

## Crisis Intervention Team 2020 Annual Report

### [Consent Decree ¶113]

f) NOPD shall track CIT use through data provided by the CIT officer or MCTU after each response. NOPD shall gather and track the following data at a minimum:

- (1) Data, time, and location of the incident;
- (2) Subject's name, age, gender, and address;
- (3) Whether the subject was armed, and type of weapon;
- (4) Whether the subject is a U.S. military veteran;
- (5) Complainant's name and address;
- (6) Name and badge number of CIT officer on the scene;
- (7) Whether a supervisor responded to the scene;
- (8) Techniques or equipment used;
- (9) Any injuries to officers, subject, or others;
- (10) Disposition; and
- (11) Brief narrative of the event (if not included in any other document).

g) NOPD shall publicly report this data, aggregated as necessary to protect privacy.

On Friday December 13, 2019, the City of New Orleans experienced a Cyber Attack which compromised integral components of its online systems. The New Orleans Police Department (NOPD) was gravely affected by the loss of use of these systems and was forced to reconstruct the data base which collected most of its data. In March of 2020, a Global Pandemic engulfed the World and effected how NOPD was able to service the community. As result of the Cyber Attack and the Global Pandemic, the data processed from CAD (Computer Aided Dispatch) and Crisis Intervention Forms completed show a disparity in collected information and crisis calls received. This comparison revealed 6,535 crisis calls answered to 3,472 CIT forms completed.

The NOPDs Crisis Intervention Team (CIT) model is a nationally recognized “best practices” approach in recognizing and managing behavior that may be attributable to a mental health disorder or substance abuse. Under this program, chosen officers receive 40 hours of intense training from mental health experts focused on techniques and best practices for minimizing the use of force against individuals in crisis due to mental illness or a behavioral disorder. CIT officers are assigned to each police district and are trained to respond to and de-escalate mental health crises.

The Crisis Intervention Team offers yearly courses to train and certify officers in Crisis Intervention. NOPD is required to ensure 20% of its patrol division are CIT certified and can provide a CIT-trained officer in each shift in each district. In 2020, the Crisis Intervention Team certified 15 officers, increasing the total number of CIT officers across the department to 335. Currently 35% of NOPD Patrol officers have been certified by the Crisis Intervention Team.

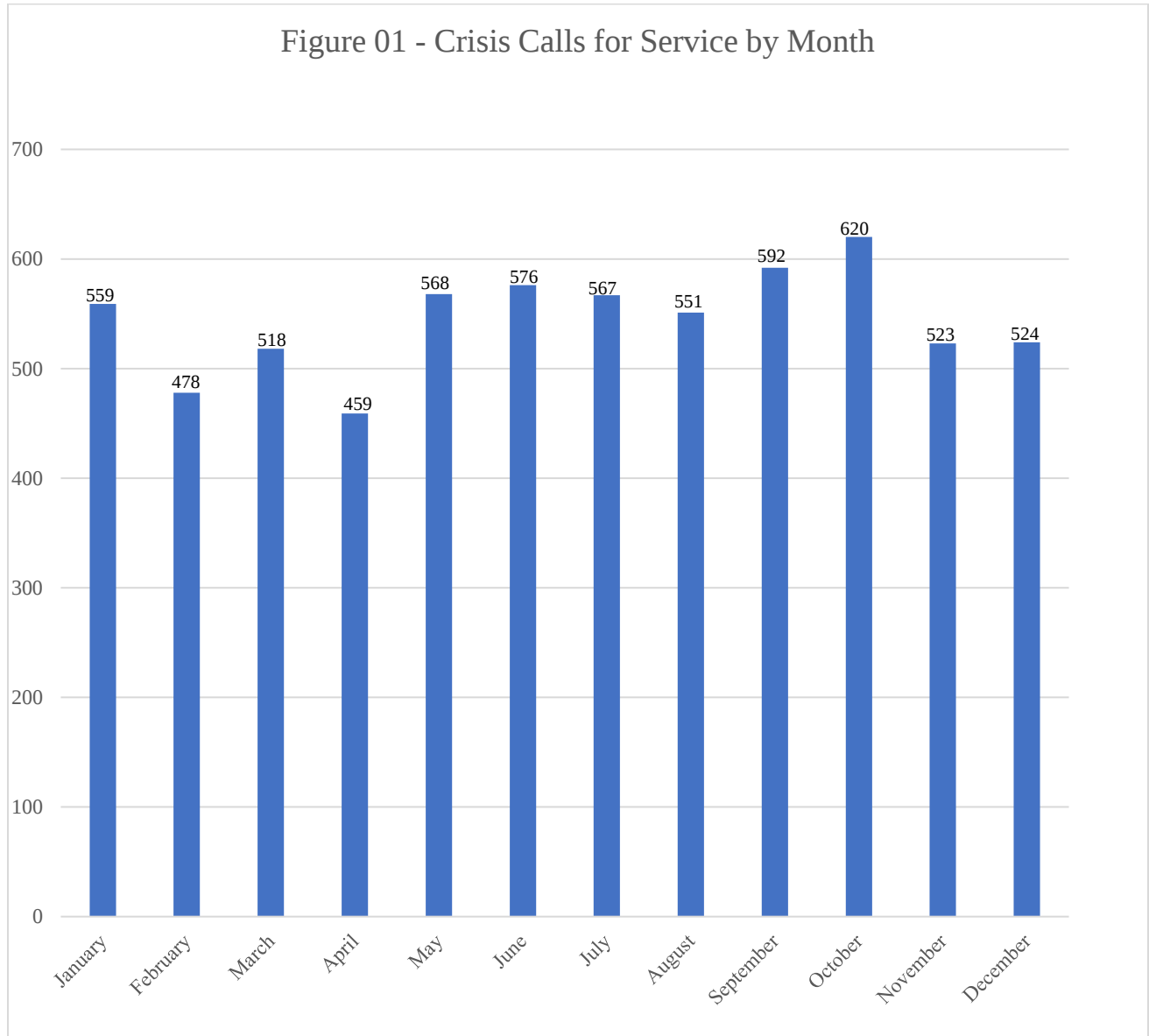
NOPD dispatches these specially trained CIT Officers to crisis calls when available to utilize their certified CIT skills to de-escalate crisis situations. All officers, CIT-certified and non-certified, receive a yearly refresher course on Crisis Intervention and De-escalation during core in-service training. The NOPD policy on Crisis Intervention (Chapter 41.25) went into effect in March 2016. The Department then began gathering the data enumerated in Consent Decree ¶ 113. In 2020, officers submitted 3,472 incidents via the Crisis Intervention Form. Aggregated data from the Crisis Intervention Forms and CAD are included in this report.

### **Computer Aided Dispatch (CAD) Aggregate Data**

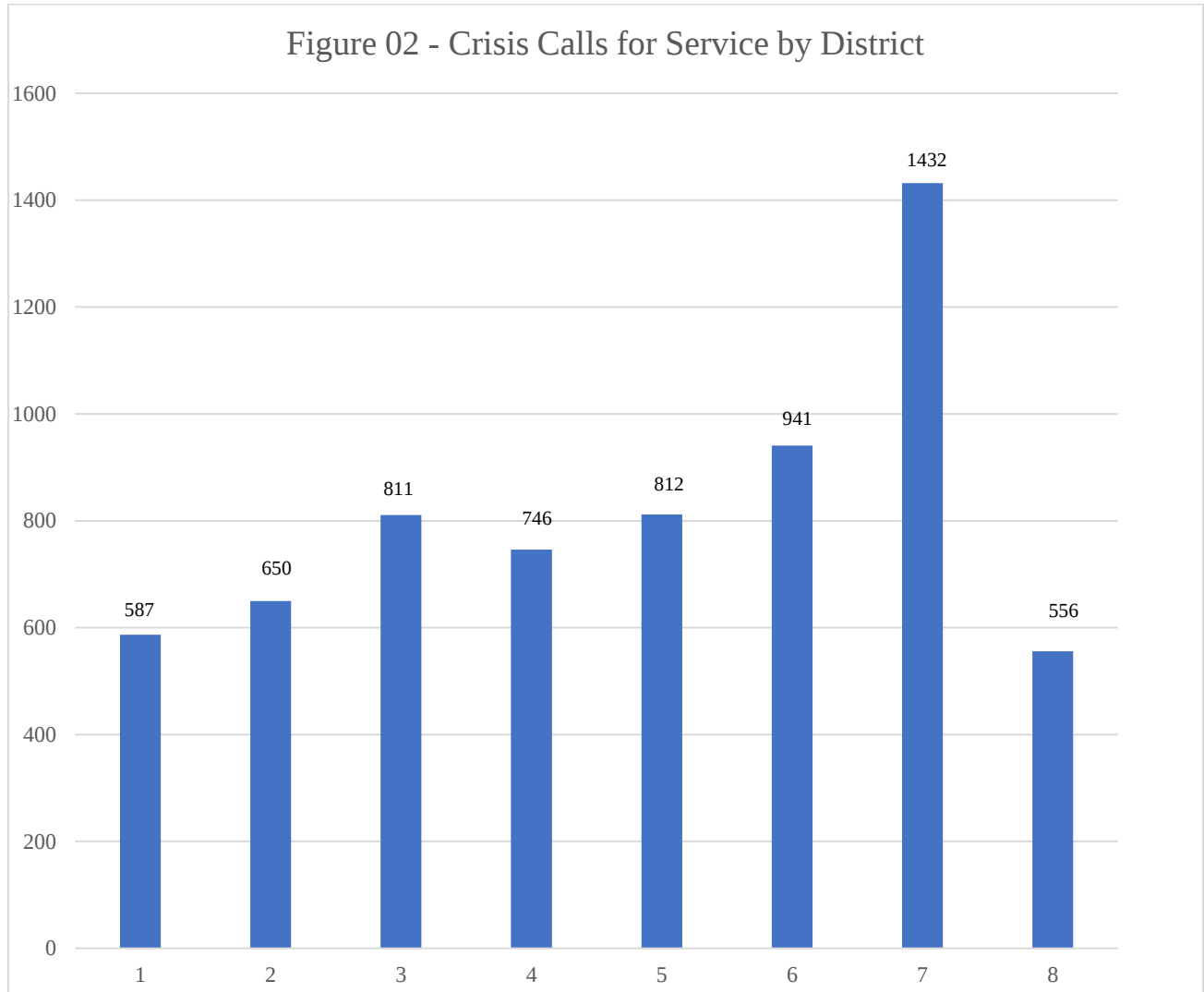
NOPD utilizes a Computer Automated Dispatch (CAD) system to track calls for service. The calls are documented with an initial signal code and a final signal code categorizing the incident. The initial signal code is entered by the dispatcher based on the caller's description of the situation. When an officer responds to the call for service, he/she may update the signal code based on his/her observation or information available at the scene; this is the final signal code.

The data below include crisis calls for service, where either the initial or final signal codes were 103M (Disturbance, Mental), 27-29S (Attempted Suicide), 29ST (Suicide Threat), or 29SA (Suicide Attempt). NOPD recognizes that crisis impact calls classified under other signal classifications but does not have a mechanism to capture this impact currently. Figures 01 – 05 reflect data collected from CAD.

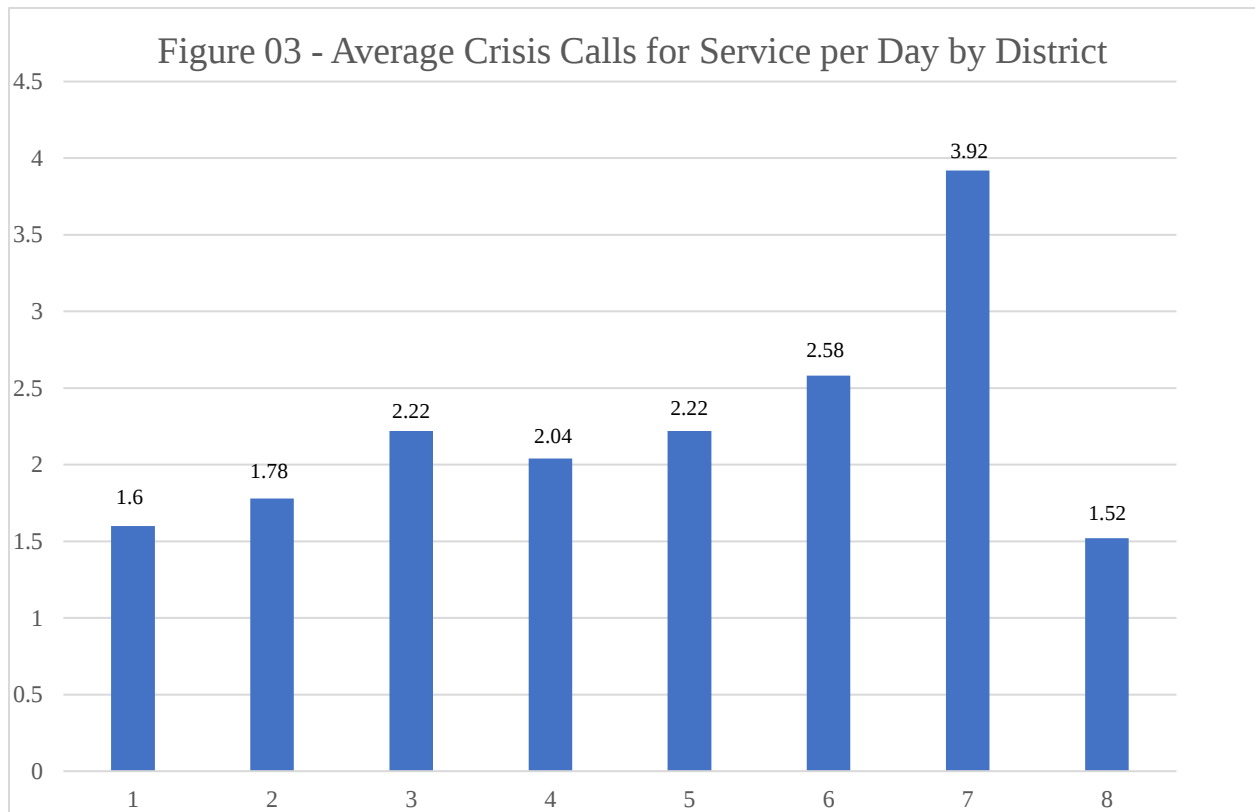
NOPD received a total of 6,535 crisis calls for service in 2020 for which the initial or final signal was 103M (Disturbance, Mental), 27-29S (Attempted Suicide), 29ST (Suicide Threat), or 29SA (Suicide Attempt). Calls by month ranged from a low of 459 in April to a high of 620 in October.



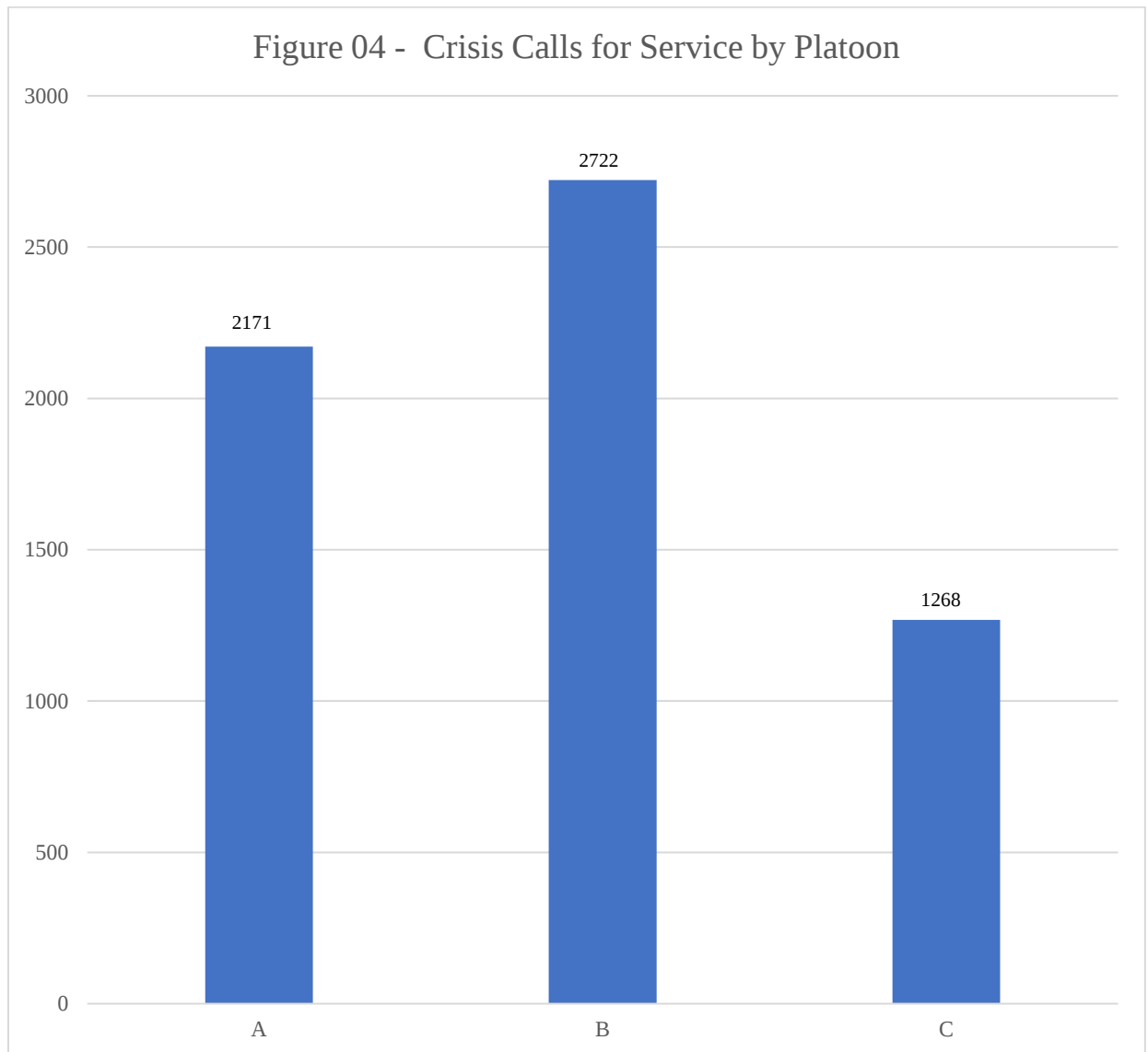
The greatest amount of crisis calls for service was in the 7<sup>th</sup> District totaled 1,432 calls, which is geographically the largest district in New Orleans. The smallest amount of calls was in the 8<sup>th</sup> District totaled 556, which is geographically the smallest district in New Orleans.



On average, in 2020 NOPD received 18 crisis calls for service per day.

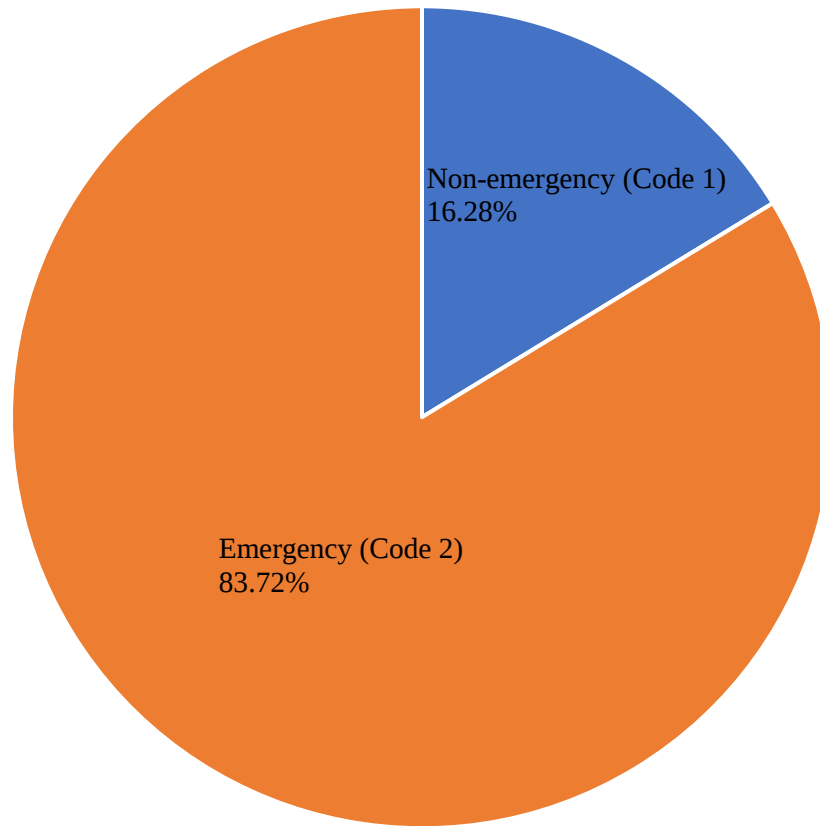


The majority of incidents took place during A Platoon (6:25am – 3:00pm) and B Platoon (2:25pm – 11:00pm), with a minority occurring during C Platoon (10:25pm – 7:00am).



Most of the crisis calls for service were for emergency situations (code 2 dispatch).

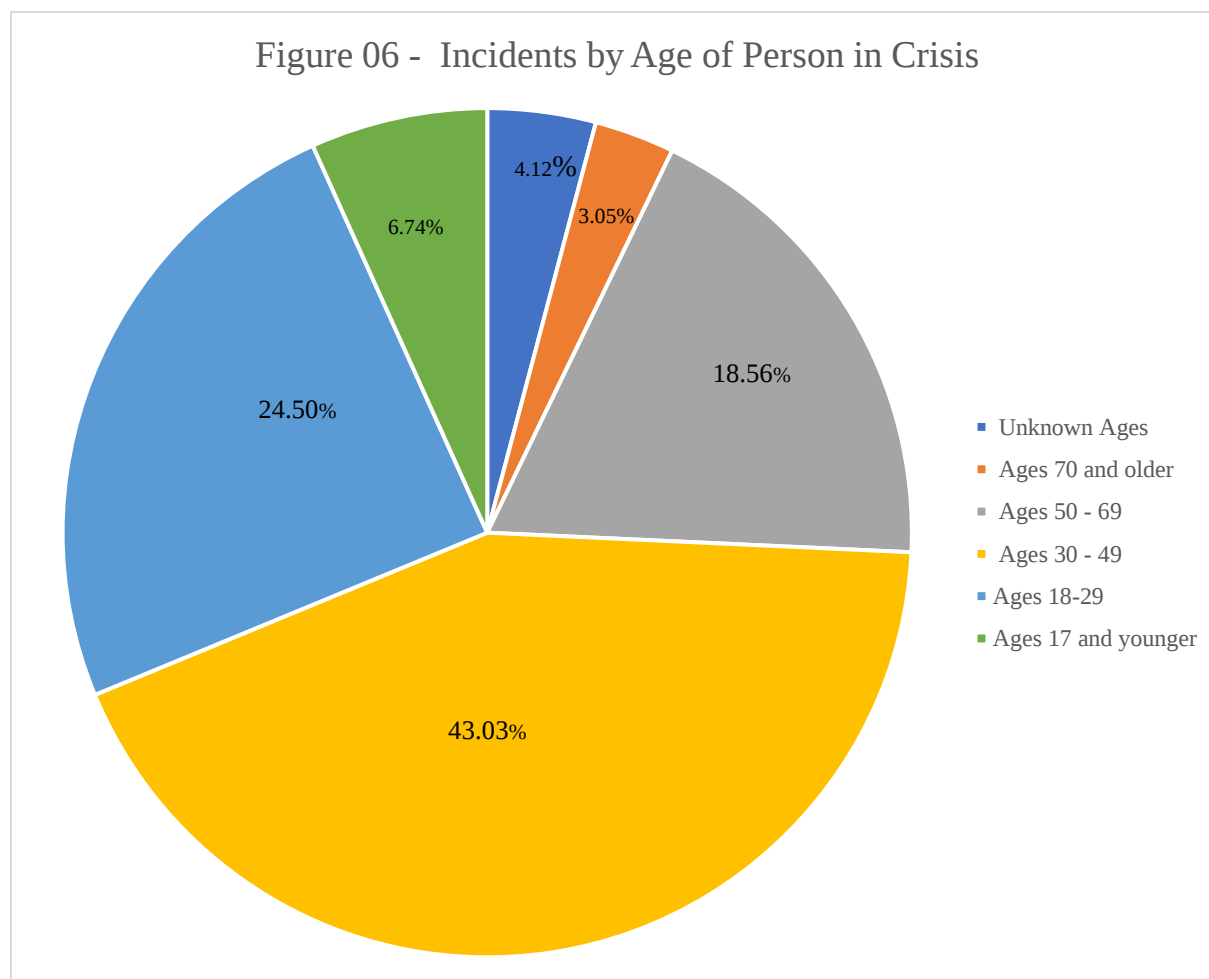
Figure 05 - Crisis Calls for Service by Emergency Level



## Crisis Intervention Form Aggregate Data

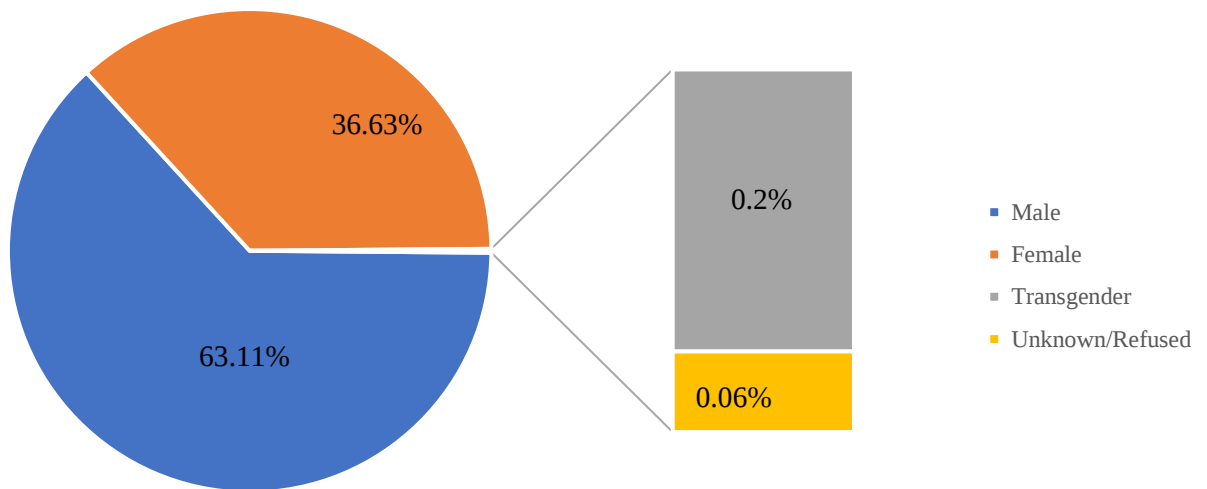
Crisis intervention forms are completed at the conclusion of crisis calls for service with a final classification of 103M (Disturbance, Mental). Per Chapter 41.25 – Crisis Intervention, officers complete crisis intervention forms on all calls with a final classification of 103M (Disturbance, Mental) but may not submit a crisis intervention form on calls that may involve a crisis but are not classified as a 103M (Disturbance, Mental). For example, if an officer arrests an individual in crisis for a battery, the officer may not complete a crisis intervention form, so the data for that incident may not be captured in this information. In 2020, officers submitted 3,472 incidents via the crisis intervention form. Figures 06 – 17 reflect data collected from the completed CIT forms.

The majority of persons in crisis were adults between the ages of 30 and 49, while roughly 7% were under 18 and roughly 3% were over 70 years of age.



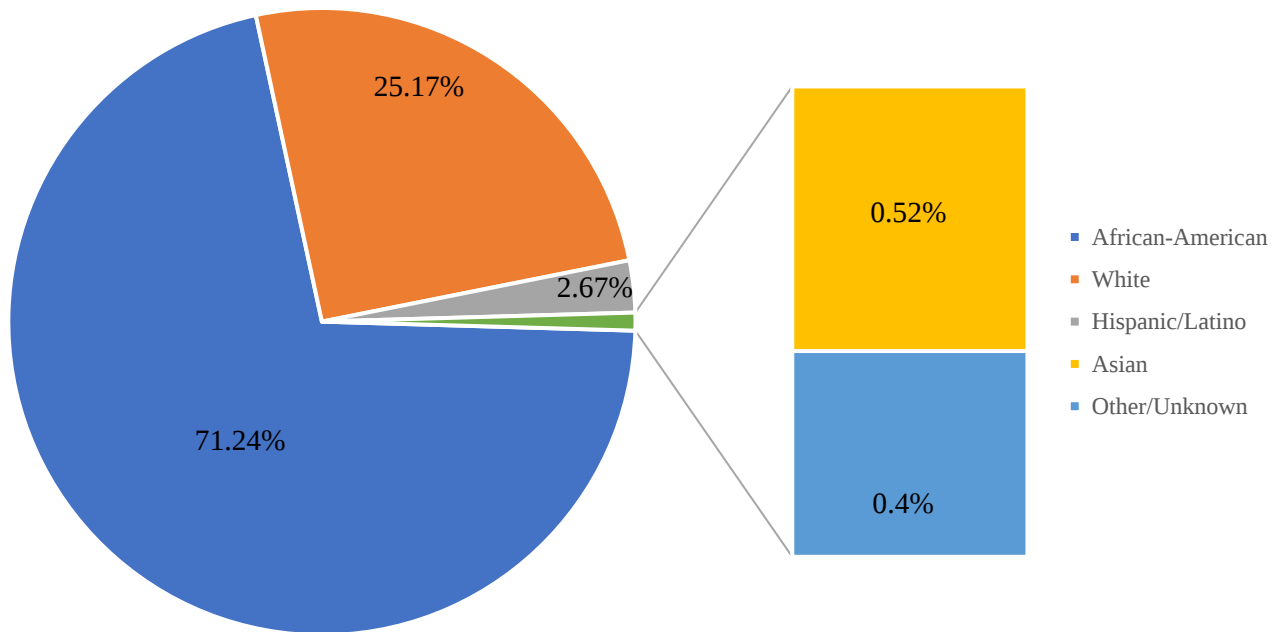
The NOPD has introduced a new form of Bias Free Policing and recognize gender identity as a formal classification of gender. Less than 1% of the crisis calls for service received were from consumers who identified themselves as transgender. The ratio of male to female persons in crisis was roughly 3:2.

Figure 07 - Incidents by Gender of Person in Crisis

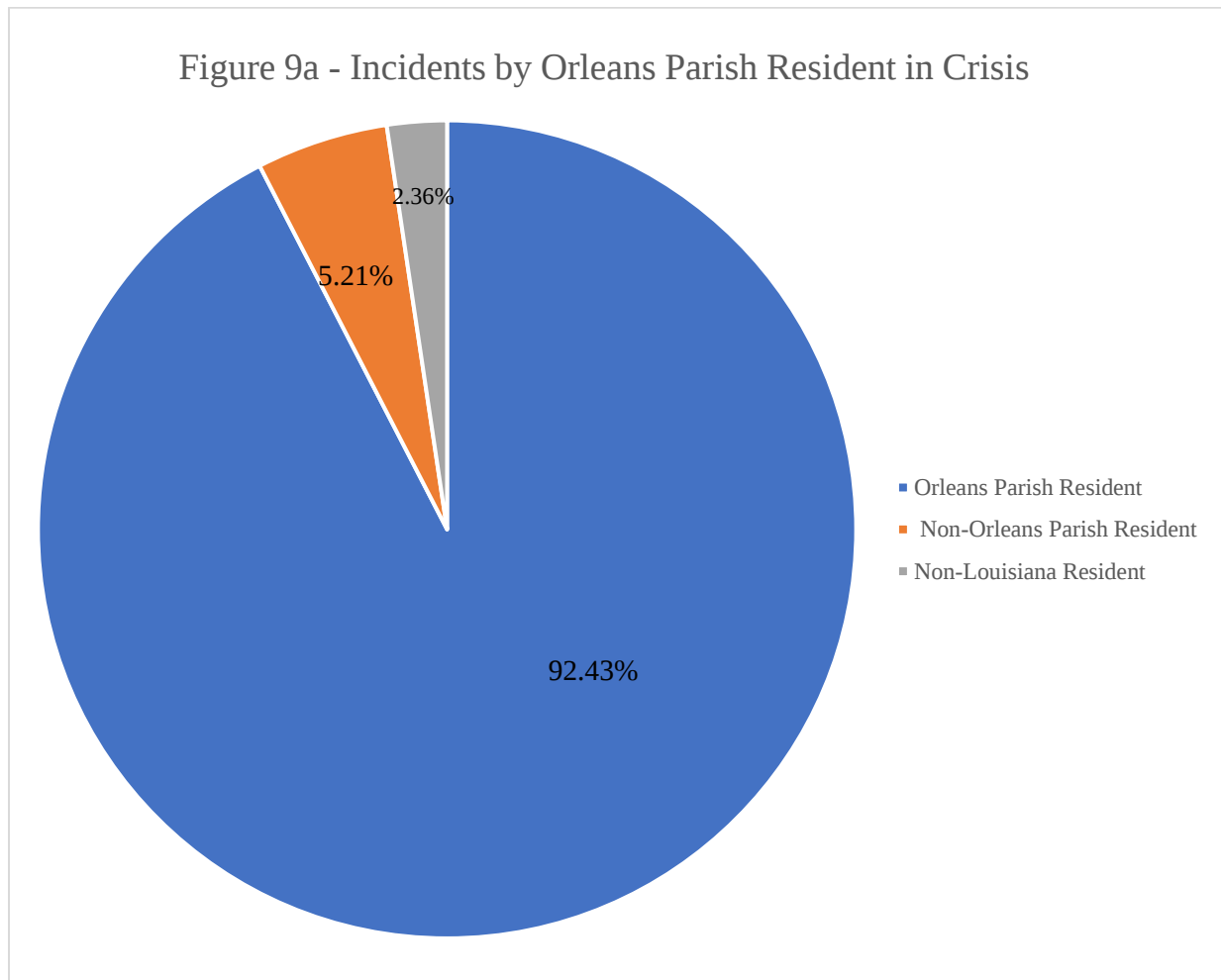


Nearly three-quarters of incidents involved persons in crisis who were African American, while one quarter were white and the remaining percentages identified as Asian, Hispanic, or another race. *Amongst the crisis calls for service received, 19 consumers in crisis requested or required translation services.*

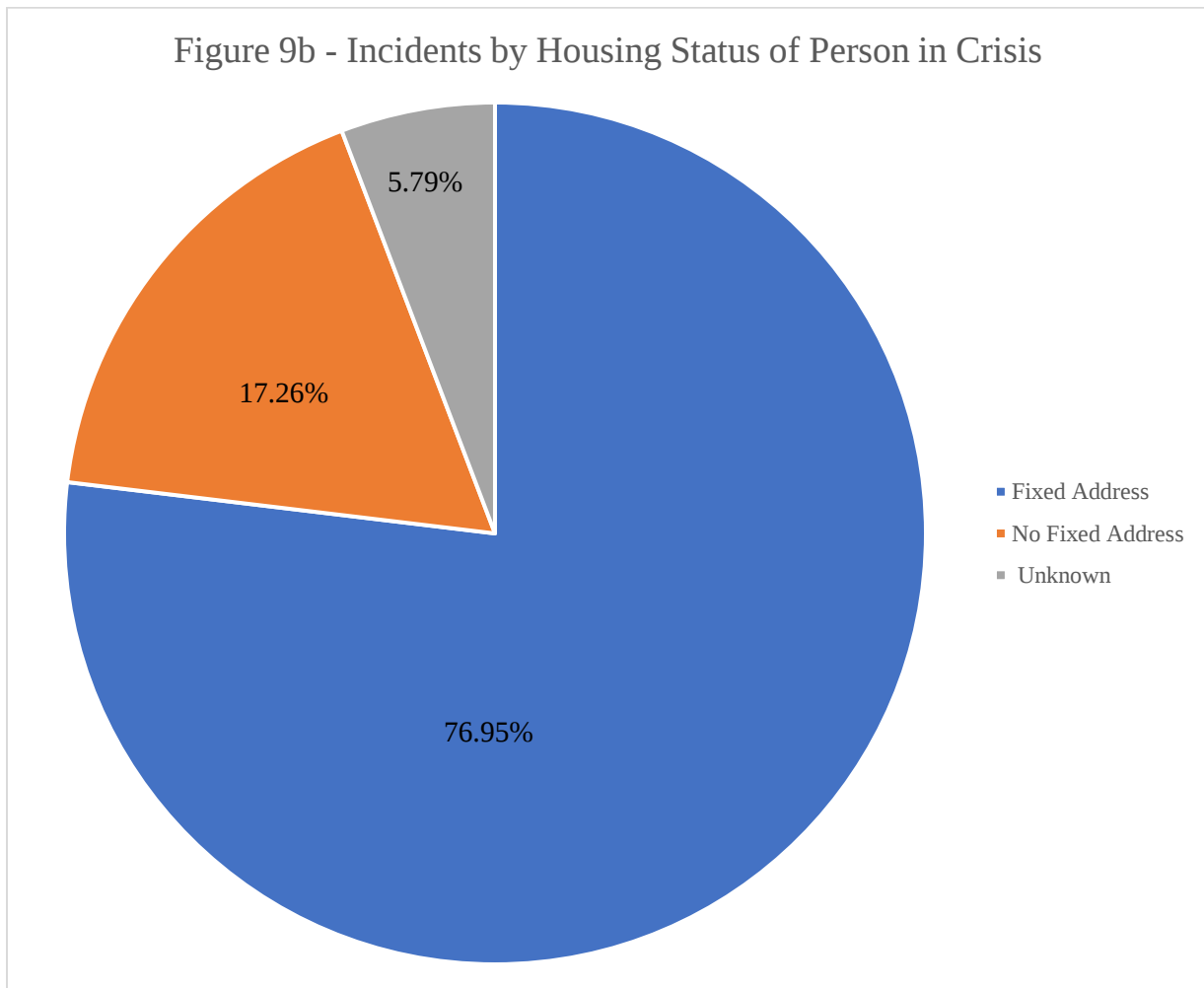
Figure 08 - Incidents by Race of Person in Crisis



The majority of persons in crisis were residents of Orleans Parish, while 5.21% resided in other Louisiana parishes, and 2.36% reside in another state other than Louisiana.

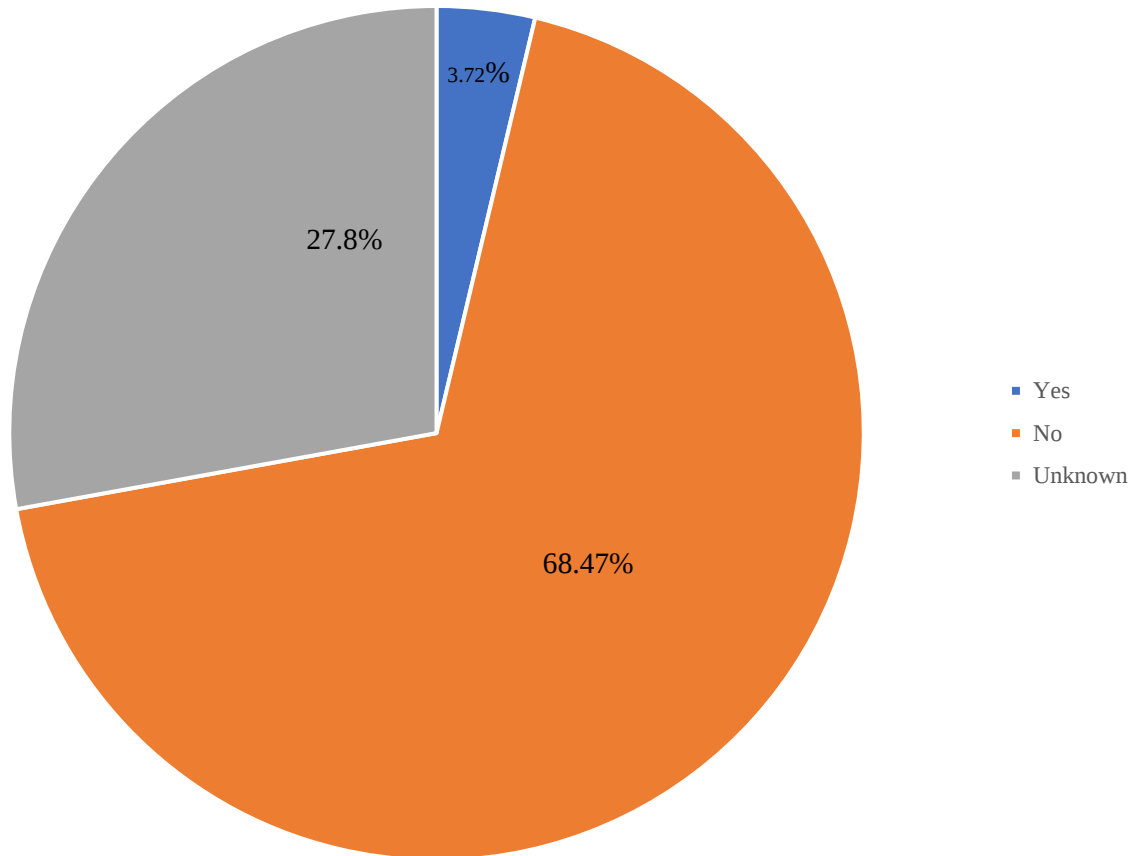


Roughly 17% of the crisis calls received involved a person who identified themselves to be homeless or not have a fixed address.



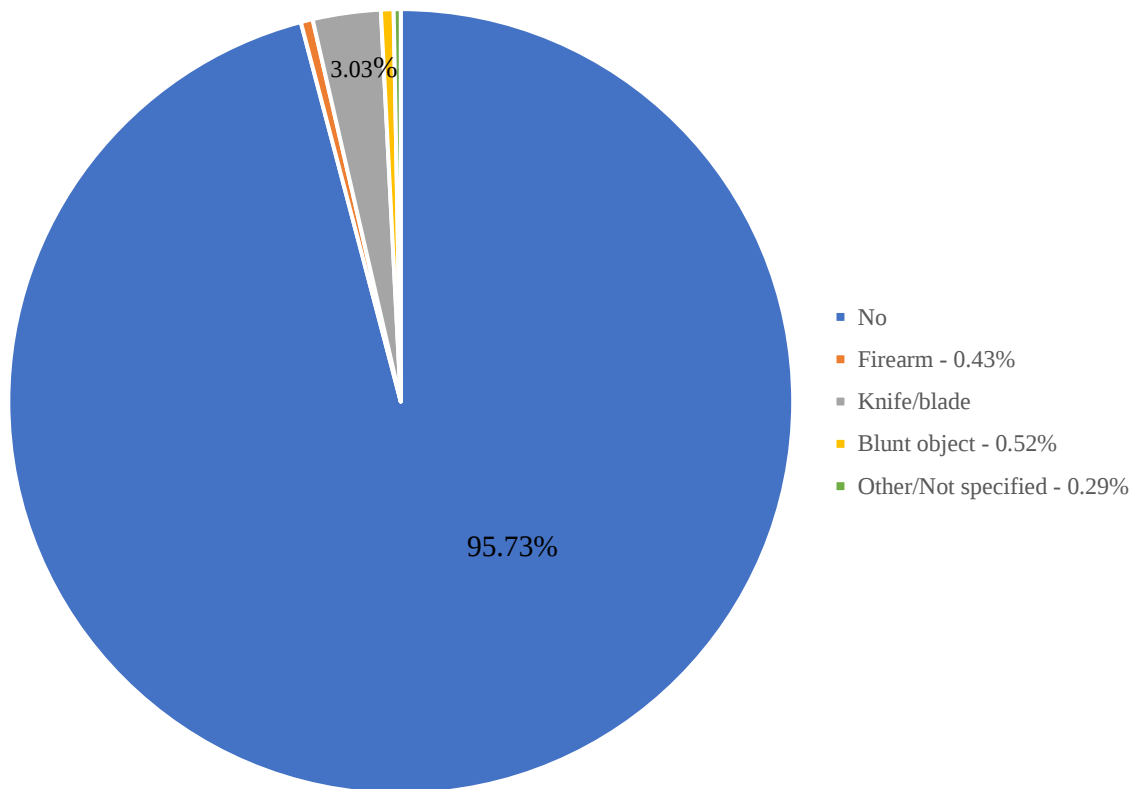
Roughly 4% of persons in crisis identified as veterans; the status of 28% of persons in crisis was unknown, while the remainder 68% were non-veterans.

Figure 10 - Incidents by Veteran Status of Person in Crisis



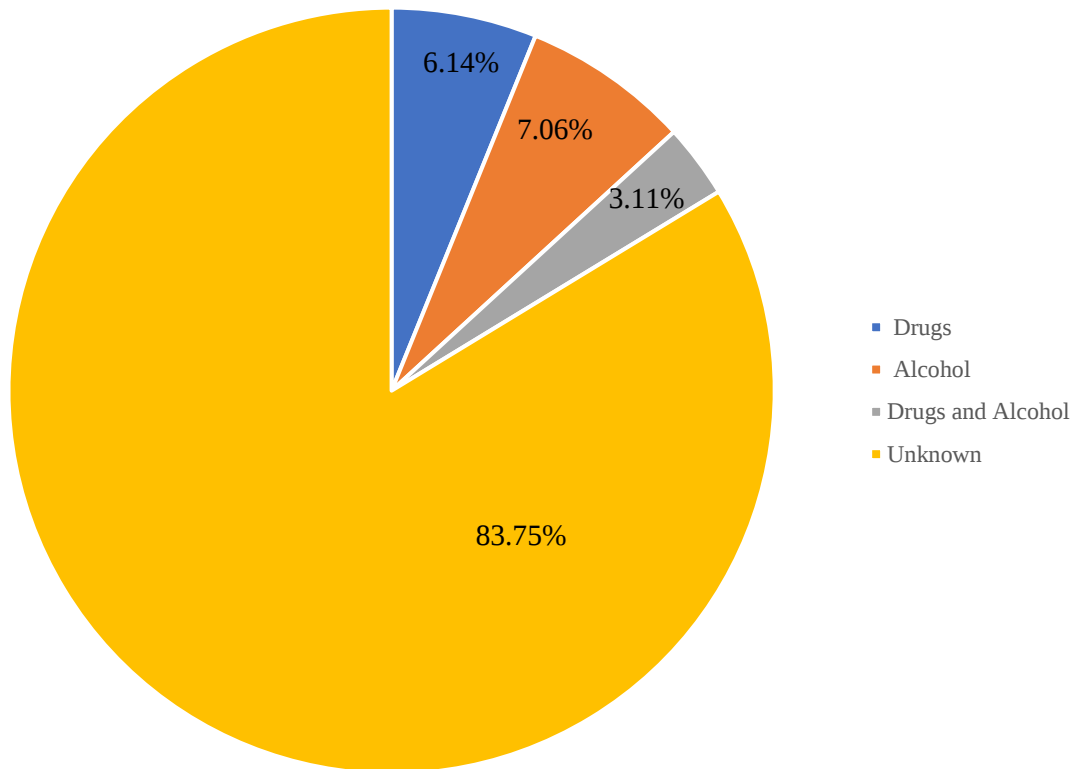
More than 95% of persons in crisis were unarmed.

Figure 11 - Incidents by Person in Crisis in Possession of Weapons



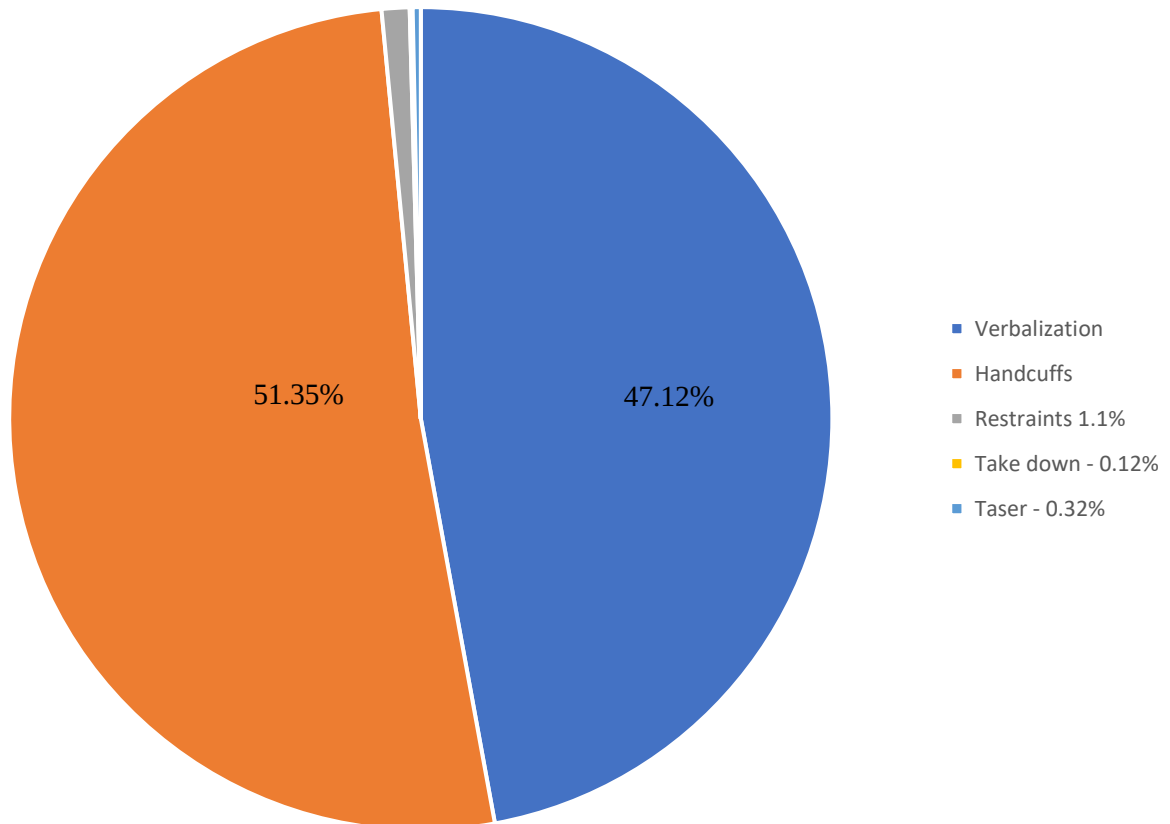
Nearly 6% of crisis calls received involved a person under the influence of drugs, while 7% involved a person who consumed alcohol and 3% involved a person under the influence of a combination of both drugs and alcohol.

Figure 12 - Incidents by Person Under the Influence of a Controlled Substance in Crisis



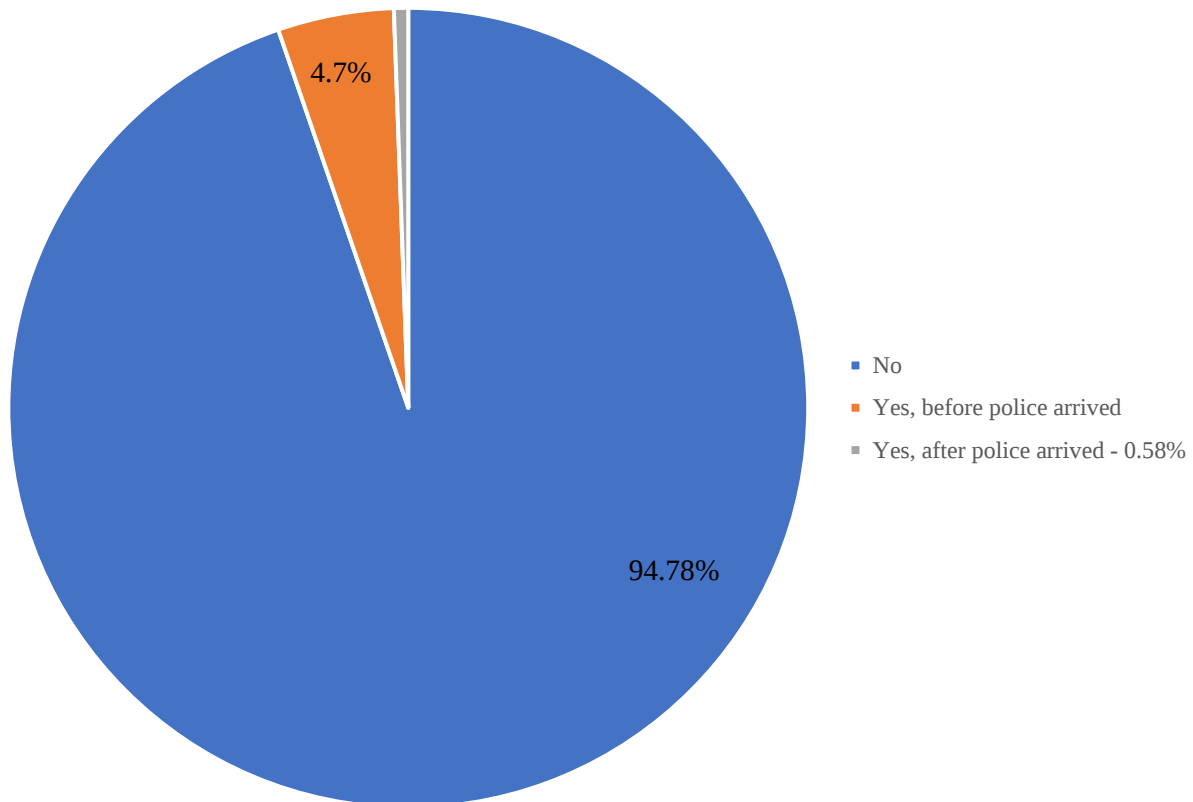
In 51.35% of instances, officers were effective in only using verbalization to de-escalate the incident before utilizing handcuffs or other restraints. In slightly less than half of interactions, officers applied handcuffs or other restraints due to a safety or flight risk or to facilitate safe transportation of the person in crisis. Techniques involving less-lethal force were utilized in 0.5% of cases.

Figure 13 - Incidents by Techniques Used during Crisis Call



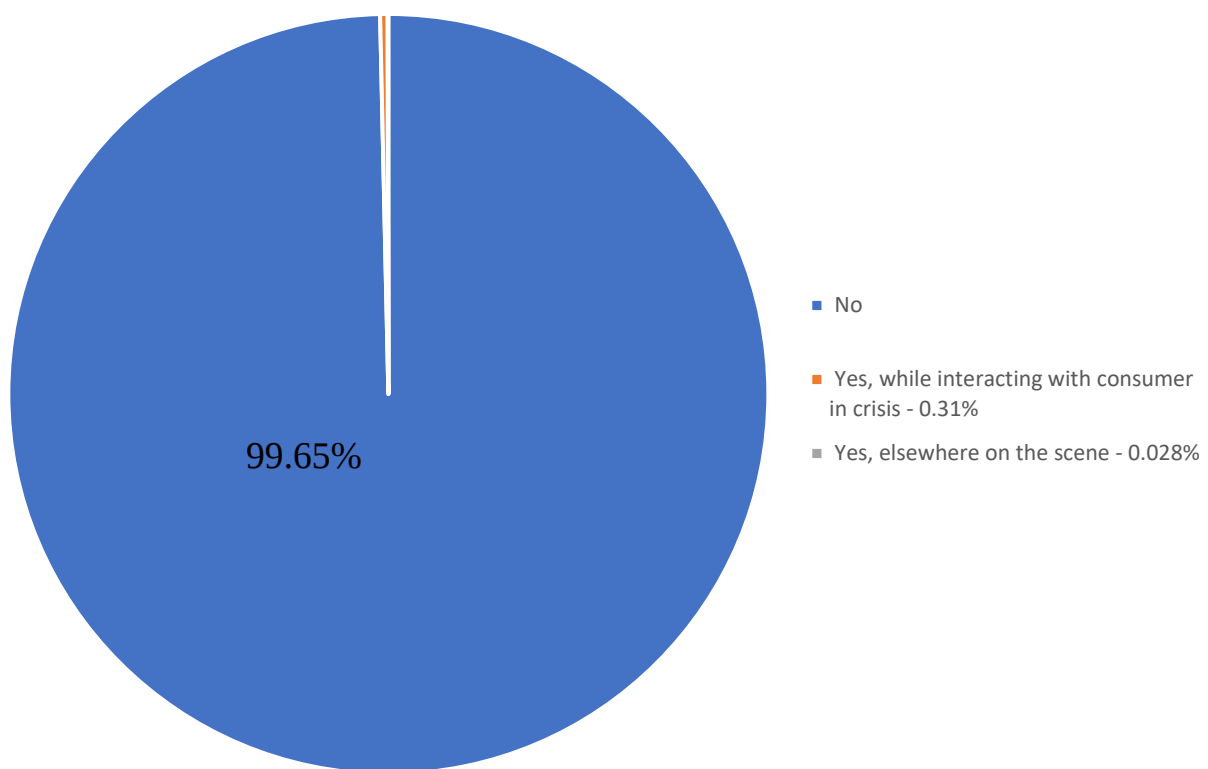
Roughly 94.78% of persons in crisis did not sustain injuries in the course of the call for service. 4.7% of individuals in crisis were injured prior to the arrival of the officers on the scene, and 0.58% were injured after police arrival.

Figure 14 - Incidents by Injury to Consumer in Crisis



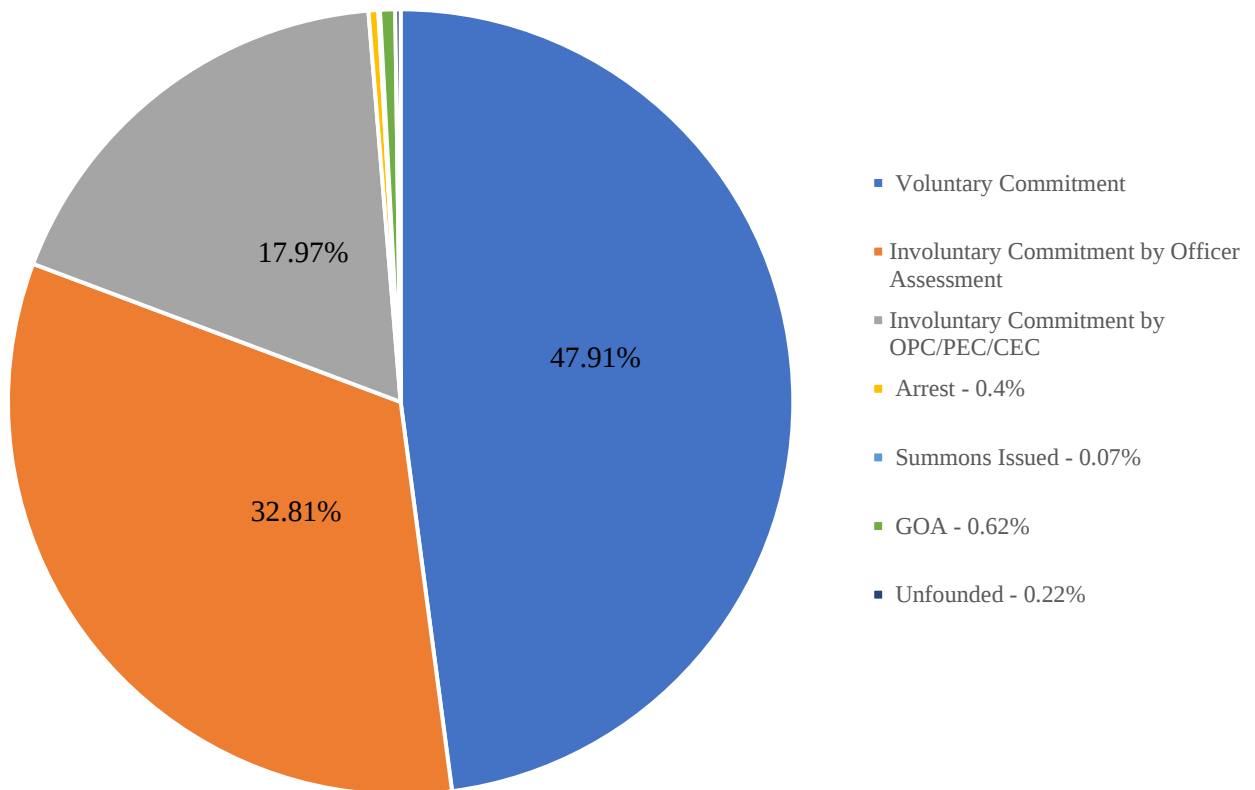
Approximately 99.65% of officers who were present on the scene with a consumer in crisis did not sustain injuries while on that call. 0.31% (11 officers) of officers who were present on the scene of a crisis call obtained injuries while interacting with the consumer in crisis and 0.028% (1 officer) was injured on the scene but was not interacting with the consumer at the time of the injury.

Figure 15 - Incidents by Injury to Officer While on the Scene of a Crisis Call



98% of incidents concluded with either voluntary or involuntary commitment to a psychiatric hospital for the person in crisis. The low percentage of arrests and summonses is partially attributable to the nature of crisis intervention form reporting. Officers complete crisis intervention forms on all calls with a final classification of 103M (Disturbance, Mental) but may not submit a crisis intervention form on calls that may involve a crisis but are not classified as a 103M (Disturbance, Mental). For example, if an officer arrests an individual in crisis for a battery, the officer may not complete a crisis intervention form, so the arrest of a person in crisis may not be captured.

Figure 16 - Incidents by Final Disposition



In most Crisis Calls a Supervisor was not present on the scene of the incident and that may attribute to many factors, including but not limited to, the final disposition of the call, the consumer voluntarily being transported or requesting medical attention, the consumer fully cooperating with the officer(s) for transport, the consumer nor officer sustained any injuries, and the officer was CIT Certified and was able to use his/her training to control the scene without incident. A supervisor was on the scene of fewer than 600 Crisis Calls in 2020.

