collaboration (PMHC) learning sites selected by the Council of State Governments Justice Center. As a learning site, our unit fields inquiries and hosts visitors from law enforcement agencies around the county who seek support to begin or advance behavioral health units of their own.

This year, our **MHU logged 30 instances of PMHC learning site-related activities**. These activities included: fielding requests for information from different law enforcement or social service agencies, presenting to internal and external groups on various topics, and holding meetings for the community to discuss our department's response to mental health crises.

This year's learning site activities included several community-based presentations that our unit did, under the "Partnering with Law Enforcement" educational series. This is the second year that we have offered 60-75 minute presentations to various community-based organizations, free of charge.

In March of 2024, our unit presented for the MPD Community Academy in what was called "behavioral health night". Attendees learned about: the MHU, the CARES team, Journey Mental Health's services generally, MARI, and our training techniques on professional communication and de-escalation.

In April of 2024, we hosted members of Waukesha County's collaborative crisis team for an in-person site visit. As part of the site visit, we covered various operational features of our MHU.

In June of 2024, our distinction as a learning site provided the opportunity to present for an "Ask the Expert: Community Response & Its Place in the Crisis Continuum" webinar. Sgt. Prado, LECW Edgren, and CARES crisis worker Kinderman spoke about the behavioral health response and collaboration between the teams.

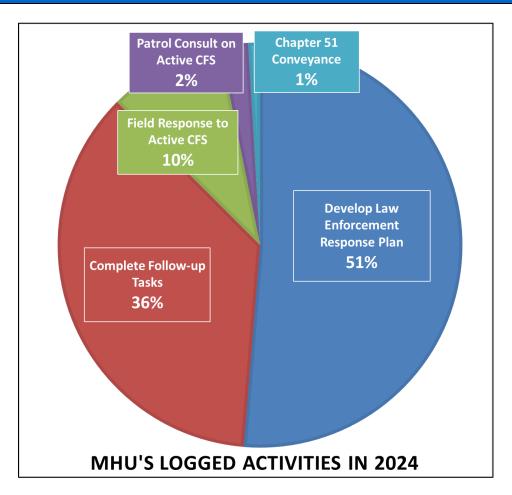
In September of 2024, our unit presented at the International Association of Chiefs of Police (IACP) Summit, hosting by MPD. We presented on our unit and on MARI, to commanders from agencies across the United States.

MHU'S WORKLOAD IN 2024

In 2024, on-duty MHOs and LECWs responded to 626 unique calls-for-service (CFS). Some of these calls were completely diverted from MPD patrol officers, while other calls were instances where MHU members supported, assisted or relieved patrol officers assigned to the call.

Additionally in 2024, MHOs and LECWs collaboratively logged 848 distinct work activities, serving 538 distinct individuals. Activities included co-responding to active patrol calls, diverting calls from patrol, completing Chapter 51 conveyances, facilitating crisis assessments, completing follow-up activities of various duration, creating or editing law enforcement response plans for community members, and other joint outreach activities. Collaborative outreach to community members often takes place at the request of concerned service providers or family members, or soon after a call that generated police contact. Outreach is done with the objectives of connecting the individual with community-based resources and discussing safety or treatment-related goals and strategies.

The chart on the next page illustrates MHU workload percentages, based on logged activities. The workload reflected in this chart is independent of the CFS data mentioned in the first paragraph of this section.



FREQUENCY RELATED TO INDIVIDUALS RECEIVING MHU SERVICES

The following statistics relate to all 2024 logged activities that our MHOs and LECWs engaged in with individuals in our community:

- Approximately 5.3% of the total activities were directed to the top five individuals receiving MHU logged activities.
- The individual who received the most MHU logged activities was 13.
- The top 50% most-frequently contacted individuals received a total of approximately 68% of all MHU activity, and the top 10% received approximately 18% of all MHU activity.
- 68.6% of individuals whose cases came to the attention of the MHU received only one activity.
- The **average individual received 1.6 logged MHU activities**. Excluding individuals who received just one contact, the average logged activities per individual was 2.8.

MPD'S CHAPTER 51 ACTIVITY IN 2024

Wisconsin statutes authorize law enforcement officers to take a person into custody to pursue an Emergency Detention (ED) when certain circumstances apply. To initiate an ED, officers must be able to articulate witnessed behavior that meets a "dangerousness" standard; they must reasonably believe that the individual is mentally ill, drug dependent, or developmentally disabled; and they must believe that pursuing an ED is the least restrictive disposition appropriate to the person's needs. Even when all these factors apply, many individuals who experience crisis seek voluntary treatment, so an ED is not appropriate. In 2024, MPD officers completed 209 Emergency Detentions.

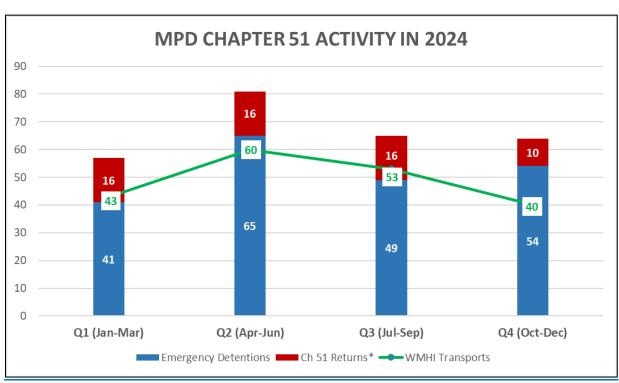
When an officer completes an ED, this initiates a court process with several possible outcomes. The individual may be discharged from involuntary hospitalization back to the community, but with certain conditions such as participating in outpatient treatment and services. If a detained individual does not comply with those conditions, Journey Mental Health can issue a "return", which authorizes law enforcement to take custody of the individual once again, and to deliver them back to a hospital. In 2024, MPD took people into custody on 55 occasions for Chapter 51 returns.

Finally, there are Chapter 51 commitments for which parties other than law enforcement can petition. Even though these commitments were initiated by other parties, the courts still vest the authority in law enforcement to take custody of the named individual until they are received by the appropriate medical facility. In 2024, MPD was involved in three-party petitions.

When other detention facilities (i.e. local hospitals) lack capacity or determine that a detained individual is inappropriate for their facilities, Winnebago Mental Health Institute (WMHI) is the ultimate destination. To safely transport individuals from Madison to WMHI (Oshkosh, WI), at least two MPD officers will spend approximately four hours round-trip to make the conveyance. Of MPD's total 267 Chapter 51-related conveyances, individuals were transported to WMHI 196 times, approximately 73% of all Chapter 51 conveyances.

In 2024, MPD contracted with a third-party transport service, to make a total of 135 conveyances. All of these transports took place from March 26th through December 31st, and pursuant to the contract, only applied to Chapter 51 conveyances made to WMHI. **Of MPD's total 196 Chapter 51 conveyances made to WMHI in 2024, third-party transports constituted approximately 69% of these.** The city and MPD sees benefits to third-party transport services handling Chapter 51 conveyances, to include: improved comfort and decreased stigma for patients, and increased officer availability within the City of Madison.

The below graph illustrates MPD's Chapter 51 related activity, by quarter. Note that the Chapter 51 Returns* per quarter also incorporates the "other" Chapter-51-related commitment petitions into the figures.



Finally, when an individual's dangerous behavior provides sufficient grounds for an emergency detention, there is a possibility that this same behavior can be criminal. **Most Chapter 51 conveyance** cases (193 of 267 cases, or 72.3%) did not result in officers drafting probable cause to arrest the individual for their behavior, nor in issuance of any municipal citations.

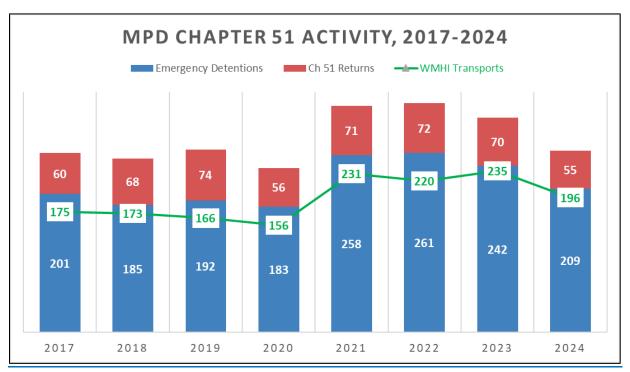
For the remaining 83 cases:

- 61 cases (22.8% of total Chapter 51 conveyances) resulted in officers effecting the emergency
 detention first, then requesting an expedited review process from the district attorney's office
 for the referred criminal charge(s);
- 7 cases (2.6% of total Chapter 51 conveyances) resulted in officers booking the individual into jail first, then effecting an emergency detention from jail custody; and
- 6 cases (2.2% of total Chapter 51 conveyances) resulted in officers effecting the emergency detention and issuing a municipal citation.

These statistics support MPD MHU's commitment to the core value of diversion, and our belief that an individual's mental health needs should be prioritized.

MPD'S CHAPTER 51 ACTIVITY, YEAR-BY-YEAR

MPD's Chapter 51 conveyances have grown considerably over the last eight years, peaking in 2022. In 2024, MPD saw a 15.4 percent decrease in overall Chapter 51 conveyances, but the percentage of conveyances to Winnebago Mental Health Institute (WMHI) remained nearly identical to 2023 data. The below graph illustrates those trends.



Data shows that MPD officers spend a significant amount of time investigating crisis incidents and carrying out tasks related to Chapter 51-related cases. In general, all Chapter 51 cases MPD are assigned to will involve at least two officers for the entirety of our involvement. Note that call-forservice data does not always accurately reflect the number of total conveyances per year.

- In 2022: of 337 Chapter 51 calls resulting in conveyances, this consumed 8,016.5 hours of MPD officer time. This averaged out to 23.8 hours per case.
- In 2023: of 306 Chapter 51 calls resulting in conveyances, this consumed 6,573.3 hours of MPD officer time. This averaged out to 21.5 hours per case.
- In 2024: of 262 Chapter 51 calls resulting in conveyances, this consumed 5,265.9 hours of MPD officer time. This averaged out to 20.1 hours per case.

One factor that likely contributes to the decrease in the average MPD officer time per case is the third-party transport program.

MPD CRISIS RESPONSE COMMENDATIONS

In 2024 alone, MPD personnel received 26 documented commendations for crisis response, deescalation and MHU-related activities. Commendations are submitted by members of the public and by colleagues who witness officer actions that are worthy of a performance recognition citation.

Below is a small sampling of some commendations that MPD officers received last year:

- "Officers responded to a busy thoroughfare for a female with developmental disabilities. Recognizing the danger that the subject posed to herself in her dysregulated state, officers appropriately took control of the subject. The officers were extremely patient, caring and methodical throughout the call which ultimately resulted in police leaving the subject in the care of the staff and a parent. Their flexibility allowed them to find the best possible resolution for all parties involved."
- "Officers responded to a report of a suicidal subject hanging from construction scaffolding
 and threatening to jump. The initial responding officers did an excellent job of securing the
 scene and transitioned to dialoguing with the subject. MFD arrived with a ladder truck to assist.
 The subject was safely brought down approximately 52 minutes after negotiations began. This
 was an excellent and well-coordinated response by the officers."
- "Officers responded to check the welfare of a possible suicidal subject. Areas were canvassed. A phone ping was conducted. The subject's vehicle was located and the subject was inside the vehicle. The subject was initially not cooperative with officers. The officers demonstrated outstanding patience, problem-solving and professional communication skills during their contact with the subject. After a lengthy dialogue, the subject agreed to voluntarily go to a hospital. The officers went above and beyond to locate this subject who was in an active crisis and they likely saved his life due to their actions."
- "Journey Mental Health sent a message about one of MPD's mental health officers saying that
 one of their crisis workers have never worked with the officer before but came back from a
 home visit very impressed by the officer. The officer and crisis worker made extensive efforts to
 engage with a subject in our community. The officer was described as incredibly patient,
 empathetic and trauma-informed."
- "Recognition from a community member for an officer's help with two recent incidents. The
 officer was described as extremely professional, compassionate and skillful at de-escalating a
 child. The community member felt the officer's actions were instrumental in positive outcomes
 in each incident and they were appreciative of his assistance."

- "Recognition for the officers who worked together to problem solve when a wanted subject was in the midst of a mental health breakdown. The officers, mental health crisis worker, ADA and judge all worked together to figure out a plan to allow the subject to get into treatment and then to report to pre-trial services and sign new bail paperwork upon his release. The collaboration and initiative to bring this situation to a good outcome that serves everyone is commendable."
- "An officer received recognition from a local hospital for how an incident was handled. The officer was being commended for how he interacted with a patient having a mental health crisis. The officer was described as professional, caring, and set clear expectations with the subject which assisted with a care plan that staff was putting together."

LOOKING AHEAD TO 2025

In 2024, MPD's Mental Health Unit looks forward to continuing what has made us successful, and to expanding upon our current efforts. Our major goals include:

- To increase the collaboration between our Mental Health Unit and MPD's Madison Area Recovery Initiative (MARI).
- To increase the number of specialized trainings available to our MHOs and continue to find opportunities to attend trainings with our LECWs.
- To increase the exposure of our unit locally and around the state, namely through increased community-based presentations. Our unit is well positioned to help educate the community and raise awareness around mental illness, police responses to crises, and the services/resources available to community members and their families.
- To take a meaningful part in addressing system-wide issues through county-wide and interdisciplinary workgroups.