



OFFICE OF THE CITY CLERK

## PUBLIC SAFETY COMMITTEE

December 11, 2017

The Public Safety Committee of the City of Mesa met in the lower level meeting room of the Council Chambers, 57 East 1st Street, on December 11, 2017 at 4:15 p.m.

### COMMITTEE PRESENT

Christopher Glover, Chairman  
Mark Freeman  
Kevin Thompson

### COMMITTEE ABSENT

None

### STAFF PRESENT

Dee Ann Mickelsen  
John Pombier  
Alfred Smith

#### 1. Items from citizens present.

There were no items from citizens present.

#### 2-a. Hear a presentation and discuss an update of the Fire and Medical Department's Patient Transport Pilot Program.

Fire Chief Mary Cameli introduced Assistant Chief Cori Hayes who displayed a PowerPoint presentation (**See Attachment 1**) related to an update of the Mesa Fire and Medical Department's (MFMD) Patient Transport Pilot Program.

Chief Cameli advised that the contract with American Medical Response (AMR), allows the MFMD to transport non-critical patients using the low acuity units. (See Page 2 of Attachment 1)

Chief Hayes provided the statistics from the pilot program that was completed in November 2017. She commented that out of the 189 calls dispatched, 32 patients were transported and it was found with the purchase of new equipment an additional 15 patients could have been transported. (See page 3 of Attachment 1)

In response to a question posed by Committeemember Thompson, Chief Cameli advised that the \$500 average revenue per transport is an estimated amount but could vary depending on how much an insurance company contributes.

In response to a question posed by Committeemember Freeman, Chief Cameli advised the transport fee is nearly the same between a basic life support call and an advanced life support call. She pointed out that MFMD plans on meeting with AMR to discuss further transports based on the current contract.

Chairman Glover thanked staff for the presentation.

2-b. Hear a presentation and discuss an update on the Public Safety Peer Support Team's efforts relating to employee mental stress and Post Traumatic Stress Disorder.

Fire Captain Dale Crogan introduced Police Detective and Peer Support Coordinator Vicki Hixson who displayed a PowerPoint presentation (**See Attachment 2**) related to an update on the Public Safety Peer Support Team's efforts relating to employee mental stress and Post Traumatic Stress Disorder.

Captain Crogan detailed the partnership between Mesa Police and Fire and the Mesa Public Safety Peer Support Team. He pointed out that most organizations run two parallel programs, which can stretch resources, and the City runs one program with combined resources. (See Page 2 of Attachment 2)

Captain Crogan stated the Peer Support Team began training City employees on mental health education and awareness. He commented that behavioral health is not just isolated to the Public Safety sector and is in every profession, therefore moving forward the goal is to increase the number of employees trained and aware of the resources available. (See Page 4 of Attachment 1)

Detective Hixson outlined the treatment and resource partnerships with the Peer Support Team. She explained that since 2015 the team recognized the need to fully understand the various treatment options available. She stated the team toured addiction clinics and behavioral health facilities and established a point of contact for each facility to tackle the needs of City employees. She continued by stating the team has also visited hospitals to understand the level of treatment each patient would receive. She pointed out that the Peer Support Team does meet quarterly with other Arizona Public Safety Agency Peer Coordinators to address the trends and needs of first responders. (See Page 6 of Attachment 2)

Captain Crogan commented that the team looks to enhance the partnerships that are already established as opposed to creating new ones. He advised during the quarterly meetings, the Employee Assistance Program provides the utilization numbers to the team on the resources that were given to City employees. (See Page 7 of Attachment 2)

In response to a question posed by Chairman Glover, Captain Crogan explained the Peer Support Team has presented to six different agencies on how to increase their peer support programs.

In response to a question posed by Committeemember Thompson, Captain Crogan explained that although there isn't a spousal support program in place, the goal is to create one in the future.

In response to a question posed by Chairman Glover, Detective Hixson advised that since partnering with Code 9 (provides education and support to Public Safety Personnel and their families for managing and reducing stress effects, such as PTSD) there have been five sessions and it is heavily attended by outside agencies. She pointed out the City's academy has a lot of onsite training on how to deal with different types of mental stress.

In response to a question posed by Committeemember Thompson, Detective Hixson reported that a few of the officers have gone through the Heal the Hero program and have found success. She advised this has a lot to do with the fact that it is a family program and the program finds nonintrusive way of helping first responders sleep better.

Committeemember Freeman stated the opinion that the program is very beneficial and helping families of first responders is important. He added that it is commendable that team members reach out to City employees as the resources that are provided will help individuals to stay mentally stable and remain a benefit to the community.

Captain Crogan concluded his presentation by noting that the program has progressed throughout the years and now is the time for the City to work together with the resources available for the overall wellness of employees.

Chairman Glover thanked staff for the presentation and asked that details regarding the partnerships formed and how to best utilize them be presented at the next meeting.

2-c. Hear a presentation, discuss, and provide a recommendation on the City's efforts relating to opioid abuse.

Fire Chief Mary Cameli introduced Police Chief Ramon Batista who displayed a PowerPoint presentation (**See Attachment 3**) related to the City's efforts relating to opioid abuse.

Chief Cameli provided the definition of opioids and advised that pain killers such as Oxycontin, Oxycodone, Percocet, Fentanyl, and Vicodin are common prescription opioids that are highly addictive. She pointed out that once a prescription has expired individuals will turn to heroin as it is a cheaper opioid. (See Page 2 of Attachment 3)

Chief Cameli displayed the 2017 opioid overdoses by zip code from June 2017 to November 2017. She advised the age range of overdoses is from 16 to 88 and these overdoses are more common among males than females. She pointed out that during the study, 80 individuals were found unconscious and revived using the drug Narcan. She explained that police officers are being trained on how to use Narcan to save lives. (See Pages 4 and 5 of Attachment 3)

Chief Batista stated that due to the support from Council, the Mayor's Office, and the Arizona Department of Health Services, the Police Department has obtained 600 doses of Narcan. He advised that a training plan was created with the help of the Fire Department and will be implemented soon. He stressed the importance of training Fire Department personnel since patient care could be transferred to them once Narcan is administered by a police officer. He pointed out that Fentanyl can be deadly to those in contact with it, even first responders, therefore it is important that Police and Fire are trained on how to administer Narcan.

In response to a question posed by Chairman Glover, Chief Batista advised the Police Department is looking to adopt the Angel Initiative (allows citizens the ability to seek treatment assistance from police without the fear of prosecution). He stated the plan is to look at alternative programs and evaluate which program works best for the community.

Committeemember Thompson asked that the Fire Department and Police Department look at alternative solutions in lieu of incarceration to save lives and present to the Committee at the next meeting.

Chairman Glover thanked staff for the presentation.

2-d. Hear a presentation and discuss the Police Department's case assignment and forensic evidence processing protocols and workflow.

Forensic Service Administrator Kimberly Meza introduced Criminal Investigation Sergeant Brandon Wilson and Forensic Service Supervisor Geneva Meza who displayed a PowerPoint presentation (**See Attachment 4**) related to the Police Department's case assignment and forensic evidence processing protocols and workflow.

Sergeant Wilson detailed how case management protocols function. He pointed out that every district has two criminal investigation sergeants and their primary responsibility is to review cases. He advised all active cases are forwarded to a detective and cases where no crime occurred are classified as unfounded. He explained that the Police Department employs a Civilian Investigation Specialist that can complete the same tasks, but can only investigate civilian property crimes; they cannot affect an arrest, make suspect contact, and are strictly at a crime scene to allow a victim to be contacted earlier. He commented the reports go through multiple levels of approval and the system is very thorough. (See Pages 2 and 3 of Attachment 4)

Ms. Geneva Meza displayed the crime scene and evidence collection statistics from January 2017 to November 2017. She pointed out that 90% of the latent prints submitted are from property crimes. (See Page 5 of Attachment 4)

In response to a question posed by Chairman Glover, Ms. Geneva Meza advised that some agencies will not respond to criminal damage calls like the City's crime scene team does.

Ms. Kimberly Meza commented that the crime scene personnel will respond to all case types and DNA turnaround time is 60 to 75 days with latent prints returning after 20 days. She advised this processing time is quicker than most neighboring agencies.

Chairman Glover thanked staff for the presentation.

3. Adjournment.

Without objection, the Public Safety Committee meeting adjourned at 5:06 p.m.

I hereby certify that the foregoing minutes are a true and correct copy of the minutes of the Public Safety Committee meeting of the City of Mesa, Arizona, held on the 11<sup>th</sup> day of December, 2017. I further certify that the meeting was duly called and held and that a quorum was present.

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DEE ANN MICKELSEN, CITY CLERK

# Mesa Fire & Medical Department Transportation Update

Presenters:

Mary Cameli, Fire Chief

Cori Hayes, Assistant Fire Chief



# Utilizing LA Units for Transportation

- Currently have three 40-hour Low Acuity (LA) Units in service
- In service during peak hours, 8:00 a.m. – 6:00 p.m., M-F
- Allowed under contract to transport low acuity patients
- LA Units are transporting non-critical patients



# LA Unit Transportation

- Began transporting November 6, 2017
- For 11/6/17 – 11/30/17:
  - Transported 32 patients
  - Dispatched to 189 calls
- Each unit averages 1 transport per 10-hour shift
- \$500 average revenue per transport



# Moving Forward

- Continue to monitor LA Unit transports
- It is important to balance the primary goal to reduce the low acuity calls for engines/ladders with transportation service time.





# Questions?



# Mesa Public Safety Peer Support Team Response to Mental Stress & PTSD



Presented by:

**Fire Captain Dale Crogan & Detective Vicki Hixson**



# Introduction

- Mesa Public Safety Peer Support Team
  - Re-introduction of Team
  - Five (5) year partnership
- Past two (2) years in Review
  - PTSD, acute stress injuries, occupational fatigue and preventive measures for public safety employees
- Things we need to do *Moving Forward...*



- **Mental Health Education & Awareness**
- **Training**
- **Treatment & Resource Partnerships**
- **Family Support**
- **Public Safety Peer Support Partnership**



# Mental Health Education & Awareness

- In 2015, began pushing out awareness, education and available resources.
- Other public safety organizations started focusing on awareness such as:
  - IAFC, IACP, 100 Club, Labor unions, etc.
- We started coordinating efforts with local and national organizations to provide physical & mental health education.
- We provided 1500+ Mesa Public Safety and City employees with Resiliency Skills training over last two (2) years.
- Trained 200+ members of other agencies (Resiliency skills, Peer Support programs, Supervisor classes, etc.).

*\*Moving Forward: We need to increase number of employees who receive the initial training classes, and develop follow up programs to ensure training continues to be beneficial.*



# Training

- In 2015, with the increased marketing of wellness and resiliency, more employees were reaching out, therefore we had to “train up” our Peer Support Coordinators.
- As more employee needs were brought forward, we realized we had to go to next level and learn more about our benefit systems.
  - City HR & Wellness Center
  - City Benefits & insurance plans
  - EAP (Compsych Guidance Resources)
  - Intake at hospitals & rehabs
  - Clinical & treatment protocols

*\*Moving Forward: We need to provide advances training to our Peer Support Team Members to current needs and resources because more employees and their families are reaching out to individual Team members.*



# Treatment & Resource Partnerships

- In 2015, we continued to focus on reaching out and locating basic wellness resources.
- Since then, we discovered we needed alternative treatment resources (dual diagnosis, substance abuse, acute anxiety, etc.).
- It became essential for Peer Support Coordinators to understand the differences in treatment providers and modalities. We developed partnerships with the following:
  - Rehab and behavioral health facilities
  - Hospital and outpatient protocols
  - Individual insurance plans
  - Private counseling practices
  - City/Federal benefit systems
  - EAP (Compsych Guidance Resources)
- We found it was necessary to explain to employees the care they needed when dealing with acute stress, anxiety, depression in regards to treatment and clinical options.

*\*Moving Forward: We found we needed the funding to increase not only our Peer Support Team Members, but also their training and access to resources.*



## Partnership Examples

- We have created a strong partnership with EAP (Compsych).
  - We meet quarterly to discuss utilization and trend reports.
  - This allows Peer Support Coordinators to plan ahead and focus training on presenting issues.
  - Our City is their book of business for public safety nationwide.
- Our partnership allowed us to go through EAP to change employee visits to 12 when involved in critical incidents, which was a benefit to the City.
- With the new Cigna partnership focusing on behavioral health, we have already started working together.
- Both Peer Support Coordinators:
  - Were invited and attended a Cigna behavioral health summit meeting in November as SME's.
  - Have scheduled a one-on-one meeting with City Cigna Representative to continue developing partnership.





# Family Support

- In 2015, we discussed the importance of involving family in first responders' treatment and recovery.
- We found we had to help our families understand what their first responders may go through, as well as what they may experience during difficult times.
- Since strongly promoting EAP resources, our family member utilization has greatly increased.
- We identified family support resources:
  - EAP/Cigna onsite information meetings
  - AZ Pitch for Kids, First Responder family support links
  - Firestrong.org & Bulletproof.org
  - Financial classes and programs for first responders

*\*Moving Forward: We want to expand to the next level and cement these in future Family Day events, Family Academies, and employee information opportunities.*



# Conclusion

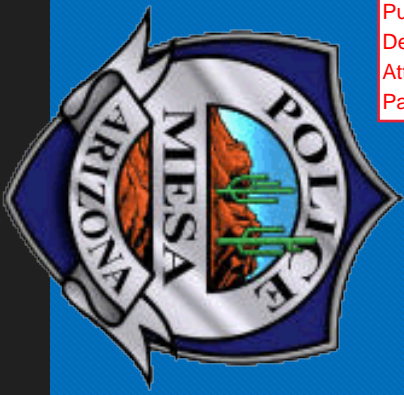


- We have accomplished more due to the successful partnership between our Departments.
- The Peer Support Coordinators have developed a great working relationship the past five (5) years, and will continue to do so.

*\*Moving Forward in 2018:*

- Both Chiefs have committed to sitting down with Peer Support Coordinators to discuss PTSD, first responder stress, anxiety concerns, etc.
- This partnership is going to create a document that illustrates our commitment in supporting our first responders. This includes an outline of what we will need to accomplish it.
- We need the funding and continued partnerships with COM, insurance providers, EAP, and families.
- Chiefs' Comments, Q&A





# City of Mesa Public Safety Opioid Action Plan

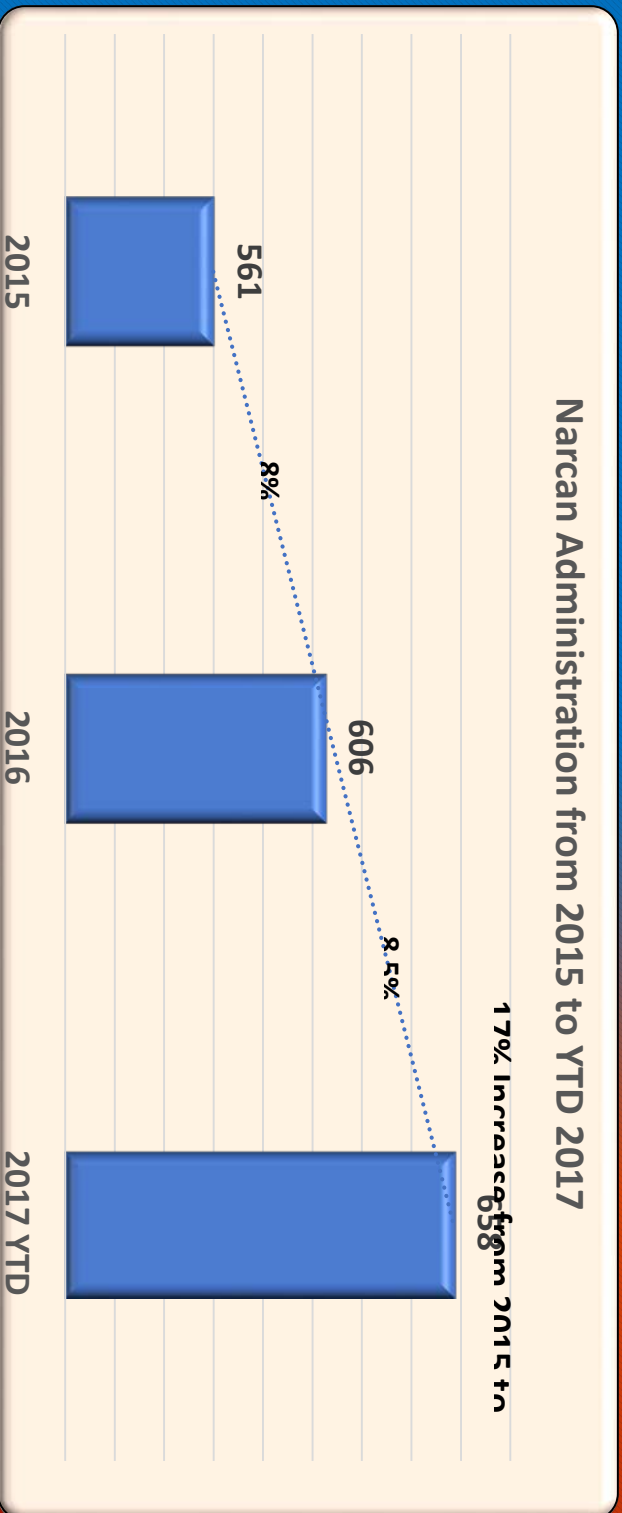
Presented by:  
Chief Mary Cameli, Fire and Medical Department  
Chief Ramon Batista, Police Department



# *Definition of Opioids*

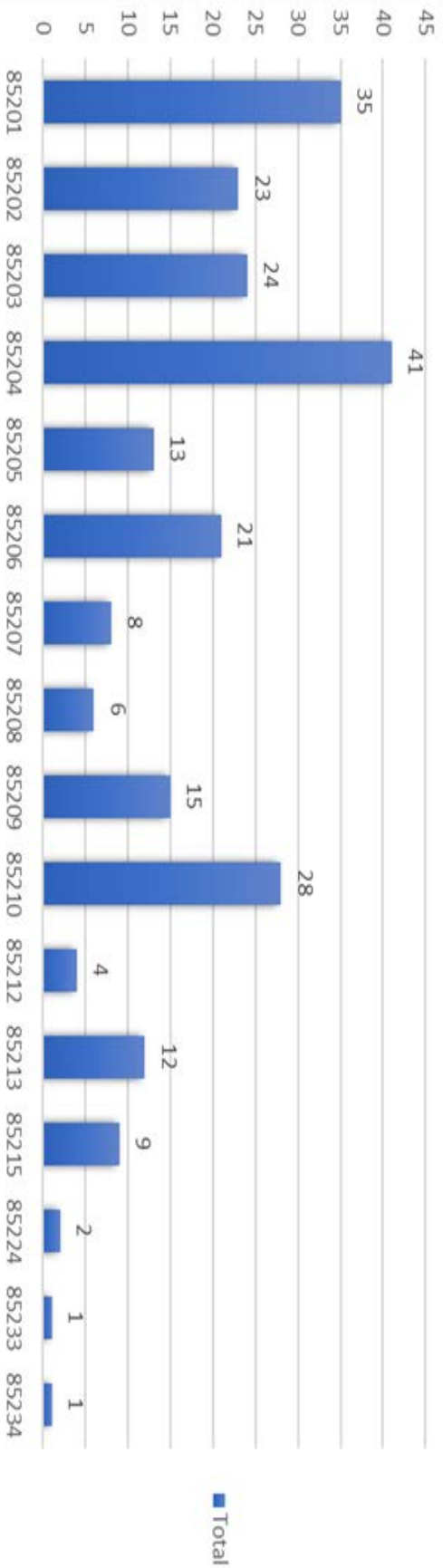
- Prescription opioids can be used to treat moderate-to-severe pain and are often prescribed following surgery or injury, or for health conditions such as cancer.
  - There has been a dramatic increase in the acceptance and use of prescription opioids.
- Heroin is an illegal, highly addictive opioid drug.
  - A heroin overdose can cause slow and shallow breathing, coma, and death.
  - People often use heroin along with other drugs or alcohol.

# Mesa Perspective 2015 - 2017

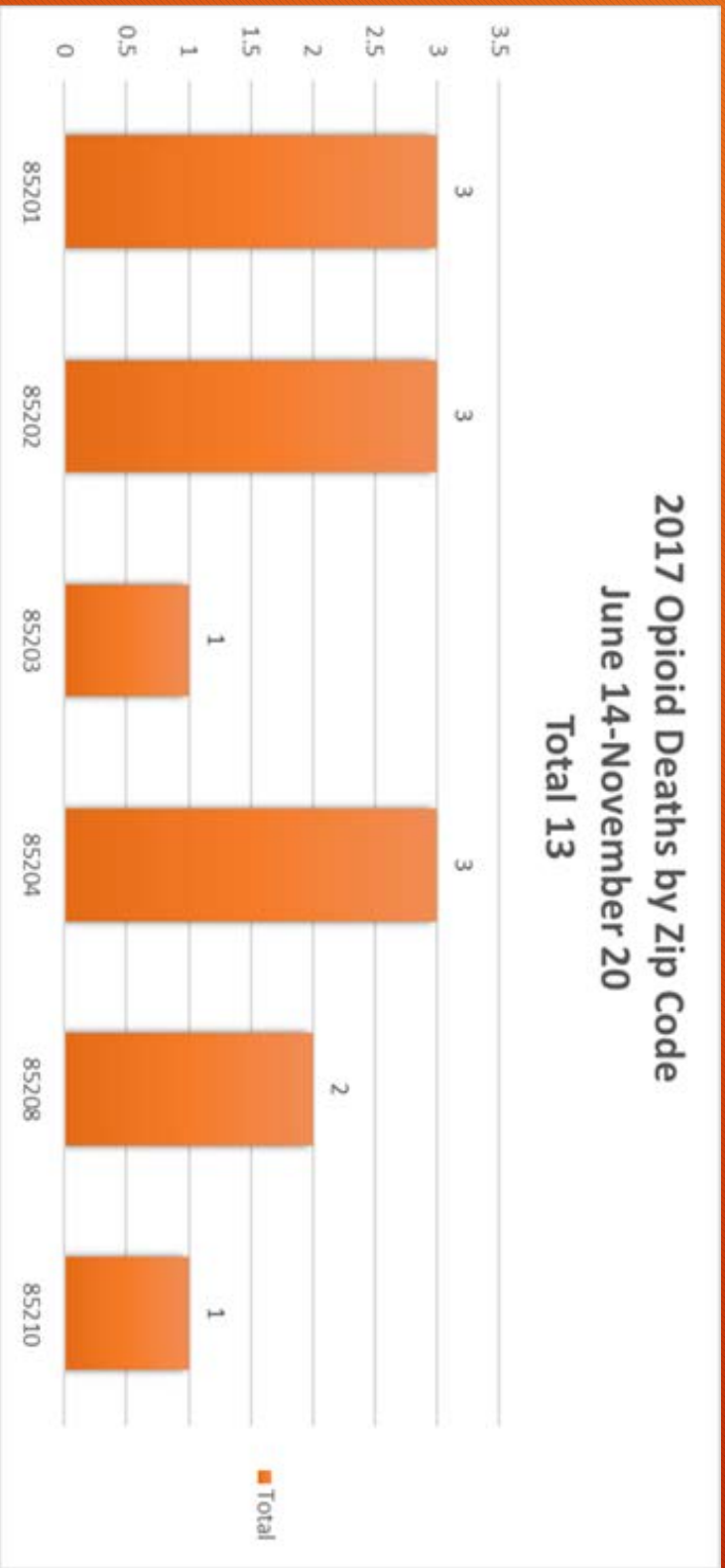


# Mesa Perspective cont.

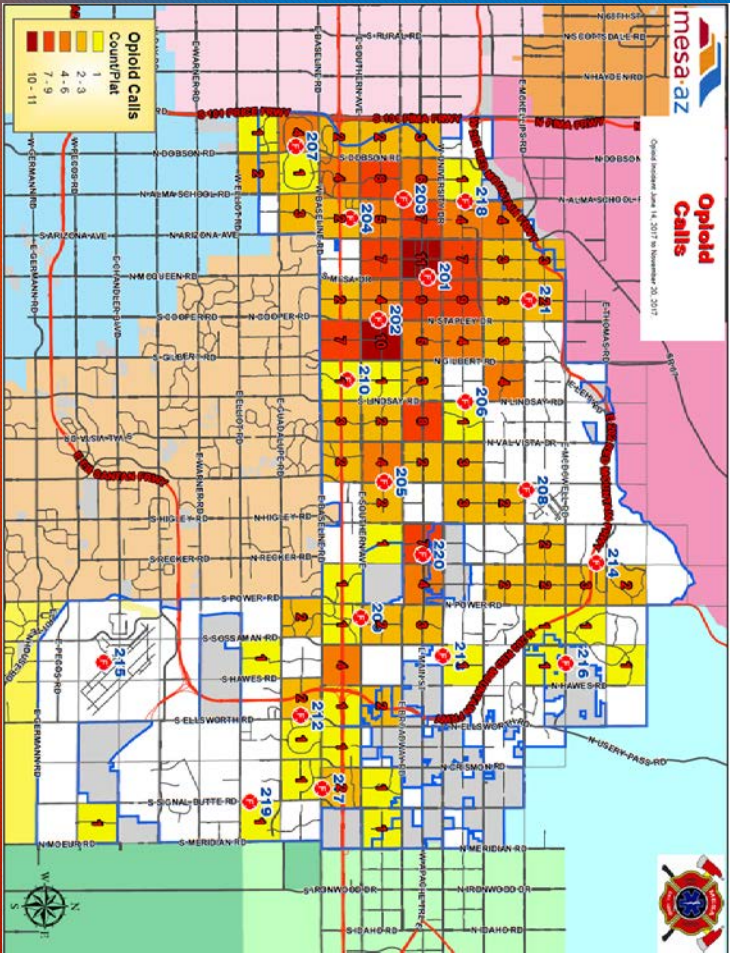
**2017 Opioid Overdoses by Zip Code**  
**June 14-November 20**  
**Total 243**



# Mesa Perspective cont.



# City of Mesa Heat Map for 2017





# AZDHS Executive Summary's "Goals to Address":

1. Increase patient and public awareness and prevent opioid use disorder
  - Fire/Medical social services program
2. Improve prescribing and dispensing practices
3. Reduce illicit acquisition and diversion of opioids
4. Improve access to treatment
  - Mesa Police Department early interventions
  - Fire/Medical social services program
5. Reduce opioid deaths
  - Mesa Police Department initial contact and early interventions through administration of naloxone and associated training
  - Fire/Medical social services response model of follow ups

# Proposed Next Steps

## *Consideration of joint Police/Fire&Medical civilian Social Services Intervention Teams (SSIT's)*

- *Increase patient and public awareness and prevent opioid use disorder*
- *Reduce opioid deaths*
- *Begin Team follow-ups on all patients administered naloxone by Police/Fire & Medical*
  - *Improve access to treatment*
- *The Team to start with 658 patient overdoses from 2017 to:*
  - *Assure treatment plans are in place*
  - *Work with the patient's case worker, probation officer, etc*
  - *Give the physical presence to encourage patient treatment program compliance*



# Questions / Comments?



# Case assignment protocols.

SERGEANT BRANDON WILSON

## Patrol function

- Patrol Officer completes initial written report and approves it to a level 1.
- Patrol Sergeant reviews case and either approves or rejects case. If case rejected for additional information or follow-up the initial Patrol Officer completes corrections.
- Patrol Sergeant approves case to a level 2. Patrol Sergeant can assign case disposition. These dispositions can be cleared by arrest, assigned, not assigned or they can leave it as pending.
- Records reviews and completes final approval to a level 3.

## Criminal Investigation function

- Criminal Investigations Sergeant reviews all cases at assigned district. Acts as a secondary line of defense to ensure proper investigation and assignment.
- Upon review by CIU Sergeant the case will either be assigned, inactivated or not assigned.
- Minor misdemeanors can be assigned to original Patrol Officer for follow-up if only minor follow-up is needed.
- Violent felony offenses are assigned to a district Criminal investigations Detective.

# Crime Scene Processing & Evidence Collection

FORENSIC SERVICES  
FS SUPERVISOR GENEVA MEZA

## Two Major Units Processing Crime Scenes & Collecting Evidence:

- Forensic Services Crime Scene Unit (CSU): 15 Members in 2017 (24/7)
- Crime Investigation Specialist Unit (CIS): 7 Members in 2017 ( M-F Day and Swing Shift)

### January-November 2017

	Property Crimes		Person Crimes		Latent Prints Collected
	Processed	Evidence Items Collected	Processed	Evidence Items Collected	
CSU (Forensic Services)	1990	1765	2670	3470	7950
CIS (Patrol Operations)	1720	200	Does not Process	-	1215
<b>TOTAL</b>	<b>3710</b>	<b>1965</b>	<b>2670</b>	<b>3470</b>	<b>9165</b>

Data does not include:

- \* Arsons
- \* Trespass
- \* Found Property
- \* Accidents
- \* Drugs
- \* Civil Matters
- \* Search Warrants
- \* Forgery/Fraud



# CRIME SCENE PROCESSING & EVIDENCE COLLECTION

THE FORENSIC SERVICES CRIME SCENE UNIT PERSONNEL ARE HIGHLY TRAINED AND HAVE THE MOST MODERN EQUIPMENT AVAILABLE. THEY USE FORENSICALLY ACCEPTED METHODS IN THE FIELD TO PROCESS CRIME SCENES SUCH AS PHOTOGRAPHY, LATENT PRINT PROCESSING, PROCESSING WITH CHEMICAL REAGENTS, AND EVIDENCE COLLECTION. WORK IS REVIEWED AND EVALUATED CONTINUOUSLY. CSU RESPONDS TO ANY REQUEST FOR CRIME SCENE PROCESSING NO MATTER THE CRIME TYPE.

## LATENT PRINT

### FIELD PROCESSING:

- ❖ SMOOTH NON-POROUS
- ❖ SMOOTH SEMI-POROUS

### LAB PROCESSING:

- ❖ SMOOTH NON-POROUS
- ❖ SMOOTH SEMI-POROUS
- ❖ POROUS

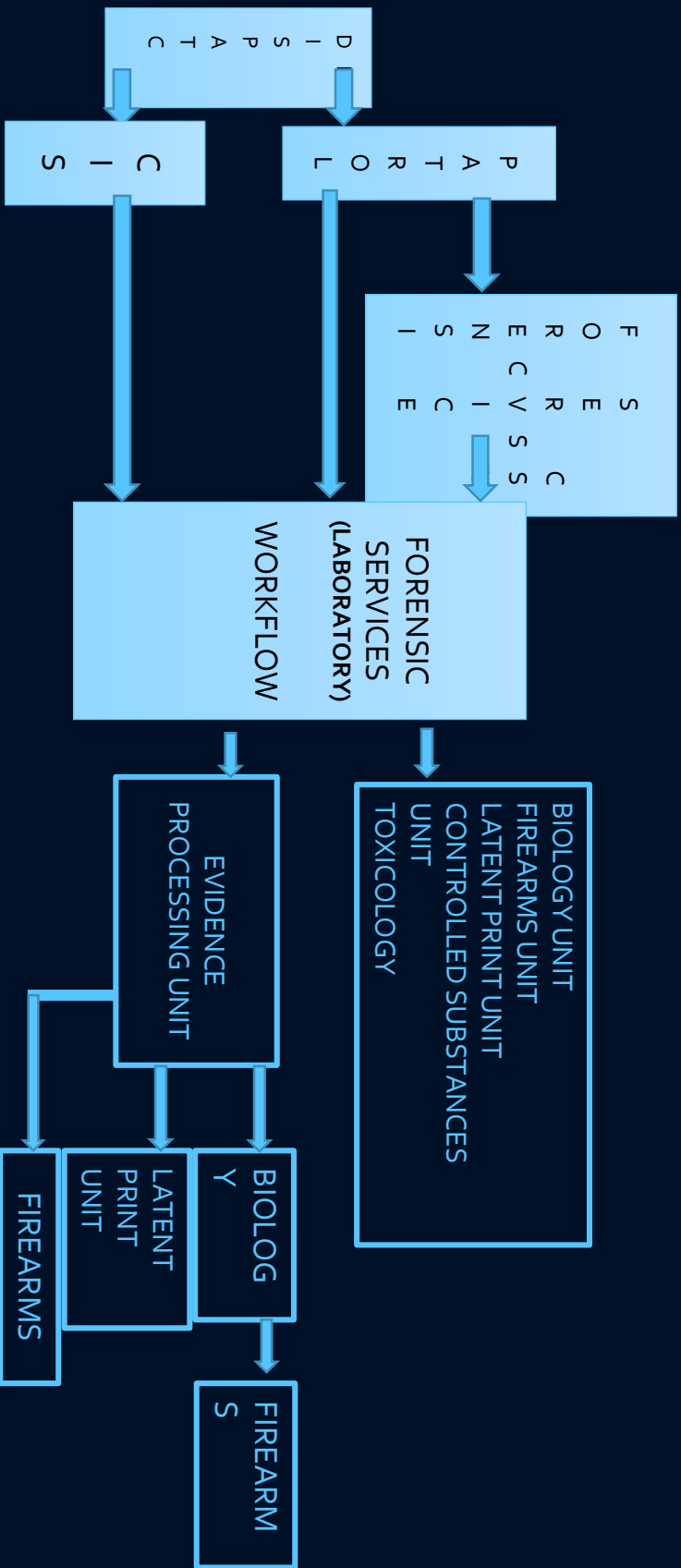
## DNA

### FIELD COLLECTION:

- ❖ DNA SAMPLE COLLECTION WITH SWAB
- ❖ COLLECT EVIDENCE ITEM FOR POTENTIAL DNA

### LAB (ANALYSIS):

- ❖ SWAB ITEMS CONTAINING POTENTIAL DNA
- ❖ ITEMS CONTAINING BLOOD
- ❖ CLOTHING WORN BY DONER
- ❖ ITEMS HANDLED VIGORESLY



**INITIAL INVESTIGATION, CRIME SCENE PROCESSING, & EVIDENCE PROCESSING WORKFLOW**