

City of Minneapolis

Minneapolis Community Safety Ecosystem Asset and Gap Analysis: Findings and Action Plan

December 2024

Policing Project at NYU School of Law



This report was undertaken by the Policing Project's Reimagining Public Safety initiative.

Learn more at SafetyReimagined.org.



Acknowledgements

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LETTER FROM DR. ANTONIO OFTELIE

Dear Mayor Frey, City Operations Officer Anderson Kelliher, and Commissioner Barnette,

The *Minneapolis Safe and Thriving Communities Report and Plan* provides a vision for the future of community safety and wellbeing. The plan also delivered an actionable framework for how Minneapolis can design and build a robust continuum of services and solutions that work “upstream” to prevent social challenges from manifesting as crime and disorder; “midstream” to respond to acute law, order, and safety incidents; and “downstream” to help heal trauma and build resilience for communities in the aftermath of these challenges.

The service continuum in the plan was grouped in three categories:

- **Preventive:** Services such as peacemakers, violence prevention, diversion, etc., that address near-term social, health, and economic challenges before they manifest as criminal behavior.
- **Responsive:** Services that address community safety incidents in real time through virtual response, civilian response, multi-disciplinary co-response, and sworn officer response.
- **Restorative:** Services that over the long term heal trauma from violence, address the root causes of community safety challenges, and help build the capacity for community resilience.

These three categories of services form a service ecosystem to holistically and equitably “wrap around” individuals, families, and communities to bring new solutions to neighborhood safety challenges and foster thriving families and communities.

Through rigorous and in-depth analysis of current Minneapolis community safety services and programs, and the systems that govern them, this *Findings and Action Plan* identifies existing barriers and opportunities for advancing the City’s community safety goals. The analysis focuses, amongst other areas, on opportunities to improve community safety services and efficiency; address equity issues in service delivery and provision; promote transparency and use of evidence-based practices; and

improve the integration of resources into a holistic ecosystem with coordinated and accountable governance structures.

Since its release, the City has taken a series of important actions in furtherance of the goals and vision set forth by the *Safe and Thriving Communities Report and Plan*. This *Findings and Action Plan* provides the City with a detailed map into where it must focus in order to effectively leverage, improve, and grow the existing components of its community safety ecosystem.

We are pleased to advance the *Minneapolis Safe and Thriving Communities Report and Plan* through this comprehensive *Asset and Gap Analysis: Findings and Action Plan*.

The City of Minneapolis, with the people of Minneapolis as a guiding force and the hard work of stakeholders across the City, will build the system and next generation of services to truly help individuals, families, and communities realize a safe and thriving future.

With resolve,

A handwritten signature in black ink, appearing to read 'Antonio M. Oftelie', with a stylized flourish at the end.

Dr. Antonio M. Oftelie

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BACKGROUND

The Policing Project at NYU School of Law, in collaboration with the City of Minneapolis, conducted a comprehensive asset and gap analysis of the City's community safety ecosystem, and produced this *Findings and Action Plan*. This analysis builds upon Minneapolis' *Safe and Thriving Communities Report and Plan*, which envisions a transformational approach to public safety by shifting from a traditional law enforcement model to one that integrates preventive, responsive, and restorative services aimed at promoting safety and well-being for all residents.

The goal of this analysis is to identify service gaps, areas of overlap, and opportunities for strategic improvement, and then provide the City with an actionable plan forward. The analysis draws on several sources of data, including the *Safe and Thriving Communities Report and Plan*, public data available through the City's data portal, data from a variety of City departments, findings from a multi-agency community safety questionnaire, and extensive follow-up conversations with safety providers. For the full methodology, see Appendix 1.

The *Safe and Thriving Communities Report and Plan* emphasized the creation of an interconnected ecosystem of services that "wrap around" individuals, families, and communities, addressing challenges upstream before they escalate, providing real-time responses to safety incidents, and fostering long-term healing and resilience. The approach integrates preventive services such as violence prevention, responsive services including modernized 911 and emergency response strategies, and restorative services that help heal trauma.

This *Findings and Action Plan* summarizes the findings and recommendations that resulted from this analysis. It is supported by an extensive Appendix section that contains the asset and gap analysis. (See Appendices 2 - 7.) By identifying existing gaps in these services, and proposing solutions to address them, this analysis aims to support the City of Minneapolis in building a more responsive, inclusive, and resilient community safety ecosystem.

The City has a strong base of existing programs and services, and motivated personnel who want to improve community safety for residents. That is admirable. Our analysis, however, found a number of issues that limit the City's ability to deliver community safety programming effectively at a systemic level, as well as program-specific challenges that should be addressed to improve services and outcomes. This

report contains numerous actions the City could and should take in order to create a coordinated, accountable, and highly effective community safety ecosystem to serve community members. This will not only improve the quality of City services; it will make it easier for the public to share in and celebrate the City's successes.

It has been our pleasure to work closely with the City to produce this report. We are grateful to the many dedicated staff—both at the City and with outside service providers—who helped us gather the information that was required. We appreciate the opportunity to support what truly is one of the most ambitious undertakings of this sort in the United States, and look forward to continuing our work together.

FINDINGS AND ACTION PLAN

Introduction

The City of Minneapolis has a solid foundation on which to build out its vision for community safety. One standout example is the City's alternative response system. The City already has transitioned approximately 9% of its calls for service to alternate responders, empowering other government agencies in the creation of public safety. This alternative response system has four parts: a behavioral crisis response team, the innovative use of traffic control agents, a very active animal control division, and the transition to using 311 and online reporting. Through a combination of critical governance improvements, policy changes, and strategic investments, the City has an opportunity to further scale these alternative services, as well as the preventive and responsive elements of the community safety ecosystem.

This analysis focused first on how the City's existing set of services can better serve Minneapolis residents. The most significant overall finding is that there is too much informality in the management of City programs and contracted services. Accordingly, this report begins with a set of governance actions to improve utilization, effectiveness, and accountability of the resources it currently has. Without a clear organizational chart and delineated responsibilities, discussed further below, most of the recommendations are made to the City, rather than to a specific agency.

Put simply, more active management and accountability measures are needed to ensure basic elements of effective operation. To give some examples: certain diversion programs were underutilized because there is no mechanism in place for referring clients to them; the network of City-funded violence interruption programs does not provide coverage during the times of day with the highest historical gun violence, and it is unknown whether State-funded providers fill this gap; and behavioral health crisis patients are not being systematically connected to available follow-up care. With more formal performance management, oversight, and transparency, such shortcomings and challenges can be addressed and the impact of the programs will grow.

The report then addresses the three areas of community safety – preventive services, responsive services, and restorative services – identifying specific steps for

improvement, and areas for growth or new programs. It is important that the City address the governance issues prior to or in parallel with program-specific efforts, in order to ensure that Minneapolis residents will get the value of any new investments. Further, any expansions should occur alongside a workforce analysis to identify the number of new staff the relevant unit or program would need, as well as any additional training and management oversight that is necessary for smooth and effective operations. Most expansion opportunities would have moderate to significant budget implications.

The City has made important progress in pursuing the vision put forth in the *Safe and Thriving Communities Report and Plan*. Now is the time to ensure that the structures are in place to manage and grow its investments so that every Minneapolis resident can feel secure and flourish in the City.

Governance

The most urgent and significant findings in this report involve the governance of the City's community safety ecosystem. These action items should be top priorities for the City overall, and, in many cases, for the Office of Community Safety (OCS) in particular. They will require dedicated resources and personnel.

The governance actions fall across five areas:

- Defining a Coherent Community Safety Ecosystem
- Managing and Supporting Community Safety Providers
- Reaching and Serving the Intended Population
- Measuring Performance and Impact
- Implementing Accountability Mechanisms

Defining a Coherent Community Safety Ecosystem

What programs are part of the community safety ecosystem? Who provides the services? How do agencies and programs interact with one another?

The Minneapolis community safety ecosystem is made up of many component parts; it is essential to account for all of them in order to avoid duplication, ensure effective coordination, and provide services at the time, place, and level that people need them

most. These elements include City agencies and offices, OCS vendors, non-OCS vendors, and entities outside City government. Ensuring that each of these components is accounted for, well-defined, and working in harmony with others must be a top order priority for the City.

The City lacks a clear organizational chart that puts service-providing agencies under an operational chain of command and defines the relationship of agencies and providers to one another – including their responsibilities around collaboration, data sharing, and problem-solving. Some department and office names also are points of confusion. For instance, on its face it is not clear what the difference is between the Neighborhood Safety Department and the Office of Community Safety that it sits within, all while online reports are filed through a resident services page titled Public Safety.¹

There also are disconnects among the agencies and programs that make up the community safety ecosystem, leading to a lack of coordination and mutual support between OCS services and providers. For example:

- Some preventive and restorative programs are not receiving client referrals from the Minneapolis Police Department (MPD) and lack basic MPD-held safety data that would help them tailor their efforts.
- The Minneapolis Health Department is creating a community safety action plan with the Youth Coordinating Board, as part of its work with UNICEF. However, it is unclear how OCS is involved in this plan, who has the responsibility for implementing it, and how the plan relates to the rest of the community safety ecosystem.
- Homeless encampment clearances are not ensuring that IDs, forms of communication, and other personal effects are kept with the individuals, which frustrates the work of those providers who are helping to house these individuals.
- It is challenging to know which programs are in the community safety ecosystem and if they are effective. For example, school-based health clinics

¹ City of Minneapolis, "Public Safety," City of Minneapolis, accessed December 16, 2024, <https://www.minneapolismn.gov/resident-services/public-safety/>.

are performing important work but the City does not track their impact on community safety.

Defining the City's community safety ecosystem means being intentional about who is providing the services, and how. Many components of the ecosystem are contracted out by the City. The decision about whether to house a program within the City or to contract with an external provider can be complex. Contracting can be more flexible and can involve the use of trusted, local providers who know their communities well. But this also creates challenges for contract management, accountability, transparency, and coordination. Shorter term or grant-funded contracts also can bring uncertainty to both staffing and the provision of services, impacting effectiveness. The City's existing mix of public employees, contract providers, and short- and long-term contracts creates challenges relating to consistency of services, data sharing and availability, contract management, and tracking and evaluation.

Finally, the community safety ecosystem must account for safety initiatives that operate in the same geographic or programmatic areas. With respect to City-funded programs, at times it was challenging to know whether multiple programs were delivering similar services. For example, while only four schools are served by the Police Athletic League, it is unclear what other programs are providing after-school services. If the City considers after-school programs to be part of the community safety ecosystem, OCS should know which programs are operating, what services they provide, and what their theory of change is. With respect to non-City programming, it is unclear if the City coordinates its funding priorities with non-City funders who support similar programming or even overlapping organizations. While this issue was most prominent with anti-gun violence programming, it likely applies more broadly.

Action Items

- The City should create an organizational chart for OCS that includes reporting structures, operational responsibilities, and relationships among City departments, offices, and programs. Entities should have self-explanatory names.
- The City should require agency programs and contracted community-based organizations to have a theory of change – an explanation of what the problem is, how their services address that problem, and how that will contribute to

community safety – so that the City can understand whether the program is effective.

- The City should issue a policy describing its approach to using contractors versus City providers, and how it determines the duration and funding mechanisms used for contracted services.
- The City should conduct a census of public safety-related programs that sit outside of OCS, such as after-school programs, to determine if and how they are part of the community safety ecosystem.
- The City should work with programs that receive non-City funding (e.g., County, State, federal, philanthropic community, etc.) to better coordinate service areas and operations, and explore opportunities such as referral relationships.

Managing and Supporting Community Safety Providers

Contracted organizations, including local community-based organizations and nonprofits, play a vital role in the community safety ecosystem, but OCS must do more to manage and support these providers. There is an urgent need for more coordination, transparency, accountability, and support for contracted services providers.

First, the City needs a reliable, responsive, and centralized contract management system. It was apparent that the City lacked essential information about the activities and performance of several of its contract providers. There were multiple instances of the agencies of Neighborhood Safety, Community Planning & Economic Development, and Neighborhood and Community Relations funding similar services, but it was not clear that these efforts were coordinated. Providers also expressed frustrations regarding communication with and responsiveness by the City. Without a contract management system, it is challenging to hold anyone accountable for maintaining productive relationships with providers.

At the same time, the City needs to support its providers adequately so that they can most effectively serve Minneapolis residents. Service providers lack access to high-quality crime- and safety-related data, which would allow them to better reach at-risk and justice-involved populations. They also expressed an interest in collaborating with entities across the ecosystem. Presently, there is no forum that brings together

City agencies, other providers, and organizations in a way that could: improve coordination among community safety programs and relevant City agencies; inform precincts about services within their boundaries; promote collaboration on local concerns and referrals; and engage City support where needed. Finally, providers – especially newer or smaller providers – will need capacity support to meet necessary reporting and accountability requirements referenced throughout this report.

Action Items

- The City should adopt a central contract management system to manage, communicate with, coordinate with, and oversee providers. The contract management system should include what requirements the contractor must fulfill, who within the City is the primary point of contact and what their role is, and how performance is to be measured, among other areas.
- OCS should co-host monthly meetings for local service providers and the Minneapolis Police Department (MPD), organized by precinct area, in order to share information, present on progress, and raise issues for the City.
- The City should embed MPD analysts within OCS permanently to provide data to providers, who require information to better tailor and inform their work.
- The City should provide basic program management and accounting training to contractors as part of the contract management onboarding process, so they have the tools to administer their programs appropriately.

Reaching and Serving the Intended Population

Throughout this analysis, it often was unclear who a given program was meant to serve, who among the eligible population was at the highest risk, how people were supposed to access programming, and whether program utilization could be measured. OCS should take immediate steps to ensure that its community safety programming is reaching the people who are eligible, starting with those who need it most.

On the front end, programs have not defined the eligible population and established clear referral pathways. Diversion services serve as instructive examples. It was not

possible to determine how many people might be eligible for diversion because the most important data point – arrest data – was not available. Furthermore, the City lacks clear referral policies regarding when a diversion referral should be made. Without a referral process, especially via MPD, there is little chance that all eligible people will reach the program and benefit from the services.

Language access is a theme that arose across multiple program types, which also impacts program utilization. Many providers felt they should be serving more non-English speakers but were not equipped to do so. The City currently lacks a mechanism to address this gap.

Action Items

- For each program in the community safety ecosystem, the City should define and quantify the eligible population, define utilization, set goals, measure regularly, and work with providers to address any barriers.
- The City should urgently address diversion programming utilization challenges, as the issue appeared most acute for these services. The City should partner with MPD, the Minneapolis City Attorney's Office (MCAO), the Hennepin County Attorney's Office (HCAO), and the County Behavioral Health unit to determine how many individuals are eligible for referral to juvenile deflection and diversion, gun possession diversion, behavioral health and substance use deflection and diversion, and restorative justice programming.
- The City should create special skills-pay incentives for public-facing employees who fluently speak in-demand languages (e.g., Spanish, Somali, Oromo, Hmong, and Vietnamese), and hold providers accountable for their ability to serve these populations.

Measuring Performance and Impact

The City suffers from serious gaps in the standardization, collection, and utilization of data. Programs funded by the City are not required to gather or share activity, performance, and safety-related data. This impedes the measurement of impact and the City's ability to coordinate responses.

The City's own data infrastructure needs the ability to record and track critical community safety data before it can be shared with the public. At present, the Computer Aided Dispatch System (CAD) does not disaggregate which complaints were made by the public via the City's online request system, making it hard to know how many people are using the system and track the impact of this innovative policy change. When it comes to dispatching an alternative responder to a 911 call (i.e., a responder who is not MPD, Emergency Medical Services or the Minneapolis Fire Department), CAD does not consistently reflect who responded. Then, once a response is dispatched, it is not clear whether arrests or transport locations are tracked systematically.

Finally, few City programs have undergone serious independent evaluations. This absence of evaluations hinders efforts to scale effective interventions and remedy underperforming ones, and it results in missed opportunities to celebrate policy successes.

Action Items

- The City should build data requirements (data collection, monitoring, and utilization) into the procurement process to ensure that providers record and share this data with the City.
- The CAD system should record and track information about how a request for services was received (e.g., from a member of the public, or via a specific City agency).
- The CAD system should record and share information about which agency or team responded to a call, and where first responders are transporting individuals they come into contact with.
- MPD should track individual arrest data (including the destinations to which officers are taking the arrested individuals), share anonymized arrest tables in addition to incident report tables, and audit the arrest tracking process to ensure it is functioning as intended.
- The City should create a research and evaluation unit within the Performance Management and Innovation Department to reinforce relationships with local academic institutions, ensure research goes through an external peer review

process, and enable the City to validate its programming more quickly. (Programs that are already good candidates for evaluation include the Behavioral Crisis Response and Traffic Control initiatives, School Based Clinics, the FATHER initiative, Step Up, violence interruption workers, and the Embedded Social Worker Program.)

Implementing Accountability Mechanisms

Accountability is essential in any system of public services and is lacking in many aspects of the community safety ecosystem. Violence interruption services are a case in point. The City does not seem to receive regular information about the activities of its violence interruption providers and the outcomes they are achieving. Organizations have not been instructed as to how they should coordinate with other City services and programs both for purposes of collaboration and de-conflicting. On the back end, there is no post-incident review process that brings all relevant stakeholders (City entities and violence interruption providers) together to determine which, if any, provider responded and what services were provided.

An informed and empowered public can play a role both in holding the City accountable for its commitments, and sharing in the celebration of its successes. Presently, there is no clear public information available regarding which programs are part of the OCS portfolio, what services and activities they are performing, and what outcomes they are achieving. The public lacks necessary transparency into its public safety ecosystem, which frustrates accountability and public awareness that could be helpful in supporting the City's efforts.

Action Items

- The City should ensure that community safety contracts, including violence interruption contracts, include deliverables, regular reporting updates, details on how those updates should be transmitted, and expectations about coordination with the other parts of the ecosystem.
- OCS should hold regular forums to review activity and progress, which are essential accountability measures. Two examples are shooting activation reviews and "ResponseStat," each referenced elsewhere in this report.

- The City should create a series of internal and public dashboards to track, measure, and share community safety ecosystem activity data.
- The City should create and post one/two-pagers for each funded program and initiative on its website.
- OCS should build out a communications plan that complements the City communications plan for sharing success stories nationally and locally in Minneapolis.

Action Items by Ecosystem Area

Preventive Services

Preventive services build individual, family, and community safety and resilience through programming aimed to break cycles of violence. This part of the public safety ecosystem includes programs that intervene to stop violence in real time. Preventive services also encompass community capacity-building programs focused on employment services, housing assistance, and fostering community connections that reduce the likelihood of violence in the first place.

Anti-Violence Programming

The City has made important investments in anti-violence interventions, but there are serious gaps in what is needed to make these programs effective.

There are time and geography gaps in the areas that anti-violence organizations cover. There presently are no violence interruption organizations contracted by the City to work in the neighborhoods west and southwest of downtown. Furthermore, there were no City-funded violence interruption organizations contracted to work in the City after midnight, when a quarter of shootings occur. North Minneapolis had no coverage at all on Sundays, the day with the second-highest level of gun violence in the City.

The processes by which violence interruption organizations receive incident information from the City, and how each organization is expected to respond, lack

clarity. Once a response has occurred, there is no review procedure in place to confirm that responders were deployed, review what resources community members were connected with, discuss the likelihood of retaliation and any post-incident events, and assess the outcome. Finally, anti-violence providers voiced a need for case management services. A medium for making effective referrals and maintaining client engagement would allow them to better serve their clients.

Community Capacity Programming

This section of violence prevention programming focuses more upstream, covering community-based supports such as help with housing, employment, and quality of life matters. Service providers across the ecosystem highlighted the significant lack of the sorts of community-based resources that are essential for preventing and addressing safety concerns. They identified a pressing need for employment, engaging after-school activities, housing, and mental and behavioral health services.

One area of particular need was “second chance” hiring, which refers to employment opportunities for people returning to the community from incarceration. The shortages here are acute. Over 200,000 people return from jail and prison each year in Minnesota, many of them from Hennepin County (which has 20% of Minnesota’s population). The Hennepin County Productive Day program, a County second chance program, reported a participant capacity of 24 individuals per year. Whether provided by the County, City, or both, there is a clear need for more job opportunities for returning residents.

Providers also cited profound challenges in helping to house individuals with chronic homelessness, behavioral health needs, and criminal legal system involvement. The issue of housing supply is outside the scope of this analysis, however, there are steps the City can take – ideally in partnership with the County and State – to better access and track what housing options there are. Current obstacles to better housing access include:

- Lack of a centralized referral and tracking system for available bed space.
- Lack of transportation for providers to connect clients to referrals, including shelter (the topic of transportation to services extends beyond services for the

population experiencing homelessness and was raised by numerous providers across the ecosystem as an obstacle to serving clients).

- The Homeless Encampment Outreach Team’s work shifts end before the time of day when shelters announce beds openings and accept referrals.

Finally, the work of outreach programs that address quality of life concerns is hindered by decentralized technology platforms. Teams such as Crime Prevention Specialists, the Homeless Encampment Outreach Team, and several others provide services to the people they encounter in the field. They record this activity on their own separate platforms. Other organizations, such as the Victim Navigators and Vacancy Strategic Inspections Group, frequently make requests for City services on behalf of the people they serve. Likewise, this activity is carried out and recorded on the providers’ own platforms. Due to these decentralized systems, the City lacks the ability to see what services people are asking for, analyze trends, and determine if problems are being resolved in a timely and effective manner.

Action Items

- OCS should implement shooting activation reviews – a monthly forum for violence intervention programming, MPD, and OCS to confirm that responders were deployed, track and measure outcomes, identify trends, and mitigate barriers to achieving intervention goals.
- OCS should develop a policy for notifying violence interrupters and the Minneapolis Public Schools safety team of incidents and develop activation protocols.
- The City should extend the contracted hours and coverage areas of violence interruption organizations to ensure they account for the hours and neighborhoods that experience the highest levels of gun violence.
- The City should create a formal partnership between the City and County to align funding and management for violence interruption contracts.
- The City should invest in case management support for clients of violence interruption programs. The City could launch the role of a Care Coordinator, a

responder who is a public employee, works between multiple programs, and receives warm hand-offs from violence interrupters.

- The City should identify potential roles within City government that would be eligible for second chance hiring initiatives, and then invest in expanding the capacity of the County's Productive Day program.
- The City should stagger the schedules of the Homeless Encampment Outreach Team so that it can operate during the hours that shelters announce new beds, and equip outreach teams with transport-capable vehicles.
- The City should launch a daytime and evening shift shuttle service that can transport individuals from City community safety interventions and homeless encampments to a pre-approved list of referral locations.
- The City, working with its partners in government, should implement a single point of entry referral system to streamline access to housing resources. This way, service providers can more effectively help their clients. The system should include a single phone number for shelter requests, real-time tracking of shelter beds across participating providers, and a referral to the shuttle service.
- The City should require teams that perform quality of life outreach and related interventions to utilize a single data tracking and reporting platform. Examples of such teams include the City's Crime Prevention Specialists, the Homeless Encampment Outreach Team, and the West Bank Business Association.
- The City should create a process for outreach and intervention workers to log service requests into 311, which would generate a tracking ticket. Examples of such teams include the Homeless Encampment Outreach Team, the Inspection Services Strategic Inspections Group, Victim Navigators, and the Crime Prevention Specialists.

Responsive Services

Responsive services provide real-time responses to community safety problems. The Minneapolis community safety ecosystem includes both in-person and virtual responses.

Minneapolis has already made significant investments in responsive services. Alternative responses across four areas – behavioral crisis response, traffic control, animal control, and 311/online – are together diverting nearly 9% of calls for service to non-police responders. The City can further grow its call diversion portfolio through closer management of its current programming and additional expansion opportunities.

The Alternative Response Portfolio Overall

The City lacks a management structure over its portfolio of alternative response programs. Currently, there is no regular forum for agency leadership to review performance and address operational issues. This is a missed opportunity to promote transparency, analyze trends, trouble-shoot problems, and ensure accountability for each alternative response program. Logistical hurdles also have hindered program operations in the past, but the City lacks a dedicated way to surface these issues and resolve them in a timely fashion. Finally, the City lacks a process to expand calls sent to alternative responses in an appropriate way. Without a dedicated effort for reviewing calls for service and identifying potential call types for non-police responses, the City is less likely to achieve its goal of diverting more calls.

Health-Related Alternative Response Calls

The City can make significant enhancements to its behavioral crisis response system to help ensure that people in crisis receive timely, appropriate, and comprehensive services. This section begins with a discussion of changes that are system-focused, and ends with a discussion about expanding to new call types.

The periods before and after a crisis response is dispatched are critically important. Resolving a 911 caller's concern on the phone can avoid the need to dispatch a responder altogether. Cities increasingly are assigning embedded social workers to take calls in 911 centers for this purpose. Many cities also provide follow-up services, commonly referred to as a second response, to the behavioral health crisis clients that they serve. Minneapolis lacks these types of pre- and post-crisis supports. Fortunately, the City is in the process of designing a pilot to include Embedded Social Workers within the Minneapolis Emergency Communications Center (MECC), who can resolve calls on the phone. In terms of follow-up services, there is a missed opportunity to

connect Behavioral Crisis Response (BCR) patients with County mental health resources because there is no secure linkage between the data collected by the BCR provider and Hennepin County. Closer collaboration with the County on these front-end and back-end supports would significantly strengthen the continuum of care.

Another limitation is that BCR presently is focused on reactive care – responding to 911 calls – and does not include a proactive element for reaching high-frequency utilizers of 911, homeless encampments, or locations from which calls routinely originate. It is common for alternative response teams like BCR in other cities to conduct outreach in high-need areas between calls and respond to “on view” incidents they observe.

The present system also continues to be more reliant on MPD than it needs to be. On the front-end, there are two call types – “person down outside” (calls when a person is on the ground from causes unknown) and overdoses – that receive a police and EMS response but should be considered for an EMS-only response. When it comes to calls already in progress, there also are opportunities to shift to non-police responses. There were several instances reported in which BCR responded to a call and then requested EMS assistance, but EMS would not go until MPD had cleared the scene. BCR should be able to request EMS assistance without first requiring MPD to clear the scene, unless there are indications that MPD assistance is needed.

In addition to these system-focused enhancements and policy changes, the City can expand alternative response by dispatching BCR to additional call types. At present, BCR is assigned to two call types: behavioral crisis response and welfare check-behavioral crisis response. There are several calls that, with training and the right level of staffing, should be considered for response by the BCR unit: persons in crisis calls; homelessness and homeless-adjacent anti-social behavior calls; calls with a behavioral health component that are currently coded as disturbances, trespasses, or unwanted persons; welfare/wellness check calls; suicidal ideation/threat calls; threats to jump; and drunk/intoxicated person calls.

Traffic-Related Alternative Response Calls

Traffic Control agents already respond to 16% of parking-related calls. This can be expanded via additional call types, better use of technology, and covering more days of the week.

At present, the team responds 24 hours per day for five days of the week, and then works normal business hours for two days per week. With additional staffing, the team could respond to more of their assigned calls and new call types such as: auto thefts and recovery of stolen vehicles where the offender is no longer on scene; and traffic collisions in which the vehicle is immobile or an in-person response is otherwise necessary (Traffic Control agents can file the reports for these types of incidents on scene, instead of utilizing police officers).

Finally, the paper-based system used to request tow trucks is holding back Traffic Control agents from responding to more calls. Currently, Traffic Control agents wait on the scene for the tow truck to show up, so they can physically hand them a paper-based tow request. With a digital solution, Traffic Control agents could submit the tow request and leave the scene to respond to additional calls.

Animal-Related Alternative Response Calls

At present, Animal Care and Control officers respond to nearly all animal-related 911 calls in the first instance. However, during overnight hours they operate on an on-call basis and for that period they cannot serve as the primary responder. By staffing Animal Care and Control officers 24/7, the team can respond to a greater share of their eligible calls and further reduce the burden on MPD.

311 and Online Reporting

The City has introduced online reporting for certain call types (theft, lost and/or damaged property, hit and run, credit card fraud), but there still is significant opportunity to expand. The City has not mandated use of the online platform, resulting in unnecessary calls directed to police. Because these calls are received across multiple platforms (online, 311, and 911 after hours), it is challenging to assess current utilization of online reporting with available data.

Certain calls for service can be shifted entirely online, sunsetting the use of 311 or 911 for taking these reports. This could include, at a minimum, all online reports related to: motor vehicle incidents in which there is no injury, and the parties have agreed to exchange information or one party is no longer on scene (damage to motor vehicles, hit and run without an injury, and theft from motor vehicle); forgeries; property

damage; and thefts when offenders are no longer on the scene. Moving these calls to the online system will require an effective communications campaign, as well as a focus on accessibility (e.g., kiosks stationed at public offices, trained librarians for those who need assistance or internet access for filing).

New Approaches

There are additional 911 calls that are handled by police but could be addressed without a police dispatch via new approaches.

Almost 3% of all Minneapolis calls for service, or over 11,000 calls per year, are for burglar alarms. The City of Minneapolis does not have a verified burglar alarm policy in place, which peer cities have used to ensure that calls are bona fide before dispatching police. Although burglar alarms are an important layer of community safety, 95% of burglar alarm calls nationally are false.² Assuming Minneapolis experiences a similar rate of false positives, that means MPD may have responded to over 10,000 calls alone last year that did not require a response at all. To combat this issue, the City of Milwaukee implemented a verified response system that requires alarm companies to first contact the property or use video to verify that a burglary is in progress, and then contact 911. This reduced calls for burglary in Milwaukee by 97%, resulting in 29,000 fewer calls.³

A meaningful portion of Minneapolis' 911 calls involve low-level conflicts that can be handled by non-police responders trained in mediation and report-taking. Other cities have community service officers, ambassadors, or mediator-type responders for calls that are outside of the behavioral health/homelessness/substance use space but are non-violent and do not require law enforcement. These calls could include suspicious or unwanted person calls, noise complaints (e.g., firecrackers, loud party, music-loud), customer trouble, tenant trouble, and certain incidents where the offender has left the scene but report-taking and victim services are required. This is a longer-term

² Blackstone, E. A., Hakim, S., & Meehan, B. (2020). Burglary reduction and improved police performance through private alarm response. *International Review of Law and Economics*, 63, 105930.

³ "Burglar Alarm Policy," Milwaukee Police Department, accessed October 30, 2024, <https://city.milwaukee.gov/police/Information-Services/Burglar-Alarm-Policy>.

opportunity, as the City would have to design the roles, write the policies, and staff and equip the new positions.

Action Items

- OCS should implement “ResponseStat” as a means of governing the City’s responsive programming. This would be a monthly forum for alternate response programs to examine call data, track and measure outcomes, identify trends, address logistical challenges and mitigate barriers to achieving program goals.
- OCS should implement an annual calls for service review process to identify additional call types that can be considered for non-police response.
- The City should write a policy requiring agencies and providers to maintain a minimum ratio of backup vehicles to operational vehicles.
- The City should implement a 911 crisis care system that includes the ability for: embedded clinicians to resolve concerns pre-dispatch; behavioral care first responders to respond to calls in lieu of police; all first responders to be able to transport patients to behavioral health care centers; and follow-up to ensure the connections were appropriate for the concern. The City is already working on an embedded 911 social worker pilot. This could be done via an expansion of the existing County Embedded Social Worker (ESW) program. Enhancements to BCR as previously discussed would increase the footprint of the behavioral care first responders, and identified policies would clarify and formalize the role of alternate destinations as transport options for patients experiencing behavioral and mental health concerns. Finally, MPD, Minneapolis Fire Department (MFD), and BCR should systematically share their data with the County so that Hennepin County Behavioral Health Center’s existing system can be used to conduct follow-ups on patients, potentially also through the ESW program.
- The City should expand BCR to include proactive outreach.
- EMS should be able to respond to BCR’s calls for assistance without MPD arriving first, unless there is a documented scene safety concern.

- EMS should respond to additional call types without MPD, where safety concerns are minimal. Such calls should include overdoses and “person down outside.”
- The City should expand eligible call types for BCR dispatch to persons in crisis; homelessness and homeless adjacent anti-social behavior; calls with a behavioral health component that are currently coded as disturbances, trespasses, or unwanted persons; welfare/wellness checks; suicidal ideation/threat; threats to jump; and drunk/intoxicated persons.
- The City should expand Traffic Control responses to 24/7 and expand the list of eligible call types to include those such as auto thefts, recovery of stolen vehicles, and traffic collisions in which no one is injured but an in-person response is required.
- The City should implement a technology solution to replace paper-based tow truck requests.
- The City should expand Animal Control responses to 24/7.
- The City should mandate use of online reporting and include more call types such as those related to certain property damage, motor vehicle incidents, and thefts.
- The City should implement a mandatory verified burglar alarm policy.
- The City should launch a full-time community service ambassador and/or mediator role for non-violent 911 calls such as neighbor disputes, noise complaints, non-threatening disorderly conduct, and report-writing calls that require an in-person response.

Restorative Services

Restorative services include supportive resources and programming that help provide healing and stability following a traumatic event. This section examines justice diversion services, which can help to reduce criminal justice system involvement; health care services that provide treatment and education; and victim support services.

Justice Diversion Services

This analysis found significant gaps in the utilization and monitoring of diversion and related programs for justice system-involved individuals. The City lacks program referral policies, tracking mechanisms, and performance data, leaving programs underutilized and individuals without the support they require.

Programs like the Gun Diversion initiative in particular have shown a positive impact, but the eligible and priority populations need to be identified, and a referral process to facilitate these connections should follow. The City also lacks policies for MPD, MFD, EMS and BCR regarding when individuals with substance use issues should be transported to the Let Everyone Advance with Dignity (LEAD) program or Hennepin County Behavioral Health Center.

Schools represent another missed opportunity for diversion. Currently, MPD and MCAO are the only two pathways into restorative justice programming. School-based referrals would provide schools with an avenue for resolving conflicts before they have to engage the justice system.

Finally, the City lacks a platform to collect diversion data, and has no tool for monitoring the activity, performance, and outcomes of these programs. Accurately collecting and monitoring diversion data will involve multiple entities including OCS, MPD, HCAO, and Hennepin County Behavioral Health Center. Without these tools, there is no process to track utilization, hold stakeholders accountable for using the programs, and ensure effectiveness.

Victim Services

There are gaps in the City's support for crime victims. There is no City-level position focused on victim services. Such a position could ensure that the City's crime victims are receiving the services they are eligible for, coordinate with the County, and liaise with NSD Care Navigators. Additionally, the City should address the dearth of programming for victims who fall into two categories: 1) victims of crimes that are not domestic, sexual, or gun-related, and (2) victims who have filed a complaint, but charges have not yet been filed.

Health-Based Services

The City's School Based Clinics aim to serve student populations that are marginalized, have experienced traumas, have low trust in health services providers, and lack access to care – especially care that is culturally affirming and inclusive. They are co-located at a selection of City schools and are staffed by Public Health Department employees. These programs report high demand, backlogs of students waiting for service, and an unmet need for dental work.

The City also has a Public Housing Substance Use Disorder program. The program provides services in five of the Minneapolis Public Housing Authority's forty-two high rises and uses contract employees rather than Public Health Department employees. The decision to rely on contract workers for health programming in public housing while using public employees for health programming in schools is a missed opportunity to streamline and standardize aspects of both of these service models.

Action Items

- OCS should implement policies that clearly articulate 1) when MPD and MCAO should divert individuals who are eligible for arrest diversion, 2) where officers should transport individuals who are eligible for arrest diversion, and 3) how referral interactions should be documented.
- MPD, MFD, EMS, and BCR should develop a policy for transporting individuals to the LEAD or Hennepin County Behavioral Health Center (or other similar programs as approved by OCS/Health Department leadership) in lieu of arrest or transport to the ER.
- OCS should require tracking and reporting of critical diversion data points, and then partner with the HCAO and Hennepin County Behavioral Health on a centralized diversion data warehouse and dashboard.
- The City should ensure that all schools have a formal referral pathway into restorative justice programming, documented in policy.
- The City should create a director-level Victims Advocate appointee within OCS with oversight over all victim programming in the City.

- The City should formalize and expand the NSD Care Navigators to provide services to all victims of crime in the City, as well as a formal linkage to police department notifications regarding victimizations.
- The City should expand the School Based Clinics, with priority given to schools in areas experiencing high levels of gun violence.
- The Public Housing Clinics should follow a model similar to the School Based Clinics, which would involve permanently co-locating on site during the day and utilizing Minneapolis Health Department employees.

Conclusion

The City of Minneapolis has made major strides in building out its community safety ecosystem, particularly through its innovative alternative response portfolio, commitment to expanding non-police interventions, and dedicated network of providers. However, as this analysis has shown, significant governance challenges—such as informality in program management, lack of coordination, and underutilization of existing services—are hindering the effective delivery of these services. To realize the full potential of its community safety ecosystem, the City must prioritize stronger oversight, accountability, and coordination to ensure existing programs operate at their highest capacity. Additionally, targeted investments in preventive, responsive, and restorative services should be made in tandem with workforce analysis and capacity-building efforts to avoid fragmentation and maximize impact. By addressing these foundational issues, Minneapolis can ensure that its community safety programs are not only innovative but also sustainable, equitable, and responsive to the needs of all residents, ultimately fostering a safer and more resilient community.

APPENDIX 1: Methodology

The Policing Project Team (the Team) gathered data through three methods to inform the *Asset and Gap Analysis*:

- A multi-agency questionnaire
- Follow-up conversations with agencies who completed the questionnaire
- Review of City data

Community Safety Questionnaire

To kick off data collection efforts for this project, the City of Minneapolis' Office of Community Safety and its Performance Management & Innovation Department distributed a questionnaire to City departments, agencies, and contracted entities that work to create community safety in order to catalog information about what they do, who they serve, the data they collect, and the geographic and time limitations of their services, among other information. The City received back a total of 107 questionnaires – 68 from City entities and 39 from non-government contract entities. In consultation with the City, we excluded 45 questionnaires whose programming fell outside the ecosystem of community safety as laid out in the *Safe and Thriving Communities Report and Plan*, and one program that was no longer active.

Below is a breakdown of the types of information gathered from the questionnaire.

Program Funding

We asked each respondent whether or not the initiative was funded by the City, and if not, by whom. We did this for three main reasons: we wanted to know if the City's continued funding would have any impact on the continuity of programming; we wanted to know if the City would be able to adjust the level of programming unilaterally; and finally, depending on who was funding the initiative, we wanted to know if external technical assistance would be available, such as with federal grants.

Program Staffing

To account for staff spending part of their time working on community safety initiatives, we asked respondents for the cumulative full-time equivalents (FTEs) of all staff members working on the initiative.

Demographics and Reach

We asked programs to share:

- Which demographics of people were served by the initiative
- The unique count of individuals these programs were coming into contact with
- The unique count of engagements programs had with clients or patients
- The tools organizations required to expand the number of people they could serve to enhance their impact

Geographies of Programming

We asked each respondent to identify the boundaries within which their programming operated. We then, as relevant, overlaid this with crime and offense data⁴ to see if the boundaries of the programming cover the need sufficiently.

We asked organizations to detail why they operated within these geographic boundaries and to identify the constraints to expanding outside of them. Responses to these survey questions shed light on why organizations have specific geographic footprints and also provided insight into what organizations would need, should they desire to expand their efforts.

⁴ Offense data is made up of reports that police officers file that detail the elements of the crime or incident. An offense doesn't necessarily equal an arrest.

Availability of Programming

We asked organizations if they were able to serve everyone who needed their services within their program geography, the reasons why they were unable to serve everyone (if applicable), and constraints to expanding their programming.

Program Operation Details

We asked about days of operation and operating hours for organizational programming. Additionally, we inquired about the reasons why organizations were operational during specific hours and what organizations needed to expand their hours. The goal was to understand if the programs were available during the times that they were in demand, and, if not, to determine what resources would help meet the need.

Externally Validating the Work

We asked each respondent to tell us whether or not their work had been externally validated by an independent evaluator, and, if so, to name the evaluator. This is important for a number of reasons. First, we wanted to understand to what extent City-funded programming is evidence-based. Second, we wanted to identify any opportunities to show the public how programming is working. Finally, we wanted to see how the City may be contributing to the national conversation about creating community safety with examples of its own work.

Barriers and Needs

We asked respondents to identify barriers to providing services to their clients, the tools they would need to serve more people, and what additional services were needed in their communities. We used this information to inform follow-up conversations. It also informed the action plan following the *Asset and Gap Analysis*.

Follow-Up Conversations

The Team conducted 65 follow-up conversations across the ecosystem with organizations funded by the City, partner agencies to the City and the County, and City departments under the Minneapolis Community Safety umbrella. The purpose of these conversations was to supplement our survey findings, better understand what data was being shared between vendors and the City, and learn about any new programming planned to address existing gaps. Each conversation, conducted either on Zoom or in person, lasted approximately an hour.

Review of City Data

The Team analyzed available data from the Minneapolis Emergency Communications Center (MECC), MPD, and 311 related to gun violence and calls for service to relevant events via their Computer-Aided Dispatch (CAD) system, the Police Information Management System (PIMS), and the 311 case management system. For dispatch data we used 2023 data, as there were significant changes in response policy that resulted in a larger number of calls being dispatched to alternate responses in that year, and it most closely resembles the pattern of dispatches in 2024. This data was used to understand current service levels and the potential demand for those services. Data specific to each service type is embedded in its respective current state analysis below. A broader overview of Minneapolis police calls for service is found in Appendix 7.

Limitations of Asset and Gap Analysis

This analysis was generally limited to those entities that responded to the questionnaire, with a small number of exceptions when programs and organizations came to our attention through other means. Further, follow-up conversations were limited to those agencies or providers that agreed to participate. This analysis is informed by the available data and, as noted when relevant, may not necessarily be a representative sample. Throughout the report, we note when data was unavailable or the analysis was limited to a sample, and how this impacted the analysis and findings.

Structuring the Analysis and Findings

Our findings are broken out in the same manner as the community safety ecosystem laid out in the *Safe and Thriving Communities Report and Plan*:

- Preventive Services, further broken out into programs that build the capacity of the community to live safely and heal from trauma, and programs that specifically target and intervene in violence and conflict.
- Responsive Services, (excluding MPD, MFD, or Emergency Medical Services (EMS) responses) to calls for service that currently exist in the City.
- Restorative Services, further broken out into justice diversion programs and healing and victim services.

Complementing the findings from the community safety ecosystem is a Calls for Service Analysis, which identifies the universe of calls for service in the City that should be further investigated to identify suitable calls to shift over to appropriate responsive services.

Finally, our findings culminate in an action plan. This plan proposes actions that the City could take to make the preventive, responsive, and restorative services more effective at creating community safety. The plan also includes administrative structures that the City could put in place to make sure its programming has all the support it needs to be successful, and the City is able to communicate those successes to the public.

APPENDIX 2: Preventive Services (Community Capacity-Building Initiatives)

The *Safe and Thriving Communities Report and Plan* describes preventive services in part as upstream programming and services that can help build resilience to violence and crime in individuals, families, and communities. This section examines a sample of programs to gain insight into how the City of Minneapolis currently builds that resilience through employment, housing, and interventions that bring the community together as mentors, advisors, and problem solvers. (Programming related to violence prevention is addressed in the following section.)

Twelve organizations with preventive interventions responded to the City's questionnaire and were engaged via follow-up conversations. The results were then combined with spatial data from the Minneapolis Emergency Communication Center and compared with similar programming from across the country.

This section includes data and analysis from the programs identified by the City as important components of the preventive community safety ecosystem. These programs do not cover the entire landscape of preventive services in the City but were those that responded to the questionnaire sent out by the City. Examining these programs – the work they do, their role in the landscape, and their relationship to the City – allows us to understand what gaps must be addressed in order to achieve the *Safe and Thriving Communities* model for preventive services.

Desired State

We examined three distinct types of preventive programming the City has focused on to build community capacity to reduce violence:

- **Employment** – These organizations provide paid internship opportunities for youth, help connect people with jobs in the community, provide support for those with disabilities in the workforce, and offer career training and education that helps individuals earn credentials for employment.
- **Housing** – These organizations connect homeless individuals with housing, and restore vacant housing to add them back to housing stock.

- **Community Connections** – These organizations strengthen connections between the school-age community and their schools, or between the community and the police.

Employment

Employment opportunities can be an effective upstream prevention tool for the creation of community safety when they are made available to or even specifically targeted at the population most at risk of criminal justice involvement and/or victimization.

- Summer youth employment programs have shown that they are able to reduce involvement in the criminal justice system while providing income and connections to career options after the student leaves the school system.⁵ When targeted at schools that serve communities experiencing violence and unemployment, this impact is amplified.
- Adult workforce development programs can create similar results when they are targeted at unemployed and underemployed residents. Such is the case with responsible fatherhood programs, which include job connections along with behavior modification interventions.⁶
- Finally, community violence intervention programs can have a dual impact. While their primary goal is to reduce violence in the community from direct interventions, they also serve an employment-related benefit by virtue of the fact that they hire from the community. The individuals they hire are also at a reduced risk of victimization or criminal justice involvement because of their employment, a concept known as the incapacitation effect.

⁵ Li, Yiping, and Kalila Jackson-Spieker, “The Promises of Summer Youth Employment Programs: Lessons From Randomized Evaluations,” *Poverty Action Lab*, September 2022. https://www.povertyactionlab.org/sites/default/files/publication/SYEP_EvidenceReview-5.25.22.pdf.

⁶ Anwar, Shamena et al. “Job Training Programs as Crime Deterrents? Evidence from a Low-Income Training Program RCT,” Annenberg Brown University, February 2022. <https://edworkingpapers.com/sites/default/files/ai22-543.pdf>.

Housing

Providing stable housing to individuals experiencing housing instability and homelessness is a preventive measure to create safety before a concern rises to the level of enforcement or a 911 call. And vacancy remediation can address unsafe community conditions and increase housing stock, reducing housing pressure and promoting community safety at the neighborhood level.

- Individuals experiencing homelessness are more likely to be victims of violent crime, develop healthcare conditions associated with exposure to weather, and experience mental health concerns.⁷ Providing housing access for this population can promote safety while reducing the burden on law enforcement so that they can address other more pressing issues.
- Abandoned and vacant housing has been shown to be associated with violent crime, and its remediation not only addresses housing concerns, but had significant impacts on gun violence.⁸

Community Connections

Social and civic connections increase a community's ability to address concerns before they rise to the level of violence or crime. Participation of the community in local governments improves the representation of traditionally marginalized communities in decision-making and prioritization of their concerns.⁹ Participation of youth and parents in the community increases the bonds between students and their schools,

⁷ Hong, Chenglin et al. "Violence Victimization, Homelessness, and Severe Mental Illness Among People Who Use Opioids in Three U.S. Cities," *Journal of Interpersonal Violence* 38, no. 19–20 (July 18, 2023): 11165–85. <https://doi.org/10.1177/08862605231179720>.

⁸ South, Eugenia C. et al. "Effect of Abandoned Housing Interventions on Gun Violence, Perceptions of Safety, and Substance Use in Black Neighborhoods: A Citywide Cluster Randomized Trial," *JAMA Internal Medicine* 183, no. 1 (January 1, 2023): 31. <https://doi.org/10.1001/jamainternmed.2022.5460>.

⁹ "2024 National Findings Report," *County Health Rankings & Roadmaps*, 2024. [https://www.countyhealthrankings.org/sites/default/files/media/document/2023 County Health Rankings National Findings Report.pdf](https://www.countyhealthrankings.org/sites/default/files/media/document/2023%20County%20Health%20Rankings%20National%20Findings%20Report.pdf).

which improves attendance, behavior, and even long-term outcomes in adulthood.¹⁰ These increased bonds and representation improve health and economic outcomes of the community at large.¹¹

From a community safety perspective, social connectedness reduces the risk of suicide, substance use disorder, and conflict.¹² In addition to preventing community violence, community connections can build the resilience of a community to heal from past violence as well.¹³

Current State

What Programs Are Doing This Work?

The following table lists the names and basic operational details (number of staff, days and hours of service, area of operation) for the community capacity-building initiatives identified in Minneapolis.

¹⁰ Borofsky, Larissa A. et al. "Community Violence Exposure and Adolescents' School Engagement and Academic Achievement Over Time," *Psychology of Violence* 3, no. 4 (2013): 381–95. <https://doi.org/10.1037/a0034121>.

¹¹ Holt-Lunstad, Julianne, Theodore F. Robles, and David A. Sbarra, "Advancing Social Connection as a Public Health Priority in the United States," *American Psychologist* 72, no. 6 (September 2017): 517–30. <https://doi.org/10.1037/amp0000103>.

¹² Henrich, Christopher C., Kathryn A. Brookmeyer, and Golan Shahar, "Weapon Violence in Adolescence: Parent and School Connectedness as Protective Factors," *Journal of Adolescent Health* 37, no. 4 (October 2005): 306–12. <https://doi.org/10.1016/j.jadohealth.2005.03.022>.

¹³ Holt-Lunstad, Julianne, "Social Connection as a Public Health Issue: The Evidence and a Systemic Framework for Prioritizing the 'Social' in Social Determinants of Health," *Annual Review of Public Health* 43, no. 1 (April 5, 2022): 193–213. <https://doi.org/10.1146/annurev-publhealth-052020-110732>; Schultz, Katie et al. "Key Roles of Community Connectedness in Healing from Trauma," *Psychology of Violence* 6, no. 1 (January 2016): 42–48. <https://doi.org/10.1037/vio0000025>.

Table I: Operation Details of Minneapolis Community Capacity-Building Initiatives

Category	Organization Name	FTE	Service Days	Service Hours	Area of Operation
Employment	Green Careers Exploration	2	Monday – Saturday	Varies	Minneapolis Green Zones ¹⁴
	Step Up	4	Varies	Varies	Citywide
	FATHER Project	1	Monday – Friday	9am – 5pm	Citywide
	West Bank Business Association	3	Thursday	Varies	West Bank Cedar – Riverside Neighborhood Area
Housing	Homeless Encampment Outreach Team	3	Monday – Friday	8am – 5pm	Citywide
	Vacant Building Registration	14	Monday – Friday	Business hours	Citywide
	Helix	14	Daily	8am – 6pm	Citywide
Community Connections	Harambee Sports Club	1	Everyday	N/A	Citywide
	MPD Crime Prevention Specialists	11	Monday – Friday	9am – 5pm	Citywide
	Youth Coordinating Board – UNICEF Child Friendly Cities Initiative	7	Monday – Friday	9am – 5pm	Citywide
	Neighborhood & Community Relations Department’s Safety Initiatives	5.1	Everyday	Varies	Citywide
	Police Athletic League	2	Monday – Friday	Evenings and weekends	Four MPLS Public Schools in North Minneapolis

¹⁴ Green Zones are defined by the City as places that have both high levels of pollution, and racial, political, and economic marginalization. “Green Zones,” *City of Minneapolis*, accessed October 30, 2024. <https://www.minneapolismn.gov/government/departments/health/sustainability-homes-environment/sustainability/green-zones/>.

We examined a sample of the above services to understand how the City's preventive programming was designed or intended to function, who is providing the service, the specifics of the service they are providing, where the service is provided, the hours of operation, and the impact of the programs' interventions. The overall goal was to identify structural gaps across them, which the City can address to build out the preventive ecosystem.

We reviewed questionnaire responses supplemented by publicly available information about these programs and follow-up conversations with programs.

Employment

Four organizations that provide employment services responded to the questionnaire. All four were implemented or managed by separate City departments – Neighborhood and Community Relations (NCR), Community Planning and Economic Development (CPED), the Minneapolis Health Department, and the Neighborhood Safety Department (NSD) – but shared similar goals: to employ youth or traditionally excluded populations in order to stabilize the immediate community through employment and connection to meaningful careers.

- The Minneapolis Health Department's **Green Careers Exploration** program helps students of color prepare for green careers (e.g., home energy efficiency training, solar training, STEM education, etc.). The program partners with nonprofits, government agencies, and private agencies to provide youth with these opportunities.
- CPED's **Step Up** connects Minneapolis youth (ages 14-21) with employers in the Twin Cities area and incorporates a mentorship program to guide youth.
- Goodwill-Easter Seals Minnesota implements the **FATHER Project**, which provides support with parenting skills, job placement, educational advancement, and payment of child support for underemployed fathers in Minneapolis.
- The **West Bank Business Association** employs individuals at-risk of contact with the 911 system to act as ambassadors, mediators, and outreach providers to individuals experiencing homelessness and substance use disorder within the West Bank Cedar Riverside Neighborhood.

Together, the four programs reported engaging 3,065 residents over the last year, with the vast majority (3,000) engaged by Step Up and the Green Careers Exploration program. Three thousand jobs is approximately 700 summer jobs for every 100,000 residents of the city. This ratio is similar to that of other major cities operating summer jobs programs – Philadelphia, Chicago, and Houston all fund between 500 and 700 jobs per 100,000 residents during the summer.

As an ambassador-like program that is bound to the neighborhood boundaries, the West Bank Business Association's program effectiveness should be measured both by whether it is accomplishing its local safety and quality of life goals in addition to serving its target at-risk population. It is a relatively modest intervention, employing fifteen people at present.

As for Goodwill-Easter Seals Minnesota's FATHER program, there was no way to determine the total universe of eligible participants from publicly available data. The organization didn't know the number of eligible participants, either, as this requires data from child support, unemployment insurance, and various court jurisdiction agencies.

Two of the four initiatives, FATHER Project and Step Up, had been evaluated. The FATHER Project evaluation was in 2020, finding that participants remained employed for longer than the control group.¹⁵ An evaluation of Step Up in 2018 found limited evidence of its effectiveness but the evaluators attributed this to the program's organizational issues relating to data collection and lack of emphasis on evaluation, rather than any definitive findings about actual effectiveness.

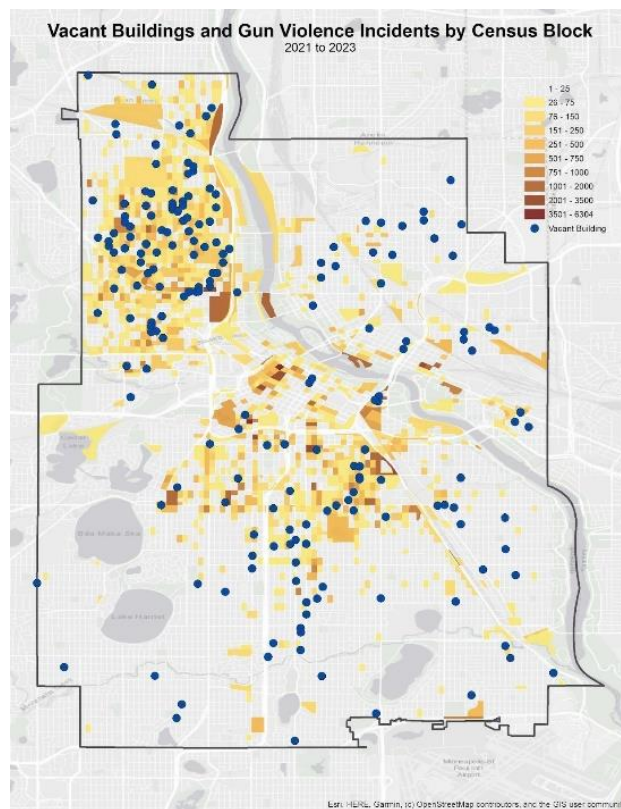
While each of the initiatives spoke about how employment contributes to stability and helps serve the needs of the target populations, only Step Up explicitly discussed the connection between increased employment and improved community safety.

¹⁵ "Supporting the Fatherhood Journey: Findings from the Parents and Children Together Evaluation (PACT)," The Administration for Children and Families, May 2019. <https://www.acf.hhs.gov/opre/report/supporting-fatherhood-journey-findings-parents-and-children-together-evaluation-pact>.

Housing

In 2023, the Minneapolis metro region experienced the fifth largest growth (a 79% increase) of homeless families with children in the United States.¹⁶ As of October 2024 there were 34 active homeless encampments in the City of Minneapolis as well as 206 buildings on the Vacant and Condemned Property Dashboard.¹⁷ Vacancy in Minneapolis is concentrated in North Minneapolis and just south of downtown, and occurs in generally close proximity to census blocks with higher gun violence.

Figure 1: Minneapolis Vacant Buildings and Gun Violence Incidents by Census Block, 2021 – 2023



¹⁶ "2023 Annual Homelessness Assessment Report (AHAR) to Congress," U.S. Department of Housing and Urban Development, December 2023. <https://www.huduser.gov/portal/sites/default/files/pdf/2023-ahar-part-1.Pdf>.

¹⁷ "Vacant and Condemned Property Dashboard," City of Minneapolis, accessed October 30, 2024. <https://www.minneapolismn.gov/government/government-data/datasource/vacant-condemned-property-dashboard/>.

Two organizations shared that they provided pathways for individuals experiencing homelessness to transition from encampments to housing. The goal of the initiatives was to provide housing and support to individuals living in encampments and to close the encampments once individuals had been housed and their goods safely stored. One agency restores abandoned homes to the city's housing stock by enforcing the renovation and repair of vacant properties so that they could be safely and legally re-occupied.

The City's Homeless Encampment Outreach Team has an authorized strength of four people who conduct outreach to encampments within 3-5 days of a 311 complaint about an encampment. The team provides information to individuals in the encampments and notifies private property owners, if the encampments are located on their property, of the need to remove them. It is important to note the primary role of this team is to respond to resident concerns about people experiencing homelessness in encampments, rather than to proactively address the needs of those experiencing homelessness. Helix was contracted to find housing for 30 people living in an encampment, and ultimately ended up finding 100 people housing. Its role now has moved from finding housing to keeping individuals in housing.

The below organizations represent a sample of the organizations working in the homelessness prevention and outreach space, which we received data on as part of this analysis.

- The **Homeless Encampment Outreach Team** responds to 311 calls regarding encampments. It includes a team of four people who sit within the Regulatory Services Department and provide information to individuals experiencing homelessness and referrals to agencies contracted by the City to find housing for them.
- **Helix** conducts housing outreach and provides mental health services to homeless encampments. It is a for-profit organization that was contracted to provide housing to individuals in specific encampments.
- Regulatory Services implements the Vacant and Condemned Property Nuisance Abatement through the **Vacant Building Registration** program as an enforcement mechanism to bring vacant properties into compliance with environmental, property, and housing codes. Through these collective efforts,

Regulatory Services ensures safety, health, and livability for residents and surrounding communities.

The City has published informative dashboards on encampments and the Vacant Building Registry. None of these initiatives reported being evaluated as of yet.

Community Connections

Five organizations responded to the questionnaire that they provided services which create and strengthen connections within the community; four of the organizations were analyzed.¹⁸ These initiatives engage and support the community by sharing information from the City on how to avoid being the victims of crime, providing outlets through which community members can voice concerns, (re)activating spaces for use by the community, and providing activities with trusted mentors.

- The **MPD Crime Prevention Specialists** are civilians who educate the public on crime trends, train the public on how to make themselves a hard target, and develop crime prevention plans in collaboration with community residents on home/apartment security; commercial security; auto theft prevention; personal safety; graffiti prevention; crime prevention through environmental design; identity theft prevention; and neighborhood, alley, and block security and safety.
- The Youth Coordinating Board implements the **UNICEF Child Friendly Cities Initiative**, which began as an action plan between UNICEF and the Minneapolis Health Department. One of the main focuses of this program is community safety, including collecting feedback from the community on what safety looks like for children and their parents.
- The City's **Neighborhood and Community Relations (NCR)** agency funds safety initiatives through short-term programming. This can include funding for events, proofs of concept (for potential further expansion), or efforts to make

¹⁸ One organization, Harambee Sports Club, is funded for the Youth Violence Prevention Week. While Youth Violence Prevention Week is an important element of the City's programming it will not be included further in this analysis as it is a week-long intervention.

safety programming more inclusive using interpreters or outreach into traditionally excluded communities.

- The **Police Athletic League** is a nonprofit organization that provides mentorship and activities for youth in an effort to deter them from engaging in criminal behavior. Police officers and community members act as coaches and mentors for youth, and the youth can participate in sports programs free of charge.

These organizations staffed their interventions with the full-time equivalent of between two and eleven staff members. All four organizations directly connected their work to improving community safety in the City of Minneapolis. However, the roles of the NCR (which reported running up to 200 community safety-related interventions) and NSD need to be clarified, as there is a potential for confusion with two City departments running portfolios of community safety programming in parallel.

None of the initiatives reported being evaluated. One department, NCR, reported being in the process of partnering with the Center for Urban and Regional Affairs to evaluate their safety portfolio.

Is There Data to Demonstrate Performance and Impact?

We requested information about data collection, reporting, and analysis to better understand how organizations utilize data to inform and improve their operations and their outcomes. We excluded the Youth Coordinating Board from the rest of the organizations in this section as their data collection is the intervention itself.

Most of the employment-focused organizations used rigorous data collection processes that included tracking employment outcomes and wages, and storing the data in a case management system. The housing-focused organizations used case management systems to track properties within their programs and individuals who were going through their interventions. Two organizations, Minneapolis Regulatory Services Department and Goodwill-Easter Seals Minnesota, reported using a data analyst. NCR is currently going through a data collection re-design in partnership with the University of Minnesota to determine which data it should be collecting to support both management and evaluation. The organizations with the least robust data collection processes collected attendance data and received unstructured feedback from participants and their families.

The most rigorous data collection was being undertaken by the Step Up initiative. The program collected data from individual participants and community partners at regular intervals throughout the intervention and complemented it with secondary data from City and State agencies. This intervention would be a great candidate for validating the impact of the City's investment in community safety.

Only one of the organizations reported collecting data on safety indicators: Step Up. Minneapolis Regulatory Services Department reported measuring community livability. If these interventions are going to be considered part of the community safety ecosystem, they have to be measurable, and that starts with tracking and identifying what impact they have.

What Barriers to Service Have They Self-Identified?

We asked about barriers to service to understand if there were any ways the City could improve its support to these organizations and make them more effective in their missions as a result.

Organizational

Several organizations reported that they struggled to make contact with both their City representative and MPD – sometimes even as it pertained to getting basic information. One organization could not tell us which agency funded their program, and said it would like the City to convene service provider meetings so it could learn more about City concerns, problem solve, and hear about funding opportunities. A City department told us that MPD refused to share any information about crime incidents and public engagements, requiring City staff to search online for it instead.

Transportation concerns impacted almost every single program we spoke to, but this was felt most by the Homeless Encampment Outreach Team, as the team was unable to transport clients or use organizational funds to purchase transport tokens for clients. The team could only give individuals directions to the services to which they were being referred, and hope that the clients arrived.

All responding organizations mentioned requiring additional funding to expand the amount of people they could serve. Given the decentralized City oversight of each of the services reviewed and gaps in program utilization data, any expansions of

individual programming should be made based on the assessed community need and ability of providers to meet it. With respect to who among the eligible population was being served, providers are not tracking (or being required by the City to track) what languages their clients speak, so it is not possible to know if non-English-speaking populations are being adequately served.

Access to social services for the providers' target populations was raised frequently, including access to substance use treatment, safe use sites, childcare, and housing. Also mentioned frequently was a desire for a feedback loop from social services providers about outcomes of clients they have referred there, done in a manner that is legal and respects privacy concerns.

Community Needs

We asked responding organizations what they thought the community needed most to thrive, and the most frequent responses were meaningful employment, engaging after-school activities for all youth, more housing, improving safety on and around public transport systems, and more mental and behavioral health services in the community. The Youth Coordinating Board also identified these concerns in its research with youth and parents in Minneapolis.

Gaps

Tying It All into Advancing Community Safety

Throughout our follow-up conversations with community safety programs, we found competing definitions of "community safety," and confusion as to which interventions are considered safety interventions and which are not. To be considered part of the ecosystem of community safety, each program needs to be able to show a theory of change that starts with their intervention and ends in a change in safety outcomes.¹⁹

¹⁹ Monalisa Salib, "Theory of Change Workbook: A Step-by-Step Process for Developing or Strengthening Theories of Change," USAID, accessed October 30, 2024. <https://usaidlearninglab.org/resources/theory-change-workbook-step-step-process-developing-or-strengthening-theories-change>.

The City must acknowledge these programs as partners in creating safety. This means lines of oversight and communication from safety-related agencies; incorporation into networks of similar providers and relevant safety-related initiatives within the City; standardized software for collection, analysis, and sharing of relevant data to track safety outcomes and progress; and the facilitation of operational problem-solving as needed. Without these elements – the connective tissue and feedback loop between programs and the City – these programs may be doing good work but their ability to promote safety is hampered and their impact impossible to quantify.

This disconnect between the preventive initiatives and the larger community safety system is particularly acute when it comes to the safety data controlled by MPD. Providers and City departments frequently said the lack of relationship with the police created significant obstacles. To perform a safety-related function, these programs must reach at-risk and justice-involved populations, but this is difficult to do without police referrals to their services. Crime- and safety-related data are also essential tools to ensure that services are calibrated and directed in a manner that supports the production of community safety. But here, too, programs noted their challenges in obtaining this data from the police.

Finally, when discussing the relationship that programs have to community safety, it is essential to address contract management. We understand there is often the need for flexible, rapid grantmaking (rather than going through a traditional grantmaking cycle). But the broader ecosystem of community safety-related contractors needs reliable, responsive, and centralized management by the City. To this end, the City needs: a central platform or registry for identifying which initiatives are safety-related and their theory of change; a contact person for each program who will respond in a timely manner; and a person or team within the City that oversees the component parts to ensure they are working together in furtherance of the goal. In at least one case, three different City departments were funding one provider to do similar work and it was not apparent that these efforts were coordinated.

Here we highlight some specific examples of how the above issues manifest in the field:

Utilization

- Understanding whether a program is well utilized is impossible without knowing the universe of potentially eligible clients. The Goodwill-Easter Seals Minnesota's FATHER Project has been proven to have a positive impact on its participants, but how many individuals (under-employed fathers who meet the criteria) are eligible to participate is unclear. We use this program only as one example to show how utilization data can inform program structure and operations. If the data showed that only a small fraction of eligible participants are engaged with the FATHER Project program, the City might work with the County to consider ways to increase participation (e.g., mandating that eligible fathers complete the intake appointment, with the rest of the programming remaining voluntary, as the program itself did not recommend mandating actual participation).
- Some organizations that operate citywide are not able to serve the non-English speaking community, effectively excluding wide swaths of the populace from their programming despite the intention that they serve the whole City.

Strengthening and Consolidating Program Models

- Crime Prevention Specialists, the Homeless Encampment Outreach Team, and the West Bank Business Association interns perform quality of life interventions similar to the Downtown Improvement District Ambassadors (discussed in a later section), but they do not provide immediate response and they collect different types of data. This is an opportunity to explore consolidating data collection platforms at a minimum, and even standardizing the roles or their elements (e.g., training, information sharing).
- The Homeless Encampment Outreach Team's shift ends before the shelters announce additional beds are open. The City could improve the effectiveness of this intervention by considering an evening shift with a safe transportation capability, or even by incorporating this team into the outreach work of the BCR unit that is available 24/7 and has the authority to transport.
- Organizations are expending a significant amount of their time and energy trying to find creative solutions to transport concerns for clients.

Performance, Outcomes Measurement, and Validation

- Only one of the programs we spoke to, the Step Up program, collected any safety-related data in its regular reporting to the City. Step Up said its data has previously been evaluated but it could not locate the reports. (The Youth Coordinating Board has been excluded, as data collection is its main focus.)
- Two of the 12 programs reported having been independently evaluated.

Governance

- Programs raised contract management concerns related to lines and quality of communication with the City, coordination with the City and peer providers, expectations around performance, and more.
- Most respondents expressed a desire for the City to convene regular, geographic-specific, thematic meetings of the organizations working in the field so they can coordinate, learn from each other, and collaborate to better serve their residents.
- The Minneapolis Health Department is creating a community safety action plan with the Youth Coordinating Board, as part of its work with UNICEF. The Office of Community Safety does not appear to be involved with the creation of this plan and so it is unclear who has the ultimate responsibility for implementing this action plan and how it will relate to the rest of the community safety ecosystem.

Expansion Considerations

While we asked programs what it would take to grow their impact, there are a number of questions that the City would need to answer before considering expansion.

- What programs are operating in the preventive space? After-school programs and quick turnaround funding for community safety are examples where there could be considerable overlap with funding and programming from other agencies.

- While only four schools may be served by the Police Athletic League, it is unclear what other providers not included in this analysis are providing after-school services and how their programming and outcomes differ from the Police Athletic League. An expansion of the Police Athletic League would need to be complementary to rather than a substitution for other effective programming.
- We have identified three sources of quick turnaround funding for limited-term neighborhood safety initiatives: Neighborhood Safety Department, Neighborhood and Community Relations, and funding given to community organizations to re-grant to smaller neighborhood organizations. When the City provides grants to organizations, it should be done with the knowledge of what other City funding the groups already receive, and what it is for. These vehicles for community grantmaking should be acting in a complementary manner and avoid duplicating efforts, which can lead to missed opportunities to make an impact elsewhere in the city.
- Has the demand and the need been quantified? What is the universe of eligible people that this program could serve and is ultimately drawing from?
 - Summer jobs and responsible fatherhood programs have been proven to be impactful, but it is unclear what portion of the eligible population they are reaching. Are the candidates who would benefit the most from a program like this being engaged? Expansion should be designed in such a manner that the most at-risk populations are prioritized for participation.
 - To know whether the most at-risk population is served, the City needs to understand the program referral process. Specifically, what mechanisms are there for law enforcement and others to refer potential program clients, and are these being used? While direct engagement with police may be a challenging topic for some programs, such referral relationships can be established in a productive manner – and the failure to do so will leave out portions of the population who can most benefit from services.

- Is existing programming designed to reach the populations whose language at home is not English?
 - Organizations that focus on outreach and word of mouth as their primary means of recruiting participants mentioned that they struggle reaching into communities whose primary language is not English. It is essential to understand what sort of language capabilities outreach teams have. This is a capability that can be mandated in the contracting process to ensure that any expansions reach beyond the English-speaking eligible population.

- How does this program create community safety?
 - Programs that operate through building the foundations of community safety (e.g., vibrant, healthy, connected communities) should understand, articulate, and demonstrate how their programming influences community safety, as well as collect indicators that enable the City to quantify that impact.

With these foundations in place, the City could consider whether and how these programs should be expanded, and then communicate to the public how these decisions will further community safety.

APPENDIX 3: Preventive Services (Violence Prevention and Intervention)

A second component of preventive services is violence prevention and intervention programming. This section examines a sample of programs to gain insight into how the City of Minneapolis currently builds individual, family, and community safety and resilience through programming aimed to break cycles of violence. Specifically, we aim to understand how the City's violence prevention programming was designed, operates, and results in a reduction of violence.

Desired State

There are three types of violence prevention and intervention programming the City has focused on to break cycles of violence:

- **Violence Interruption** – These are organizations that hire or contract with staff that have pre-existing relationships in the community, sometimes with personal experience navigating the justice system. The programs leverage those relationships to de-escalate conflicts before they become violent, as well as connect people with services.
- **Group Violence Intervention** – In this model, law enforcement partners with community members who are regarded as authority figures, to reach out to individuals in their community who may be at risk of victimization or perpetration of violent acts. The goal is to stop involvement in shooting violence and connect people with services.
- **Ambassadors** – These initiatives provide a presence in downtown Minneapolis and the East Phillips neighborhood. While their primary responsibility is not violence reduction, they provide a watchful eye, can engage law enforcement as needed, and refer individuals at increased risk of victimization to services.

Current State

This analysis involves the gaps we identified in violence prevention and intervention programming that is funded by the City of Minneapolis as viewed through four distinct lenses.

- First, we ask what the programming intends to do, if the program is successful in meeting its intent, and if the program has been externally validated.
- Second, we ask if the programming is offered in areas of the City where the violence is occurring.
- Third, we ask if the programming is active during the times that violence is occurring.
- And finally, we ask what barriers may be impeding program effectiveness.

Eight of the organizations that responded to the community safety questionnaire had gun violence and crime prevention or intervention as their mission. We took the information gleaned from the questionnaires and compared it to the City's data for shootings and persons with a gun from January 1, 2021 to December 31, 2023. We then engaged in follow-up conversations conducted in Summer 2024.

Gun Violence Data Review

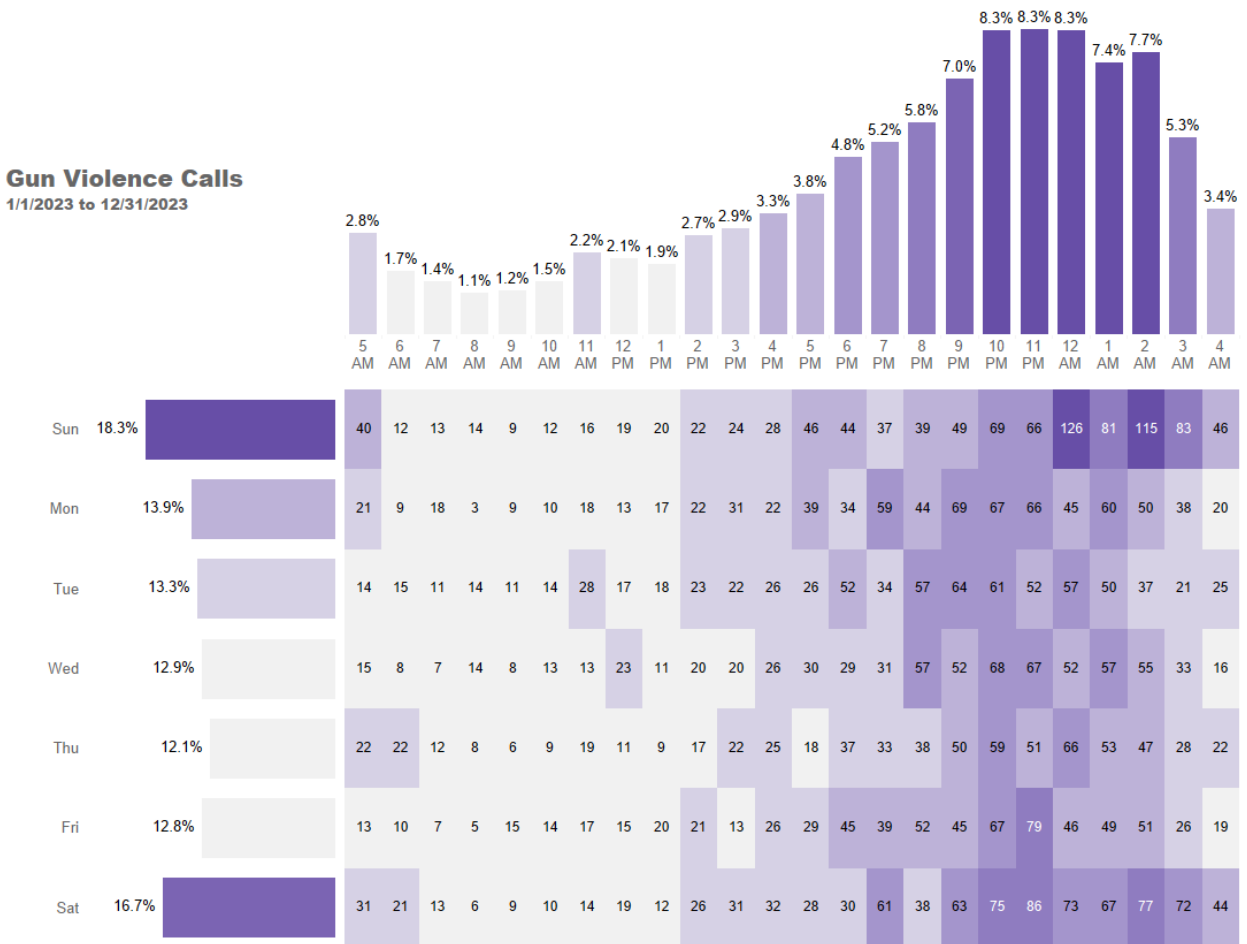
The City of Minneapolis provided the Team with access to their Computer Aided Dispatch (CAD) and Police Information Management System (PIMS) data, which we used to produce an analysis of gun violence. The CAD data includes all calls for service processed through the 911 system. PIMS provides information on police activity such as incident resolution, arrests, and other information. We used the initial problem type for each call for service to identify gun-involved calls for the previous three years (January 1st, 2021 to December 31st, 2023).

Over three years, we identified over 21,000 counts of shootings, ShotSpotter alerts, or 911 calls for service regarding someone with a gun. We took these data and mapped them into temporal heat maps to identify time-based patterns of violence in the City.

The temporal heat maps display time series on a rectangular grid, with color representing values and position on the grid indicating the corresponding time,

whereby the vertical axis represents a day of the week and the horizontal axis indicates the hour of the day within this period of time. The color shading shows the higher count of violent incidents during the specific pairing of time of day and day of week. For example, Sunday at 3:00 a.m. is shaded dark purple because of the high number of violent incidents during that day and hour pairing.

Figure 2: Minneapolis Gun Violence Calls, 2021 – 2023



We also mapped these data onto census blocks to identify spatial patterns of areas across the City experiencing violence.

Figure 3: Minneapolis Gun Violence Incidents by Census Block, 2021 – 2023

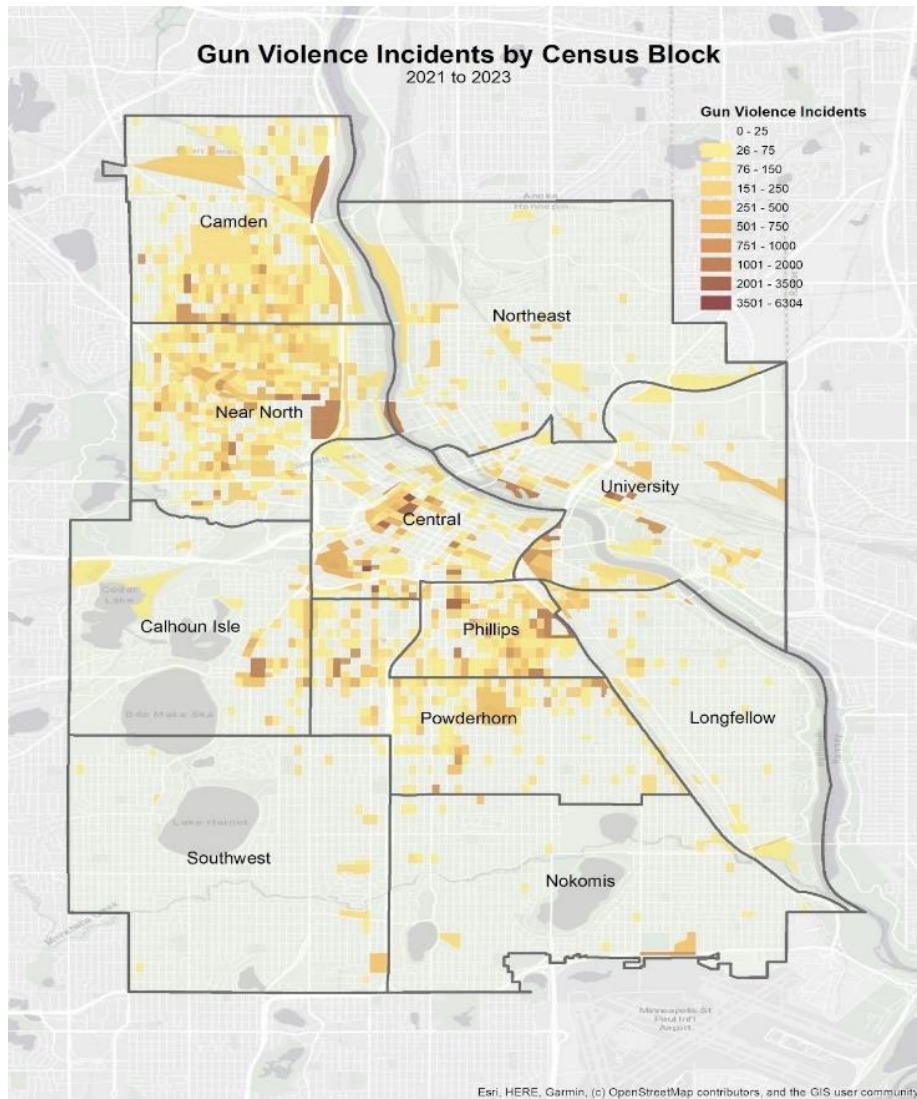


Table 2: Minneapolis Gun Violence Calls for Service, 2023

Initial Problem	Count of Gun Violence Incidents
Person with a Gun	1,594
Shooting	811
ShotSpotter Activation	3,034
Total	5,439

What Programs Are Doing This Work?

The table below outlines violence prevention and intervention programs that responded to the questionnaire or were otherwise identified as important organizations to speak to in Minneapolis, but is not an exhaustive list.

**Table 3: Operation Details of Minneapolis
Violence Prevention & Intervention Programs**

Category	Organization Name	FTE	Service Days	Service Hours	Area of Operation
Youth Group Violence Intervention	Cause & Effect, LLC	1	Everyday	4pm to 9pm	Citywide
	Change Starts With Community	1	Everyday	24 hours	North Minneapolis and South Minneapolis
Group Violence Intervention	Urban Youth Conservation	1	Everyday	24 hours	North Minneapolis and South Minneapolis
Violence Interruption	Metro Youth Diversion Center	15	Monday – Friday	NA	Cedar–Riverside, Seward, Dinky–town
	Restoration Inc	16	Wednesday – Saturday	4pm to 12am	North Minneapolis
	T.O.U.C.H Outreach	17	Wednesday – Sunday	NA	Downtown, East Lake, West Lake & Franklin Ave
	We Push for Peace	32	Tuesday – Sunday	NA	North Minneapolis
	Mad Dads	20	Tuesday – Saturdays	4pm to 12am	Central Minneapolis, Powderhorn, and portions of Bryant neighborhoods
	MPS Emergency Management Safety and Security	20	Monday – Friday	School hours	Minneapolis Public Schools Citywide
	Next Step Program	17	Everyday	24/7	Hospitals in Minneapolis Citywide

Ambassadors	Minneapolis Downtown Improvement District	16	Monday through Friday	6am to 11pm	The boundaries of are limited to the 120 square blocks of the Downtown Improvement District by City ordinance, roughly covering from Chicago Avenue to 2nd Ave N going east to west and from 2nd St S to Grant going north to south.
	AIM Patrol		Everyday	Evenings	Businesses within the East Phillips Neighborhood
	Little Earth Protectors		Everyday	Evenings, no specific hours	Little Earth Housing Community

Violence Interruption

The City of Minneapolis funds violence interrupters on the street, within the public school system, and within the hospitals. We reviewed questionnaire responses and City contracts, supplemented by publicly-available information about these programs, which are housed under the NSD.

As of August 2024, the NSD mandated organizations to follow the Cure Violence model that: detects and intervenes in conflict before it spills out into violence; conducts active outreach to those at highest risk of violence involvement to provide wraparound supports for individuals and their structural needs; and undertakes community engagement to influence norms and understandings of what's acceptable behavior. We were unable to access any data as to what interventions took place and how they fit into a local and citywide plan for violence reduction. We spoke with a number of interruption organizations which stated that rather than having an assigned area, they had a general area of operations and the response was based on who held the strongest pre-existing relationships.

Although violence interruption organizations are funded by the City, there was no policy for how and when City officials or agencies could activate their services, either following an incident or based on actionable data or intelligence. Rather, the organizations rely only on an informal network to direct them to areas at risk of experiencing violence. This differs from other cities, in which it is common for activations to also occur through schools, through hospitals, and by police

departments. Not only was the mechanism for such activations unclear in Minneapolis, but there also appear to be overlapping coverage areas such that it is unclear what organization *would* be called, as well as who has the responsibility to call, and what policy (if any) would determine this process.

NSD's current focus, as explained to us, is on making sure the contracts for violence prevention funds are being spent down in a manner that is in compliance with government regulations, and hiring staff to manage the contracts. It does not appear that the vendors currently have a programmatic reporting process with the City – we could not identify any process for sharing basic activity or performance data. We were unable to review any outputs of the interventions or what approach they are currently following. Basic information, such as community contacts, interventions used, outcomes, and related data were not available for review – or, based on our inquiry, being shared with the City.

NSD has been awarded a Department of Justice Byrne grant, which has an evaluation requirement. Therefore, there should be a rigorous evaluation of this programming in the next 36 months.

Group Violence Intervention (GVI)

Three GVI providers responded to our questionnaire, and all three organizations reported being staffed with one employee. Together, they reported having over 200 engagements in the last year, with almost 400 individuals served in the community. Technical assistance for these engagements is provided by John Jay College of Criminal Justice.

Program referrals can come from the County Probation and Parole Office, MPD, and Minneapolis Public Schools, but at present only the Probation and Parole Office is making referrals. Individuals who are referred by Minneapolis Public Schools have not necessarily been arrested, but have been referred due to documented behavioral concerns within the school system. The County Attorney's office has also started their own GVI and Youth Group Violence Intervention (YGVI) initiatives but, based on what we learned, the City and County initiatives do not work with one another.

The City website for NSD, which also houses these organizations, does list some promising statistics for the reduction of shootings amongst GVI-involved participants

(a 73% drop in victimization of gang-affiliated individuals during the summer), but we were unable to view the underlying data or view the analysis, and the City was unable to confirm where the analysis was located.²⁰

Ambassadors

The Downtown Improvement District (DID) Ambassador program focuses on providing a physical presence downtown, responding to quality of life concerns, and partnering with organizations that focus on homelessness and youth concerns to reduce instances of anti-social behavior. It is activated via radio from a control center that is linked to private cameras in businesses across the district.

The program provides annual reporting on their work, which includes statistics on how many people it has connected with resources and how many active clients it has. There does not yet appear to be an independent academic evaluation of the impact of its interventions on community safety.

AIM Patrol and Little Earth Protectors focus on de-escalating conflicts before they reach the level of a police response as well as providing a physical presence to deter crime in the East Phillips neighborhood area. They are funded by CPED and have not been evaluated yet.

Where Do They Operate?

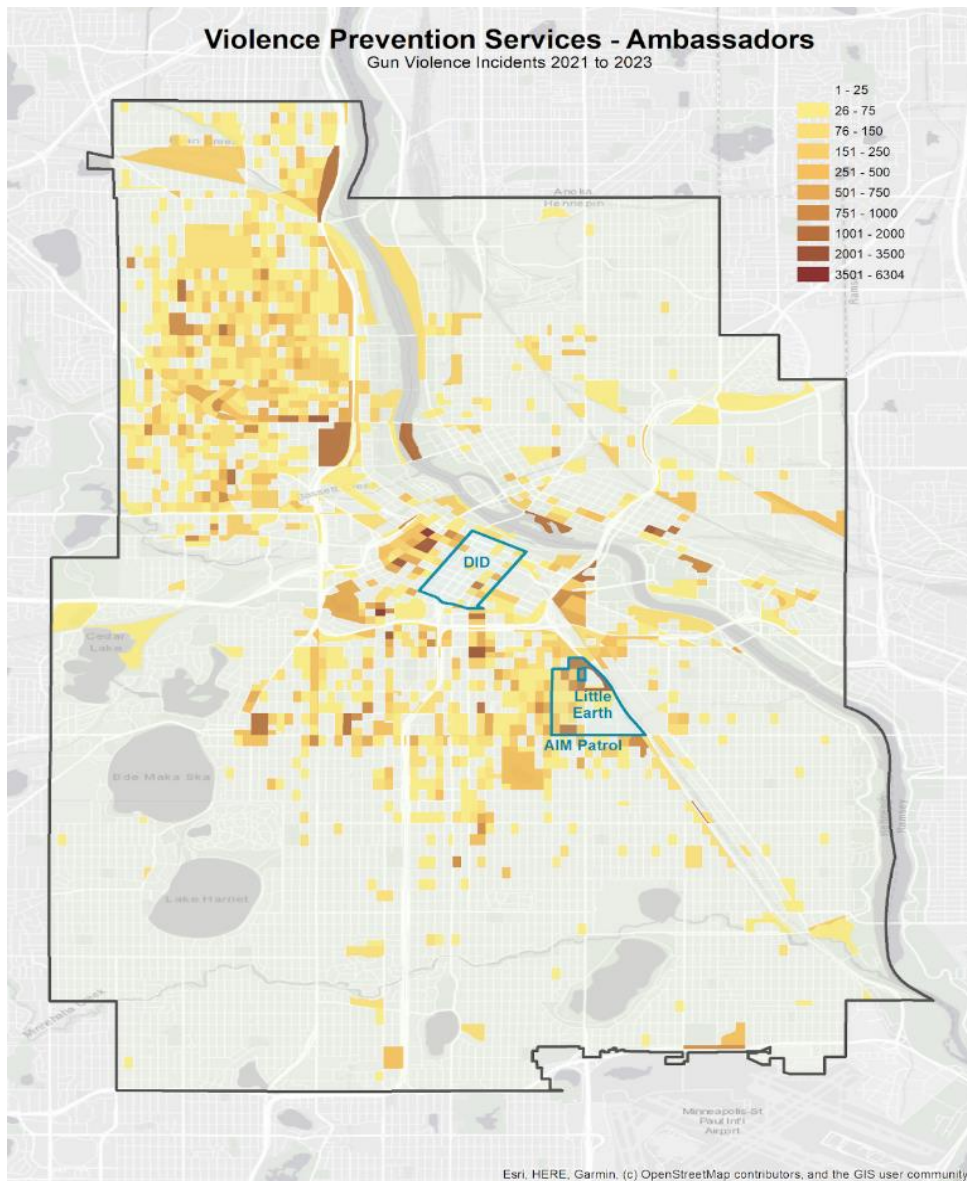
Thirteen organizations providing violence interruption or group violence/youth group violence intervention and one group with a general crime reduction mission responded to the questionnaire. Of these, four were citywide and the remainder were neighborhood specific, with the largest non-citywide areas of responsibility being held by We Push for Peace, Restoration Inc., and Metro Youth Diversion Center. The smallest area was the Minneapolis Downtown Improvement District.

²⁰ Group Violence Intervention," City of Minneapolis, accessed October 30, 2024. <https://www.minneapolismn.gov/government/programs-initiatives/public-health-approach/group-violence-intervention/>.

Ambassadors

The DID ambassadors work within the boundaries of the Minneapolis Downtown Improvement District. This district is funded by special assessments on businesses across a 120 city-block area, and the boundaries are set by City ordinance. AIM Patrol and Little Earth Protectors work in the East Phillips Neighborhood and the Little Earth Housing Community.

Figure 5: Minneapolis Gun Violence Incidents Across Community Ambassador Services' Geographic Areas of Operation, 2021 – 2023

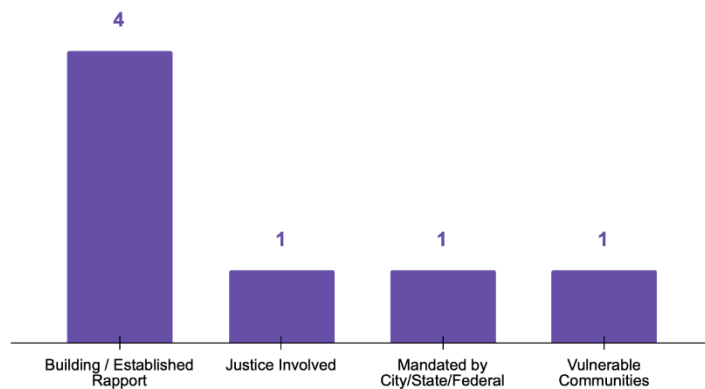


Group Violence Intervention

Three of the six city-funded GVI/YGVI organizations responded to our questionnaire and reported having citywide coverage. As reported, these referrals are made based on availability of the organizations and the need to ensure that clients who may be in conflict with one another receive services separately. Referrals do not appear to be made based on location.

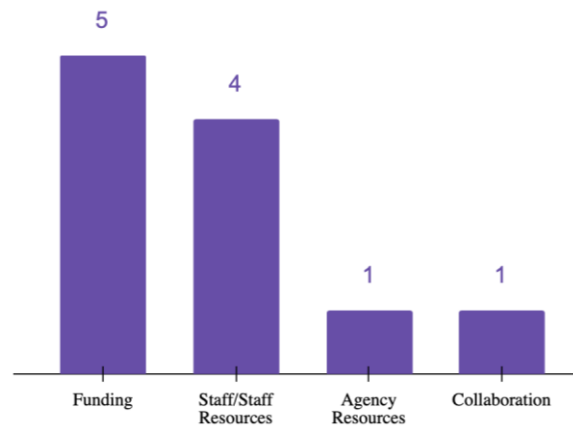
We asked the organizations for the reasoning behind their areas of operation, and the most frequent response was that organizations had already built rapport in those geographic areas. The remaining reasons for serving in specific geographic areas included that clients were justice involved, the organization was focused on vulnerable communities, and organizations were mandated to serve that specific geographic area. We asked if they were able to serve everyone who needed their services within the program geography, and just over half said no. When asked why not, the most frequently cited reasons were limited funding and limited staff or staff resources (like vehicles). The remaining reasons were that their clients needed better access to employment and financial resources, agencies only offered referral-based services and could only help individuals who came through the justice system, and agencies lacked physical space and ability to provide transportation to their clients.

Figure 6: Programs' Reasoning for Area of Operation



We asked what organizations would need to expand their area of operation, and the most frequently cited answer was funding. Organizations also mentioned a need for collaboration within and across organizations and agencies, a need for agency resources, and a need for staff.

Figure 7: Programs' Constraints to Expanding Areas of Operation



When Do They Operate?

Gun violence in Minneapolis has strong temporal trends, with approximately half of the shootings during the week happening on Friday, Saturday and Sunday, and approximately half of the shootings during the 24-hour period happening between 8:00 p.m. and 2:00 a.m. Data analyzed over a three-year period revealed that the day and hour when gun violence was most prevalent was Saturdays at 12:00 a.m., Saturdays at 2:00 a.m. and Sundays at 2:00 a.m.

Violence Interruption

No violence interruption/crime reduction organizations reported having service hours that overlapped with the times of day when violence was most prevalent, and none of the organizations reported working seven days a week. The organization, with the most staff, T.O.U.C.H. Outreach, reported working Tuesday through Sunday. Restoration Inc. reported working the fewest days – Wednesday through Saturday – with their operational hours going until midnight.

Group Violence Intervention

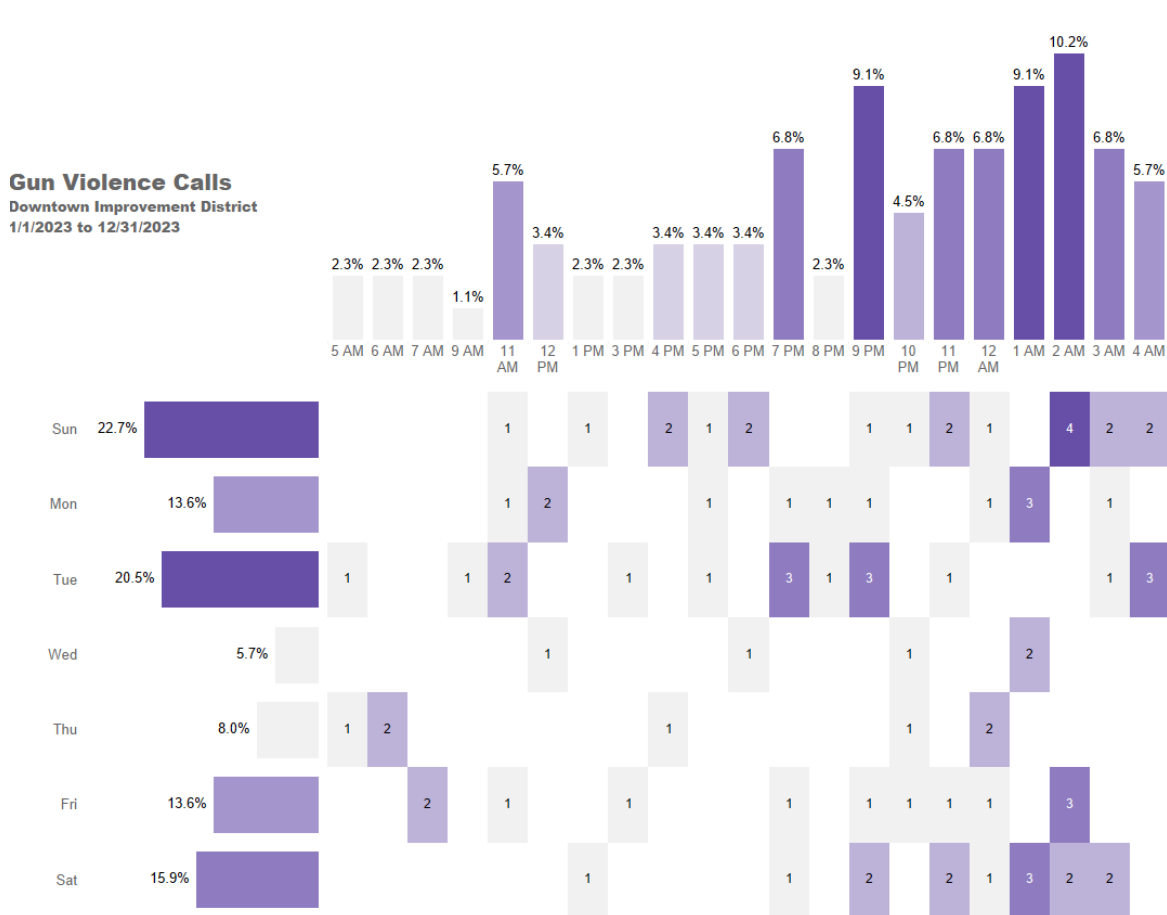
The GVI programs do their work via scheduled events (their model, by design, does not include real-time responses), so the time the violence was happening was not as relevant to their operations.

Ambassadors

The DID ambassadors are available Monday through Saturday from 6:00 a.m. to 10:30 p.m. and Sunday from 6:00 a.m. to 6:00 p.m. The hours where there is the most violence within the downtown improvement district are almost entirely outside of the working hours of the ambassadors, with the most violence happening on Sunday after 6:00 p.m. when the ambassador shift finishes earlier than any other day. It should be noted that the ambassadors are not directly designed to be a violent crime intervention program, but rather to create a downtown safety presence, address quality of life concerns, and make service referrals.

AIM Patrol and Little Earth Defenders don't have set hours, but their volunteers patrol in the evenings.

Figure 8: Downtown Improvement District's Gun Violence Calls, 2021 - 2023

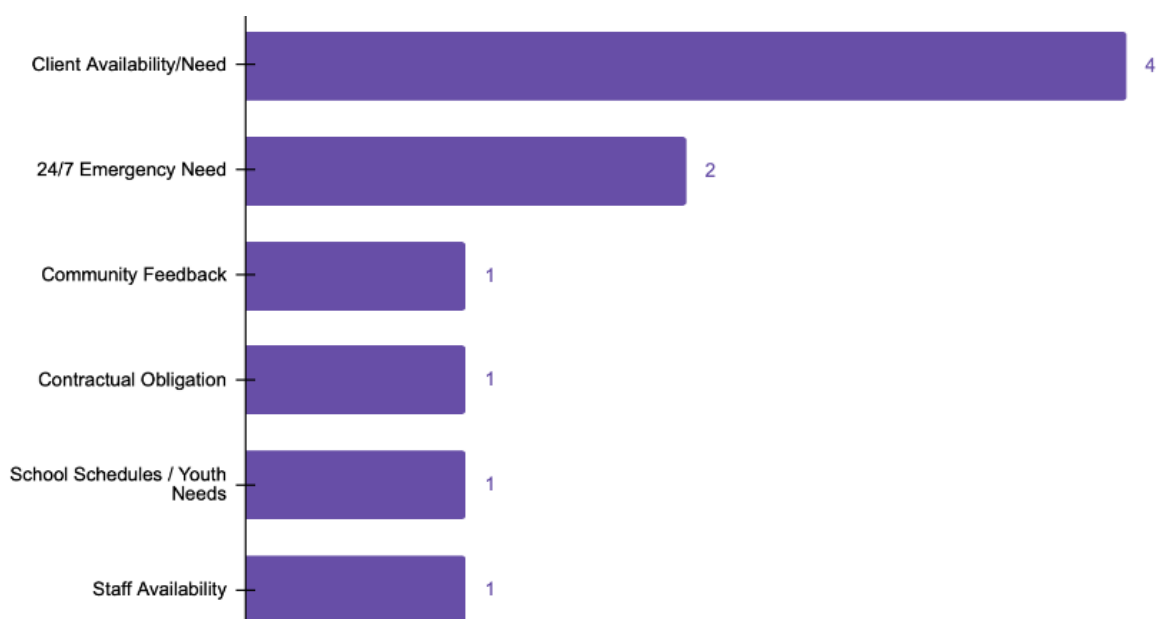


We asked organizations why they worked those service hours, and most frequently they cited their clients' availability and need. Clients included Minneapolis residents broadly, and in some instances included specific demographics of individuals (e.g., youth). Agencies said they determined need and availability in several ways. They reported choosing their hours based on client feedback, time of day when most people were present, times when most youth were available, availability of their own staff, and the need to address emergency issues (in the case of 24/7 operation). Community feedback and contractual obligations were also cited. It should be noted that the organizations which reported 24/7 operations, however, are GVI organizations that are not, per our understanding, intended to provide real-time responses.

We asked what organizations would need to increase the hours they were available, and they reported that they would need funding, staff, agency resources (support for transportation and police presence at events had been curtailed due to staffing concerns), and collaboration within and across agencies.

NSD has received federal funding to extend the hours of the violence interruption programming until midnight. While this will cover a significantly larger portion of the hours that see higher levels of violence, it will still not cover the most violent hours of the week, as 38% of gun violence calls happen between midnight and 5:00 a.m., and the two of the three-hour blocks with the most gun violence calls are 1:00 and 2:00 a.m.

Figure 9: Programs' Reasons for Service Hours



Is there Data to Demonstrate Performance?

We requested information about data to understand how organizations were tracking their interventions and to better understand how organizations utilized data to inform and improve their operations. We learned that several organizations desire to use data to improve operations; however, there are not many systems in place to aid in this endeavor. While there is currently no regular data sharing between the City and the organizations, reciprocal data sharing going forward can help to improve organizational metrics.

Violence Interruption

One organization, Restoration Inc., reported employing a data analyst. This is the only organization that responded to our questionnaire that does so. It also reported using a custom program on the Apricot platform to manage its data. The other organizations that responded reported using Smartsheet and Google Drive to manage their data.

The data collected by the organizations appears to be inconsistent in type, quality, and rigor. On one end of the spectrum, an organization said it collects the number of attendees at an interruption event. On the other end, the organization with the most rigorous reporting collected a detailed description of an event, types of interventions that took place, and observations about the incident and individuals involved. One respondent referenced a form it has been filling out that was initially provided by the City, but we were unable to locate an example of the form.

Group Violence Intervention

As the GVI organizations all report to be single-person organizations, they do not employ data analysts. One said the organization does not use any data systems to collect or manage its data, keeping it in reports instead. The other two have custom-built systems on the Apricot platform. It is unclear what data they receive from or share with the City.

The data collected by the organizations do not appear to be standardized. One organization collects only recidivism and housing information. One organization

documents client needs, barriers, and their referral source. The most rigorous organization tracks recidivism, victimization, participation in services, and status in the judicial system.

Ambassadors

The DID ambassadors program does not employ data analysts, but it co-locates its Safety Communications Center – its coordination and deployment hub – with the MPD 1st Precinct operations center. Ambassadors receive their directions from this center. Engagement is collected within an app that all of the ambassadors carry on their phones, and the app creates analytic reports for managers.

The data collected through the DID app is quite rich, including GPS coordinates of the interaction, the nature of the engagement, the number of people engaged, the outcome of the engagement, the end time of the engagement, and free text notes. Depending on the percentage of engagements that are being captured in the app (a concern mentioned in the questionnaire), this could lend itself to rigorous evaluation.

What Barriers to Service Have They Self-Identified?

We asked about barriers to service to understand if there were any ways the City could improve its support to these organizations and make them more effective in their missions. Housing was the most frequently mentioned resource that would help clients succeed. (This was far and above the most commonly mentioned concern in all of the follow-up conversations.)

The most frequently reported organizational barriers to service were lack of funding and resources, and a need for client resources. Organizations equally cited a need for greater client buy-in and addressing client homelessness/housing instability. Other reported barriers were clients' justice involvement and community partners/collaboration across organizations.

When we asked which resources they would need to provide their clients to overcome some of these barriers and increase the number of people they serve, housing was most frequently mentioned. Drug treatment/safe use sites, food, and healthcare were the next most frequently cited responses, followed by employment/financial support

and social support. Childcare, collaboration within and across agencies, youth opportunities, education, space, and staff and staff resources were also mentioned.

Gaps

Based on the data collected as well as engagement with City and contracted stakeholders, we have the following findings about gaps in coverage of violence prevention and intervention services funded by the City of Minneapolis.

- Based on our review, the City has not set expectations or deliverable requirements for its violence interruption organizations, nor has the City instructed the organizations on how they are to coordinate with other City services and programs.
- There was no clear process regarding how organizations receive operational or incident information from the City.
- There was no established process for how peer organizations should collaborate and/or deconflict the work they are doing in the same geographic and substantive space.
- There is an apparent gap between how organizations are scheduling their coverage, and the periods when there is the most violence. We did not identify a process – either on the part of the City or the organizations – to ensure effective coverage seven days a week, or to concentrate coverage during periods with the most gun violence.
- The temporal coverage gap is further compounded by a geographic coverage gap, in that areas of the City that experience the greatest levels of gun violence have, in some cases, no or very low coverage during critical weekend and overnight hours. For example, among the respondents:
 - We found no violence interruption organizations contracted to work in North Minneapolis between 12:00 a.m. Sunday and Monday morning – effectively leaving the area without coverage on the second-highest day of the week for gun violence.

- We found no violence interruption organizations that worked after midnight – the time when a quarter of shootings occurred.
- We found no violence interruption organizations working on the west and southwest sides of the downtown area.
- For organizations that were not funded entirely by the City, they reported funding streams from the County, the State, foundations, and private donors. It is unclear if and how the City works to coordinate and/or align funding priorities for violence interruption with the other levels of government, and if some of the gaps in service (geographic or temporal) are being or could be filled by funding from a different entity.
- Case management –pathways for referrals, staffing of case managers, and maintaining client engagement – was a common struggle within the violence interruption programs. This is an area where the city could explore centralization and a public staffing solution.
- We could not identify any strategic or operational approach on the part of the City for using data to plan and manage programs. This included a lack of the following:
 - Requirements that organizations collect and report specific data to the City.
 - A process for organizations to make data requests from the City.
 - A way to track how the interventions are activated.
 - An expectation or process for tracking and reporting outcomes, as a means of measuring impact.

APPENDIX 4: Responsive Services

The *Safe and Thriving Communities Report and Plan* highlights the importance of meeting calls for service with the right response, and using the right responder at the right time. The City of Minneapolis has already identified and moved several call categories to other, non-police responders. These include moving behavioral health calls to Behavioral Crisis Response (run by the organization Canopy Roots), moving certain parking and traffic control calls to Traffic Control, moving property and theft calls to 311/online reporting, and moving animal control and animal crime investigations to Minneapolis Animal Care and Control. This section will identify gaps in the utilization of existing authorized alternatives to police response, opportunities to continue to move additional calls over to these responders, barriers to success, and needs identified in the community that, if met, will reduce the demand for 911 in the first place.

Using a combination of questionnaires, follow-up conversations, Minneapolis Emergency Communications Center data, and 311 data, we set out to understand how the City's responsive programming intends to reduce calls for service to police, who provides the services, what services are provided, the hours of service, and how the intervention results in a reduction of calls for service to police.

We used the last twelve months of data for Behavioral Crisis Response because this service was not operating at full capacity until 2023. For the remaining responses we used 36 months of data through December 2023. We note that the data provided for our analysis of 311 did not contain a way to distinguish between police reports submitted online by a 311 call taker on behalf of a call, versus those submitted by the general public through the online reporting system. This significantly limited our ability to quantify how the public was utilizing these options.

Desired State

There are four types of responses to 911 calls for service that the City has developed to divert calls to more appropriate responders:

- **Behavioral Crisis Response** – These are responses that are categorized by the Minneapolis Emergency Communications Center (MECC) as being behavioral

crisis responses or welfare checks with a behavioral component. The goals of these responses are to deescalate the situation, assess the underlying needs causing the crisis, and create a plan to address them, which may involve transportation to a service provider to determine whether or not the needs of the person would be best served by being transported to another location.

- **Traffic Control** – These are responses that are initiated by the MECC or the 311 call center in order to maintain traffic flow and enforce parking and other non-moving violations.
- **311/Online Reporting** – These are call types that were previously addressed by the MECC and police but currently are routed through 311 and online reporting as a means of reducing the administrative burden on the first responder system.
- **Animal Control** – These are responses that are dispatched by MECC and the 311 call center for concerns related to animals within City limits.

Current State

Table below identifies alternative first response services in Minneapolis.

Table 4: Operation Details of Minneapolis Responsive Service Programs

Category	Organization Name	FTE	Service Days	Service Hours	Area of Operation	Percentage of Total 911 Calls
Alternate First Response	Behavioral Crisis Response (Canopy Roots)	30	7 days/week	24 hours	Citywide	1.7%
	Traffic Control	60	7 days/week	8am–6pm (M,Tu) 24 hours (W to Su)	Citywide	0.4%
	Animal Care and Control	13		24 hours	Citywide	3.1%
	311 and Online Reporting	28	M to F	7am–7pm	Citywide	4.2%

The table below shows the count of calls handled by first response services and call type in Minneapolis during 2023. Of the nearly 400,000 calls the city received, over 25,000 (6.3%) were eligible to be serviced by the alternate first response agencies and of the eligible calls, 63.4% received an alternate response. (These figures do not include alternative responses provided via online reporting, which do not receive a dispatched response.)

Table 5: Calls for Service Volume by Call Type and Method of First Response, 2023

Dispatch Method	Animal Control	BCR	Traffic Control	Other*	All 911 Total
Alternate Dispatch	9,680 (2.4%)	5,154 (1.3%)	1,165 (0.3%)	0 (0.0%)	15,999 (4.0%)
Police Dispatch Only	624 (0.2%)	2,526 (0.6%)	6,074 (1.5%)	372,550 (93.7%)	381,774 (96.0%)
Grand Total	10,304 (2.6%)	7,680 (1.9%)	7,239 (1.8%)	372,550 (93.7%)	397,773 (100%)

**The calls quantified in the 'Other' column refer to calls with problem codes that are not systematically serviced by an alternate first response.*

Behavioral Crisis Response

Behavioral Crisis Response (BCR) in the City of Minneapolis is conducted by Canopy Roots, a nonprofit that is contracted to respond to 911 calls for service that indicate a behavioral health crisis. Since its launch in 2021, the organization has completed approximately 16,000 engagements. Canopy Roots employs approximately 30 full and part-time employees and operates three response vans doing citywide response.

Logic Model for Behavioral Crisis Response

The BCR unit responds to calls that it is dispatched to via MECC. Per the most recent contract, it does not conduct follow-ups, do outreach, or respond to individuals who it sees who could use BCR assistance but have not called 911 yet (commonly referred to as "on-view" responses in the policing context). We surveyed 10 similar alternate response programs in New York (BHeard), Chicago (CARE), Denver (STAR), Oakland (MACRO), Eugene (CAHOOTS), San Francisco (SCRT), Olympia (CRU), and Albuquerque (ACS), finding that nine of the 10 were able to proactively self-dispatch (meaning that

they were able to mark themselves as on a call without being directed by 911) and respond to “on-view” situations.

BCR is currently dispatched to two call types, behavioral crisis response and welfare check-behavioral crisis response, but provides support to police on other calls where they believe there might be a behavioral health component. We asked if BCR would be willing to expand the number of calls it is dispatched to and BCR said it would be willing to discuss this if it was included in the contract.

For purposes of this analysis, we used data from BCR calls that were logged in the publicly available calls for service data, not case data. BCR shares annual data with the City Council, but the public calls for service data is the most comprehensively available data that the City has on the BCR program.

There is no data sharing system in place to facilitate or track follow-up care for BCR patients, or to track any engagement with outpatient care. BCR does not share data with Hennepin County Behavioral Health about the patients with whom it interacts, as it was not a requirement in the contract. The County is well-positioned to provide follow-up care, which is often critical to addressing underlying issues and preventing future crises. The County provides follow-up care to individuals who come through the criminal justice system as a result of interactions with law enforcement officers. While BCR patients likely were able to avoid a law enforcement interaction, the County is not aware that they have had an incident that rose to the level of a 911 call, and cannot provide the follow-up care that they might provide to a similarly situated individual who came in via an encounter with law enforcement and was referred to a County Embedded Social Worker. As currently structured, BCR patients are missing out on opportunities for follow-up care as compared to patients who enter through the criminal justice system.

Figure 10: Percentage of Eligible Behavioral Crisis Response Calls That Received BCR Dispatch, 2023

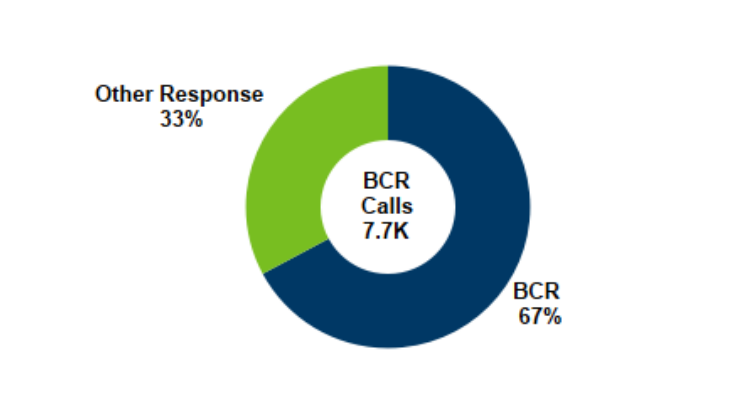


Table 6: Behavioral Crisis-Related Calls by Type, 2023

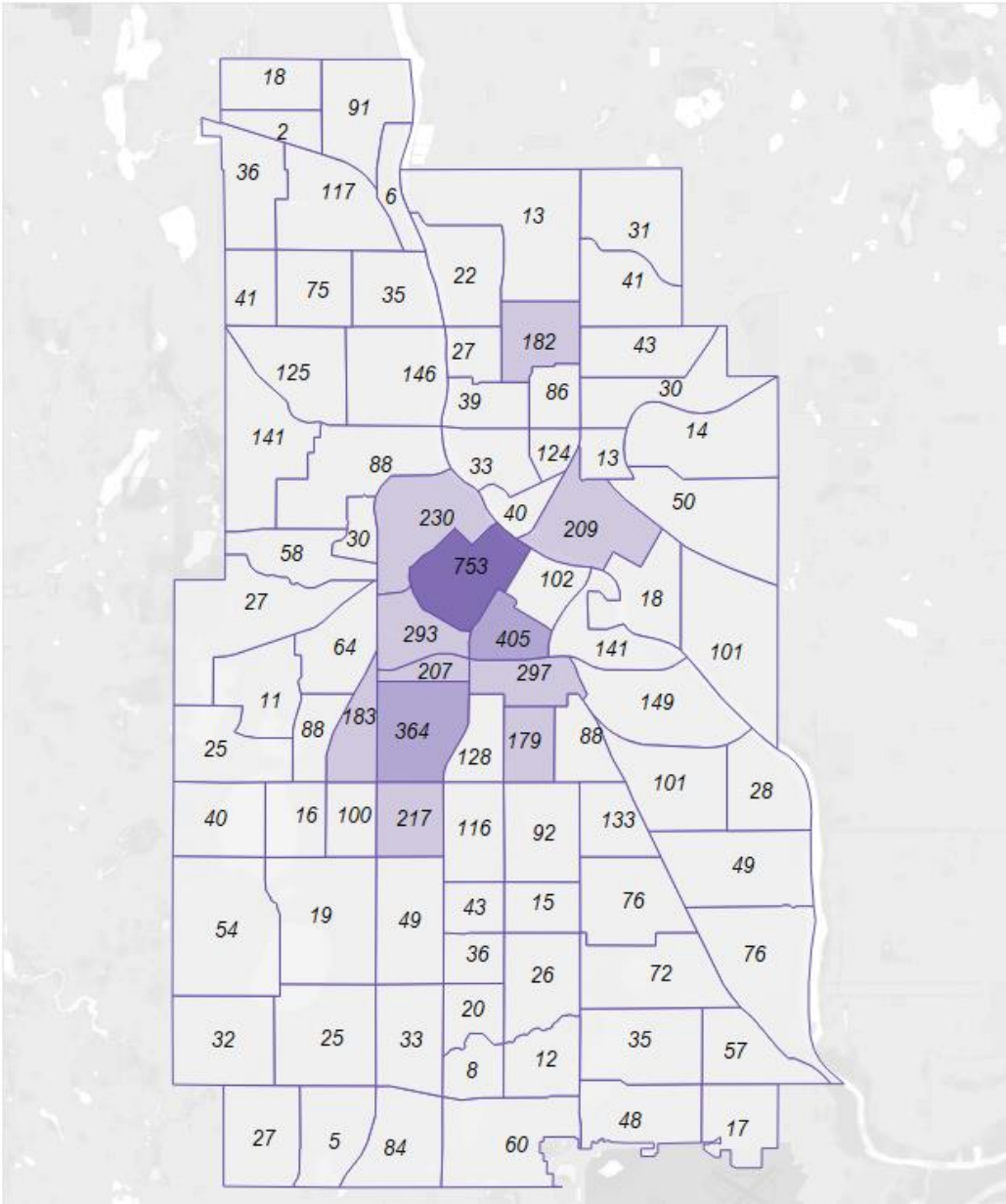
Behavioral Crisis-Related Calls for Service	2023	% of Total Calls
Behavioral Crisis Response	2,083	0.5%
Welfare Check - Behavioral Crisis Response	5,597	1.4%

The BCR has not yet been evaluated, but the vendor is partnering on an evaluation with the Minnesota Justice Research Center, a local non-profit research and advocacy organization.

Where Do They Operate?

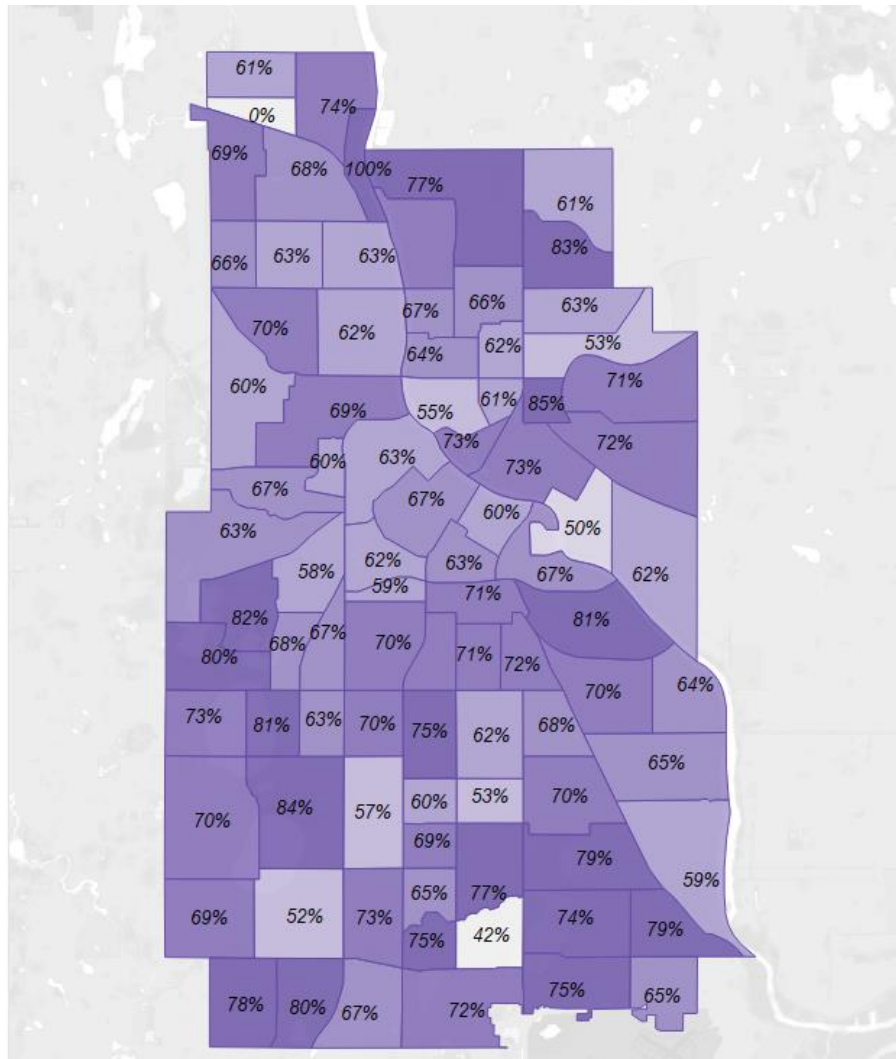
Behavioral Crisis Response-eligible calls were concentrated mostly in the downtown area, immediately south of downtown, and the lower half of North Minneapolis.

Figure 11: Behavioral Crisis Calls Across Minneapolis Neighborhood Areas, 2023



We also looked at the percentage of eligible calls BCR was dispatched to by precinct and found that response percentages were similar across precincts.

Figure 12: Minneapolis Percentage of Behavioral Crisis Calls with Behavioral Crisis Response Mapped across Neighborhoods, 2023

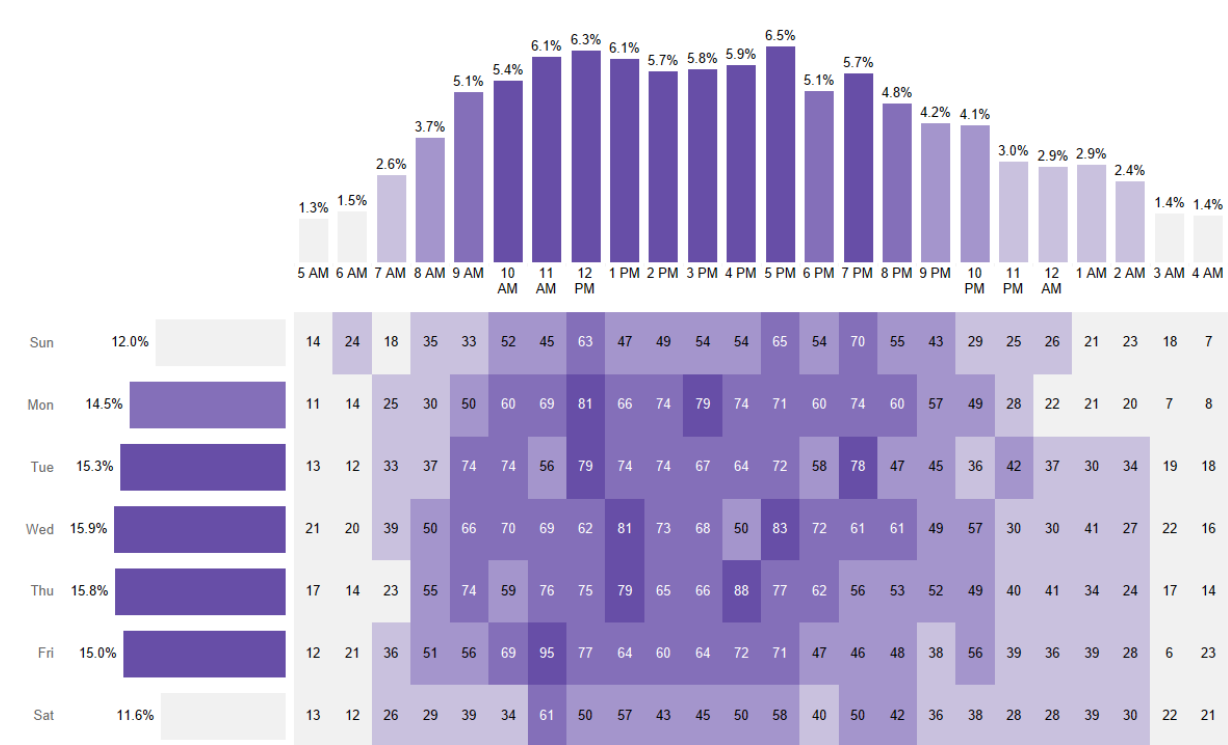


The BCR unit provided a maximum of three vehicles per watch shift. Each van was responsible for multiple precincts, and none could be dedicated to a more specific geography. In between calls BCR returned to its office in Northeast Minneapolis. When asked what it would need to provide more focused geographical coverage, BCR said that it would need additional vehicles and staff, and would have one team per each of the five precincts. The City has ordered additional vans and is waiting on delivery to address this concern.

When Do They Operate?

The vast majority of the calls for service for behavioral crisis responses occurred during the traditional 9–5 workday. Of those, calls were most prevalent on Wednesdays and Thursdays. The lowest day for calls was Sunday.

Figure 13: Minneapolis Behavioral Crisis Calls Mapped across Day and Time, 2023

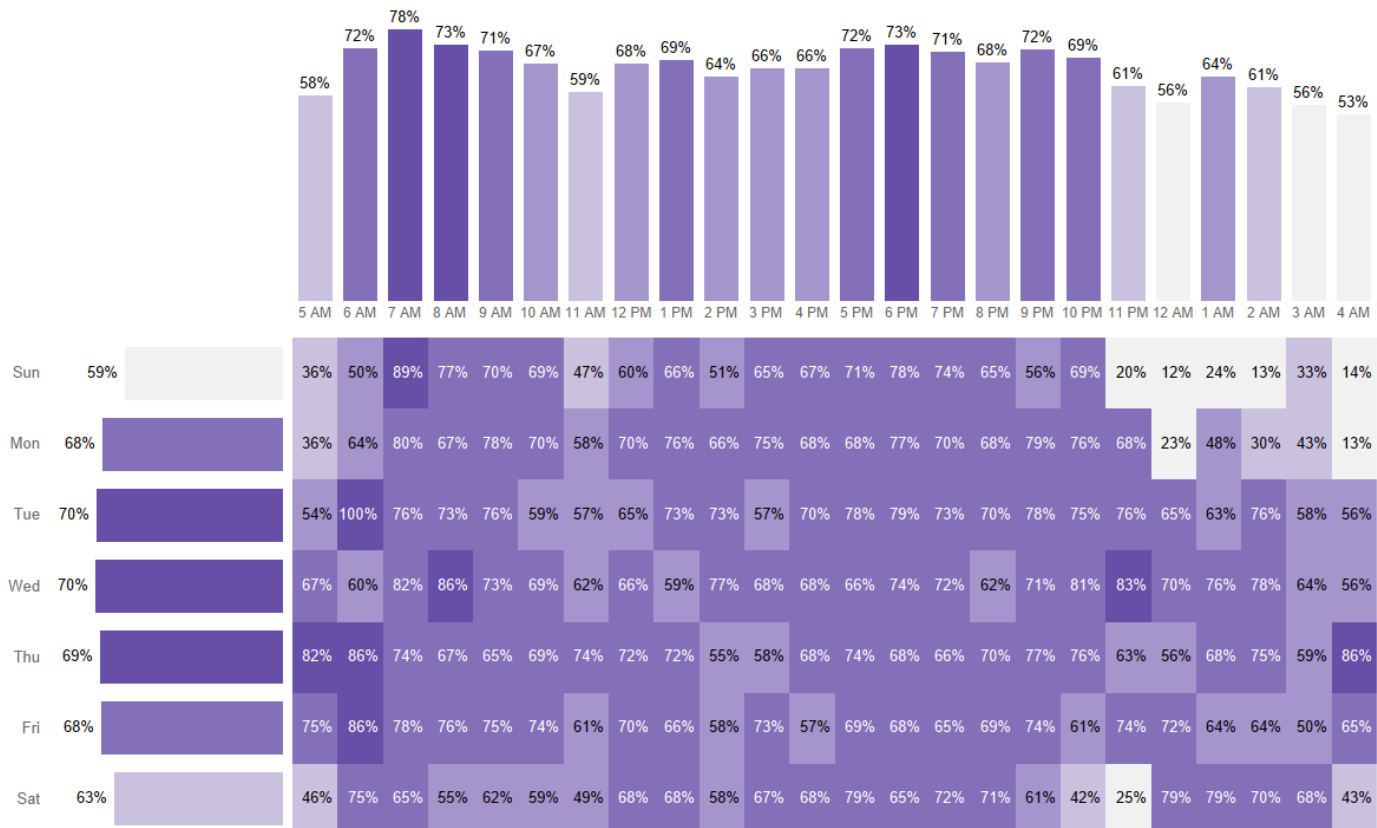


We examined the percentage of behavioral crisis calls that were responded to by the BCR team during 2023 (the first year of 24/7 operation). In other words, we took the total number of calls received by the MECC in the two call type categories that are eligible for a BCR response – behavioral crisis response and welfare check-behavioral health – and we then determined what percentage of those calls actually received a BCR response. Calls that did not receive a BCR response received a police response.

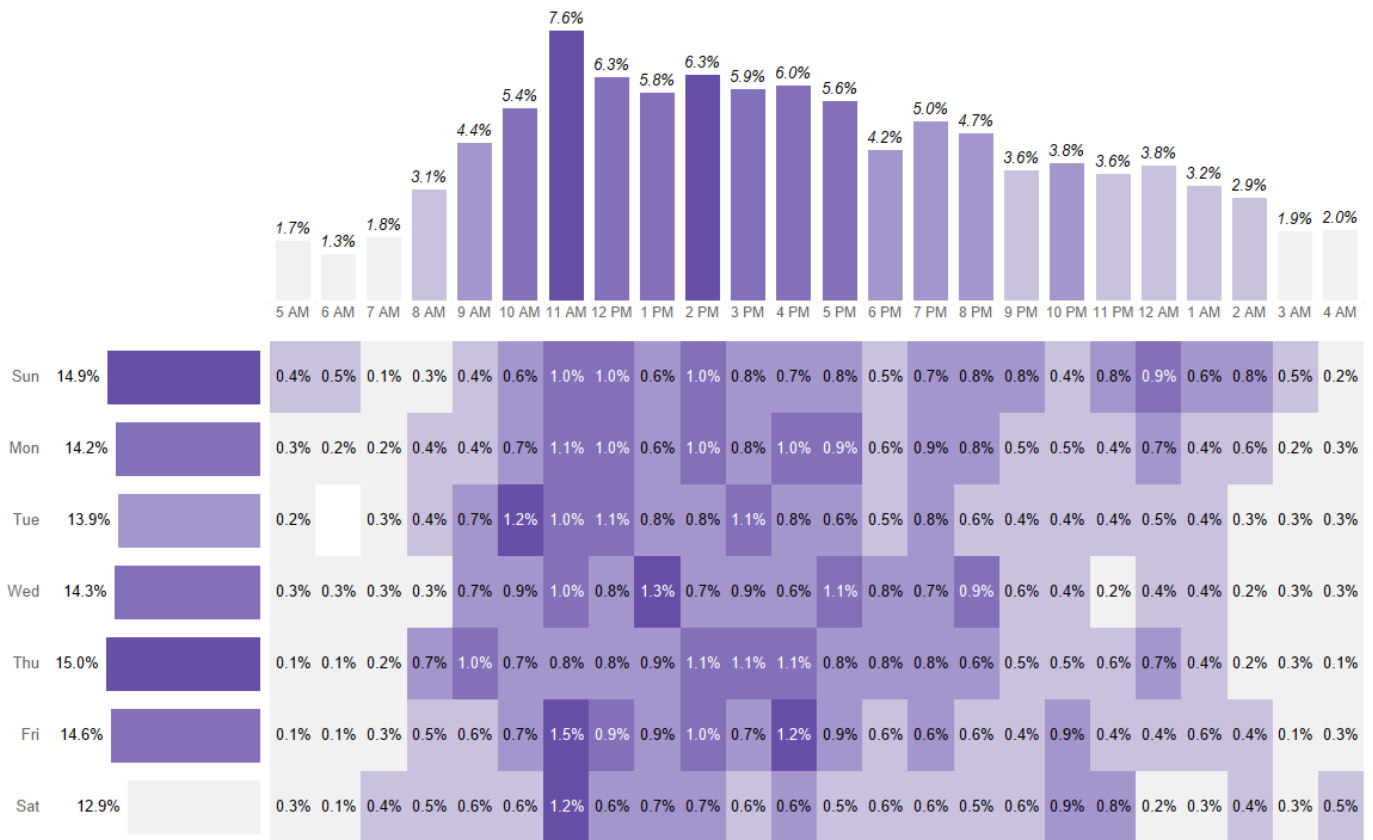
We cannot know from this data set exactly why a BCR unit was not dispatched to an eligible call. The days that the BCR unit responded to the fewest eligible calls were over the weekend. Calls that were eligible for a BCR dispatch but received a police response

instead were most prevalent on Sundays, with just over 40% of BCR-eligible calls responded to by the police instead of BCR.

Figure 14: Minneapolis Percentage of Behavioral Crisis Calls with BCR Response Dispatched Mapped Across Day and Time, 2023



**Figure 15: Minneapolis Behavioral Crisis Calls with No BCR Response
Mapped Across Day and Time, 2023**



We mapped the eligible calls that did not receive a BCR response onto a day and time chart to identify the day/hour blocks where calls were most frequently responded to by law enforcement instead. Over the course of the 7 day period, we identified a 9-hour block from 11:00 a.m. to 8:00 p.m. where additional service was most needed. During 2023 this 9-hour time block accounted for over 2,600 behavioral crisis calls that were handled by the MPD instead of BCR. This increase in percentage of eligible calls responded to by MPD corresponds to an increase in behavioral health calls, which suggests capacity issues.

What Barriers to Service Have They Self-Identified?

Over the last year, the BCR was able to serve as the primary dispatched unit to approximately 67% of calls that received a BCR dispatch from the MECC, with the

remainder placed into the MPD dispatch queue. We asked what BCR would need to serve more people and it listed additional funding, more staff, and additional agency resources (e.g., additional vehicles). This would enable BCR to provide additional capacity during the hours of highest demand and allow BCR to have a team operating in each police precinct. BCR also mentioned that it needed more housing options in the community to which it could refer patients, and that this would ultimately reduce the need for calling 911 for some of its patients. An in-depth evaluation of BCR's work would provide the data to estimate exactly how much additional staffing and resources are needed to be able to respond within a desired response time at current levels of calls and at various proposed levels of call expansion.

Minneapolis Traffic Control

Traffic Control is a division within the Minneapolis Regulatory Services Department of 60 employees, most of whom are field agents. Traffic Control's mission is to support community safety and effective traffic flow by controlling traffic during rush hour, large events/emergencies, and periods of construction. Traffic Control also address code compliance through permit enforcement, illegal/dangerous parking enforcement, and community education of parking regulations.

Logic Model for Traffic Control

Traffic Control's specific interventions include providing an external perimeter during special events, and addressing parking and abandoned vehicle complaints – writing parking and non-moving citations, identifying violations using license plate readers (LPRs) on its vehicles, and processing tows for the City. When the 311 call center is operational (7:00 a.m. - 7:00 p.m.), traffic control agents can be dispatched via the 311 complaint system. When the call center is closed or the call is emergent, agents are dispatched over the radio by the MECC on the non-emergency channel. Agents are also able to respond and investigate vehicles that are identified by their LPRs as having unpaid tickets for possible towing.

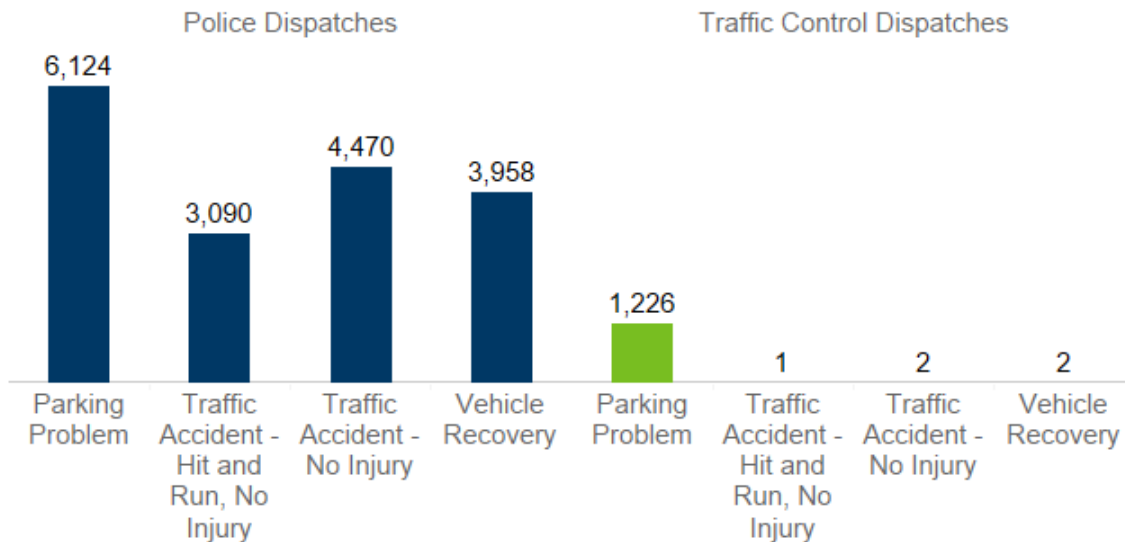
Traffic Control currently responds to emergent parking requests, such as a car blocking a right-of-way. When asked if it would be able to respond to a larger number of call types, Traffic Control said it is interested in expanding its scope to non-emergency situations such as property damage reports, minor accident reports, and

recovery of unattended stolen vehicles, although some of these reports would also be eligible for online reporting (like hit and runs of a parked car). It is unclear what legal hurdles there might be for taking on an investigation role. Adding minor accident reports would increase its response load by 8,000 calls per year and the recovery of unattended stolen vehicles would increase the number of calls it responds to by 3,000 calls per year.

Table 7: Parking Problem Calls, 2023

Auto Related Flag	2023	% of Total Calls
Parking Problem	7,239	1.40%

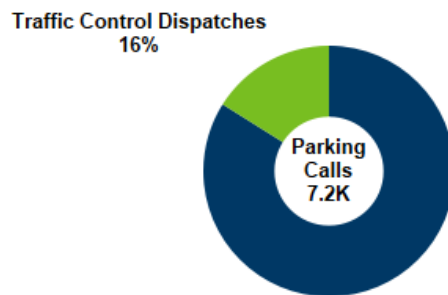
Figure 16: Minneapolis Traffic-Related Calls by Response Dispatched, 2023



It should be noted that it was unclear how many of these calls could also be directed to online reporting and forgo a response completely, as has been done in other cities, so this number should be seen as a top estimate of call burden to be undertaken by Traffic Control.

Of the parking-related calls for service the City received over the three year period, 17.8% were dispatched to traffic control units based on the radio call sign. The remainder were responded to by the police.

Figure 17: Minneapolis Parking-Related Calls that Received Traffic Control Dispatch, 2023



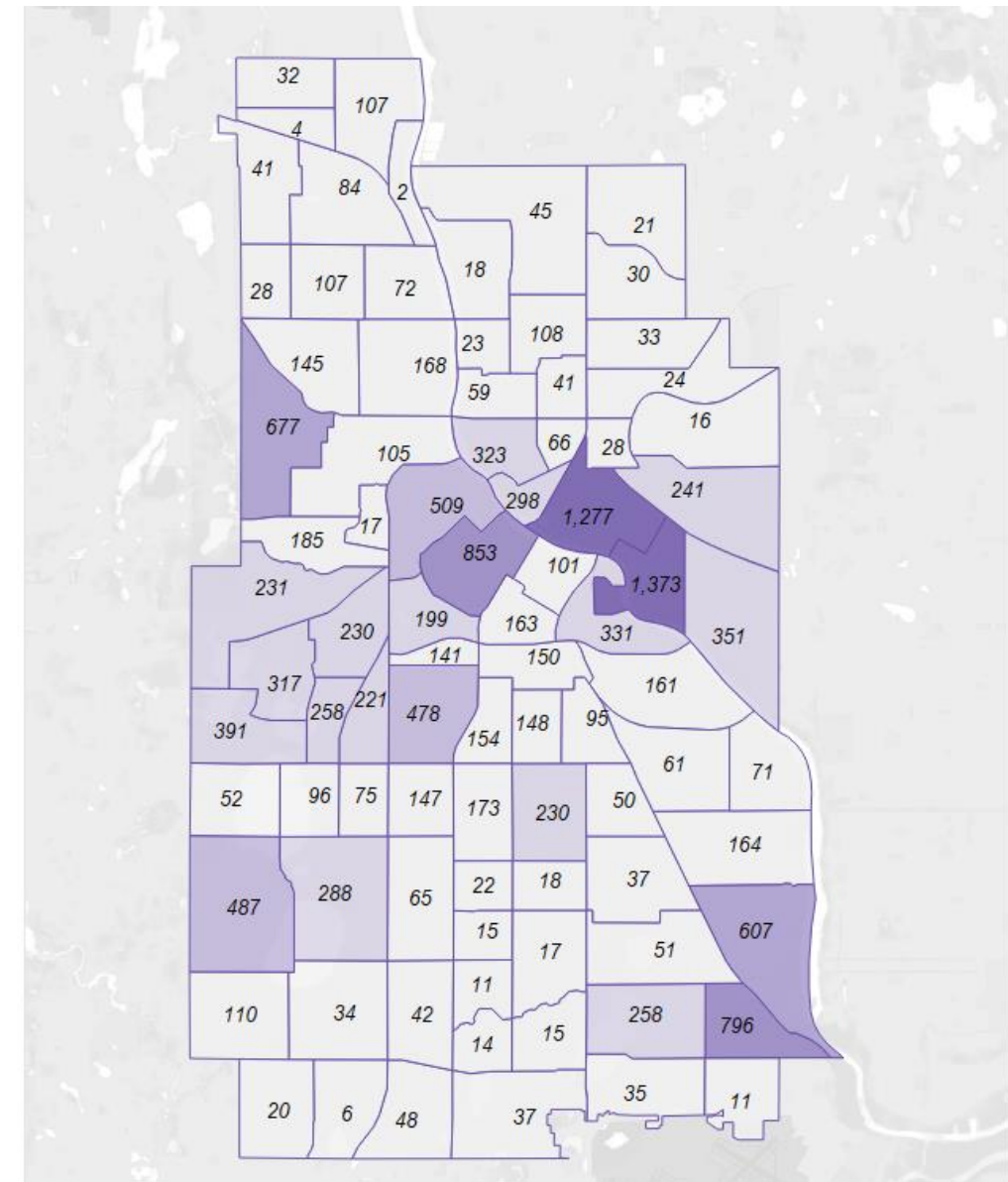
Traffic Control has not been independently evaluated as of the writing of this report.

Where Do They Operate?

Parking calls for service are concentrated in the downtown, east of downtown, and southwest of downtown regions of the city. The area with the most parking-related calls for service to 911 is the neighborhoods containing the University of Minnesota. Many of the parking-related calls for service are focused on Minneapolis' Critical Parking Area program and zoned parking, which may explain why the enforcement is not evenly distributed throughout the city.²¹

²¹ "Critical Parking Area Map," City of Minneapolis, accessed October 30, 2024. <https://www2.minneapolismn.gov/business-services/licenses-permits-inspections/streets-sidewalks-utility/critical-parking-permits/critical-parking-map/>.

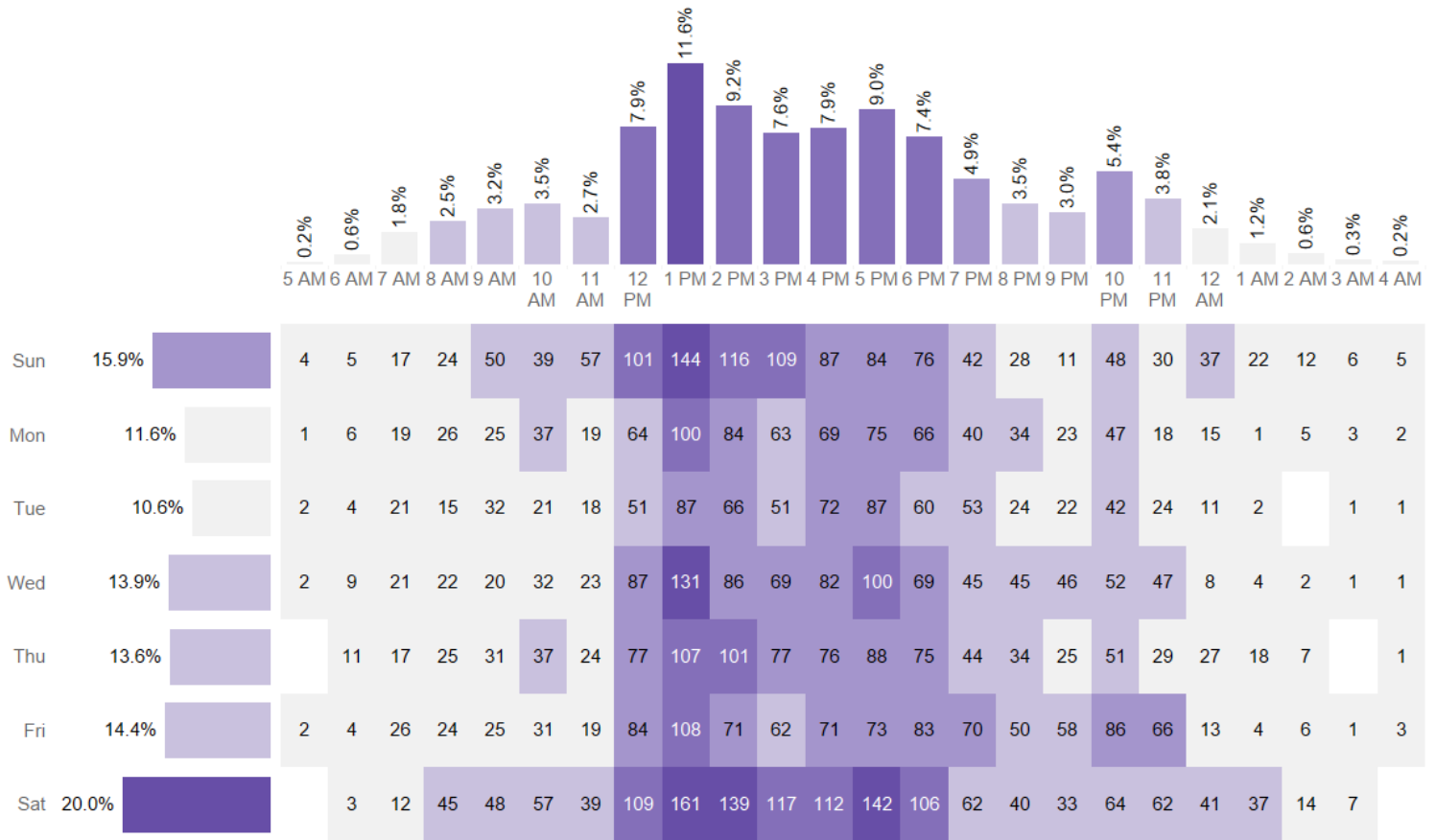
Figure 18: Parking Calls for Service Across Minneapolis Neighborhood Areas, 2021-2023



When Do They Operate?

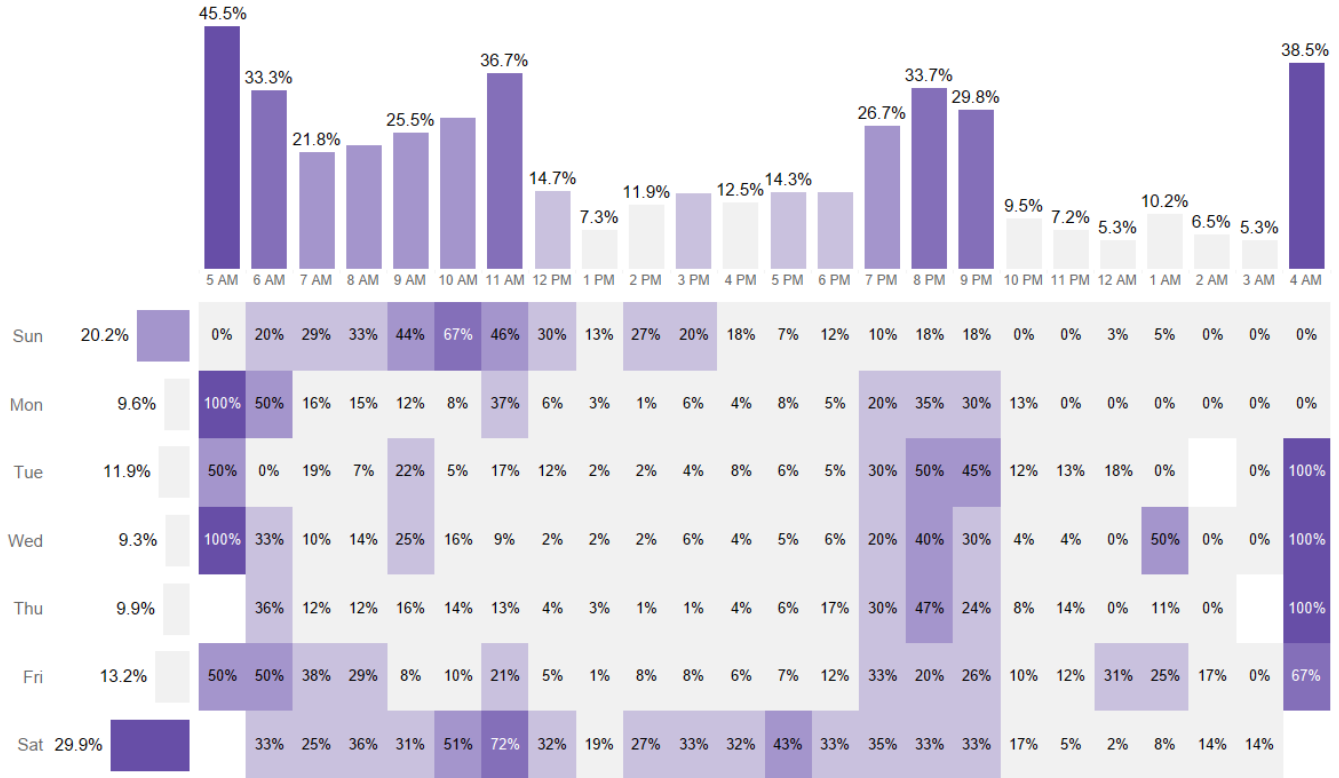
Parking-related calls for service are most active on the weekends, with almost 20% occurring on Sundays. The fewest calls for service for parking happen on Tuesdays. During the day the call frequency follows 9-5 working patterns, going later into the night during the weekends to account for special events and nightlife traffic.

**Figure 19: Minneapolis Parking Calls for Service Mapped
Across Day and Time, 2023**



Traffic Control is being dispatched to the highest percentage of eligible calls on Saturdays and Sundays. There is a significant drop off in their percentage of eligible call responses happening between noon and 7:00 p.m. during the work week, and after 10:00 p.m. every day. The drop in percentage of eligible calls responded to corresponds with the increase in traffic calls, which suggests capacity issues.

**Figure 20: Minneapolis Parking Calls for Service with Traffic Control Dispatch
Mapped Across Day and Time, 2023**



What Barriers to Service Have They Self-Identified?

When asked what it would need to be able to serve more people, Traffic Control mentioned two things. The first was additional capacity via full-time staff so that it could operate 24/7 (it currently operates 24/5) – Traffic Control specifically proposed seven additional FTEs. This addition would improve the percentage of eligible calls to which it is able to respond. The second was a solution to the considerable amount of time spent waiting to physically hand over paperwork to tow truck operators. This could potentially be addressed by a technological solution and would increase the percentage of eligible calls it is able to respond to as well as the amount of proactive work it is able to accomplish.

Minneapolis 311 and Online Reporting

311 is a department composed of 28 staff within the City of Minneapolis government that operates from 7:00 a.m. to 7:00 p.m., Monday to Friday, and also operates the online incident reporting system – a system that allows residents to file reports for stolen, lost, or damaged property, which is available 24/7. 311 acts as an access point for information about City services for residents, and, as of June 2021, it enables residents to file reports about non-emergent property damage and theft incidents in lieu of calling 911 and getting a police response.

Logic Model for 311 and Online Reporting

The City of Minneapolis transferred the responsibility for filing non-emergent property damage and theft reports from 911 and MPD to 311 and the online reporting system, in an effort to reduce the administrative burden on the police department which was facing serious hiring and retention challenges. Callers would be able to file a report with a 311 agent if they contacted 311 during working hours, or they could file a report online and request a call-back. The City then dispatches an appropriate response during daytime working hours.

According to data obtained via the questionnaire, in 2023 311 agents filed 4,277 police reports for theft, lost, or damaged property, and there were 12,461 online reports filed by the public. This is equivalent to 4.2% of total call volume received through 911 for 2023. When individuals called to file a report that was available online, it was the practice of the 311 agents to fill out the online report on their behalf. The online report data does not distinguish between online reports that are filed directly by a member of a public, and online reports that 311 agents complete online on behalf of a member of the public seeking City services. This makes it difficult to measure to what extent residents are aware of, and using, the online option.

The City does not have a process for identifying additional calls that could be moved to online reporting nor for identifying the resources that would require. The City of Dallas, which has been the most aggressive with its use of online reporting, has taken an additional step of identifying calls to move online and sunsetted the ability to make reports over the phone – although it is unclear how this has impacted access to reporting.

The City of Minneapolis has applied for funding to evaluate the impact of its 2021 policy change moving calls from the MECC to 311 and the online platform.

When Do They Operate?

311 leadership stated that it operated during Monday to Friday, 7:00 a.m. to 7:00 p.m., because that is when it received the most traffic across its channels (emails, text, mobile app cases, and self-service cases). This was calculated on a cost-per-call basis, and it was determined that availability outside of these times was not a cost effective use of staff. When asked what it would need to staff outside of that window, it said it would need additional 311 agents.

What Barriers to Service Have They Self-Identified?

With the exception of the need for additional FTEs, the remainder of the barriers were mostly process driven. 311 respondents highlighted a need for a centralized information exchange system, so they can be informed and therefore well-positioned to respond to calls. As the central information point for the residents of the city, a formal information exchange process between departments and 311 would ensure that 311 has quality, timely information about important programs, events, and other matters in the City. Such a formal system or process does not currently exist. Rather, 311 relies on informal updates and news releases from each department's communications department for information about City programs, events, and other matters.

Minneapolis Animal Care and Control

Minneapolis Animal Care and Control (MACC) is a division within Regulatory Services that supports community safety through animal crime and welfare investigations, adoption services, kenneling for victims of domestic abuse, low-cost veterinary clinics, and public education campaigns. Within the department it has 13 members assigned to field and investigative services. MACC responds to calls 24/7, using a combination of shift work and on-call response.

Logic Model for Minneapolis Animal Care and Control

Animal Control is dispatched via 911 and 311, and also completes investigations on animal-related crimes. It does not respond with lights and sirens and does not carry weapons. Instead, Animal Control uses de-escalation techniques or retreats to a position of safety when necessary. Since the hiring and retention challenges began at MPD, Animal Control has taken on all of the responsibilities for animal-related calls from MPD with the exception of warrant service and sign-offs on arrest requests following an investigation.

When asked if it would take on any additional roles from MPD, Animal Control shared that its main concern was being able to respond to calls around the clock.

Of the 26,514 calls related to animal control received over a three year time period, 92% had an animal control officer dispatched to the scene, and the remainder received a police response. The majority of Animal Control-related calls are “animal calls,” which is used primarily for calls involving off-leash dogs, but can also be used as a catch-all term for animal-related disturbances that do not fit into the other animal-related call categories.

Figure 21: Percentage of Animal-Related Calls that Received Animal Control Dispatch, 2023

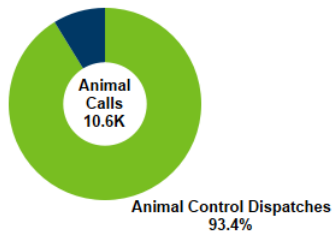


Table 8: Animal Control-Related Calls by Type, 2023

Animal Control-Related Calls	2023	% of Total Calls
Aggressive Dog	322	0.1%
Animal Bite	1,063	0.3%

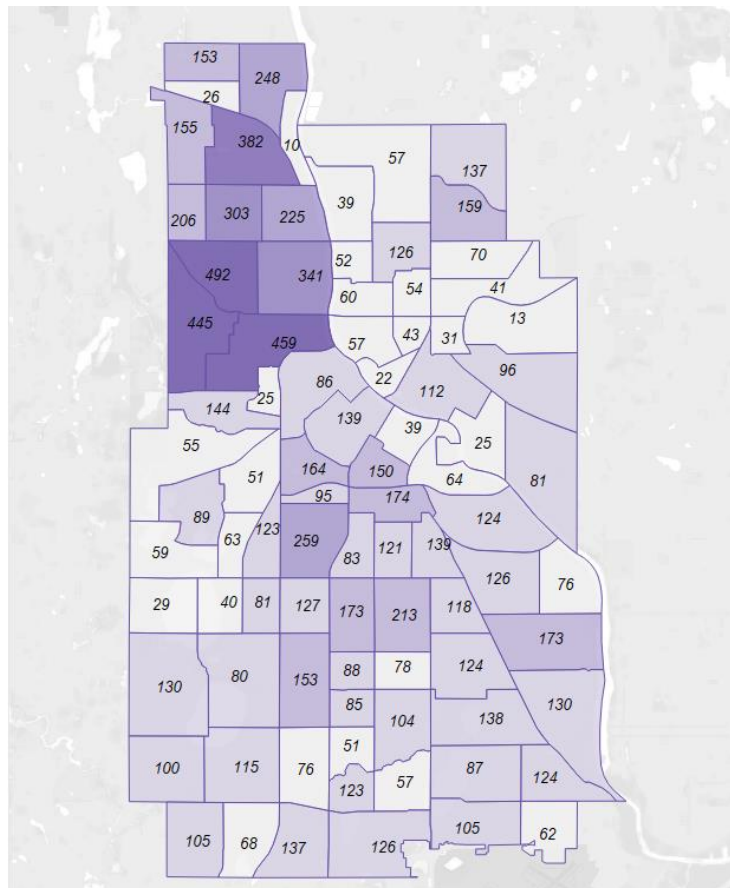
Animal Call	7,923	2.0%
Animal Welfare Check	1,319	0.3%
Total	10,627	2.7%

None of the programs have been independently evaluated.

Where Do They Operate?

The majority of the calls for Animal Control come from North Minneapolis, but it patrols and responds to calls in neighborhoods all over the city. Animal Control has been able to respond to all of its calls within the city, although in few cases as a secondary responder after police have arrived.

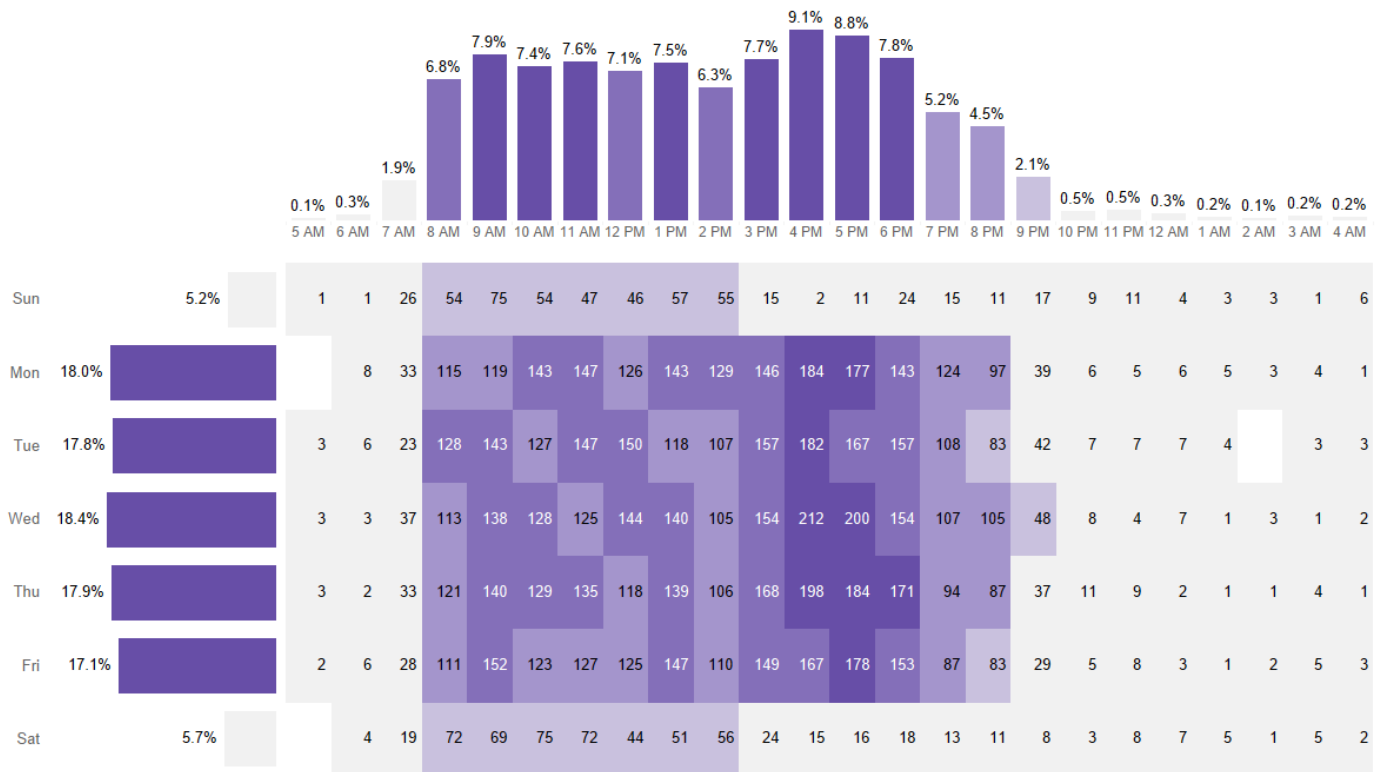
Figure 22: Animal Control Calls for Service Across Minneapolis Neighborhood Areas, 2021-2023



When Do They Operate?

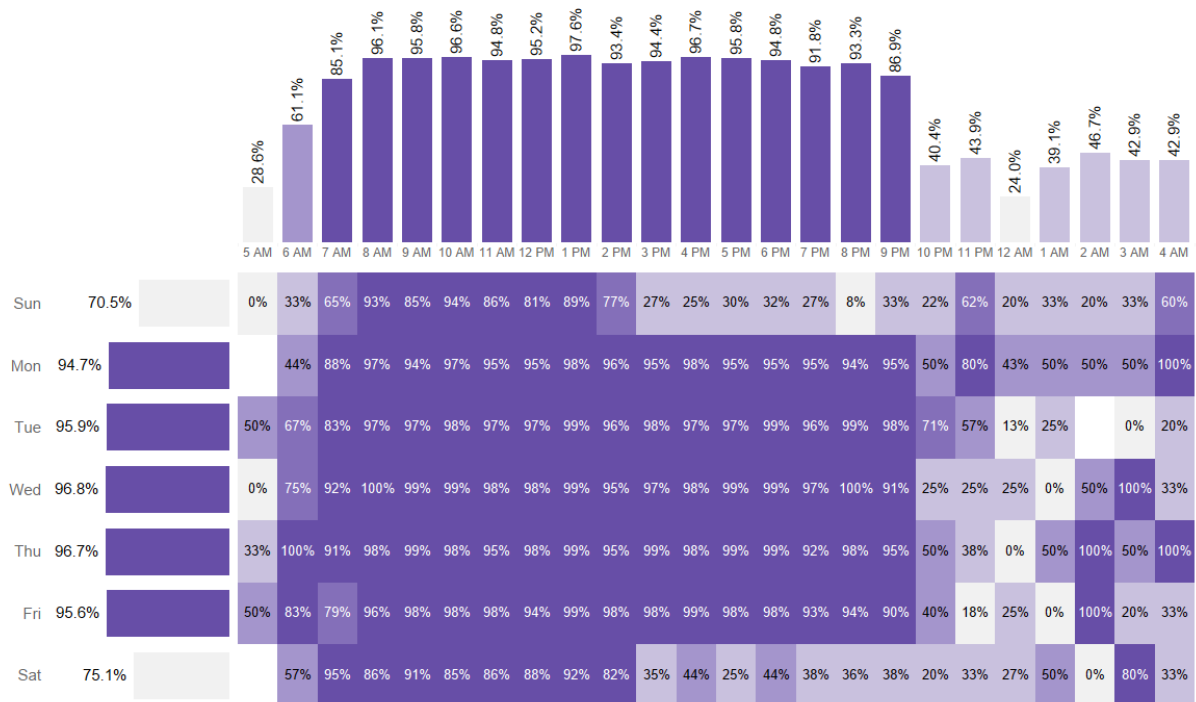
Animal control officers are available 7:00 a.m. to 11:00 p.m. on Monday through Friday, and 7:00 a.m. to 4:00 p.m. on Saturday and Sunday. During these hours, officers also respond to self-referred on-view calls. Outside of those hours, they only respond to 911 priority calls for bites and animals inside the house. During this time, officers work on call, and either arrive to take control of the scene from the police who have arrived first, or the police drop the animal at the Minneapolis Animal Care and Control facility themselves.

Figure 23: Animal Control Calls for Service Mapped Across Day and Time, 2023



Most of the calls that have to be responded to with a police officer are happening when the unit is on call, rather than on shift. When asked what Animal Control would need to be able to increase its availability and reduce its reliance on the police for calls outside of their working hours, Animal Control respondents reported that they would need additional staff to be in-office 24/7.

Figure 24: Percentage of Animal Related Calls for Service Dispatched to Animal Control Mapped Across Day and Time, 2023



What Barriers to Service Have They Self-Identified?

Animal Control reported that it was able to respond to all calls it received at least as a secondary responder; however, it cited that more full-time staff and patrol vehicles would help increase Animal Control officer presence and reduce response times to calls. Also, Animal Control respondents reported that, due to a lack of serviceable vehicles, they are sharing vehicles between officers, further increasing response times. We asked how many more agents and vehicles Animal Control would need to operate around the clock and respondents said two additional vehicles, and ten additional agents.

Animal Control also raised steps the City could take to reduce reliance on emergency response in this area. Specifically, if the City could provide or expand community-based affordable veterinary care, accessible social services that are inclusive to animals (e.g., shelter/housing, emergency vet care, etc.), and affordable pet resources (e.g., food, boarding, behavioral training), this would reduce the number of 911 calls

with an animal nature, increase the number of people who could get into homeless shelters (this can be a struggle for pet owners), and reduce the cost of animal ownership for low-income residents. When asked what Animal Control would need to be able to provide these expanded resources, to the extent that they would be operated out of this department, respondents said five additional kennel technicians to implement the low-cost vaccination program and a larger budget for food. The City has begun the process of identifying a new facility that would allow for the space necessary for the expansion.

Gaps

The key findings for the responsive services fall largely into four areas of feedback:

Utilization

There is no oversight structure for ensuring that the utilization of non-police interventions is maximized.

- Based on the 911 call types that they have been assigned, the four responsive programs are authorized to respond to 10.2% of calls out of the total police 911 call volume.
- Alternate first responders were dispatched as the primary response to 63% of eligible behavioral health, traffic, and animal calls, with the police department responding to the other 37%.
 - For example, in the last year, BCR was dispatched to 67% of eligible calls as a primary response, relying on the police to respond to the other 33%.
- There is no regular process to review call data (including response percentages, response times, etc.), performance metrics, and outcomes, nor a process to discuss utilization and efficacy of these services, similar to the police department's use of the MSTAT process. We were told that MECC and BCR do reviews individually, but were unable to observe.
- BCR and Animal Control both cited problems with vehicle availability, which impacts their ability to respond to all eligible calls. BCR is in the process of

getting two more vehicles and Animal Control is in the process of selecting replacement models for their fleet.

Expansion

There is no process or cadence for identifying additional call types that could be shifted online or reallocated for response by alternate responders.

- Every responsive entity we spoke to said it was willing to take on additional call types if given the resources necessary to do so.
- There is no regular process to review call data and confer with responsive agencies about additional call types that could be moved from police response to alternate responses.

Technology

Programs are not fully taking advantage of technology to increase the impact of their interventions.

- BCR is not sharing patient data with Hennepin County Behavioral Health Center, which has developed a system of outreach, follow-up, and provider notifications to ensure mental health crisis patients remain engaged in treatment and out of the criminal justice system.
- Traffic Control agents are physically handing over tow requests to tow truck operators, resulting in 30-40 minutes of lost time per tow during their shifts as they wait for the vehicle to show up.
- 311 agents continue to take calls at unverified volumes for categories that have been moved to online reporting. When the 311 center goes offline (it is not 24/7), those calls end up going to 911.

Validation

Programs have not been evaluated and as a result the City is missing opportunities to elevate their successes and develop a roadmap for addressing their challenges.

- BCR and Traffic Control are incredibly innovative programs that have a wealth of anecdotal evidence supporting the positive impact they are making in the lives of residents. It would be invaluable to the City and to other jurisdictions in the country to have strong independent academic evaluations and a way to anonymize and share some of the success stories.

APPENDIX 5: Restorative Services (Justice Diversion)

As the *Safe and Thriving Communities Report and Plan* says, “access to... vital health and wellbeing social services, income support services, and housing needs are critical to stabilizing... individuals and their families.” The City of Minneapolis built a portfolio of programs that is intended to provide regular, prioritized access to stabilizing services for individuals who were arrested for possession of controlled substances and possession of firearms, youth who committed low-level offenses, and sex workers who are at risk of being trafficked – each in lieu of further engagement with the criminal justice system. This section will identify opportunities to maximize the use of the programs in this portfolio, as well as opportunities to enhance these programs to cover more offenses, address barriers to success, and meet needs identified in the community.

Using a combination of questionnaires, follow-up conversations, and Minneapolis Emergency Communications Center (MECC) data, we set out to understand how the City’s restorative programming intends to provide services in place of criminal justice system involvement, what services are provided and their basic characteristics, and to what extent these interventions are reaching the intended populations.

Desired State

Diversion programs provide non-carceral restorative alternatives for individuals engaged in unlawful activity such as sex work, gun possession, curfew violations and other low-level criminal acts. This can happen at the point of arrest, where the officer diverts the individual to a service in lieu of booking the person into the system, or after a person has been arrested, where the Minneapolis City Attorney’s Office (MCAO) holds the charges in abeyance and refers the individual into treatment, thus avoiding a criminal record. Services can include mental and behavioral health programming, job search assistance, housing assistance, education support, and assistance in securing identification.

Current State

What Programs Are Doing This Work?

Four City of Minneapolis-funded non-profit diversion initiatives responded to our questionnaire:

**Table 9: Operation Details of Minneapolis Justice
Diversion Restorative Service Programs**

Category	Organization Name	FTE	Service Days	Service Hours	Area of Operation
Deflection/Diversion	Urban Ventures	2	Thursday	10am to 3:30pm	Citywide
	Upside Initiative	1	7 days a week	24/7	Citywide
	Pillsbury United Communities LEAD	4	M-F	9am to 4pm	East Lake Street from Chicago Avenue to Hiawatha Avenue plus 2 blocks north (28th street) and 2 block south (32nd Street)
	Youth Connection Center	3	7 days a week	24/7	Citywide
	Restorative Justice Community Action	5	Varies	Varies	Citywide

- Urban Ventures** is a partnership with MCAO. Participants are referred into this program following an arrest for an unlawful possession of a firearm. The program receives 25 participants per year on average. Participants are required to go through nine weeks of group therapy and case management. Twelve months after they complete the program, they are eligible for expungement.

- **Pillsbury United Communities: Let Everyone Advance With Dignity** (LEAD, which in some municipalities refers to Law Enforcement Assisted Diversion, a different model) is a program that was initially designed to receive individuals who were arrested for the possession of controlled substances. However, the focus of the program in Minneapolis is to connect individuals who were referred to the program by local businesses, neighbors, and program outreach workers to services. It operates from 9:00 a.m. to 4:00 p.m. Monday to Friday, and is funded by the City, the County, and several foundations and private organizations. In the first year of operations (2023), the program served 43 clients. LEAD is not regularly reporting its data to the City.
 - LEAD noted that it approached the City to apply for evaluation funding through the BJA COSSUP initiative but the City applied with a different community partner. The program has not yet been evaluated.

- **The Youth Connection Center** is a 24/7 program operated by The Link that is specifically designed for youth. The Youth Coordination Center is a no-locked-doors program that operates as a partnership between the City, County, and Minneapolis Public Schools in which officers can drop off youth who are in violation of the City curfew or other low-level offenses. The program receives eight youth per week, down significantly from a high of 80 just prior to the murder of George Floyd. Its current caseload is 240 clients.
 - The Youth Coordination Center initiative was last evaluated in 2013 by Rainbow Research, an evaluation firm based in Minnesota. We attempted but were unable to obtain a copy of the evaluation.

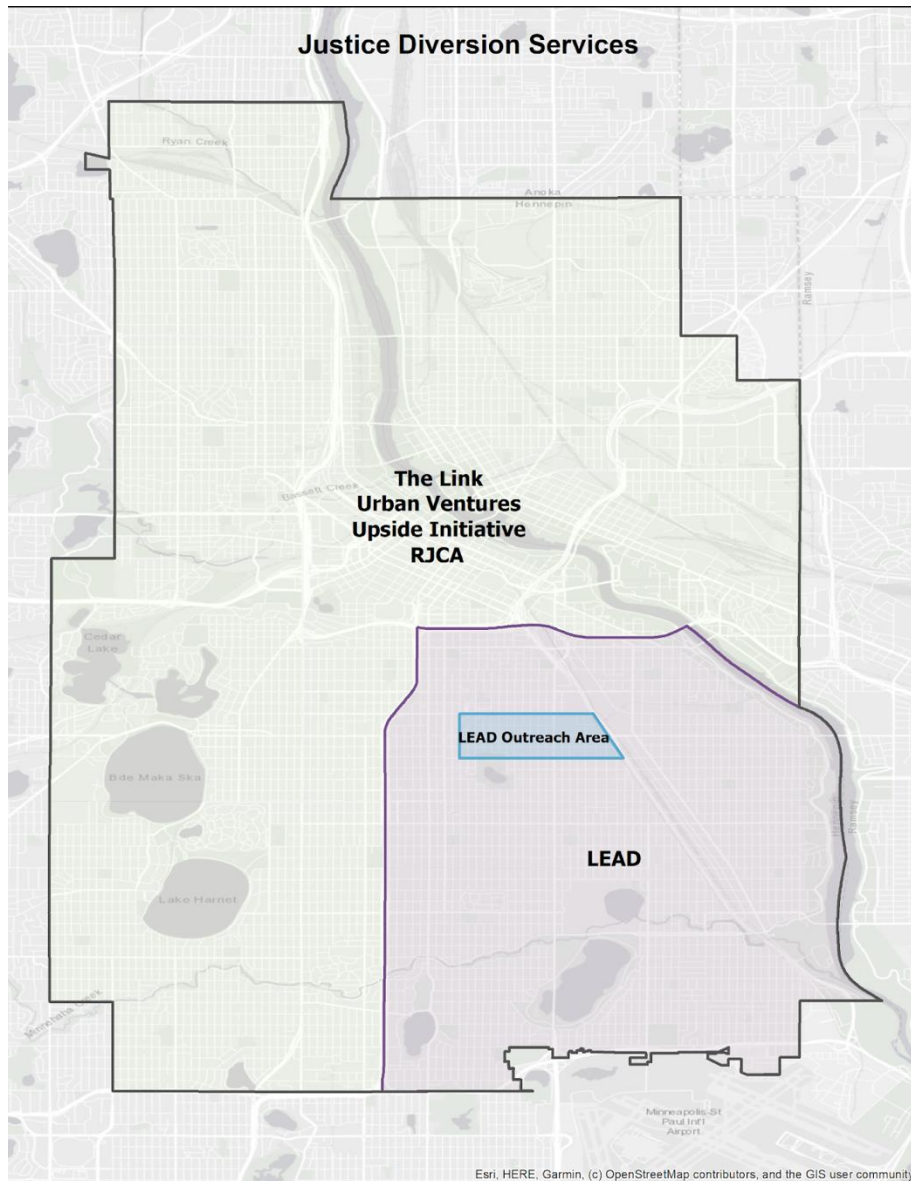
- **The Upside Initiative** is a partnership of The Link, The Family Partnership, the Minnesota Indian Women's Resource Center, and the City of Minneapolis that receives referrals of potential human trafficking victims from police officers following enforcement of sex work operations in the City of Minneapolis. The initiative also conducts outreach in the community and manages a hotline. It reported connecting with approximately 1,000 people per year.
 - This initiative has not been evaluated.

- **Restorative Justice Community Action** is a citywide program that brings together individuals who have been cited for misdemeanors and a panel of representatives from the community to begin the process of taking

responsibility and ultimately repairing the harms that had been caused, in lieu of using the courts system. This is an evidence-based intervention that has been evaluated by the University of Minnesota and proven to reduce future contacts with the criminal justice system. MCAO refers adults to this program and MPD refers juveniles. It is funded by the County and receives approximately 100 referrals per year.

Where Do They Operate?

Figure 25: Justice Diversion Services' Areas of Operation



Four of the five deflection and diversion initiatives funded by the City operate on a citywide basis. LEAD operates within the boundaries of the third police precinct but conducts outreach in an area two blocks north and south of East Lake Street, between Chicago and Hiawatha Avenues. Its outreach area is outlined above.

Table 10: Counts of Narcotics Offenses (3rd, 4th, and 5th Degree) by Precinct

Precinct	2021	2022	2023	Grand Total
1	198	291	366	855
2	111	96	69	276
3	184	210	320	714
4	223	255	273	751
5	141	168	235	544
Grand Total	857	1,020	1,263	3,140

Narcotics offenses appear to be increasing each year in all but the second precinct. The City is averaging just under four reports filed per day for 3rd, 4th, and 5th degree narcotics offenses.²² MPD is not diverting any of these offenses to the LEAD program under LEAD’s current design.

It is unclear from the current data how many narcotics incident reports result in someone being taken into custody at all, or how many are taken to jail versus being taken to a non-carceral treatment facility in lieu of arrest, like the Hennepin County Behavioral Health Center.

When LEAD was asked what it would need to expand its areas of operation, LEAD said that it would need more funding, referrals from the City, better access to transportation, and data from the City to match its expansion to the areas of greatest need.

The MCAO gun possession diversion initiative, in partnership Urban Ventures, operates on a citywide basis and has been evaluated by the University of Chicago School of

²² We excluded 1st and 2nd degree offenses because they were primarily manufacturing- and distribution-related and are not considered personal use.

Social Work. Preliminary findings show that completion of the program is associated with a reduction in the likelihood of arrest in the two years following participation in the program.²³

In 2023, there were over 2,500 police reports filed for either weapons offenses or 3rd, 4th, and 5th degree narcotics offenses, or just under 7 per day.

Table 11: Citywide Weapon Offenses by Year, 2021 to 2023

Offense Description	2021	2022	2023	Grand Total
CARRY LONG GUN	20	19	26	65
CONCEALED WEAPON	1,410	1,297	1,215	3,922
DANGEROUS WEAP	28	34	26	88
FAKE WEAPON			8	8
PERMIT VIOL	11	14	14	39
POSS WEAP	2	10	1	13
All Weapon Law Violations	1,451	1,353	1,265	4,069

It was unclear from the data how many of the 1,265 weapons offenses in 2023 resulted in arrests, nor was arrest data available. Thus, it was not possible to estimate what percentage of gun arrests were being diverted to Urban Ventures.

MCAO and MPD are diverting 100 people from the courts to Restorative Justice Community Action (RJCA). RJCA is working on writing a policy in collaboration with both agencies to define exactly who is eligible, and to track recidivism to gauge the effectiveness of the program. When asked what it would need to expand the number of people served in lieu of the courts system, RJCA said that it would need a policy on referrals, as well as information on who wasn't referred so it could analyze its current program for expansion.

²³ Epperson, Matt. "Prosecutor-Led Gun Diversion Programs: Preliminary Finding, Future Directions," Smart Decarceration Project, 2023. <https://www.joycefdn.org/>.

When Do They Operate?

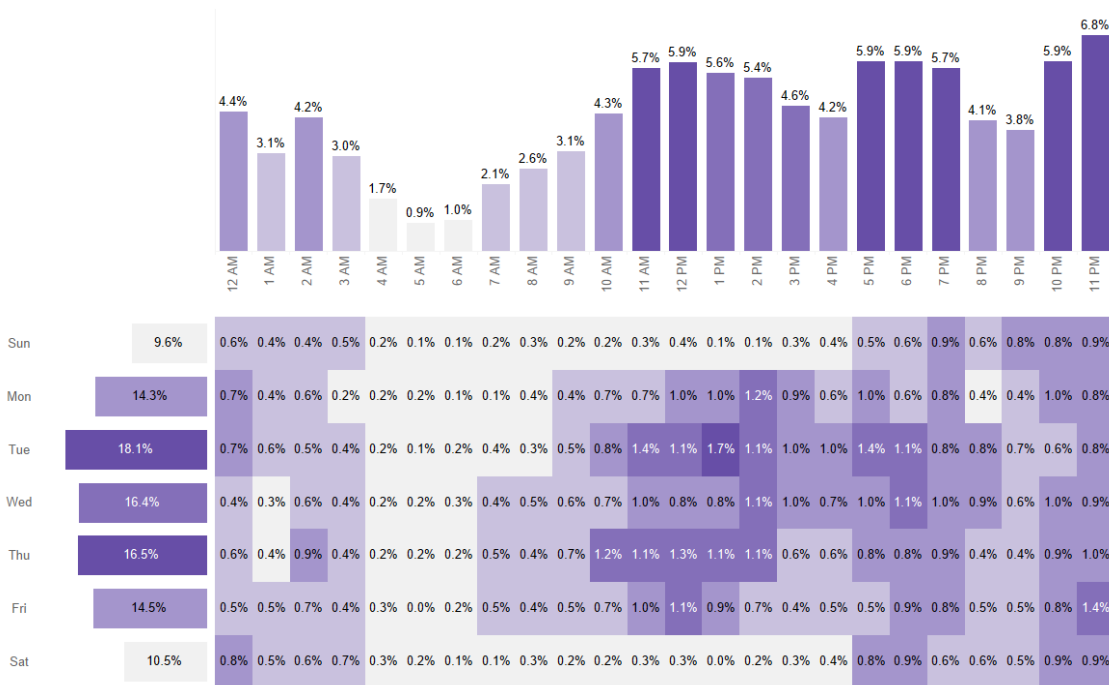
The Youth Connection Center and the Upside Initiative operate on a 24/7 basis.

LEAD operates Monday through Friday, 9:00 a.m. to 4:00 p.m. LEAD chose these hours as it was a new program and aimed to grow staff capacity as it grew its client base. LEAD hopes to eventually grow to be 24/7.

Urban Ventures operates once per week on Thursdays, when it hosts group sessions. It chose those hours to match its clients' schedules. We asked what it would need to add availability, and Urban Ventures said it would not need to expand its availability unless it had more referrals.

RJCA works variable hours, as it wants to be sure that it doesn't have to interrupt a participant's schooling or working hours.

Figure 26: Narcotics Offenses Mapped Across Day and Time, 2023



In the City of Minneapolis, 3rd, 4th, and 5th degree offenses follow traditional working hours during the work week, and then spike during the evenings every day. Should the City begin diverting offenders to LEAD, its current hours enable the intervention to cover the traditional workday cluster, representing approximately 30% of the weekly

narcotics offenses. We asked what LEAD would need right now to expand its time availability, and it said staff, funding, and referrals from MPD.

Is There Data to Demonstrate Performance?

Both LEAD and the Youth Connection Center appear to have very rigorous data collection processes. LEAD uses data to track patient interactions, patient engagement with resources, and staff attendance at events, as well as to identify places for future outreach based on where its referrals are coming from. LEAD uses validated tools at set intervals to check progress. All of these are linked to the clients through a unique client identifier and housed in Salesforce. While LEAD does not have a dedicated analyst, the project manager has data analysis as a secondary responsibility.

The Link, which operates the Youth Connection Center, uses Clienttrack, an information collection platform that collects all client interactions and uses tools to evaluate clients at set intervals. Link also has a data analyst, a director of evaluation, and a youth advisory board that it uses to gain insights on data trends at the intervention level, rather than just at the individual level.

Urban Ventures tracks participation data and keeps client notes on a Salesforce platform. It does not have a data analyst or have specific variables that it tracks other than attendance, but it has been working closely with the University of Chicago School of Social Work to evaluate the impact of its programming. Urban Ventures submits periodic reports to MCAO about how many individuals come through the program, but it does not have access to data on how referral decisions are made.

Upside Initiative tracks participant intake data, the number of contacts made with each participant, and outcomes; it also collects anecdotal success stories. It does not have an analyst in house who manages its data.

We independently reviewed crime data from the Minneapolis Police Information Management System (PIMS) to quantify the presence of weapons and narcotics offenses in the community as well as which incidents might be eligible for diversion. It was unclear from these reports how many offenses became arrests, and they did not contain ages or dates of birth, making it impossible to estimate the percent of diversion-eligible calls. There were also no arrests for sex work-related crimes in the arrests table provided. We were therefore unable to identify the potential universe of

arrests that might be eligible for referrals to the Youth Connection Center or the Upside Initiative.

RJCA tracks participant data until participants have completed the program, as RJCA has to report back to MCAO and MPD if its participants are successful or not. RJCA does not track recidivism data as that is held by MPD.

What Barriers to Service Have They Self-Identified?

We asked about barriers to service to understand if there were any ways the City could improve its support to these organizations and make them more effective in their missions as a result.

The most frequently reported organizational barrier to service was the lack of information about the service landscape. Providers sought a better understanding of which other programs are operating in this space, and how many people MPD is referring to diversion services (including a breakdown of those who refuse diversion or are ineligible, and why). They were aware that the County is also offering diversion services through the Behavioral Health Center and the County Attorney's Office, but were unsure if this service is being used in addition to or instead of theirs. Organizations noted that there was not a process for discussing diversion criteria and whether or not those criteria could be expanded to enable additional referrals; they would be interested in doing so.

Providers also noted a lack of shelters to which follow-up referrals could be made. A lack of housing options that were appropriately staffed and resourced to meet the needs of individuals with histories of chronic homelessness, behavioral health needs, and criminal legal system involvement was also a barrier as many of their clients were banned from congregate housing shelters. Some providers specifically suggested increasing the beds at Avivo Village which they felt was the most appropriate fit for their clients.

Finally, they mentioned that phone access and the ability to quickly replace identification (e.g., drivers license or state ID) were significant barriers for providing services. Programs have resorted to purchasing phones for their clients out of their own funds.

Gaps

The most pressing finding above all else in these initiatives is the need for more active engagement and oversight from the City. Every single organization reported a lack of clarity about why its referrals had dropped or stopped altogether. **This should be urgently addressed.** Organizations expressed a willingness to discuss eligibility expansion, and a desire for the City to regularly bring organizations in this space together for problem-solving and relationship-building.

Utilization

There is no governance or oversight structure for ensuring that the utilization of diversion interventions is maximized.

- We were unable to determine, based on available data, what percentage of eligible individuals are being referred to diversion or restorative justice services by the MPD or MCAO, nor does it appear that the City is tracking this data.²⁴ The most significant immediate obstacle to calculating utilization is the lack of clear arrest data for analysis.
- It is unclear based on available data if MPD is using County substance use arrest diversion opportunities.

Expansion

There is no cadence for identifying additional arrest types that could be included under existing diversion programs.

- The MCAO gun possession arrest diversion program has had the same criteria for seven years, but it is unclear what percent of eligible gun arrests this criteria captures. MCAO reported being in the process of revisiting the criteria to identify possibilities for expansion.

²⁴ Both MCAO and the MPD are referring individuals to restorative justice circles hosted by Restorative Justice Community Action, a County funded and managed program, but it was unclear whether or not there was a policy for the City on how and when individuals were diverted to restorative justice

- As an evaluated program, there is an opportunity to test whether or not the success of the gun diversion program can be continued with expanded criteria for gun possession charges or even non-firearms charges altogether.
- RJCA is in the process of exploring additional charges that could be added to its eligibility, but there does not appear to be a process on the part of the City for proposing additional charges.

Technology

The City is not fully taking advantage of technology solutions to monitor the activity of the diversion portfolio.

- There is no centralized location that houses the data internally for diversion programming. The City lacks a collection platform for all of the relevant diversion data, and a dashboard that monitors the activity, performance, and outcomes, if possible, of these programs. Without these tools, there can be no process to hold program stakeholders accountable for utilizing the programs and ensuring their effectiveness.

Validation

Programs have not been evaluated and as a result the City is missing opportunities to assess their successes and develop a roadmap for addressing their challenges.

- We only found two programs (the MCAO gun arrest diversion program and RJCA) that had been evaluated. Both showed reductions in recidivism. There is an opportunity to confirm the findings and further assess the programs with additional offenses.
- Successful programs with positive, validated results like this can be communicated to the public, as part of an eventual Office of Community Safety messaging strategy.

APPENDIX 6: Restorative Services (Healthcare and Victim Services)

The *Safe and Thriving Communities Report and Plan* describes restorative services as supportive resources and programming that help provide healing and stability following a traumatic event. This section examines a sample of programs to gain insight into how the City of Minneapolis currently provides those restorative services through healthcare provision and education, victim services, and emergency medical systems follow-up care.

Eleven organizations with restorative interventions responded to the City questionnaire, and were engaged via follow-up conversations. The results were then, as relevant, combined with spatial data from the Minneapolis Emergency Communication Center and compared with similar programming from across the country.

This section includes data and analysis from a range of programs identified by the City as important components of the restorative community safety ecosystem. These programs do not cover the entire landscape of restorative services in the City, but were those that responded to the questionnaire that the City sent to providers and agencies it identified as being in the community safety space. Examining these programs – the work they do, their role in the landscape, and their relationship to the City – provides insight into what gaps must be addressed in order to build out the *Safe and Thriving Communities* model for restorative services and achieve all ecosystem components.

Desired State

There are two types of restorative programming the City has focused on to provide healing and stability:

- **Healthcare** – These are organizations that hire or contract with staff that provide treatment, recovery services, stress management, connections to other necessary supports (e.g., housing), and health education.

- **Victim Services** – These are organizations that provide support services and consultation on legal issues, and help build rapport between police and communities.

Healthcare

Community-based health programs can have a direct impact on community safety by providing locations for the community to resolve their concerns without having to call 911. By connecting individuals to treatment providers for substance use or mental health concerns, such interventions are able to reduce the likelihood that individuals hurt themselves, and reduce the instances of survival-type crimes associated with untreated mental health or substance abuse disorders. These programs also provide connections to other foundational services that can ultimately reduce the likelihood of future health or safety concerns, like those related to housing, primary care, and employment.

- When interventions are designed to be culturally relevant and healthcare encounters are delivered by providers who display cultural competence, they positively impact community participation, enhance awareness of health-promoting behaviors, enhance program adherence,²⁵ and reduce some of the impact from negative health encounters.²⁶
- Programs that provide follow-up to 911 interactions have been found to reduce emergency medical service calls by 54% among callers who experienced homelessness, substance use disorders, and psychiatric disorders.²⁷
- School-based health clinics (SBHCs) have the unique opportunity of providing medical and behavioral health care in a setting where youth spend the majority

²⁵ Lettlow, Helen Alice. "Engaging Culturally Competent, Community-Based Programs in Reducing Tobacco-Related Health Disparities," *American Journal of Public Health* 98, no. 11 (November 2008): 1936–39. <https://doi.org/10.2105/ajph.2008.147314>.

²⁶ Flynn, Patricia M. et al. "Health Professional Cultural Competence Reduces the Psychological and Behavioral Impact of Negative Healthcare Encounters," *Cultural Diversity and Ethnic Minority Psychology* 26, no. 3 (July 2020): 271–79. <https://doi.org/10.1037/cdp0000295>.

²⁷ Tangherlini, Niels et al. "The HOME Team: Evaluating the Effect of an EMS-Based Outreach Team to Decrease the Frequency of 911 Use among High Utilizers of EMS," *Prehospital and Disaster Medicine* 31, no. 6 (September 19, 2016): 603–7. <https://doi.org/10.1017/s1049023x16000790>.

of their day, thus removing some of the healthcare barriers experienced by disadvantaged populations. By providing this access, SBHCs have been proven to increase both short- and long-term outcomes.²⁸ As an example, SBHCs may act as early intervention sites for youth experiencing suicidal thoughts, or potentially intercepting youth gun violence via school shooters.²⁹ Additionally, treating youth who experience adverse childhood experiences (e.g., domestic violence) may also act as a point of intervention for not only addressing their health concerns but intervening to promote safety within their homes.³⁰

- In addition to healthcare interventions that are available in schools, success has been found in healthcare interventions that are implemented in low-income public housing neighborhoods. Due in part to health workers' knowledge of participants' unique challenges, these programs have found success in promoting positive health behaviors.³¹ Among public housing neighborhoods that saw reductions in crime, there was a high degree of social intervention that addressed problems of disadvantage among tenants.³² Thus we may also anticipate that healthcare interventions in public housing neighborhoods will positively impact neighborhood safety.

Victim Services

Victim services provides direct support and services to victims which may include referrals to community resources, crisis intervention, crime prevention strategies, or legal consultation. Effective victim services programs have an important role in the

²⁸ Arenson, Michael et al. "The Evidence on School-Based Health Centers: A Review," *Global Pediatric Health* 6 (January 2019). <https://doi.org/10.1177/2333794x19828745>.

²⁹ Ibid.

³⁰ Ibid.

³¹ Andrews, Jeannette O. et al. "The Effect of a Multi-component Smoking Cessation Intervention in African American Women Residing in Public Housing," *Research in Nursing & Health* 30, no. 1 (January 22, 2007): 45–60. <https://doi.org/10.1002/nur.20174>; Quintiliani, Lisa M. et al. "Community Health Worker-Delivered Weight Management Intervention among Public Housing Residents: A Feasibility Study," *Preventive Medicine Reports* 22 (June 2021): 101360. <https://doi.org/10.1016/j.pmedr.2021.101360>.

³² Judd, Bruce, Jack Barton, and Robert Samuels, "The Effectiveness of Strategies for Crime Reduction in Areas of Public Housing Concentration," *State of Australian Cities National Conference, Brisbane* 30 (November 2005).

creation of community safety. National victim service programs that focus on victims of domestic violence reported a decrease of repeat victimization of up to 40%.³³

Current State

What Programs Are Doing This Work?

Table below identifies restorative service programs examined in Minneapolis.

Table 12: Operation Details of Minneapolis Healthcare and Victim Services Restorative Service Programs

Category	Organization/Activity Name	FTE	Service Days	Service Hours	Area of Operation
Healthcare	Asian Media Access	2	W and Th	3pm to 9pm	North Minneapolis
	COPAL	1	M-Sa	Varies	Citywide
	Encouraging Leaders	6	M-F	9am to 5pm	Citywide
	Embedded Social Workers	5	M-F	9am to 5pm	MPD Precincts
	Minneapolis Fire Department Safe Station Program	3	7 days a week	24/7	Citywide
	Minneapolis Health Department - Public Housing/SUD	0.9	M-F	Varies, typically 2 hrs a day	Citywide

³³ Xie, Min, and James P. Lynch, "The Effects of Arrest, Reporting to the Police, and Victim Services on Intimate Partner Violence." *Journal of Research in Crime and Delinquency* 54, no. 3 (November 20, 2016): 338–78. <https://doi.org/10.1177/0022427816678035>.

	Minneapolis Health Department - School Based Clinics	75	M-F	8am to 5pm (school year) 9am to 2pm (summer)	MPS Schools
	Minneapolis Health Department - Opioid Response Team	3	M-F	8am to 5pm	Citywide
	Neighborhood HealthSource	5.5	M-Sa	8am to 5pm	Citywide
Victim Services	MCAO Victim Witness Services	3.5	M-F	8am to 4:30pm	Citywide
	NSD Community Navigator	7	7 days a week	9am to 5pm	Citywide

Healthcare

Nine organizations responded to the questionnaire indicating that they provided healthcare services. Four of the organizations are housed in public agencies and five are nonprofit organizations that are contracted to provide services on behalf of the City of Minneapolis. The focuses of these initiatives are a mix of culturally specific substance use and mental health outreach programs and services to public housing and schools.

- **Asian Media Access (AMA)** uses multimedia and technology to communicate, educate, and mobilize communities, specifically among youth. AMA focuses on nutrition, substance use cessation, and improving vaccination rates amongst marginalized communities.
- **Communities Organizing Latine Power and Action (COPAL)** provides stress management, self-care training, and connections to behavioral health resources in Spanish to their staff and members. COPAL connects community members with behavioral health services and therapists who offer services in the language they speak.

- **Encouraging Leaders** is contracted by the City to promote opioid misuse awareness, and enroll youth in substance use treatment. It is a citywide initiative that focuses on Black, Brown, and Indigenous communities.
- Hennepin County **Embedded Social Workers (ESW)** work within police precincts through referrals they receive from officers, EMS, and BCR. The social workers conduct mental health assessments, home visits, or meetings in the community as part of their follow-ups. ESWs can provide referrals to other social service agencies or local resources for additional care and opportunities to better serve the client.
- The Minneapolis Fire Department's **Safe Station Program** primarily focuses on providing opioid and substance use disorder treatment. It is housed within a North Minneapolis fire station to create a safe and trusted environment for people who are seeking assistance with substance use disorders. The program is conducted in partnership with the Twin Cities Recovery Project.
- The Minneapolis Health Department's **Public Housing/Substance Use Disorder (SUD) Program** is composed of two initiatives. The first is an anti-stigma campaign that is focused on mental health and substance use disorder in Minneapolis Public Housing high rises. The second is a pilot of on-site, weekly substance use support groups in seven Minneapolis Public Housing high rises.
- The Minneapolis Health Department's **School Based Clinics** maintain a critical healthcare safety net for adolescents and operate on-site clinics in nine Minneapolis high schools. The School Based Clinics often provide the first point of contact for physical, mental, and behavioral healthcare for teens in Minneapolis and address various healthcare barriers such as lack of insurance, parental/guardian cooperation, and transportation. While the clinics have not been independently evaluated, they desire more support to assess their data and the capacity to analyze their own data and outcomes.
- The Minneapolis Health Department's **Opioid Response Team (ORT)** is dedicated to addressing the opioid crisis through educational campaigns, community outreach, and partnerships with culturally relevant organizations. It also focuses on treatment and recovery services, aiming to provide comprehensive options for individuals battling opioid addiction. ORT collaborates with healthcare providers, counseling services, and support

groups to ensure accessible and continuous care, encompassing medication-assisted treatment and counseling services. ORT works closely with the University of Minnesota on research and evaluation.

- **Neighborhood HealthSource** is a group of non-profit primary care clinics that work to improve the health of the community by reducing emergency room visits. The organization provides peer support for suboxone patients and patients who are brought into contact with the program through in-clinic care or community outreach. The program's outreach efforts focus on harm reduction, overdose prevention training, and encampment support.

Victim Services

There are two victim services programs that responded to the City's questionnaire, both of which are staffed with public employees. One is run through the MCAO and one through NSD. The City does not provide victim services to victims of felonies, as this is provided by the County.

- The Neighborhood Safety Department's **Community Navigator** program builds rapport with historically marginalized groups that have been ignored or express distrust for the MPD. Additionally, it provides support to victims, survivors, and the broader community including those that had been impacted by crime and/or violence.
- **MCAO Victim Witness Services** works with victims once a suspect has been identified and charged. The program keeps witnesses updated on proceedings, connects them with services and victims funds, and collects witness statements for the court.

Is there Data to Demonstrate Performance?

We requested information about data, to understand how organizations were tracking their interventions and using data to inform and improve their operations.

As many of these organizations were healthcare providers, they collected a large amount of data from their participants. The program with the least robust data

collection process recorded intake information and tracked outreach to the participants and contacts made in the community.

Two programs, the Opioid Response Team and the Public Housing/SUD program, reported combining individual data with area-level data on health and safety outcomes to prioritize outreach. It appears that the organizations are spending time on their own trying to understand the realities on the ground – data that the City is already collecting, and could be sharing with its providers. Four programs – Asian Media Access, the Public Housing/SUD program, the School Based Clinics, and COPAL – reported using the data they collect to influence their strategies and programming moving forward.

Two programs reported having a data analyst.

What Barriers to Service Have They Self-Identified?

We asked about barriers to service to understand if there were any ways the City could improve its support to these organizations and make them more effective in their missions as a result.

Organizational

First, organizations said that they would like to see improved collaboration between agencies and the City. This could include making sure that organizations are being made aware of other City-funded organizations working in the same field or geographic area for purposes of referrals, or that the City helps to navigate data-sharing barriers between behavioral health providers and the County's behavioral health team. Lastly, some asked that the City encourage partner organizations to hire Spanish speakers as the City is seeing an influx of Spanish-speaking refugees who are in need of services.

Also with respect to coordination, several organizations said that when encampments are cleared, it sometimes hinders their work, as many of their clients lose identification and phones in addition to other personal effects during the cleanup. This slows down the process of connecting their clients to housing and treatment, and, in turn, leaves them more vulnerable to future victimization.

Second, programs reported wanting to see improvements to the referral process – both referrals to their services, and referrals from their service to other agencies. The Embedded Social Workers, for example, get referrals at the discretion of the referring officer, but they believe there are many more eligible referrals that are not being made. Other problems mentioned wanting a centralized system for identifying available housing beds, programs with availability for youth-specific referrals, and a means of identifying available programs with specific language and cultural competencies.

Community Needs

We asked responding organizations what they thought the community needed most in order to thrive, and the most frequently mentioned responses were meaningful employment, more housing, improving safety on and around public transport systems, and more mental and behavioral health services in the community – specifically services that were culturally relevant – and access to safe syringe disposal and cleanup.

Gaps

Healthcare and victim services programming improve community safety when they have low barriers to use and are easily accessible across the city. To be incorporated into the community safety ecosystem of the city, these programs would need a theory of change that explicitly links their interventions to safety and then regularly measures their safety-related impact.

Utilization

- Consistent and reliable referral systems were lacking in all but one case. The MCAO Victim Witness Services program was the only one that had a clear system for referrals. Other programs relied on staff members to generate referrals through networks of people they knew. Both the Community Navigators and Embedded Social Workers received their clients through previously established relationships rather than using a formal criteria-based system.

- The demand reported for the School Based Clinics is beyond what they can provide at current staffing levels. Before the 2024-2025 school year started, the program already had a waiting list that it did not anticipate being able to address until weeks into the school year. For other programs, utilization levels were not possible to calculate because, using available data, we were not able to determine the number of potentially eligible clients or percentage of eligible people being served.
- We could not locate an asset map to identify the universe of healthcare supports that exist within the City of Minneapolis, including those funded by the City, County, and State, as well as any that exist from the federal government, like the Veterans Health Administration. Recognizing that healthcare is a foundation of community safety, a mapping process would inform the City on gaps in treatment availability that need to be filled in future budget cycles.

Strengthening and Consolidating Program Models

- The School Based Clinics and the Public Housing/SUD programs both provide co-located services but one uses public employees (employees of the Health Department staff the School Based Clinics) and the other contracts out the services (in the case of the Public Housing/SUD program). This is an opportunity to explore expanding the footprint of the clinics program and adding public housing-based clinics to the Health Department's portfolio of direct services programs. This would standardize the services provided, reduce the administrative burden of programming (by eliminating the work of contract management), improve the data collected and shared (as they would not need data-sharing agreements), and be easier to evaluate with all the data in one place.
- There is a gap in programmatic support for victims of crimes that are not domestic, sexual, or gun-related, and for victims who have filed a complaint but charges have not been filed yet.
- Current encampment clearances are not ensuring that IDs, forms of communication, and other personal effects are kept with the individuals. These items are important to support their access to healthcare, re-entry into housing, and reduce their likelihood of becoming victims.

- A common concern we found amongst the organizations that we spoke to is that Spanish language programming across City-funded services has not kept up with the influx of refugees.

Performance, Outcomes Measurement, and Validation

- Many requests for service are being made outside of official channels, including over the phone, via email or in person, and then these requests are being logged on different spreadsheets and systems. This creates an administrative burden and inhibits transparency and performance management. All requests for service from public employees should generate a ticket on a centralized tracking system, like 311, whether they are formal or informal.
- One of the eleven programs reported working with an evaluator.
- There is no performance management or transparency tool, such as a dashboard, for identifying how many people these programs serve and what types of interventions and outcomes are being achieved. Such a platform would be a useful communications tool for legitimizing the work of restorative services as a community safety intervention.

Governance

- Providers want to see more collaboration between the City government and organizations providing similar services, as well as upstream and downstream referrals. They want to be able to work together to address challenges and prioritize one another for referrals and connections to promote the success of their clients.
- It is unclear how and why the City decides to directly provide a service versus to contract out a service to the private or nonprofit sector. The existing patchwork creates a number of challenges relating to consistency of services, data sharing and availability, contract management, and tracking and evaluation.
- It is unclear what the target population within the City is for a particular intervention. This would be incorporated into the theories of change.

- Data collection and tracking is not standardized across City departments, leading to several different management tools and/or spreadsheets being used and a lack of formal reporting systems.
- Substance use programs are not receiving regular updated information from the City on overdoses in their areas of focus. This could be done at regular convenings of organizations working in this space and other avenues.

Expansion Considerations

Discussing the need for – or approach to – expansion is challenging for two reasons. First, as mentioned at the beginning, this is only a sample of restorative programs. We are therefore unable to recommend expansion of a particular program without knowing whether another program or service is also providing this function and can or is serving the same client population. Second, discussions about expansions require accurate information about who the target population is (eligibility criteria, how many people or families are eligible, where are they located, etc.) and the rate at which the target populations utilize the services. The Victim Witness Services program, School Based Clinics, Public Housing/SUD program, and Embedded Social Workers were the only interventions that responded to the City’s questionnaire with this type of information, or for which this could be estimated from available data.

The MCAO Victim Witness Service program gets a list of the misdemeanor arrests from the day before, allowing specialists to reach out to all of the victims who are filed within the system and meet the program’s criteria. The program is able to engage with almost every victim it has information on and is authorized to serve at this time. The MCAO Victim Witness Service program identified two service gaps outside of its population of focus that currently exist in the victim services area. First, it identified a lack of support programming for victims of other crimes that are not domestic, sexual, or gun-related in nature. A potential solution of support groups for these victims was suggested. Secondly, it identified a gap in services for victims who have filed a complaint but charges have not been filed yet. These reports can take months for the investigators to work through, and during this time it becomes more and more difficult to engage these victims in restorative care and connect them with prosecuting attorneys.

The Embedded Social Workers employ only five staff to conduct follow-ups on people referred by MPD, EMS, and BCR. If the program only conducted follow-ups on every BCR

and MPD call alone, it would still be responsible for 13,500 follow-up calls per year between five people. Based on the program size (number of FTEs) and the number of potentially eligible clients (should referrals become systematic), this is a program to consider expanding.

The School Based Clinics work in nine of the ninety-seven Minneapolis public schools. These schools were chosen because many youth and their families in these areas, particularly those from marginalized communities, have experienced traumas, have low trust of health services providers, and lack good access to care in general. Students in these areas are also less likely to have health care providers who reflect their identities and/or provide culturally affirming and inclusive care. The program reports having such a demand for its services that there is a backlog of students waiting to be seen. It also reports a demand for dental work, which it is unable to fulfill. Were the program to expand to serve the full city (should the other 88 schools be determined to also need the services), it reports that it would need additional budgeted funding and purposefully outfitted space, as well as funds for incorporating dental support into the model.

The Public Housing/SUD program works in five of the forty-two high rises operated by Minneapolis Public Housing Authority. Properties were chosen based on crime and violence in the vicinity as well as substance use and overdose indicators. The amount of time the program can spend on site is limited by current funding levels. With additional funding, it could potentially follow a model similar to the School Based Clinics of being permanently co-located on site (rather than hosting clinics on-site) – a request that the residents have made. The public housing program faces additional challenges by being a contracted service, so it lacks access to the data that the programs staffed with public employees have access to.

Both the School Based Clinics and the Public Housing/SUD program rely on grant funding to operate, rather than City-budgeted funding. In order to expand both of these citywide they would need to be incorporated into the budget at consistent and higher levels.

For the remainder of the interventions, a number of questions would need to be answered before considering expansion, including ones such as these:

- What programs are operating in this space?

- Asian Media Access, COPAL, Encouraging Leaders, the MFD Safe Station Program, and Neighborhood Healthsource are all great examples of organizations that provide outreach and engagement in the substance use space. But it is unclear what other organizations are doing so, whether through County and State funding or other sources. This should be mapped out and understood before determining whether or not the City-funded programs should be expanded.
- Has the demand and the need been quantified? What is the universe of eligible people that this program could serve and is ultimately drawing from?
 - Follow-up programs in other parts of the country have been proven to reduce the likelihood of future 911 calls. The Embedded Social Worker Program and the NSD Community Navigators need to be evaluated to measure their impact as a follow-up intervention, but it is also unclear what the criteria for referrals to the programs are, what the total number eligible individuals are, and what percentage of those eligible are being referred. Expansion should be considered once these questions are answered.
- Is existing programming designed to reach the various populations whose language at home is not English?
 - COPAL was the only healthcare program that responded to the City's questionnaire that had a language-specific focus (Spanish). To know whether the City's non-English speaking populations are being served it is essential to understand whether other programs exist that have the capability to conduct outreach in other prevalent languages spoken in Minneapolis, but at the very least Somali, Oromo, Hmong, and Vietnamese.
- How does this program create community safety?
 - While it may seem self-explanatory that a healthcare program makes individuals safer or that a victim services program helps an individual heal from a traumatic event, the theory of change for these programs should be clearly spelled out (e.g., reducing future victimhood) so that the community can see how these programs fit into the larger safety ecosystem. Once the theory of change is articulated, the program

impact must be tracked and measured to assess if the safety goals are being met (and if not, why not).

Answering questions like the above will give the City the foundational knowledge upon which it can decide whether or not these programs need to be expanded, and what needs to be included in their contracts.

APPENDIX 7: Calls for Service Analysis

Having mapped out the structure of the existing community safety ecosystem, as well as identified some of its challenges, this section provides a deeper data-driven review of calls for service to identify the universe of low-risk call types and their suitability for alternative responses to address and fill some of those gaps.³⁴ This analysis complements the findings in the Responsive Services section of this document (Appendix 4) and leverages benchmarking with peer cities to contextualize the viability of Minneapolis' options.

Any shifts toward alternative responses are designed to resolve resident concerns in a timely and effective manner while enabling the police to focus on the investigation and deterrence of violent crime. Three underlying themes that motivate this section are (1) the MPD continues to experience staffing shortages that have reduced their capacity to respond to calls, (2) Canopy Roots and other alternative response programs within the city have successfully taken on responsibilities previously handled by MPD, therefore providing a strong foundation on which to build, and (3) other cities have identified these calls as low-risk and managed to successfully divert them to other alternatives, thus shifting the call burden from the police.

We analyzed Minneapolis calls for service to 911 from January 1, 2021 to December 31, 2023 to identify call types that were potentially suitable for alternative response. Over that time frame, there were over one million calls for service across the community safety system. This translates to an annual average of 366,000 calls with 309,000 calls for service routed to police per year. Of those police calls, 146,000 calls (47%) are potential candidates for alternate response. Should Minneapolis decide to divert some of these additional call types toward non-police responders, this could provide residents with responsive services that meet their needs while significantly helping to alleviate the call burden carried by MPD.

³⁴ Calls for service are events reported via 911 calls, non-emergency calls to the department, direct contact with officers, or 311 calls that were routed to the police for a response. Calls for service data do not capture public safety concerns that community members did not call 911 or seek police services to address, making them an incomplete measure of community members' public safety priorities. <https://justicenavigator.org/for-communities/understand-data/glossary/>.

Analysis Approach

This analysis followed three steps. First, we estimated calls for service demand. Specifically, we looked at what types of concerns residents are calling 911 for assistance with, and how often those services are requested. Second, we focused on call types that align with the *Safe and Thriving Communities Report and Plan*, with an additional emphasis on calls for which there are strong national alternative models in other cities. Finally, we considered the City's existing resources, services, and programs that can be leveraged, modified, and/or expanded in order to address these additional call types.

Calls Excluded from the Analysis

We excluded call categories that, by their nature, may require police presence, calls in which a crime currently was in progress, and call codes explicitly indicating violence. The Minneapolis Computer Aided Dispatch (CAD) data also included calls dispatched to the Minneapolis Fire Department, Emergency Medical Services (EMS), and University of Minnesota Campus Police, which we likewise excluded from consideration.

Description of excluded calls:

- Call types that are no longer used.
- Calls that are initiated by an officer or by a community member flagging down an officer (calls that did not originate from a 911 call).
- Calls with an explicitly violent component – Any call where the call code indicated that a weapon is identified on scene by the caller or the crisis involves a person acting violently.
- Crimes currently in progress – Any call where the call code indicates that someone is actively committing a crime when the call is initiated.
- Unknown calls – Call types in which the data indicate that the complaint and/or the location of the complaint are unknown.
- Medical Emergency/Person Injured on Scene – Natural Disasters.

- University of Minnesota Campus Responses – Calls dispatched to Campus Police, as very few of these generate an MPD response.
- Fire/EMS Calls – Fire and EMS calls are outside the purview of this analysis.
- Inter-agency Assist Requests – Calls made by responders on scene, who identified what they needed and have requested the corresponding assistance.

Diversion-Eligible Calls

With the above call types excluded, an average of 146,000 calls per year during the three years from 2021–2023 had the potential for diversion from MPD, requiring further analysis. We next categorized this group of calls using the *Safe and Thriving Communities Report and Plan* framework, drawing on its vision for expanding alternative response in Minneapolis. This analysis was further informed by national models of success across the country and prioritized based on feasibility of implementation in Minneapolis. These calls for service represent approximately 47% of total calls for service.

The *Safe and Thriving Communities Report and Plan* identified the following 12 categories for potential diversified response:

1. Behavioral health crisis response
2. Wellness checks
3. Medical calls
4. Low-acuity crime and disorder complaints
5. Traffic
6. Parking
7. Property crime
8. Incidents with individuals experiencing homelessness³⁵
9. Domestic violence
10. Sexual assault
11. Animal incidents

³⁵ There aren't call codes that directly address homelessness, but rather calls related to homelessness that fall in BCR and low acuity categories.

12. Requests for violence interrupters³⁶

Table 13 below provides a breakdown of the total calls by call type.

Table 13: Portion of Minneapolis Calls for Service by Diversion-Eligible Call Types

Safe and Thriving Communities Report and Plan Call Category	Total	Yearly Average	Percentage
1. Behavioral health crisis response	26,830	8,944	2.9%
2. Wellness checks	51,434	17,144	5.5%
3. Medical calls	39,102	13,034	4.2%
4. Low-acuity crime and disorder complaints	134,194	44,732	14.4%
5. Traffic and 6. Parking	76,588	25,529	8.2%
7. Property crime	71,936	23,978	7.7%
9. Domestic violence and 10. Sexual assault	11,626	3,876	1.3%
11. Animal incidents	26,442	8,813	2.8%
Grand Total	438,152	146,050	47.1%

These 146,000 calls per year are the universe of calls that the City of Minneapolis has an opportunity to design their community safety ecosystem around, and, as described in this report, some of these calls have already been assigned to non-police responses in the City. It also may be the case that this number decreases as call types are inspected further to determine their best fit. This number may seem imposing, but there are plenty of peer cities who are already doing parts of it. It need not all be tackled at once, but over time this could be an important move toward resolving callers' needs and saving police resources.

³⁶ Requests for violence interrupters are addressed in the relevant section of this report, specifically as it pertains to activations of these community responders that do not come through the 911 system.

Opportunities for Additional Diversion

Behavioral Health Crisis Response

The City of Minneapolis receives approximately 8,900 calls for service for behavioral health-related calls each year. This number does not include calls that are coded differently, such as trespassing or unwanted person, which may have a behavioral health component. The City of Minneapolis has contracted Behavioral Crisis Response (BCR) to respond to behavioral crisis calls (specifically for behavioral crisis response, and welfare check-behavioral crisis call types), and over the last three years BCR has responded to an average of 5,000 calls for service each year.

As the City launches the embedded 911 clinician pilot (embedding a social worker in the 911 call center who can resolve caller concerns over the phone, potentially avoiding a dispatch), there will be fewer calls dispatched with a behavioral health component. This will give the behavioral response teams capacity to expand the types of calls they respond to. Additionally, there is another call type which BCR does not currently respond to but may include calls that fit their skillset well. The person-in-crisis call type should undergo a quality assurance process to identify whether any of the calls in this category should be coded as behavioral crisis response, and therefore be responded to by BCR. This would further reduce the number of calls that are dispatched as person-in-crisis and reduce the number of calls dispatched to law enforcement.

Finally, if the City added jumper, threat to jump, and indecent exposure to the behavioral crisis calls that are currently being diverted, they would reduce the burden on law enforcement by about 650 calls each year. Together, behavioral health crisis-related calls as a category represents 2.9% of calls for service to law enforcement.

Table 14: Minneapolis Average Annual Behavioral Health Crisis Calls by Type (2021-2023) and Comparison Cities that Dispatch Non-Police Responders to Similar Call Types

Final Problem	Comparison Cities	Minneapolis Yearly Average
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Behavioral Crisis Response*	Albuquerque, Durham, Denver, Eugene	1,370
Welfare Check-Behavioral Crisis*	Albuquerque, Durham, Denver, Eugene	3,621
Indecent Exposure	Albuquerque, Durham	410
Jumper	Albuquerque, Durham, Denver, Eugene	109
Person In Crisis	Albuquerque, Durham, Denver, Eugene	3,303
Threat to Jump	Albuquerque, Durham, Denver, Eugene	131
Total		8,944

**Calls already diverted to alternate first responders.*

Welfare Checks

The City of Minneapolis receives on average 17,000 calls each year in relation to the welfare of a business, a driver, a possible missing person, or a resident at home. None of these are currently responded to by an alternate response unit. Calls to check on businesses make up a very small percentage of the welfare-type of calls, and include calls where someone may be locked inside a business and those where a business has been left unsecured without staff inside. Driver-related welfare calls, or “slumpers” as they are called in Minneapolis, involve a response to a person who is suspected of being incapacitated behind the wheel, but the cause is undetermined. The City receives just under 2,400 calls for service each year in relation to a missing person, almost a third of which are about a child. The remainder of the calls for service are to check the welfare of someone at their residence.

It was unclear through our research why the police are responding to any of these as the primary response. Some call types like a lost child should be considered a multiple unit response and include the fire department and BCR. In order to make sure police are only responding to welfare check calls when they believe that a crime has taken

place, the check the welfare call type should be split into two – one call type for when the caller believes something nefarious has occurred, and the second call type for the remainder of calls, in which the caller is showing concern for the wellbeing of another person.

Responding to calls for service for welfare check-type calls would at a minimum require an additional call type and to hire the additional staff necessary to respond to up to 17,000 additional calls per year, or 5.5% of total current police call volume.

Table 15: Minneapolis Average Annual Welfare Check Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Final Problem	Comparison Cities	Minneapolis Yearly Average
Abandoned Child	Durham	31
Check the Welfare	Albuquerque, Durham, Denver, Eugene	12,522
Found Child		253
Lock-In-Police		60
Lost Child	Durham	538
Missing Person	Durham	1,552
Slumper	Albuquerque, Durham, Denver, Eugene	1,462
Slumper w/Fire	Albuquerque, Durham, Denver, Eugene	653
Unsecure Business	Albuquerque, Durham, Denver, Eugene	73
Total		17,144

Medical Calls

The City of Minneapolis receives an average of just over 13,000 calls per year that involve a person down outside or an overdose. None of these calls are currently responded to by an alternate response unit. As they are medical calls, it is unclear why the police department must respond unless the individual died or the patient was a minor. The priority for overdose calls is administering opioid overdose reversal medication, which other responders (fire, EMS, and BCR) can also respond to if they are provided with the necessary medication and can respond in a reasonable timeframe. Police, who also are equipped with the medication (Narcan), should respond if the other units are unavailable.

The St. Petersburg Police Department in Florida stopped responding to overdose calls, as well as public intoxication, suicidal ideation, and juvenile disturbance calls in 2020, contracting with a behavioral health unit instead.³⁷ These call types could be moved from MPD in relatively short order. They require a policy change in the order that first responders are sent (EMS, fire, BCR, and then police), but not the creation of a new unit, and would reduce the number of police calls for service by 4%.

Table 16: Minneapolis Average Annual Medical Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Final Problem	Comparison Cities	Minneapolis Yearly Average
Overdose	Durham, Denver, Eugene, Tulsa	5,389
Person Down Outside	Tulsa	7,645
Total		13,034

Low-Acuity Crime and Disorder Complaints

The City of Minneapolis receives approximately 44,000 calls for service each year for low-acuity crime and disorder complaints, roughly broken down into anti-social behavior, interpersonal disputes, and unsafe housing conditions. None of these are responded to at this time by alternate response units. Low-acuity crime responders are operating across the country. The Albuquerque Community Safety response system dispatches to disturbances and suspicious person calls, which account for a significant share of low-acuity call volume in Minneapolis, with nearly 20,000 calls each year. The Mediation Response Unit in Dayton responds to other disturbance-adjacent call types like disorderly person, juvenile disturbances, and non-violent disputes, as have low-acuity responders in Denver and Durham as well.

³⁷ "Mayor Kriseman and Chief of Police Anthony Holloway Announce Significant Change in Police Response," St Petersburg Police Department, accessed October 30, 2024, <https://police.stpete.org/2020/july/09/significantChangeInPoliceResponse.html>.

If the City followed the lead of their peers, low acuity crime and disorder call types dispatched to an alternate responder could reduce the call burden on police by up to 14.5%.

Table 17: Minneapolis Average Annual Behavioral Health Crisis Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Final Problem	Comparison Cities	Minneapolis Yearly Average
Check Hazard	Denver	181
Crank 9-1-1 Call		58
Curfew Violations	Dayton	1
Customer Trouble	Dayton	1,742
Disturbance	Albuquerque, Durham, Denver, Dayton	11,504
Drunk/Intoxicated Person	Albuquerque, Durham, Denver, Dayton	689
Firecrackers	Albuquerque, Durham, Denver, Dayton	393
Kid Trouble	Denver, Dayton	248
Loud Party	Albuquerque, Durham, Denver, Dayton	788
Music-Loud	Albuquerque, Durham, Denver, Dayton	2,318
Neighbor Trouble	Durham, Dayton	1,316
Suspected Prostitute	Durham	41
Suspicious Person	Albuquerque	8,442
Tenant Trouble	Dayton	582
Threats	Durham, Denver	1,774
Trespass in Boarded Dwell	Albuquerque, Durham, Denver	652
Truancy		3
Unwanted Person	Albuquerque, Durham, Denver, Dayton	14,000
Total		44,732

Traffic and Parking

Parking has already been identified as an opportunity area for civilian response by the City of Minneapolis. Some parking problems are currently being handled by Traffic Control. This section identifies other calls for service that are adjacent to the parking problems that the Traffic Control department is already taking on in Minneapolis. These calls have been responded to by alternate responses in Denver, Baltimore, and Wilmington. Taking on the full suite of calls below would account for 25,000 fewer calls being dispatched to law enforcement each year.

Responding to these additional call types would require hiring additional staff for existing responders and represent 8% of current calls to law enforcement.

Table 18: Minneapolis Average Annual Traffic, Parking and Vehicle Accident Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Final Problem	Comparison Cities	Minneapolis Yearly Average
Auto Theft	Denver	6,044
Parking Problem	Baltimore	5,257
Personal Inj Acc-Report	Denver	156
Property Damage Accident	Dallas, Denver, Baltimore, Wilmington	4,653
Property Damage/Hit & Run	Denver, Baltimore, Wilmington	4,026
Recover Vehicle	Baltimore	4,020
Road Hazard		1,373
Total		25,529

Property Crime

The City of Minneapolis receives just over 23,000 property crime-related calls for service each year. The City's online reporting system enables residents to report damage to property, hit-and-runs, and theft in lieu of a police response. Using the online system is currently optional, but if it was used for 100% of eligible calls this would result in over 10,000 fewer calls to 911 and 311 each year. The City also does not have a verified burglar alarm system requirement, so officers respond to over 11,000 calls for

service for audible alarms each year rather than only those that have been verified to be bonafide alarm calls.

If the City was able to reduce its calls for service for burglar alarms in a manner consistent with other cities by requiring verified alarms, and mandate the use of online or in-person reporting for the remainder of the property calls, it could reduce the burden on law enforcement by 7.4% without having to hire any additional staff.³⁸

Table 19: Minneapolis Average Annual Theft, Burglary, and Property Crime Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Final Problem	Comparison Cities	Yearly Average
Audible Alarm		303
Audible Business Alarm		7,414
Audible Residential Alarm		3,534
Burglary Business – Report*	Denver, Seattle	547
Burglary Dwelling – Report*	Denver, Seattle	1,361
Damage Property-Rpt Only*	Dallas, Denver, Baltimore, Seattle	2,201
Forgery Report	Dallas, Seattle	368
Theft	Dallas, Denver, Baltimore	3,344
Theft – Report Only*	Dallas, Denver, Baltimore, Seattle	4,906
Total		23,978

*Calls already diverted to alternate first responders in Minneapolis.

³⁸ “Burglar Alarm Policy,” Milwaukee Police Department, accessed October 30, 2024, <https://city.milwaukee.gov/police/Information-Services/Burglar-Alarm-Policy>; “Verified Response: The False Alarm Solution,” Salt Lake City Police Department, accessed October 30, 2024, https://slcpd.com/ass3ts/uploads/verified_response_summary.pdf.

Violent Crime and Injury Reporting

The City of Minneapolis receives nearly 3,800 calls for service each year to file a report about domestic abuse, criminal sexual conduct, or assault. None of these are responded to by alternate response units.

There is an opportunity to incorporate both alternate responses and the victim services system into the process of responding to calls about such violent crimes when the person responsible for the harm is no longer present. This would provide the victims with access to the care at the time of their filing, rather than being referred to care at a later date. These report-only calls make up over 1.2% of calls for service to MPD.

Table 20: Minneapolis Average Annual Violent Crime and Injury Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Problem Final	Comparison Cities	Minneapolis Yearly Average
Domestic Abuse Report Only	Durham, Denver	1,504
Assault Report Only	Denver	613
Crim Sex Conduct/Report		1,759
Total		3,876

Animal Incidents

The City of Minneapolis receives just over 8,800 calls for service each year of an animal incident nature. Ninety-five percent of these calls are responded to by Minneapolis Animal Care & Control. The 5% that are responded to by the police happen overnight, a practice that Animal Control attributed to a shortage of take-home vehicles. Animal Control takes on almost 3% of all calls for service from the MPD. The cities listed in Table 21 also use a dedicated animal control department to handle animal-related emergencies and complaints.

If the City was able to address the logistics barriers to Animal Control responding to all of its calls, the City would reduce the number of calls responded to by police by another 440 calls per year, or just under 0.5%.

Table 21: Minneapolis Average Annual Animal Incident Calls by Type (2021-2023) and Comparison Cities with Similar Call Types

Problem Final	Comparison Cities	Minneapolis Yearly Average
Aggressive Dog*	Baltimore	229
Animal Bite*	Baltimore, Deltona	678
Animal Call*	Seattle	6,546
Animal Check The Welfare*	Baltimore, Cleveland, Deltona	1,353
Animal Fight*		7
Total		8,813

**Calls already diverted to alternate first responders in Minneapolis.*

Policy Changes

The City of Minneapolis does not have a verified burglar alarm policy in place, which peer cities have used to verify that calls are bonafide before dispatching law enforcement. The City also has not mandated the use of online responses for certain call types, resulting in unnecessary calls for service as well as call systems and data that are spread between three platforms (online, 311, and 911 after hours). Finally, MPD appears to be responding to medical calls, such as overdose calls and “person down” calls, which often do not require police. These are policy changes the City of Minneapolis can make to reduce overall calls for service. These approaches, used successfully in other cities, include verifying certain calls for service and requiring the use of means other than a 911 phone call and a dispatch for certain issues.

Expand Calls to Existing Alternate Responses

The City has not yet taken full advantage of the skillsets that its non-police responders have. Other peer cities have expanded their behavioral health response teams into homelessness and homeless-adjacent anti-social behavior, overdose response, disturbance, trespass to dwellings/unwanted persons, welfare/wellness checks, and suicidal ideation/threat. They have also expanded traffic units beyond parking ticketing into car accidents and vehicle recoveries. It is important to note that expanding these calls would also require additional staff capacity to respond to the new call load.

Establishing New Responses

There are additional low-risk calls that could receive a non-police response, using new types of teams or services that go beyond the City's current suite of alternatives. Other cities have community service officer/ambassador-type roles that respond to non-violent calls for service, specifically those that fall outside of the behavioral health/homelessness/substance use space and might require mediation or civil citations. This is a longer-term opportunity as the City will have to design the roles and their policies, and staff and equip these roles.

Takeaways

The City of Minneapolis is already diverting 8.9% of calls for service from law enforcement to alternate responses each year, and has the opportunity to further reduce the burden by examining an additional 38% of calls.³⁹ Of course, it will not be possible to divert 100% of the calls in each of these identified areas. Some of the calls that make up these categories will need to be scrutinized in greater detail as a part of a process to identify new call types for alternative responses. And once categories are selected, each call would still be screened for eligibility. But, as the discussion above demonstrates, there is still a significant opportunity to expand alternative response in

³⁹ From 2021 to 2023, the City of Minneapolis averaged 309,000 calls for service routed to police. Of that call volume, we identified 47 percent as candidates for alternate response consideration, with 8.9 percent already receiving alternate response via behavioral health, traffic control, animal control, or online response.

Minneapolis and, in many cases, existing City services and infrastructure can help facilitate this process.

As alternate responders continue to demonstrate effectiveness in taking on call volume from the overburdened police department and service demand changes, additional call categories can be reviewed for future alternate response opportunities. This will enable law enforcement to focus on the most pressing matters – the investigation and deterrence of violent crime – while peers in other agencies shoulder a greater share of the responsibility for making their communities safer.

Supplementary Information

Below is additional commentary that contextualizes the approach of this analysis.

Considerations with Source Data

Estimating Calls for Service Demand

This report utilizes the calls for service data reported by the City of Minneapolis Computer Aided Dispatch (CAD) system from 2021 to 2023 to quantify community safety service demand from its residents.

- Unique incidents are determined by a call's incident number and each call is categorized by its 'Final Problem' type. An incident number is generated automatically for each call that is handled by the call center. The Final Problem type is the definition of the problem addressed by the first responders based on their experience at the scene of the incident. Further explanation of this choice is provided in the Initial Problem vs. Final Problem section below.
- We use the average call volume over the previous three years for each Final Problem type to estimate future demand for service.

Initial Problem vs. Final Problem

The CAD data report a description of both the initial problem and final problem to be addressed in the call for service. The initial problem refers to the call taker's diagnosis of the situation based on the information provided by the caller, whereas the final problem is determined after first responders arrive on scene to confirm the situation. About 12% of calls have a different initial problem than final problem. We decided to use the final problem as it is the most accurate understanding of what services were needed on scene.

There is also a valid rationale for using the initial problem code instead of the final problem, because that is the information used to determine which unit to dispatch to a scene. Using the initial problem alters the findings of the report somewhat.

Defining Calls Routed to Police

In the introduction of the Calls for Service Analysis section of this report, we quantify the number of calls that are "routed" to police versus other departments of the Minneapolis public safety infrastructure. There are some important methodological nuances to this calculation listed below:

1. We used the Final Problem call code to determine whether the police are supposed to systematically respond to a call. The Final Problem call codes are formatted with a parenthetical that identifies which departments are to be dispatched for each Final Problem. For example, the call code "Person with a Gun (P)" is designated a Police response while "Overdose (PE)" would require both Police (P) and Emergency Medical Services (E) to be systematically dispatched to this type of call. For this analysis, call codes that contain a P are generally considered a call routed to police. Exceptions to this rule are described in point 2.
2. The general rule about identifying which departments are supposed to respond to calls based on the call code is complicated by the fact that Animal Control, BCR, and Traffic Control do not have a distinguishing character in the Final Problem call code. These calls are all notated as if they are solely responded to by police. For example, the Final Problem code for a behavioral crisis response

is 'Behavioral Crisis Response (P)'. In these instances, we disregarded the parenthetical and considered those calls to be non-police responses.

3. The Final Problem call codes are used to describe the appropriate units to respond to an incident based on City policy. They are not a description of which units actually showed up to each individual call, which will occasionally differ from prescribed policy. Because the purpose of the Calls for Service Analysis section is to address the dispatch policy for each call code, deviations from policy that can occur on an incident-to-incident basis are not controlled for in the data.

Peer City Benchmarking

The table below outlines peer city programs' alternative response scope by issue.

Table 22: Catalog of Alternative Response Programs by Type of Available Response

City	Program	Behavioral Health Crisis Calls	Welfare Check Calls	Medical calls	Low-Acuity Crime and Disorder Complaint Calls	Traffic, Parking, and Vehicle Accident Calls	Property Crime Calls	Violent Crime and Injury Calls	Animal Incident Calls
Albuquerque, NM	Albuquerque Community Safety Department (ACS)	X	X		X				
Baltimore, MD	Baltimore County Government Online Report					X	X		
Baltimore, MD	Baltimore City Health Department Animal Services								X

Cleveland, OH	City of Cleveland Division of Animal Care and Control								X
Dallas, TX	Dallas Police Department Online Reporting System					X	X		
Dayton, OH	Dayton Mediation Response Unit (MRU)		X		X				X
Deltona, FL	City of Deltona Animal Control								X
Denver, CO	Denver Civilian Report Technician					X	X		
Denver, CO	Denver Support Team Assisted Response (STAR) Program	X	X	X	X			X	
Durham, NC	Durham Holistic Empathetic Assistance Response Teams (HEART)	X	X	X	X			X	
Eugene, OR	Eugene Police Department Crisis Assistance Helping Out On The Streets (CAHOOTS)	X	X	X					

Oakland, CA	Oakland Mobile Assistance Community Responders of Oakland (MACRO)	X	X		X				
Seattle, WA	Seattle Animal Shelter Animal Control								X
Seattle, WA	Seattle Police Department Online Crime Reporting				X	X	X		
Tulsa, OK	Tulsa Fire Department Alternate Response Team	X	X	X	X				
Wilmington, NC	City of Wilmington Civilian Crash Investigators					X			



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