Human-centred Engagement & Liaison Partnership: 6-month review

October 28, 2021

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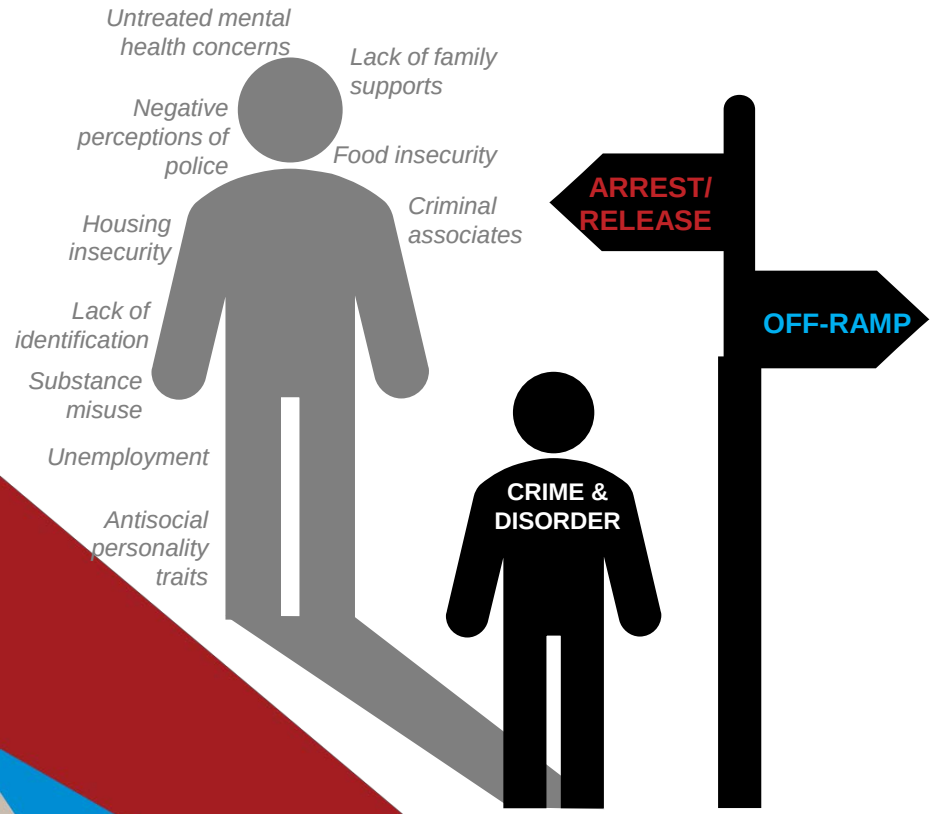
HELP Methodology



Human-centred Engagement & Liaison Partnership (HELP)

Integrated Offender Management (IOM)

Behavioural Assessment Unit (BAU)

- **Community services**
- **Healthcare providers**
- **Provincial and municipal government agencies**
- **Not-for-profit organizations**

Transitional housing

Cultural supports

Income support

Counselling

Skills training

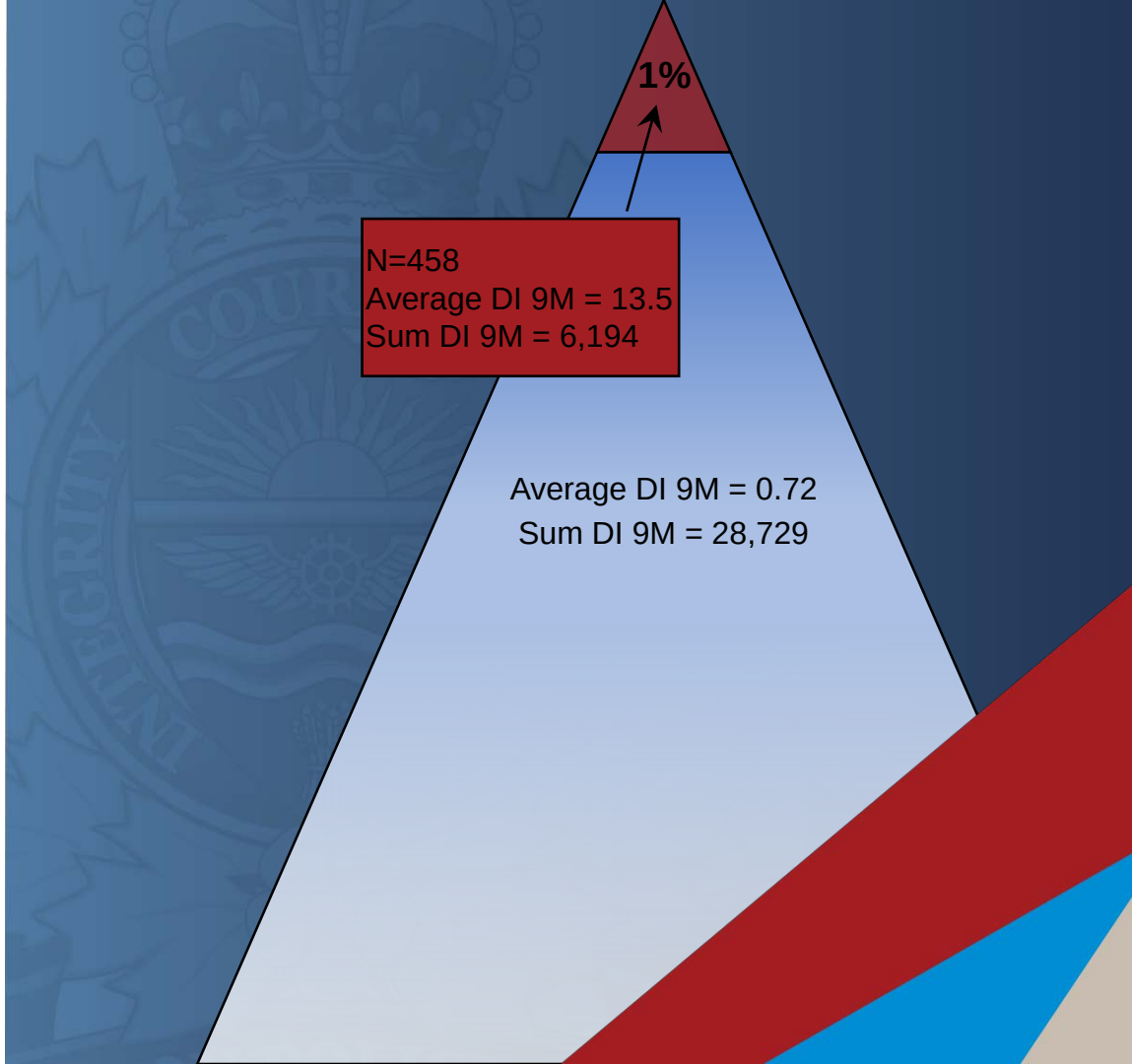
Transit passes

Food bank

Addiction treatment

SRB community members

- Top 1% of Disorder Indicator violators in the last 9 months
- N=458
  - 70.1% male
  - 27.3% between 26 to 31 years old (range: 12 to 65 years old)
- Demand: 6,194 violations



Purpose of the Union Building

- Co-location of different partners to increase cooperation, communication and greater information sharing

- Leads to greater efficiency & effectiveness in case planning for vulnerable and marginalized community members.

Collaboration within Union Building

- Alberta Health Services Addictions and Mental Health Teams are now situated within the building.
- These compliment Social agencies both within and external to the building.
- By coordinating and sharing information, we can direct care to the correct sector.

HELP 6-month overview

As of June 30, 2021, HELP documented **572 requests**.

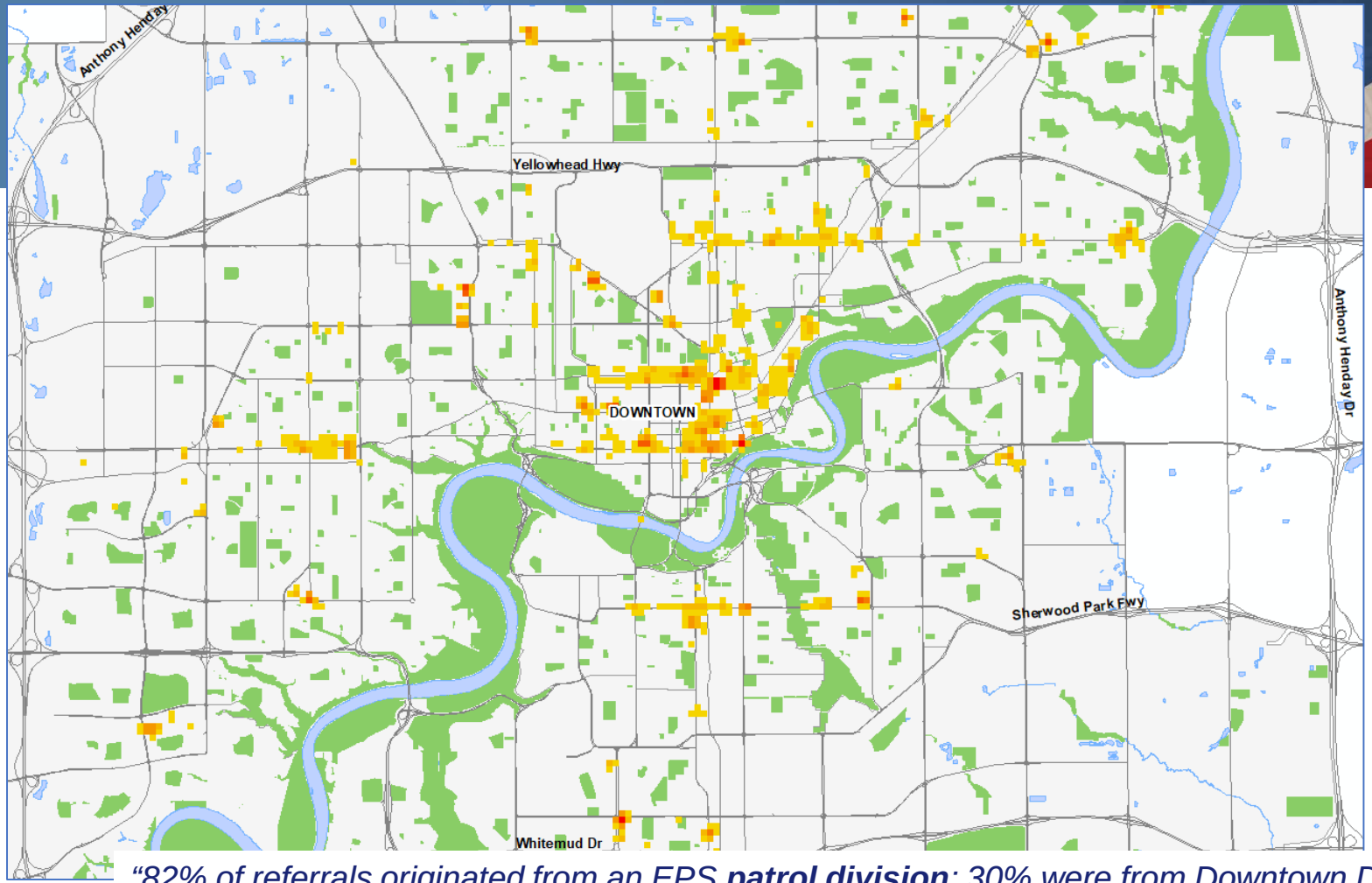
82% of referrals originated from an EPS **patrol division**; 30% were from Downtown Division alone.

HELP members responded **on-scene for 277 calls**, and they provided **phone support for 268 calls**.

Navigators identified that community members most often required **mental health, housing, and substance-abuse** related services.

Persons referred to HELP generated **3294 police-reported occurrences** and **1533 disorder indicator violations** during the 9 months prior to referral.

ESPC reports an upward trend in the number of homeless persons in Edmonton, from 2020 to 2021. **2318 homeless persons in Edmonton**, as of Q2 of 2021.



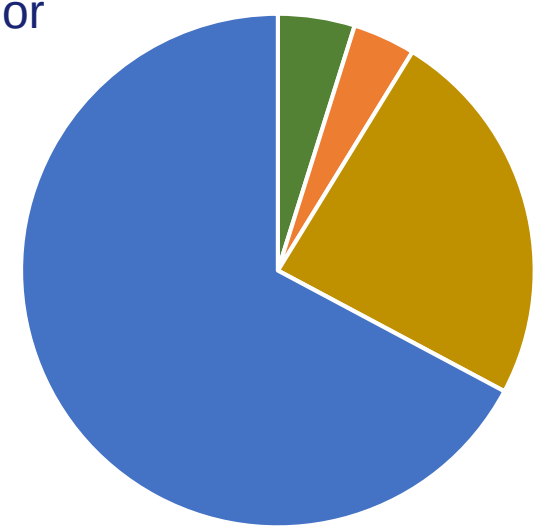
*"82% of referrals originated from an EPS **patrol division**; 30% were from Downtown Division alone."*

Case management: Contextual factors

- **Individual relationships are more impactful than agency policies**
- EPS, ERC, and probation worked well with HELP for legal matters
- EPS partnership provides navigators greater access to and legitimacy among services and ability to transport community members
- **Boyle Street Community Services**' programs are frequently utilized
- **Boyle McCauley Health Centre's** diversity of resources are also beneficial
- **Larger agencies that were more regimented and bureaucratic were more challenging**, particularly for community members with very complex situations or needs.
- Community member characteristics can also hinder case management – behaviour, complexity of needs, personality, expectations.

HELP community members: Subgroups

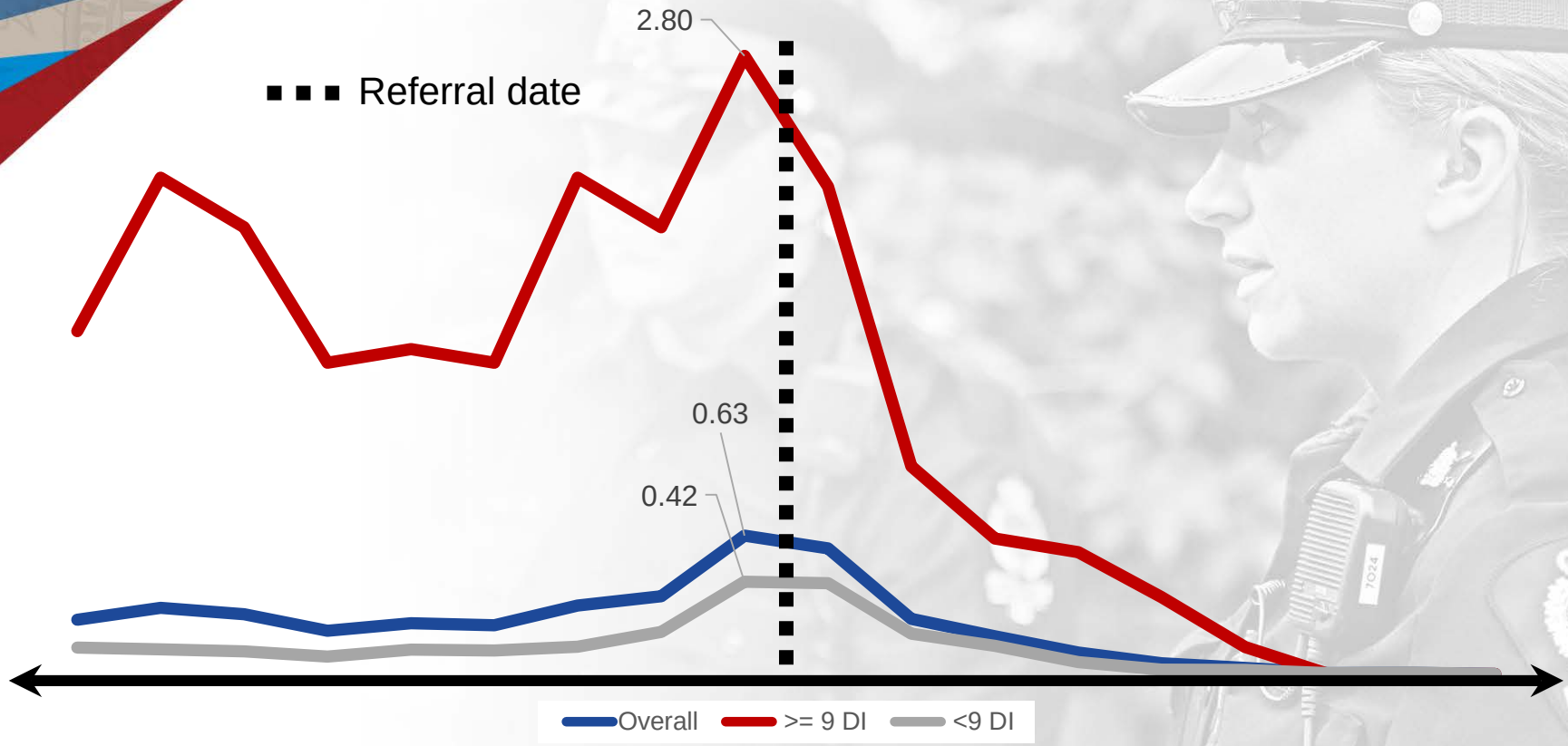
- **HighPolice_HighHELP**: Community members in *the top 1% of Matrix for 9-month disorder indicator violations* (i.e., nine or more 9-month DI violations) with a chronology (n=27)
- **HighPolice_LowHELP**: Community members with nine or more 9-month DI violations without a chronology (n=22)
- **LowPolice_HighHELP**: Community members with fewer than nine 9-month DI violations with a chronology (n=134)
- **LowPolice_LowHELP**: Community members with fewer than nine 9-month DI violations without a chronology (n=375)



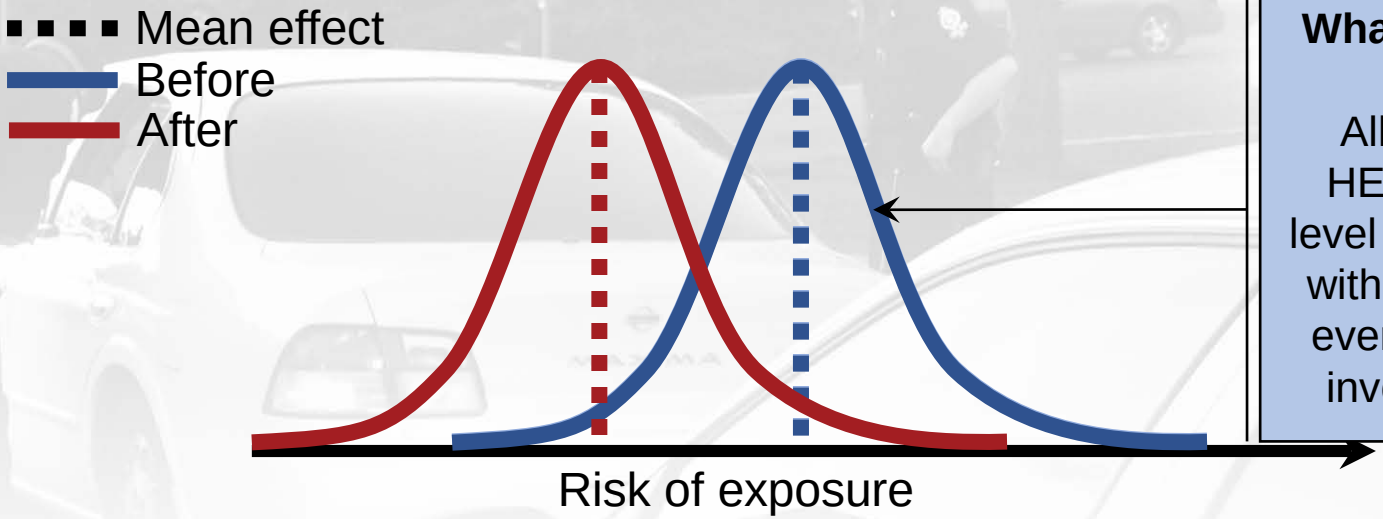
HELP community members: Subgroups

	Referral group			
	High Police Involvement		Lower Police Involvement	
Measure	High HELP	Lower HELP	High HELP	Lower HELP
Count	27	22	134	375
Average of UCRViolationDiff	-5.52 (-47.2%)	-0.68 (-10.9%)	-0.08 (-5.2%)	-0.01 (-0.7%)
Average of DIViolationDiff	-5.07 (-49.8%)*	-0.77 (-15.0%)	0.28 (-33.6%)	0.06 (9.8%)
Average of OccurrencesDiff	-2.96 (-24.8%)	-0.73 (-10.4%)	0.57 (19.8%)	0.03 (1.4%)

Average DI violations by month, 9 months pre and post HELP referral



Population-approach

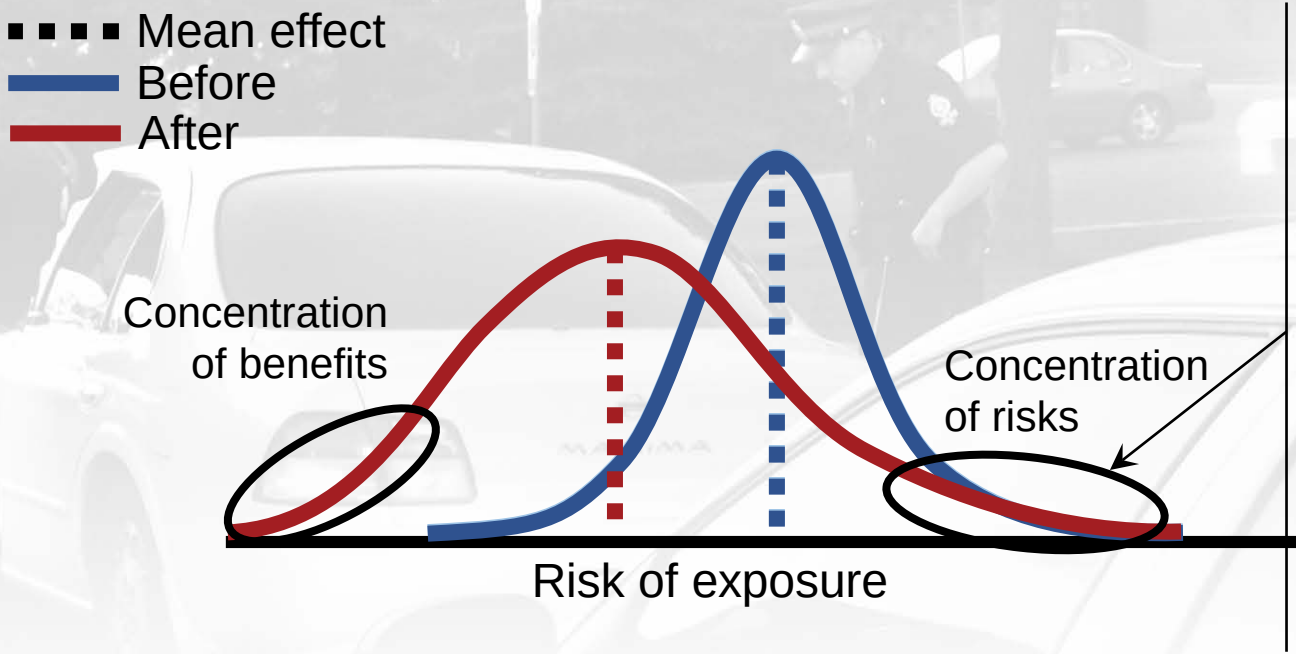


What does this mean for HELP?

All persons referred to HELP receive the same level of navigation services, with the hope that this will evenly impact everyone's involvement in disorder.

Population approach: Shift entire distribution of population towards lower mean (Adapted from Frolich & Potvin, 2008)

Population-approach con't

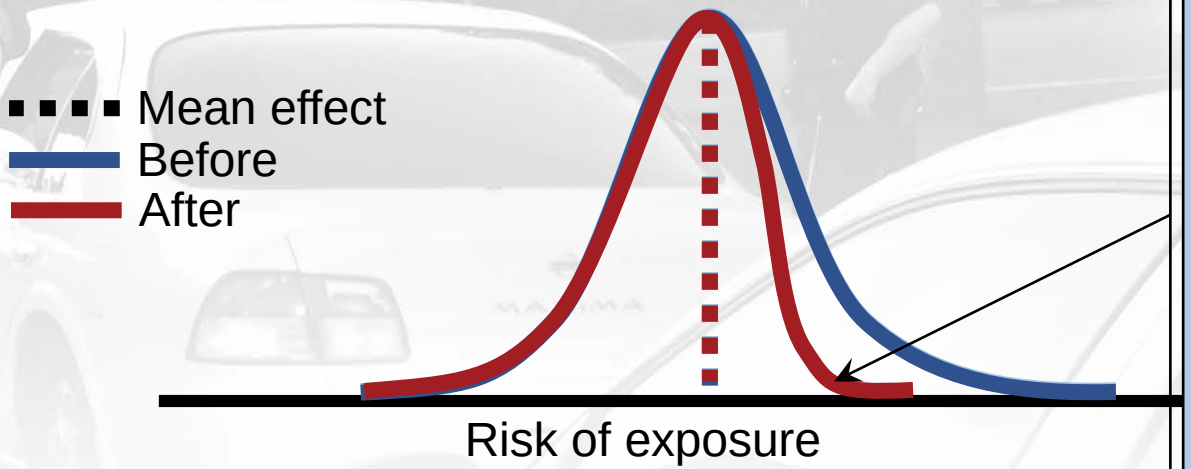


What does this mean for HELP?

All persons referred to HELP receive the same level of navigation services. This may decrease police involvement for those already at lower risk, but persons with greater needs and police involvement aren't impacted.

Potential increase in variation of risk following population-approach intervention (Adapted from Frolich & Potvin, 2008)

Populations at risk approach



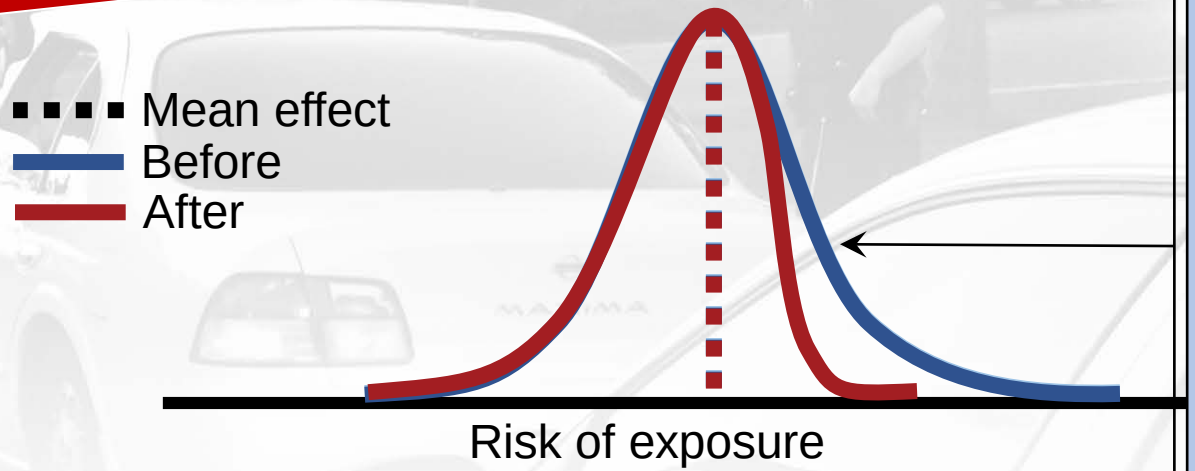
What does this mean for HELP?

Only respond to individuals with greatest need and disorder indicator violations and offer individualized and higher-intensity interventions (e.g., HUoS). Lower risk individuals are not affected and may become at risk in the future.

Populations at risk approach: reduce specific risk exposure for individuals at highest risk

Integrated approach

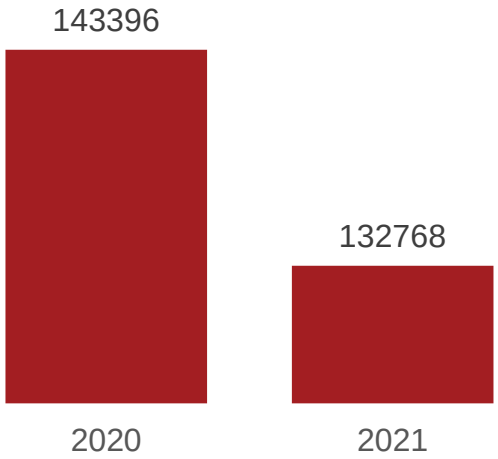
This is the approach that we recommend for HELP!



What does this mean for HELP?

Provide different levels of support that correspond with the community member's level of need and their previous police involvement. Continue to respond to referrals for community members with high and low exposure to risk; support those at lower "risk" as a proactive measure.

Calls for service YTD (September 30, 2021)



7% decrease in calls for service in 2021 YTD compared to 2020 (132 768 and 143 396, respectively).

Event types with the largest decreases:

- Trouble with Person -12% (-1882)
- Trouble with Intoxicated Person -20% (-1461)
- Theft under $5000 -17% (-905)
- Suspicious Persons -24% (-851)
- Trouble Not Known -9% (-603)

Next steps

Define criteria or parameters for HELP's different response levels and for what community members are selected for case management.

IT support for a case and records management system that facilitates operations and evaluation (e.g., Power Apps or Niche-based solution).

Expand evaluation beyond police-reported involvement and quantitative data sources to consider its impact on frontline police, the community, partners, and intended beneficiaries.

Conduct more rigorous and in-depth analysis to better determine impact of HELP and any differences in the program delivery or success for different groups. Explore potential of information sharing for operations and evaluative purposes.

Continue to identify barriers to and factors for success to improve practices and potentially effect systemic change.

Next steps, con’t

THANK YOU