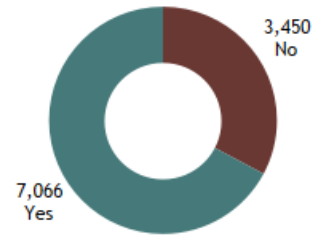




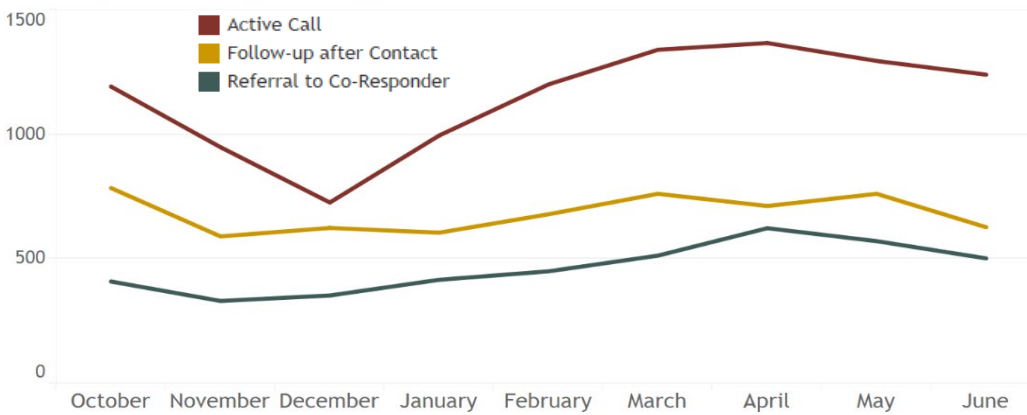
The Co-Responder model pairs law enforcement and behavioral health specialists to respond to behavioral health-related calls for service. These teams utilize the combined expertise of the officer and the behavioral health specialist to de-escalate situations and help link people with behavioral health issues to appropriate services. There are three ways a co-responder team interacts with an individual: 1) active call responding to police dispatch, or police requesting co-responder clinicians on scene, 2) a referral made from law enforcement or other community partners to the co-responder team, or 3) a follow-up contact where the co-responder team reaches out to the individual after a previous contact. During State Fiscal Year 2021 (July 2020 through June 2021), co-responder teams in **more than 80** communities had more than **25,900** contacts with individuals.

De-escalation Provided Active Calls

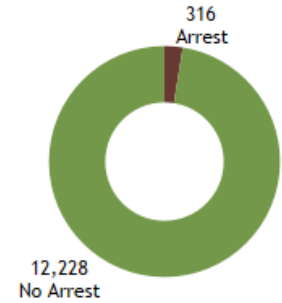


De-escalation utilizes communication techniques to assist a person in crisis by reducing the emotional intensity of a conflict or potentially violent situation.

Co-Responder Response Types ¹



Arrests Active Calls



Hispanic Ethnicity

Mexican	1,007
Puerto Rican, Cuban, or Other Hispanic Ethnicity	1,952

Race

White or Caucasian	14,478
Black or African American	1,553
Other Race	890
Multiple Races	579
Asian	250
American Indian or Alaska Native	200
Native Hawaiian or Pacific Islander	33

Individuals Contacted:

Demographics



Gender Identity

Male	12,304
Female	10,789
Transgender	168
Non-binary	46

Age

25 and Younger	6,652
26 - 50	11,360
51 - 75	5,537
76 and Older	739

¹ The line graph above begins in October, the second quarter of State Fiscal Year 2021, due to a modification of the reporting template that allowed these data to begin to be collected. All other figures in this report refer to FY21 (June 2020 through July 2021).

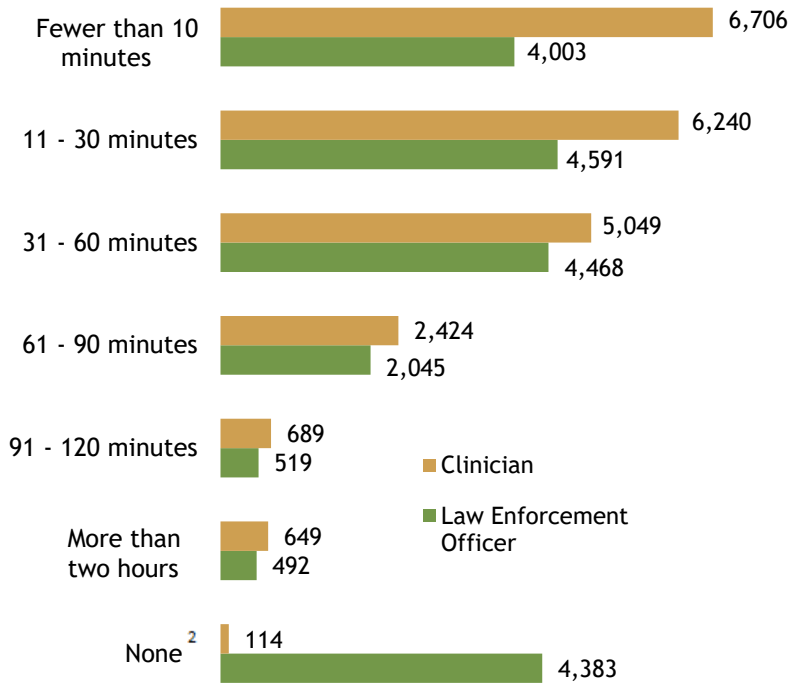
Missing Data: Throughout this report, missing data has been omitted; thus, totals will not be consistent across categories. OBH continues to support contracted programs to ensure reporting quality.





Time Spent on Scene

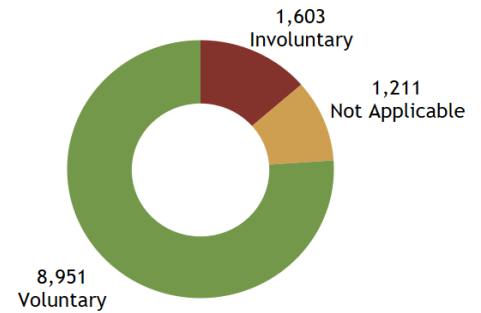
Active Calls



In more than **4,700** active calls, a co-responder stayed on scene to provide services while law enforcement was released back to patrol activities.

Voluntary Status after Call

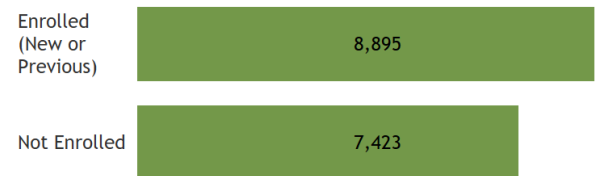
Active Calls



Call outcomes represented in the "Involuntary" category above include 72-hour (M-1) holds, holds for transportation (M-0.5) (§ 27-65-105), and Substance Use Emergency Commitment (§ 27-81-111).

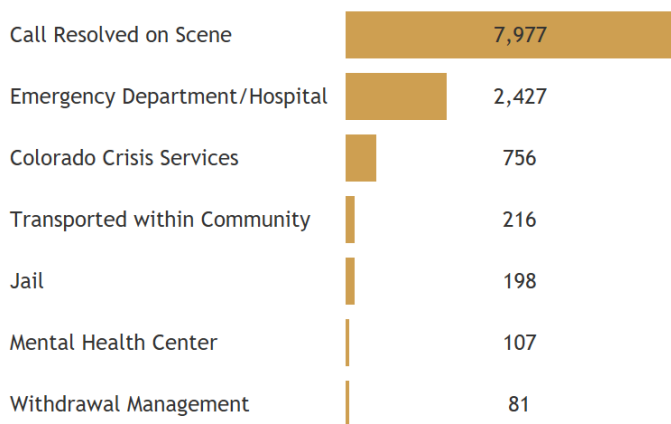
Enrollment in Behavioral Health Services

All Call Types



Location of Call Resolution

Active Calls



Looking Ahead

Understanding the overall behavioral health need is imperative to ensure communities have the right resources to respond effectively. Most emergency dispatch systems do not currently have a reliable method for tracking behavioral health-related calls. Some agencies have begun collecting this information, and OBH is working with programs on this effort.

² On some calls, the scene is deemed unsafe; therefore, the clinician is not always able to make contact with the individual and provide services.

