



Public Safety Call Allocation Study

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City of Portland, Oregon

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MissionCriticalPartners

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We wish to acknowledge the engagement and commitment to improving public safety response to emergencies and non-emergency community needs. Engagement consisted of a combination of 61 in-person interviews and focus groups, virtual meetings that resulted in approximately 130 connections and a community-focused online survey that yielded 1,020 responses. In total, MCP was able to hear from diverse individuals with expertise and lived experiences. Included in the engagements were elected officials, traditional responders, non-traditional responders, community voices comprised of local government leaders and staff; 911 dispatch, emergency medical services (EMS), fire, and police leaders and professionals; researchers; leaders in both public and private organizations; technologists; community activists; mental health and substance use professionals; and providers of community-based alternatives to 911, including alternative hotlines.

We appreciate the opportunity and trust the City of Portland has placed in MCP to serve you.

1 Introduction

Jurisdictions nationwide are continuously assessing and reassessing public safety response methodologies, evaluating where their organizations stand today, exploring where they want to go, and making critical decisions on how to meet the ever-evolving public safety needs of the communities they serve. In response to the current challenges related to alternative response, like many others today, the City of Portland, Oregon, (City or Portland) finds itself on the precipice of an opportunity to analyze and examine its public safety nature codes, call types, allocation, and field response staffing. The City engaged Mission Critical Partners, LLC (MCP) to assess the types of calls dispatched to public safety service providers and the number and type of public safety providers needed to respond to the different types of calls. This holistic assessment was performed with an underlying question in mind—*is there a city resource—other than traditional public safety responders¹—that may be more qualified to assist those in need?*

Refocusing existing resources/programs—so responses to the communities' safety needs are adequate, appropriate, support their wellbeing, and do not cause harm based on a new configuration of innovative alternative service models—will contribute to upholding that one's identity does not determine outcomes and that the City's public safety system is equipped to serve those in need.

MCPs proposed opportunities, considerations, and recommended strategies for alternative responses incorporate meaningful and actionable steps to building a cohesive community safety system. When operationalized, these recommendations are expected to align with the City's internal governance and staffing to support the envisioned alternative community safety system that is collaborative and includes community-based research and civic engagement.

Terms introduced within this report are explained in Appendix J. Others may be found in the National Emergency Number Association (NENA) glossary.

Study Objectives

- *What current protocols are used to screen callers and transfer callers to crisis response services?*
- *How are calls currently dispatched through the Bureau of Emergency Communications (BOEC) via 911 or the Public Safety Non-Emergency Line to a City responder, as well as those dispatched to Park Rangers via Portland Parks & Recreation?*
- *How are various types of calls currently allocated (e.g., how are different types of calls prioritized, dispatched, and assigned) to responders?—Is this allocation efficient and appropriate? Why or why not? If not, what are alternative recommended allocations?*
- *What, if any, new policies and/or protocols are necessary?*
- *What are the specific needs of law enforcement, fire and emergency medical service (EMS) in responding to calls that may involve mental health, housing insecurity, or other community-based service needs related calls for service?*
- *What are the community's specific needs in requesting and receiving services that may involve mental health, housing insecurity, or other community-based service needs related to calls for service?*
- *What, if any, existing or new technology can be leveraged to support identified needs?*

¹ Fire, emergency medical services (EMS), or law enforcement

In 2022, BOEC received 1,071,169 calls for service on a combination of 911, 10-digit non-emergency, 10-digit emergency, other (sources), and administrative lines² and generated 617,875³ computer-aided dispatch (CAD)⁴ incidents⁵. Nearly 58% of the CAD incidents generated can be attributed to a telephone call answered by BOEC, while the remaining is assumed to be field unit or self-initiated activity and administrative messages.

It is important to note that not every call to a public safety answering point (PSAP) results in a CAD incident. For example, multiple 911 calls can be received for the same vehicle fire, or the same caller may call and hang-up several times because of hold times. Duplicate repeated and informational calls are all part of the call volume.

The remaining 42% of the CAD incidents that are not generated by a phone call may be a self-initiated activity (i.e., generated by a field unit) such as a person or traffic stop or an incident observed in progress. An example of an administrative CAD incident is an internal request, such as having an officer call a deputy district attorney on a case.

BOEC is experiencing a decline in CAD incident activity, showing a steady decrease from 2019, where 737,616 CAD incidents⁶ were generated, to 2022, where 617,875⁷ were generated—a reduction of 149,741 incidents. Telephone calls received in December 2021 compared to November 2022 show a slight decrease from 88,904⁸ to 81,753⁹—a reduction of 7,151 calls.

Overall, City staff strive to understand community needs and expectations, especially people experiencing homelessness or lower incomes and people disproportionately affected or underserved by access to medical and mental/behavioral health resources. Continually improving on this effort will help center public safety services around people and communities, improve the interactions between the community and public safety services, and contribute to building a haven for help, health, and life. This is accomplished by:

- Managing calls for service unnecessarily entering the emergency communications center (ECC) outside of the traditional 911 or 10-digit line workflow (N11 codes [e.g., 311¹⁰, 211¹¹, 988¹²])—public education programs that encourage the use of community resources rather than dialing 911 and agency website dashboard/portal/scanner applications for traffic, etc.

² On a combination of 911, non-emergency, 10-digit emergency, other (sources) and administrative lines – Data collected from the BOEC Director’s Reports – December 2021 through November 2022

³ December 2021 to November 2022 BOEC CAD Extract Data

⁴ The NENA Knowledge Base Glossary defines terms, acronyms and definitions associated with the 9-1-1 industry. Intended users of this document are any person needing NENA’s definition/description of a 9-1-1 related term(s).

<https://www.nena.org/page/glossary>

⁵ Denoting a dispatch to a field responder or administrative CAD incident

⁶ BOEC Director’s report – January 2023

⁷ BOEC CAD extract data – December 2021- November 2021

⁸ BOEC Directors Report December 2021

⁹ BOEC Directors Report November 2022

¹⁰ 311 systems are designed to complement 911 (police, fire, and medical emergencies) and 211 (community and health services) systems. When combined, these services provide community members with easy access to a wide range of local government and community information and services. [What Is 311? \(govtech.com\)](https://www.govtech.com) – 311 is a non-emergency phone number that people can call in many cities to find information about services, make complaints, or report problems like graffiti or road damage.

¹¹ [Dial 211 for Essential Community Services | Federal Communications Commission \(fcc.gov\)](https://www.fcc.gov) - In many states, dialing “211” provides individuals and families in need with a shortcut through what can be a bewildering maze of health and human service agency phone numbers. By simply dialing 211, those in need of assistance can be referred, and sometimes connected, to appropriate agencies and community organizations. <https://www.211info.org/about/our-team/>

¹² The Portland-based nonprofit Lines for Life (<https://www.linesforlife.org/>) will oversee the call service in Oregon except in Marion and Polk counties, where Northwest Human Services will be in charge. Both groups have run crisis hotlines for years. <https://oregoncapitalchronicle.com/2022/07/14/oregon-and-the-rest-of-the-country-launches-new-988-crisis-intervention-service/>

- Reducing the unnecessary need for call-taker contact to process calls for service that may or may not require dispatch but involve repetitive or standard information—interoperable links to agencies using the same or disparate CAD systems, which drive to offset voice interaction (or alternative); online reporting software for a variety of activities, including civil violations, property crimes with no suspect, or community reported information on crime trends or patterns; and data integration/interfaces for situational awareness for public safety and City and Multnomah County (County) officials.
- Routing calls for service entering the ECC that may not necessarily require a traditional police, fire, or EMS response to alternate resources—nurse triage; behavioral health clinicians in the ECC environment; Portland Fire & Rescue (PF&R) Rapid Response Vehicle Program, crisis hotline or 988; co-response; community health outreach and mobile integrated healthcare; personal health education to better understand their medical issues before they become emergencies; community response and/or paramedicine programs; and social services.

Today, no national standards or best practices have been formally adopted to address behavioral health response, dispatch screening, and alternative call allocation to responsibly and safely transition calls from 911 centers and traditional fire, EMS and police responses to more appropriate services—just as there are no provisions for professional licensing for alternative assessments for calls for service. These gaps must be addressed to allow those calling 911, 311, a crisis line, or other provider to be provided access to a level of care that aligns with their needs.

To address the overall themes identified during focus groups and listening sessions (see Appendix A), support the results of the community survey (see Appendix B) and consider the national environment, MCP proposes a **Respond – Resolve – Restore** approach to alternatively allocate calls for service. The first step is to shift the mindset toward measuring workflow efficiencies as they relate to **responding** with the right resource for the issue at first contact—away from outcomes. Through these efficiencies, the right combination of city and community resources can help **resolve** and ultimately **restore** the situation. While restoration could take minutes or years, those in need would be on an upward trajectory—each step of the way integrating even the smallest move toward harm reduction. Whatever or however their scenario—be it police accountability, substance use, mental health, housing insecurity, and other community-related service needs—the right response can help lead toward restoration through harm reduction.

2 Call Allocation Analysis, Findings, and Results

Information garnered through data collection—focus groups and key information interviews, BOEC’s Directors Report¹³, standard operating procedures (SOPs), and current workflows used to support both traditional and alternative response needs—is presented in this section. Research and review of the call allocation data is later used to identify and recommend changes to the processes, structure, staffing, technology, and training to improve workflows. In the absence of alternative response standards, measures from existing call-taking and dispatch national standards and best practices were considered, as well as MCP’s industry experience and knowledge.

¹³ <https://www.portland.gov/911/directors-report>

- **Standard** – something established by authority, custom, or general consent as a model or example¹⁴
- **Best Practice** – a procedure that has been shown by research and experience to produce optimal results and that is established or proposed as a standard suitable for widespread adoption¹⁵
- **Industry Experience** – primarily involves a minimum of ten years of combined education, work experience, and specialization in a respective industry or market segment.

Nine standardized questions—with slight modifications to accommodate the different audiences (elected officials, traditional responders, non-traditional responders, and community voices)—were used in the 61 focus groups, key information interviews, and community voice listening sessions (see Appendix A). The goal for each audience was to offer the attendees an opportunity to share what was on their minds and, in turn, allow MCP to use the information to build a strategic foundation for optimizing emergency, non-emergency, and alternative response as it relates to call allocation.

Identifying early trends and themes provided a pathway for developing the community survey—the results of which (see Appendix B) further validated MCP's preliminary findings. The focus of the community survey was to seek the community's input on two focus areas:

- When it comes to a public safety (fire, medical, police) response, what are the communities' priorities?
- What are the communities' specific needs in requesting and receiving services that may involve mental and behavioral health, housing insecurity, or other safety-related but non-emergency situations?

Outcomes from these important components offered the City an opportunity to learn directly from community members about how call allocation and resource dispatching influences their decisions when seeking assistance and what changes they think should be made to the system.

The data and information provided ranged from hard numbers (quantitative data) to opinions and anecdotal input (qualitative data). For data that was quantitative, MCP relied on established public safety and private industry metrics to assess and evaluate factors related to public safety. Where data was qualitative, or metrics had not previously been established, MCP drew on its collective industry experience and awareness of best practices to create those metrics and assess the status of the ECC.

MCP reviewed the various technologies currently being used to support the receipt, triage prioritization, and assignment of emergency and non-emergency calls. As a result, technology strategies are recommended in Section 3.4.

Key Findings



Key Takeaways

- The complexities of defining adequate response, limitations of using traditional time stamp-related benchmarks, changes in public expectations, preliminary review of the data provided, and information received during key informant interviews (KIs), focus groups, and

¹⁴ "Standard," Merriam-Webster, 2020. <https://www.merriam-webster.com/dictionary/standard>

¹⁵ "Best Practice," Merriam-Webster, 2020. <https://www.merriam-webster.com/dictionary/best%20practice>

listening sessions, call for timeliness and equitability to be applied across all calls for service.

- As public expectations have changed, defining adequate responses based on capturing a caller's moment in time, then applying a nature code to the situation, and allocating resources based on that nature code has demonstrated itself to be problematic. Portland-specific data demonstrates that what communities, including responders, are insisting upon, and expecting does not align with how things "have always been done."
- More than 60 city/county/state alternative programs/resource(s) exist—some more siloed than others. These alternative programs are in desperate need of change management and a citywide coordination framework if they are to be effective.
- Many services mirror one another, resulting in a duplication of costs and efforts and creating confusion for callers in knowing which resource would best meet their needs when traditional fire, medical, or police response may not be necessary.
- Several constraints exist within the data that currently limit the ability to accurately ascertain desired key measurements (e.g., the percentage of calls that have previously gone to alternative responders, that could go to alternative responders in the future if they all worked collaboratively, and that would specifically be diverted from police to alternative response)¹⁶:
 - The data may not exist or, if it does, it is inaccessible or in disparate locations.
 - Data sets or fields are deemed by administrators as inconsistent for data analysis.
 - Requires prerequisite steps before the data can be available or compiled in a form that will be accurate and of practical use.
 - Requires agency operational expertise and collaboration to review and make decisions prior to being able to make firm recommendations.
 - May be too early in a program's existence to acquire, evaluate, or draw conclusions.
- Future opportunities, considerations, and recommendations, while considerable, do not advocate for an entirely new set of call types or nature codes. Rather, the recommendations suggest increased modifications to address call types and nature codes, priority levels, and policy and metric gaps—with the intent to improve coordination and meet public expectations for adequate response.
- Having nearly 4,500 nature codes and their derivatives, many tied directly to emergency medical dispatch (EMD) and emergency fire dispatch (EFD) protocols, necessitates change and establishing agreed-upon criteria that can be used as a tool to consistently assess nature codes as alternative resources—such as Portland Street Response (PSR), Public Safety Support Specialist (PS3), Community Health Assess & Treat Team (CHAT), Community Connect, and even Portland 311 (PDX 311) after its resource availability and training to handle more events than they do presently is expanded.

¹⁶ Known variances and constraints exist in the 911 industry across the nation, hampering research and the ability to leverage data in desired ways while protecting highly sensitive and personal information.
<https://www.transform911.org/blueprint/chapter-8-data-and-tech/>

- BOEC uses EMD Protocol 25¹⁷ but does not yet utilize the enhanced protocol as it is awaiting the anticipated release of a software update. BOEC does not use nurse navigation or Emergency Mental Health Dispatching (EMHD)¹⁸.
- Call-takers do not utilize emergency police dispatch (EPD) protocols but align with BOEC policies that dictate police call processing.¹⁹
- Multiple alternative response policies that reflect practices for decision-making and authorizing 911, PDX 311, and others receiving requests for service exist, increasing the risk of policy conflicts and confusion.
- Existing policies are prescriptive and default to traditional unit allocation. Traditional response recommendations have been pre-programmed into the CAD system but do not include alternative response resources other than PSR²⁰.
- The 32% (340,875²¹) of the telephone calls received on non-emergency and administrative lines are more likely to be Priority 6 or 7, which comprise 27% (163,892²²) of the total police CAD incidents. However, it cannot be presumed that these are automatically eligible for alternative responses.
- Regardless of the source, 1.21% (1,976) of the CAD incidents initially assigned a Priority 6 or 7 were upgraded to a final priority of 1 through 4, indicating there was likely a significant on scene change that increased the level of risk only determinable after field response. Conversely, 8.58% (14,063) of the total CAD incidents had the reverse occur—the final priority was downgraded from a Priority 1 through 4 to a Priority 6 or 7.
- Significant and differing levels of confusion, confidence, and trust were expressed by the communities during interviews and survey results regarding accessing services specifically via 911.
- Accessing the desired public safety, alternative, and community resources directly (expressed in the community interviews and listening sessions), as opposed to having to access through 911, was further supported by 65% of the community survey respondents as a measure to address the apprehension that some have with contacting 911 while still having a path to emergency services if needed.
- Survey results for the question “I trust the 911 Call-taker, with the appropriate training, to determine the proper responder for my situation, even if it’s not who I initially requested,” suggest that perhaps the public is unsure of the level of training, experience, and expertise that is obtained by 911 professionals and their knowledge of what resources best fit what is being reported.
- In the community survey, 69% of the respondents agreed or strongly agreed when asked, “A police officer is the only option for calls related to activity that may be defined as

¹⁷ Psychiatric/Mental Health Conditions/Suicide Attempt/Abnormal Behavior

¹⁸ <https://prioritydispatch.net/emhd/>

¹⁹ BOEC Policy 5.003

²⁰ BOEC – Portland Street Response Triage Criteria

²¹ BOEC Directors Report December 2021 to November 2022 Workload Call Volume

²² December 2021 to November 2022 CAD extract data – Police Priority 6 and 7 Incidents make up 27% of the total CAD incidents processed (Priority 6 and 7 calls = 163,892 of the 617,875 CAD Incidents)

criminal.” This suggests that, when a crime is committed, alternative responders are not what the public expects for a response.

- The top 25 nature codes represent 46% (285,223) of the 617,875 CAD incidents.
 - Of the top 25 nature codes, 44% of the generated incidents (124,622) may be eligible for alternative response, which is 20% of all CAD incidents.
- When examining each discipline’s (fire, medical, and police) top 12 nature codes, which total 42% (258,727) of the incidents dispatched, 14 out of the 36 nature codes accounted for a total of 49% (126,568) of incidents that may be eligible for an alternative response or co-response. See Appendix C.
- The percentage of calls estimated to be eligible for alternative response across call, CAD, survey data, and PDX 311 projections suggests an initial 33% eligibility goal for alternative response with another 10% potential for co-response.

2.1 Typology and Adequate Response

By definition, “typology” is the study of, or analysis or classification based on types or categories.²³ What CAD data refers to as call types and what has been commonly referred to in BOEC policies and the objectives for this report are two different things. In CAD, typing relates to the overall architecture when there are multiple levels or algorithms in a work or call flow, and it is relied upon when one part of the flow is disrupted or ineffective. For example, CAD views “call types” as the service categories of F (fire), M (medical), and P (police). What CAD data refers to as “nature codes” (e.g., ILBURN, ASSIST, THEFT), however, are what policies and the report objectives refer to as call types. Because CAD is essential to call typology—the combination of call type and nature codes—for clarity, MCP suggests using the term *nature code* to reference a situation or event requiring services (e.g., ILBURN, ASSIST, THEFT) and reserving *call type* to reference the service categories (i.e., F, M, and P).

2.1.1 Typology

Using the current call *typology* is not necessarily ineffective and remains the way CAD systems are programmed. However, relying on traditional or legacy nature codes to adequately serve the broad spectrum of modern situations goes beyond the original intent. ECCs continuously need to redefine, add, or delete nature codes for situations that could involve threats resulting in life, property, and environmental loss (real emergency in the traditional sense) as real-world conditions change or jurisdictional policy dictates. In contrast, the expectation of managing the broad spectrum of societal challenges (e.g., unwanted subject, welfare check, suspicious person) continues to evolve over time and, as a result, has congested the system—thereby making its response ineffective.

Simply put, ECCs are trying to apply tools and constructs—developed to handle what is perceived as the traditional “real emergency” requiring fire, medical, or police response—to the need and prevalence of alternative responses. While the industry may have “always done it this way,” a call for transformational change has gripped the nation, necessitating a new approach. The use of traditional call typing (F, M, P) and nature

²³ <https://www.merriam-webster.com/dictionary/typology#:~:text=%3A%20study%20of%20or%20analysis%20or,typologist>

code-based unit recommendations that only include fire, medical, or police units for call allocation no longer meets the modern public's expectations for adequate response and standards of care.

While there are some standard nature code recommendations, they are typically for CAD-to-CAD²⁴ communications and are not meant to be prescriptive to agencies. In most instances, MCP has found that it is not necessarily the call types or nature codes but rather the policies behind the call types and nature codes. Existing policies often are too prescriptive, and responses favor traditional unit allocation recommendations programmed into CAD because they were the only options available until recent years. However, this must be balanced because to break or deviate from policy or provide a policy that allows too much discretion exposes jurisdictions and staff to risk. For this prevailing perception or mentality to change, clearly defined policy and CAD unit recommendations that allow telecommunicators to override and better select the response or referral to fit the specific circumstance(s) will be required.

2.1.2 Adequate Response

Defining adequate response based on capturing a caller's moment in time, applying a "nature code" to it, and allocating resources based on that nature code has, as public expectations have changed, demonstrated itself to be problematic. Public expectations and their definitions of adequate response have changed over time, requiring new responses to the public's requests for service.

By general definition, an *adequate response* is a response that provides the most appropriate service or information. When public safety comes into play, the definition of adequate response is significantly more complicated—an infinite number of variables are not predictable. The public's expectation of adequate response when a real emergency occurs is that the public safety system will react swiftly.

When asked if the community should be offered more service options besides fire, medical and police, 57% of respondents agreed with this statement, 25% felt additional services were not needed, and 18% were neutral on the subject—suggesting that the City is going in the right direction with alternative programs. (See Appendix B)

While individual perspectives and perceptions define an emergency, MCP has encountered various definitions²⁵ ²⁶ ²⁷, which can be summarized as follows: Regardless of whose perspective or perception it is (caller or responder), "real emergencies" are in-progress events that pose an immediate danger to life, property, or the environment²⁸ that will more than likely result in the loss of life or destruction of property or that threatens one's physiological or safety needs if intervention by trained responders does not occur as close to the time of occurrence as possible.

From an operational perspective, what traditionally drives the definition of adequate response are industry standards, terms, and metrics associated with time stamps through the lifecycle of a call for service (e.g., call answer time, call entry to dispatch, dispatch to turnout, on scene, and patient contact²⁹). Benchmarks related to

²⁴ https://www.911.gov/assets/NHTSA_CAD_Current_Status_of_CAD_Interoperability_Final_29July2022.pdf

²⁵ "UK Government Advice on Definition of an Emergency". An emergency is an urgent, unexpected, and usually dangerous situation that poses an immediate risk to health, life, property, or environment and requires immediate action.

²⁶ [Emergency Definition & Meaning - Merriam-Webster](#). Unforeseen combination of circumstances or the resulting state that calls for immediate action.

²⁷ An acute injury or illness that poses an immediate risk to a person's life or long-term health, sometimes referred to as a situation risking "life or limb".

²⁸ Examples of environmental loss include forest fires and hazardous chemical spills.

²⁹ [NFPA 1225: Standard for Emergency Services Communications](#)

complaints and, in more recent years, direct polling of the community to measure satisfaction with response times have also played a factor.

As the definition of real emergencies relates to adequate response, we can see how individual expectations evolve across a continuum and changes the definition of adequate response over time. This is the genus of EMD, which provides zero-minute response time³⁰ medical assistance, the emergence of nurse navigation programs, and the call for changes in how public safety responds to the needs of those seeking mental health services.

2.2 Call Allocation (Receipt, Assessment, Classification, and Triage)

This section provides an analysis of the public safety response continuum that begins at BOEC and ends with resources being allocated and dispatched to requests for service and its relationship with typology and adequate response.

2.2.1 Receiving Calls for Service

Calls for service can be described as reporting parties that have accessed PSAPs by using established public numbers or methods requesting service. There are four ways to contact BOEC: 911 voice, text-to-911, 10-digit emergency lines³¹, and 10-digit non-emergency lines³². Contract or allied agencies such as TriMet Control, Portland International Airport (PDX) control towers, and those that have direct primary radio access to BOEC dispatchers (police, sheriff, ambulances, and fire units) can also request a call for service via a “priority” line.

When calling the non-emergency number, callers are placed in the call holding queue, and a recording advises that if the call volume exceeds the number of available (technical) phone lines, the caller will be disconnected and to call back to try again. It can be assumed that callers may not call back or attempt to bypass the system by dialing 911 for their non-emergency requests.

Each law enforcement³³ agency BOEC serves has a different operational policy for the types of events it responds to or provides an

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Of the top 25 nature codes, 44% of the generated incidents (124,622) may be eligible for alternative response, which is 20% of all CAD incidents.

When examining each discipline’s top 12 nature codes, which total 42% (258,727) of the incidents dispatched, 49% (126,568) of the incidents may be eligible for an alternative response or co-response. See Appendix C)

³⁰ Since the methodology of EMD became accepted as the U.S. national standard of dispatch care and practice, EMS systems that have lagged behind appear to be in mounting jeopardy, a trend being copied internationally. The success of EMD as the standard of care in the U.S., Canada, the U.K., Austria, Italy, and Switzerland has prompted other countries to adopt EMD, to the point that the science of EMD is now generally accepted as the international standard of care and practice. A properly-trained EMD can effectively eliminate the time gap for many situations. Willing bystanders can provide first aid via telephone instructions. In fact, callers increasingly expect to be coached in this way... This concept, trademarked as the Zero-Minute Response, is changing the complexion of emergency care.

<https://cdn.emergencydispatch.org/iaed/img/how-it-works-best/Principles-of-EMD-1.pdf>

³¹ Per BOEC Policy 5.001.2 Emergency 10-Digit Call Answering: calls received on 10-digit emergency lines are generally for or from alarm companies, TriMet, Police/Fire/EMS agencies outside BOEC jurisdiction, AMR and Project Respond.

³² [Police and Fire \(Non-Emergency\) | Multnomah County \(www.multco.us\)](http://www.multco.us) - The non-emergency number serve Multnomah County Sheriff, Portland Police Bureau (PPB), and Troutdale Police. Gresham Police, PF&R and Multnomah County Rural Fire District #14 have their own non-emergency numbers.

³³ When referring to countywide services or the law enforcement profession, law enforcement is inclusive of Sheriff’s deputies and municipal police officers.

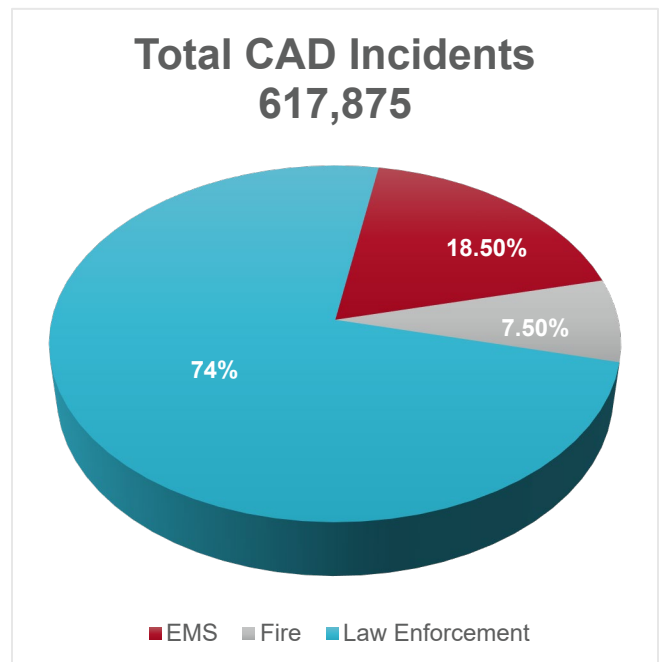
online reporting tool³⁴, which can be found on the respective websites. Online reporting is an effective alternative to traditional telephone reporting that may put the caller in a hold queue. Online reporting applications also divert calls for service that would normally be fielded in the ECC, thus reducing BOEC's call volume. If online reporting cannot be achieved by the caller and if the nature code is appropriate, a PS3 can write a police report for non-emergency situations that do not require police officer authority and do not involve potential evidence, suspects, or a crime scene³⁵.

In 2022³⁶, BOEC received 1,071,169 calls; 340,875 of those were received on non-emergency and administrative lines (32%). Based on an analysis completed by PDX 311, it is anticipated that re-directing these calls from BOEC to PDX 311 could reduce BOEC's call volume by 180,000 calls, nearly 17%³⁷. In 2022, even though PDX 311 was not operating 24 x 7, it achieved 49% of this projection.³⁸ It is anticipated that expanding PDX 311's hours in combination with increased public education, training, and policies will allow PDX 311 to manage additional services and continue to increase and relieve BOEC of non-emergency calls.

There are approximately 4,500 nature codes in the BOEC CAD system. Of the total CAD incidents (617,875), 74% were dispatched to police, 7.5% to the fire service, and 18.5% to EMS—shown in the graphic to the right.

The top 25 nature codes constitute 285,223 or 46% of the 617,875 CAD incidents dispatched. Of the top 25 for all disciplines (fire, medical, police), the general findings are as follows:

- 93% were dispatched to the police (264,724), and 7% were dispatched to the fire service (20,499).
- PSR was dispatched to 6,788 incidents (0.02%) of the total top 25.³⁹
- Three of the top five police nature codes fall into the disorder⁴⁰ call group: Suspicious Subject, Vehicle, Circumstance; Unwanted Person; and Disturbance – Priority.



³⁴ [Police Report: Online Submission - Link | Portland.gov/CaseNumber.com | Versaterm \(mycasenumber.us\)/ File a Police Report Online | City of Gresham \(greshamoregon.gov\)](#)

³⁵ [Portland Police Bureau \(PPB\) Policy 0630.26 -Public Safety Support Specialist Program / PPB PS3 Impact Report 2021 / Public Safety Support Specialists | Portland.gov](#)

³⁶ [December 2021-November 2022 Directors Report](#)

³⁷ <https://www.wweek.com/news/city/2022/04/28/mayors-budget-to-propose-beefing-up-3-1-1-capacity-in-effort-to-offload-some-non-emergency-calls-from-9-1-1-dispatchers/>

³⁸ 75,595 contacts - <https://www.portland.gov/311/documents/pdx-311-program-update-dec-2022/download>

³⁹ The data presented was during the period when PSR was approximately eight months into operations and previous to that was only in one neighborhood.

⁴⁰ [Police Dispatched Calls Dashboard | Portland.gov](#) - Call types in the "Disorder" grouping can be used to describe events that are not easy to categorize as criminal or civil based on the call data alone. These call types may not be descriptive of the potential type of crime, but rather a description of the location (e.g., "School Incident", "TriMet"), people involved (e.g. "Juvenile Problem"), or situation that may or may not be related to crime (e.g. "Suspicious", "Disturbance", "Unwanted Person"). All additional call groupings may also result in a reported crime.

- Depending on the information collected by the call-taker and based on current BOEC policy, these nature codes are allocated to armed law enforcement units, except for Suspicious Subject, Vehicle, Circumstance, where PS3s or online reporting is an option for low priorities.
- Of all the Unwanted Person incidents dispatched (25,429), 96% are low priority (Priority 4 through 7)⁴¹.
- Of all the Welfare Check incidents dispatched (23,089), 95% are low priority (Priority 4 through 7)⁴².
- Combining low-priority Unwanted Person and Welfare Check CAD incidents results in 48,518 incidents that may be candidates for alternative response.
- Disturbance – Priority, Welfare Check – Priority, Suspicious – Priority, Assault – Priority, and Theft – Priority are nature codes with priority responses that require an armed law enforcement officer to secure the scene and are not eligible for alternative response. These nature codes total 91,928, or 20% of the incidents specifically dispatched to law enforcement⁴³.
 - On calls where on-scene units have declared the scene secure, consideration should be given to requesting a resource, such as a PS3, to remain on scene until the situation is resolved and/or if a report is needed.
- While medical calls accounted for 18.5% of the 617,875 calls dispatched, no nature code rose to the top 25. However, four of EMS's top 12 calls may be eligible for alternative responders (e.g., CHAT – if not already being conducted) (see Appendix C).
 - Deferring these calls creates capacity in the 911 ambulance system for priority calls.
 - Low acuity calls for service like police requests for a Code 1 Medical and Sick Person – Unknown Complaint – No priority symptoms, and Patient Evaluation and Sick Person – Unwell/III are possibly eligible for an alternative response.
 - Low acuity calls where nature code selection is an Omega or Alpha EMD determinant, with medical authority approval, may be eligible for alternative response and, in the future, nurse navigator conferencing. There are some Bravo determinants in the EMD and EFD protocols that could also be evaluated for alternative response with proper policy and outcome review.

Not having the data to support what the nature and priorities entail for the calls received on the non-emergency and administrative lines, it could be assumed that mid-level calls received at BOEC could be considered for an alternative response. Absent that level of detail, however, we can theorize that **32%** (340,875⁴⁴) of the telephone calls received on non-emergency and administrative lines are more likely to be Priority 6 or 7, which comprise **27%** (163,892⁴⁵) of the total CAD police incidents. Based upon the Portland Police Bureau (PPB) priority

⁴¹ Priority 4, 6, and 7 in the December 2021 to November 2022 CAD extract data set.

⁴² Ibid.

⁴³ Calls specifically dispatched to police equal 457,318 (December 2021 to November 2022 CAD extract data set).

⁴⁴ BOEC Directors report December 2021 to November 2022 Workload Call Volume

⁴⁵ December 2021 to November 2022 CAD extract data – Police Priority 6 and 7 Incidents make up 27% of the total CAD incidents processed (Priority 6 and 7 calls = 163,892 of the 617,875 CAD Incidents⁴⁶)

https://cdn.ymaws.com/www.nena.org/resource/resmgr/standards/nena-sta-020.1-2020_911_call.pdf

definitions, it can be further theorized that a significant percentage of these CAD incidents are capable of utilizing alternative resources rather than a traditional response.

Estimated Eligible Alternative Response Goal

- 32% = non-emergency and administrative telephone call volume
- 27% = Priority 6 and 7 police CAD incidents
- 31% = survey responses indicating police have a role in presented scenarios
- 41% = survey responses indicating alternative responders have a role in presented scenarios
- 17% = percentage of calls that 311 anticipates diverting from BOEC
- 20% = of all CAD incidents may be eligible for alternative response
- 44% = of the top 25 CAD incidents may be eligible for alternative response
- 49% = average across the top 12 CAD incidents for all disciplines that may be eligible for an alternative response

The average across call, CAD, survey, and PDX 311 data suggests an initial **33% eligibility goal** for alternative response.

Note: The 10% survey delta in opinions of respondents identifying expectations for response may include a goal for co-response.

However, when seeking to determine an exact percentage of calls eligible for alternative response, because of the nature of public safety, it cannot be presumed that 32% of calls or 27% of CAD incidents are automatically eligible for alternative response. This is because, regardless of the source, 1.21% (1,976) of the CAD incidents initially assigned a Priority 6 or 7 were upgraded to a final priority of a 1 through 4, indicating there was likely a significant on-scene change that increased the level of risk only determinable after field response. Conversely, 8.58% (14,063) of the total CAD incidents had the reverse occur—the final priority was downgraded from a Priority 1 through 4 to a Priority 6 or 7. Errors in either direction can have devastating consequences, reinforcing the need to constantly assess variables to mitigate the risk inherent in public safety.

Interestingly, in alignment with this analysis, the results of questions 6 through 19 of the community survey, when analyzed, found the following: When categorized by traditional (fire, medical, police), PDX 311 (City staff), alternative responders (CHAT, Community Connect, Mental Health Professional, PS3, and PSR), self-managed, and other, 40.89% of the responses to the scenarios indicated that a traditional responder, whether as a sole resource or part of a co-response, had a role in the situation. Of that 40.89%, the police had a role in 31.30% of those instances.

Exhibit A – Call Process Diagram

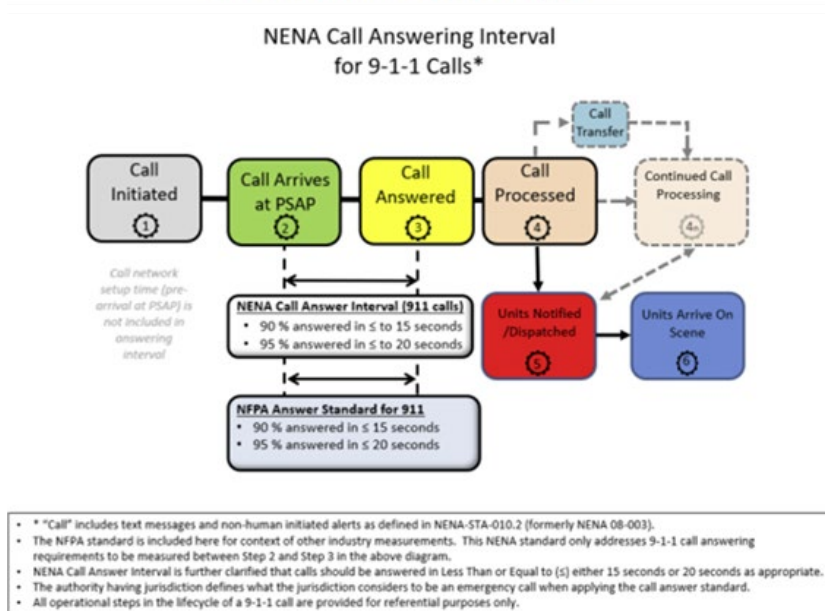


Figure 1: NENA Call Process Diagram

- Alternative responders collectively had almost an identical percentage of involvement, with **40.92%**. PS3 and PSR were also referred to almost identically, each with 11.93% and 11.47%, respectively.
- This was followed by citizens opting for a self-managed response by using online resources, talking directly with someone on the phone, or addressing the situation themselves in 9.38% of the scenarios.

BOEC has adopted the industry standard as found in the *NENA Standard for 9-1-1 Call Processing*⁴⁶. Of note is BOEC's improved average call answering time from the first quarter of 2022 compared to the first quarter of 2023. Of the 120,026 911 calls received in the first quarter of 2022, 36% were answered in 15 seconds and 41% were answered in 20 seconds. Of the 126,735 911 calls received in the first quarter of 2023, 45% were answered in 15 seconds and 50% were answered in 20 seconds.⁴⁷

It was reported that due to many services mirroring one another in the Portland metropolitan statistical area (MSA), callers are confused as to which resource would best meet their needs.

Conferencing and/or transferring often indicates that the caller did not reach the (correct) service intended. The figure above illustrates that when a call is received, and it is determined that the caller cannot be assisted by the ECC, the caller may be transferred, or the call is terminated after advising the caller of the appropriate resource or referral.

Transferring is common in ECCs when 911 calls are (technically) misdirected to them⁴⁸ or the ECC is not the correct resource to resolve the issue at hand⁴⁹. Staff indicated that there is frustration—on the part of both the caller and call-taker—when it is determined that BOEC is not the right resource, and they must transfer or refer the caller to the right resource. Staff empathizes with a caller who has been on hold for a substantial time, only to find out that the resource or direction was not a resolution, which results in the caller going back through the 911 system again. In addition to transferring, there are situations where call-takers must (technically) conference the caller with another resource that provides the best level of care. Conferencing ensures that the caller is safely connected with the other resource. Conferencing is common when, for example, translation services are required⁵⁰ or when persons in a mental health crisis are deemed safe to be connected with the County's Behavioral Health Call Center (BHCC) crisis line.

Accessing the desired public safety, alternative and community resources directly, as opposed to having to access through 911 was expressed by 65% of the community survey respondents. Interestingly, some of these services (i.e., CHAT and PSR programs) are within the PF&R, which is a traditional first response resource, but provides alternate responses/resources. This suggests alternate ways to access these resources may ease congestion of BOEC's call volume and provide the caller with the resource they need. (See Appendix B)

2.2.2 Assessing and Classifying Calls for Service

Call-takers obtain, at a minimum, basic caller information⁵¹, which assists in determining the nature code from nearly 4,500 unique or derivatives of BOEC nature code(s) programmed into CAD. When selected, the call for service is electronically routed in the CAD system to the assigned dispatcher while the call-taker continues to

⁴⁶ https://cdn.ymaws.com/www.nena.org/resource/resmgr/standards/nena-sta-020.1-2020_911_call.pdf

⁴⁷ BOEC Directors Report Feb-April 2022 and Feb-April 2023

⁴⁸ BOEC Policy 5.001.2 911 Call Answering – Section VIII

⁴⁹ BOEC Call Answering Policy 5.001.2 Transferring 911 Calls for Other Jurisdiction Response

⁵⁰ BOEC Policy 5.011 Language Service

⁵¹ BOEC Policy 5.001.2 911 Call Answering – Basic information includes determining address and its verification, location type (house, business/QAs, apartment) call back number and what the caller is reporting.

enter supplemental call details (if needed). The dispatcher then allocates the assigned resource to the incident, which is generally conducted via voice broadcast over the public safety radio system or, per policy, can be read and acknowledged on mobile devices. This incident creation is typical of ECCs throughout the country.

After the basic questions have been asked and answered, specific call screening questions are asked to obtain a deeper sense of prearrival situational awareness for field responders and, in the case of EMD and EFD protocols, the questions further refine the response. There are two forms of asking these questions: freelancing (e.g., asking the questions that come to mind based on call-taker and dispatcher training and experience) or protocol usage. BOEC uses EMD and EFD ProQA protocol software provided by Priority Dispatch Corporation (PDC), which was implemented in May 2021. The Medical Priority Dispatch System (MPDS®) software—EMD—provides 36 protocols⁵², each prompting call-takers to ask scripted questions. The answers provided by the caller translate into a specific nature code (or chief complaint). The nature code has a pre-assigned priority code, which prompts a pre-programmed resource recommendation dictated by the local response assignment for each agency that responds⁵³. The Fire Priority Dispatch System (FPDS®)—EFD—operates in the same fashion.

Similar but conflicting information was received regarding the plan for EMD protocol software implementation. Several sources advised that the approach was to install the software as received from the vendor and, after a year's use, locally configure and customize the software to correspond to BOEC's existing EMS response system; others advised the approach was to follow the vendor's recommendation to align local responses as closely as possible to the legacy system and evaluate in six months. While it is more typical for ECCs to take the latter approach to configure and customize prior to implementation so that the protocol software closely aligns with first-response practices and policy, BOEC's implementation resulted in mixed reactions that included resource allocation complaints, questionable nature code selections, and system unreliability. The reputations of EMD and EFD have gained negative attention within the Portland responder community, to the point where responders cited call-taking and allocation errors on the protocols.

Protocol revisions that outline significant change(s) are published by the vendor, and the changes require the agency to update its response configurations, restricted settings, and special definitions. In October 2022, Protocol 25, Psychiatric/Mental Health Conditions/Suicide Attempt/Abnormal Behavior, was significantly revised. BOEC has yet to implement the updated version of Protocol 25, as more changes were being made to it.

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There are three protocols or protocol enhancements in the suite of vendor offerings that are not used by BOEC: EMHD, EPD, and nurse navigation.

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The EMHD protocol enhancement is a tool offered by a third-party vendor, 911 Training Institute⁵⁴, which is working closely with PDC. The EMHD protocol provides a bridge (in the form of paper, Adobe PDF, or software) for low-acuity persons reporting they are in crisis; using a more robust questioning sequence allows call-takers to determine the most appropriate level of care available

⁵² [Medical Priority Dispatch System - IAED \(emergencydispatch.org\)](https://www.iaed.org/emergencydispatch.org)

⁵³ BOEC Policy 4.091 Local Response Assignment Plan

⁵⁴ www.911Training.net

in their response system. Per the provider, the EMHD Guide includes a robust protocol that assesses more than suicide—self-injurious behavior, potential homicide, domestic violence, non-high-risk mental struggles, and when a caller denies all the above yet is in serious distress. EMHD assures that callers in distress of any nature (when not shunted to EMD for a specific medical emergency) feel heard, are carefully assessed, and are directed to additional support depending on what the ECC has set up by policy with their field units, 988, mental health agencies (in-house, mobile units) or just traditional wellbeing checks. The goal is for all callers feeling and truly being well cared for so that the ECC has done its due diligence by best practice standards and in the public's eye. If the EMHD system is implemented, the training that telecommunicators receive will provide them with the tools to use when talking with third-party callers, enhancing their ability to manage crisis calls. While this is not used at BOEC, it is a component of the 911 call-taking system that should be considered for the existing BOEC configuration and is discussed in Section 3.2.

BOEC is partnering with BHCC in a pilot program that places a mental health social worker in the ECC. It is hopeful that this program will develop into a service model that provides more immediate crisis counseling to those in need. However, calls are still transferred through BHCC to the social worker, which is how the system works, even if a social worker is not physically in the ECC. While BOEC is tracking the number of calls transferred to BHCC, the ability to eliminate the transfer and risk associated with call transfers will contribute to determining the effectiveness of the pilot. On those occasions when the onsite social worker is busy, calls, when transferred, will be handled at BHCC using normal processing.

Unlike fire and medical, law enforcement relies on call screening in accordance with user agency policies and BOEC SOPs⁵⁵ rather than scripted protocols. BOEC and its partners have identified 79 specific policies that reflect the duties of the call-taker and dispatcher when nature codes are used and another 90 supporting internal SOPs that guide BOEC staff through less frequent high-risk situations. Portland is not unique in regard to not using EPD. PDC, which provides BOEC with EMD and EFD software (ProQA) and manual card systems, also has EPD software. EPD is controversial with many law enforcement agencies—some agencies find the protocols helpful as the structure reportedly improves training outcomes and consistency of questions and services provided by telecommunicators, yet others report that dispatch and field personnel find the protocols too prescriptive and time-consuming, negatively impacting officer safety and response times. Considerable internal discussion is warranted if BOEC considers implementing EPD, which also requires dedicated staff and extraordinary time and effort, including 24 hours of training for each ECC employee for certification. When assessing priorities, BOEC determined that implementing another protocol when staffing is already challenged would not be effective. As it relates to supporting alternative response call allocation, EPD provides Protocol 127, Suicidal Person/Attempted Suicide, to assist the call-taker.

Triaging, nature coding, and call priority are highly intertwined. When a protocol is used to guide the call-taker under what can be highly stressful and difficult conversations, it has been proven that the information collected is concise (relating to the nature being described), efficient (asking each question in a prescribed sequence), and effective (in administering pre-arrival and post-dispatch instructions). In the absence of protocols, policies and quick-at-hand call-taker resources can achieve effective and pertinent call information.

2.2.3 Triaging Calls for Service

Call triaging, commonly referred to in policy as prioritization (see Appendix D), can be defined as sorting calls based on a level of urgency⁵⁶. BOEC has seven frequently used priority codes that range from “Occurring/Imminent Danger to Life” to “As Available Response.” Priority levels are set by agencies across the

⁵⁵ BOEC Policy 5.002 Call Type and Protocol Selection

⁵⁶ Definition: calling for immediate attention - <https://www.merriam-webster.com/dictionary/urgent>

country, including those served by BOEC. It is not uncommon to see eight priorities; however, BOEC’s priority levels are unique in that they tie the nature code and time of occurrence to the degree of urgency. This can complicate how calls are stacked in the queue and when viewed on a mobile device. The following are examples of priority coupled with nature codes:

- Priority 1 (P1) – (ASSLTP) Priority 1 (P1) = critically injured by assault. (ASSLTP) Priority 2 (P2) = physical assault in progress or just occurred.
 - The only difference is the use of critical, which in call-taking is an assaulted person’s degree of injury (loss of consciousness, not breathing, cardiac arrest, or traumatic injury resulting in uncontrolled bleeding). These factors are generally not known until after the nature code has been identified [ASSLTP].
- Priority 2 (P2) – States a “suicidal (person)” and does not describe the urgency level, such as the subject is armed with a gun and is threatening self-infliction, while a subject brandishing a visible weapon at people in a threatening manner qualifies as a P1 call.
- Priority 3 (P3) – An armed robbery that just occurred (within the last 15 minutes/5 minutes if on foot) is in the same category as an “officer needs help,” which are inconsistent times and proximity.

In the examples cited above, the levels of urgency are tied to the time proximity of an event. To easily identify the time element involved in priorities, it is a common practice to use suffixes at the end of a nature code, such as IP (in progress), JO (just occurred), and C (cold).

2.2.4 Call Resource Allocation

Resource allocation can be described as the ability, generally through CAD, to recommend a field unit or resource, where the dispatcher either accepts the recommendation or assigns another unit to the incident. Once the call is processed, there are several options for allocating resources. Optimally, to aid in call allocation and resource management, CAD systems are preprogrammed with priority defaults that aid in the recommendation of what type(s) of unit(s) should respond and how many based on the nature code. However, when mutual aid resources⁵⁷ that are typically not managed by the ECC are needed, the process of connecting with those resources can be more time-consuming.

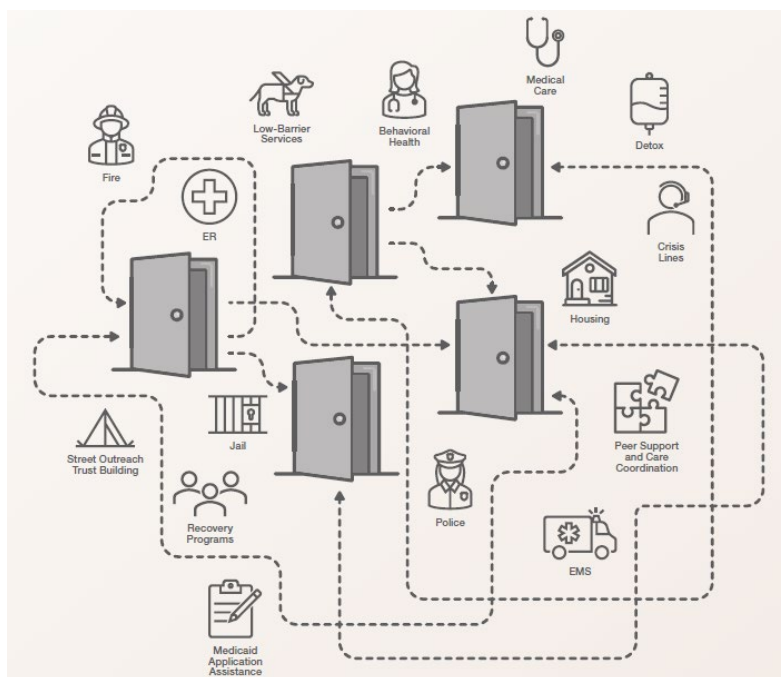


Figure 2: Portland Crisis System

Current State: Uncoordinated – No “wrong door,” but no clear path to response, recovery, and restoration

⁵⁷ Mutual aid resources can be described as those entities that are not initially recommended and dispatched by an ECC but are either dispatched upon request by on-scene resources or part of plan or policy where their response is not immediate.

The Portland MSA is rich with service agencies and resources to address human needs and societal challenges. When calling 911, and the call-taker is trying to determine the need, particularly during volatile or emergency-to-urgent situations, matching the caller's situation or resource needs with one of more than 60⁵⁸ identified service agencies in real-time is not only complicated but is inefficient and ineffective. Trying to integrate these service agencies as preprogrammed alternative responders in the 911 system requires an entity, like Portland's Community Safety Division (CSD), to coordinate and facilitate the purpose of these agencies, their scope of practice, availability, and whether they can be considered as primary and/or an alternative responder to be dispatched and, for safety purposes, accounted for when needed, either by 911, 311, or others. Until this effort—the task of having the “direct” dispatch of more appropriate resources to a citizen in need through 911—is undertaken, response will take the current form of traditional dispatched resources.

In general, when a call is entered into the CAD system, the call type and nature code drive the pre-programmed CAD recommendation for the type and number of units or resources. CAD recommendations can be overridden by field supervisors who monitor pending calls, a responder's location in proximity to the incident, and other variables. Receipt of a new incident forces re-prioritization of all open calls. Reallocating generally occurs when re-assigning field units to the highest priority calls (P1–P3) in the queue, leaving the remaining incidents for non-urgent assignment to appropriate responders or remaining pending until resource(s) become available. Even when a call has been dispatched, who responds can be altered. For example, the PF&R's CHAT program monitors the CAD, and when a low-priority call that meets its response criteria is dispatched, CHAT personnel advise the dispatcher that they will respond, which preempts the originally assigned unit.

The community survey rendered mixed results when asked “I trust the 911 Call-taker, with the appropriate training, to determine the proper responder for my situation, even if it's not who I initially requested.” Support for this sentiment was 41%, while 32% do not share the same confidence. When adding the neutral 27% to those that disagreed, it suggests that perhaps, the public is unsure of the level of training, experience, and expertise that is obtained by 911 professionals and their knowledge of what resources best fit what is being reported. (See Appendix B)

Similarly, if, for example, there are no PS3s⁵⁹ on duty in the East Precinct for a Priority 6 call and a sworn officer is assigned, the field supervisor can request that the dispatcher change the assignment, allowing the sworn officer to be assigned to a more appropriate call and the Priority 6 will pend (queue) for a PS3. While redirecting or reallocating calls is a common and best practice in law enforcement agencies, particularly those with high call volume, first response agencies should have a well-defined contingency plan when resources are low to non-existent. BOEC user agencies refer to this as a “Local Response Assignment Plan,”⁶⁰ which states that “response assignment plans are approved by BOEC User Agencies and in the case of medical responses, in cooperation with Multnomah County Emergency Medical Services. User Agencies have the authority to change their response configurations without consulting or getting approval from the Dispatch Steering Committee (DSC) ...”

Reallocating response resources based on call priority is the most effective method of balancing scarce resources versus calls for service demand in a minute-to-minute dynamic deployment or allocation plan; however, the resources that eventually arrive at a call for service can conflict with the public's expectations.

⁵⁸ Per inventory performed by MCP

⁵⁹ PS3 can be dispatched directly either verbally through the radio system or electronically, receiving the CFS on the Mobile Device

⁶⁰ BOEC Policy 4.091 Local Response Assignment Plan

In the community survey, 69% of the respondents agreed or strongly agreed when asked if “A police officer is the only option for calls related to activity that may be defined as criminal.” This suggests that when a crime is committed alternative responders are not what the public expects for a response. (See Appendix B)

Reallocating tends not to occur in the fire service or EMS unless call demand exceeds the number of resources available and no other contingencies exist.

When there are no ambulances available, this is referred to as Level 0⁶¹. When this occurs, “it is the System Status Plan Coordinator’s (SSPC) responsibility to provide additional units for the system at Level Zero, and the ambulance contractor (American Medical Response [AMR]) SSPC is responsible for ensuring sufficient resources are available to cover response for Multnomah County.”⁶² While low ambulance resources impact the contractor’s ability to provide services, it also

impacts the fire service. When Level 0 is reached, fire units respond to medical incidents when the patient must be transported to a hospital, but responders and the patient must wait until an ambulance becomes available and is dispatched to the call. Calls are dispatched in the following order:

- Highest Priority – Most serious call by call type and remarks (e.g., CH1 with CPR⁶³ in progress)
- Medium Priority – Oldest call without an ambulance assigned
- Lowest Priority – Code 1 transports will not consider out-of-county or non-contract ambulance resources “available for dispatch” until they are logged into the system⁶⁴

Community sentiments were nearly equally divided with 45% agreeing with waiting for the right response and 42% disagreeing. With a near-even division on this issue, and adding the neutral 13%, more community education is needed regarding how calls are prioritized, who is available at the time of the caller’s request, and who with the proper legal authority is appropriate to respond or how best the situation can be handled (i.e., other methods of reporting should be considered). (See Appendix B)

Park Rangers

The relationship between the Bureau of Parks and Recreation and BOEC may not be well understood by stakeholders. Park Rangers patrol 500 City-owned parks of approximately 12,000 acres while being monitored but not dispatched by BOEC fire dispatchers. Park rangers have their own dispatchers that work Monday through Friday, 7:00 a.m. to 5:30 p.m.⁶⁵ It was further reported that even though each park ranger is issued a portable radio on the City’s public safety radio system, they are denied use of an active dispatch channel to not interfere with the fire unit to dispatch communications. While rangers are permitted to operate on a non-fire radio channel that is assigned to BOEC fire dispatch, it is reported that it is not actively monitored or, as reported by some staff, not monitored at all. There is some indication that the park rangers may be requesting assistance on police channels, further adding to the referenced misunderstanding between stakeholders. With no response on the radio channel, they must resort to using their cell phones to request services from BOEC. The configuration of this communication can increase park ranger risk and put community lives in danger. For example, a park ranger with a subject experiencing respiratory arrest must call 911 or the 10-digit emergency line instead of

⁶¹ BOEC Policy 6.066 Reduced Service Level

⁶² Ibid

⁶³ Cardiopulmonary resuscitation

⁶⁴ BOEC Policy 6.066 Reduced Service Level

⁶⁵ Park dispatch is seeking to expand and dispatch into the weekend.

being able to use a primary dispatch channel. It was reported that park rangers had experienced long call wait times, delaying essential patient care.

Overall, the existing communication configuration substantially increases park ranger risk as they are identified by City uniform and marked vehicles without immediate radio communication when they are confronted with an emergency or potentially volatile situation; the City is duplicating dispatch services through Parks dispatch, which is struggling, like BOEC, to staff the department.

2.2.5 Justification for Change

As this analysis has demonstrated, there are many key stakeholders in Portland's dynamic and robust public safety ecosystem. Each stakeholder in the 911 call continuum has a role to play, and when changes are made to any part of the continuum, it can and most likely will affect all. Considering 911 has traditionally been at the beginning of the continuum, how effective and efficient operations and the technology used in its service delivery set the stage for those downstream.

The need for central coordination of the multitude of service programs/resources that exist in the Portland MSA necessitates a change to help minimize callers cycling through the system to find resolution after initially accessing 911, PDX 311, 211, or any other services and being told they are not the right agency to assist. Having an abundance of service agencies in the area coupled with the changing landscape of *who is best to go to calls and when* requires robust program oversight to carefully move alternative resource recommendations into the response system.

Having nearly 4,500 nature codes and their derivatives, many tied directly to EMD and EFD protocols, calls for change and establishing agreed-upon criteria that can be used as a tool to consistently assess nature codes as alternative resources such as PSR, PS3, CHAT, Community Connect, and even PDX 311 after its resource availability and training to handle more events than they do presently is expanded.

In response, while there is a justification for further change beyond the considerable initiatives the City has already undertaken, the changes articulated in Section 3 focus on increasing call allocation toward alternative responses into existing programs rather than suggesting a new set of nature codes.

Collectively, this demonstrates a need for change. Change that is rooted in the need to leverage diversity, experiences, education, and shared passion for the mission of making Portland safer by exploring new ways to respond to behavioral, mental health and other community-based requests for services in ways that are personalized to the needs of community members.

3 Future Opportunities, Considerations, and Recommendations for Alternative Call Allocation

The future opportunities, considerations, and recommendations proposed in this section are focused on helping the CSD meet its responsibilities for building alternative emergency service models, sending the right responder to the right call at the right time, and reducing the need for public safety response.

While there are siloed examples in the ECC environment, and numerous unique pilots around the country, there is no playbook or a one-size-fits-all solution for what the country is facing⁶⁶. What the Portland-specific data shows, and the communities (including responders) are insisting upon and expecting, does not align with how things “have always been done.” This could be challenging for some to accept, but like other evolutions in the industry since 911 began, it is important to listen and find ways to safely address community needs.

In response to those expectations, MCP proposes a **Respond – Resolve – Restore** approach to alternatively allocate calls for service (i.e., incidents), who responds, and the impact this approach has on responders and the community. The first step is to shift the collaborative mindset toward measuring workflow efficiencies as they relate to having the right resource respond at a caller’s first contact and driving that mindset away from focusing solely on the caller or incident outcomes. While outside the scope of this study, through these efficiencies, the foundation is set for the right resources to help resolve and ultimately restore the situation, including establishing workflows and metrics for measuring long-term success and the public’s trust. While restoration could take minutes, months, or years, those in need would be on an upward trajectory as it applies to individual community-related service needs. Each step of the way integrates trauma-informed care and progressive steps toward harm reduction.

The approach presented below is comprised of two symbiotic elements—first contact response (FCR) and community services response network (CSRN). While FCR is a constant, the mechanism for accessing the alternative resources allocated to the CSRN can be accomplished through either a two N-number system or a three N-number system (e.g., 911, 311, 211, etc.). As expected, there are benefits and challenges City and public safety leaders need to consider when deciding which access system to adopt, not the least of which is the current congestion of the 911 system, delays in call answer times, and the voice of the communities asking for a three-number system. There is a lack of trust in BOEC to discern the need for and allocate alternative response resources over traditional resources. Ultimately, the CRSN needs to exist to improve the coordination, access, and safety of alternative resources. The decisions that need to be made are primarily related to management oversight and operational efficiencies.

3.1 First Contact Response

Based on understanding the complexities of defining *adequate response*, limitations of using traditional time stamp-related benchmarks, changes in public expectations calling for a paradigm shift, preliminary review of the data provided, information received during KIIs, focus groups, and listening sessions, and complementary to traditional benchmarks, MCP proposes a modern concept of *First Contact Response (FCR)* that promotes timeliness and equitability applied across all calls for service through policy setting of the expectation that an individual seeking assistance would receive an adequate response on first contact (if electronic) or without being

While considerable, the future opportunities, considerations, and recommendations, do not advocate for an entire new set of call types or nature codes. Rather the recommendations suggest modifications to address call type, nature code, priority levels and policy and metric gaps intended to improve coordination of the changes in service capabilities and public expectations of adequate response.

⁶⁶ Although considered controversial by many in the 911 industry, Chapter 7 of the Blueprint for Transformation published by the University of Chicago Health Lab under the Transform 911 initiative provides a compilation of response options and case studies focused on “ensuring the right response at the right time” and the creation of “a diverse ecosystem of responses that reduces the reliance on the police by default”. <https://www.transform911.org/blueprint/chapter-7-response/>

required to talk to more than two people. While the definition of adequate response does not necessarily change, FCR approaches service delivery and call allocation differently.

- Unlike traditional approaches, FCR is **focused on measurable processes and procedural improvements** rather than outcomes, which are not always predictable (e.g., an emergency medical technician [EMT]) performs textbook CPR, but the patient still dies; a crisis counselor safely delivers a person in crisis to a detox or de-escalation center and the next day the person still overdoses or commits suicide). As a metric, FCR would measure the percentage of contacts or calls that provide an adequate response as defined above.
- This approach seeks to engage in **trauma-informed care** and **harm reduction** from the point of entry (door) to “services” regardless of how the request enters the “service network” (i.e., 911, public safety non-emergency line, PDX 311, or CSRN). At its foundation, this means someone seeking assistance does not have to talk to more than two people⁶⁷ to receive the right response or service (City responders or otherwise) for their situation and provide safety for all involved.
- FCR is committed to call flow efficiency and consistency that includes a pathway to a **known landing point/space** for persons seeking assistance or services.
 - These pathways seek to provide voluntary opportunities (intercepts⁶⁸) to connect those needing assistance with services capable of actively taking steps that can lead to resolution and restoration (i.e., an adequate response).
- In the future, the FCR approach combined with the CSRN reduces the plethora of services and their access points into no more than two or three (911 and 311, or 911, 311 and a new, repurposed, supplemented number assigned to the CSRN) easily rememberable connection points that are accessible 24 x 7.
 - Programs such as those that exist in Albuquerque, New Mexico,⁶⁹ are showing early success with a two-number model (911 and 311); however, based on feedback received from the community, a three-number model may be more successful in Portland.

Regardless of the system selected, meeting FCR goals and metrics is expected to focus on defining the true impact of the process and procedural improvements to the preservation of life and property, and one’s overall **community-based service needs**. To meet established goals and requirements will require recommendations (Section 3.4) focused on the following:

- **A commitment to gradual progress** as the long-term success of FCR will be reliant upon the following:
 - A robust organizational and public education campaign.
 - Future 24 x 7 availability of alternative resources (e.g., PDX 311, 988, PSR, PS3, CHAT, Community Connect, etc.) as or if demand increases.

⁶⁷ An example from the Florida E-911 Plan that can be applied across the public safety ecosystem for all sources of call states: “With a transferred call, the caller must never be procedurally required to talk with more than two people: the primary ECC 911 Call-taker and the Call-taker at the remote agency. There shall be no inherent double transfers. All 911 calls transferred by a ECC must be identified at the receiving point as an emergency 911 call. With a transferred call, the Call-taker shall inform the caller that the call is about to be transferred”; set forth in Rule 60FF-6.005(5)(b), Florida Administrative Code 53 set forth in Rule 60FF-6.005(5)(b)1., Florida Administrative Code 54 set forth in Rule 60FF-6.005(5)(b)2., Florida Administrative Code

⁶⁸ Intercept 0-1 Sequential Intercept Model Mapping Report for Multnomah County, Oregon

⁶⁹ **Albuquerque Community Safety — City of Albuquerque** <https://www.cabq.gov/acs>

- Readily available criteria-based tools (e.g., protocols, policies, embedded CAD recommendation automated guidelines) so anyone, including BOEC staff, can easily identify and reach the services they want or need versus the traditional defaults.
- **Centralized coordination and assembly** of existing services into the intercept lanes. Reduction of the more than 60 numbers, service organizations, and respective websites into no more than two or three access point numbers.
 - Centralized coordination, through BOEC, the CSD, or another coordination entity, will require that existing and new services go through an organized and prescribed workflow to be included in the CSRN.
 - This can contribute to improving caller and responder decision-making, keeping FCR workflows efficient, and eliminating multiple program cost duplication.

A benefit of this approach is indicated in studies that show ECCs are getting busier with the number of calls received and that, often, turnover is due to the workload expected to be performed when already short-staffed. By routing calls where they need to go, the number of calls can be reduced, in turn retaining more employees and adding capacity back into the 911 system⁷⁰.

It is unrealistic to think that implementing this recommendation will stop calls not requiring traditional services from entering the 911 system. The intent is—along with the implementation of coordinated options, ongoing system maturity, and public education—to reduce the overall number of 911 calls, making these events fewer, with a policy to support the opportunity to move callers to other resources.

Resolving someone’s emergency or non-emergency situation begins with meeting public safety needs as close to where they are occurring as possible. This includes reducing the harm that may occur from not speaking to a live person, getting transferred between agencies, or not having a path to a safe landing space that bridges the transition from response to resolve and then restoration, which mitigates (reduces) the need for repeat calls. Considering the situation details, an incident may be resolved when the responders have established, at minimum, a temporary workaround, if not a permanent solution for the issue. An example of this from a fire service perspective is the amount of water that the fire department may put on a fire, so there is no chance it will reignite, causing more damage and requiring a second response. While it may appear excessive, the result is a response that resolves the situation by putting out the fire completely the first time and establishes a path toward **restoring** the lives/property/environment to its new state following the response and resolution without delay.

3.2 Community Services and Response Network Concept of Operations

The adequate response and typology approach for FCR necessitates developing a CSRN. CSRN is a collaborative network of teams, programs, and services that specialize in providing community-based responses to calls for service in coordination with or independent of traditional fire, medical, or police response.

Based on the call typology and response matrix, this concept responds to the communities’ desire for direct access to alternative responses⁷¹ and addresses the apprehension that some have with contacting 911 while still having a path to emergency services if needed. While both systems provide professional access to emergency services where appropriate, only a three-number system would allow those that want to exercise

⁷⁰ March 14, 2023 - State of 911 Webinar

⁷¹ Community Survey – Question #3 – 65% of respondents agreed that there should be a separate phone number for direct access to alternative responders such as Portland Street Response (PSR), Community Health Assess & Treat Team (CHAT), and others. See Appendix B for further

streamlined access to resources the autonomy to request the type of response that aligns with their expectations without initially risking or dictating emergency response.

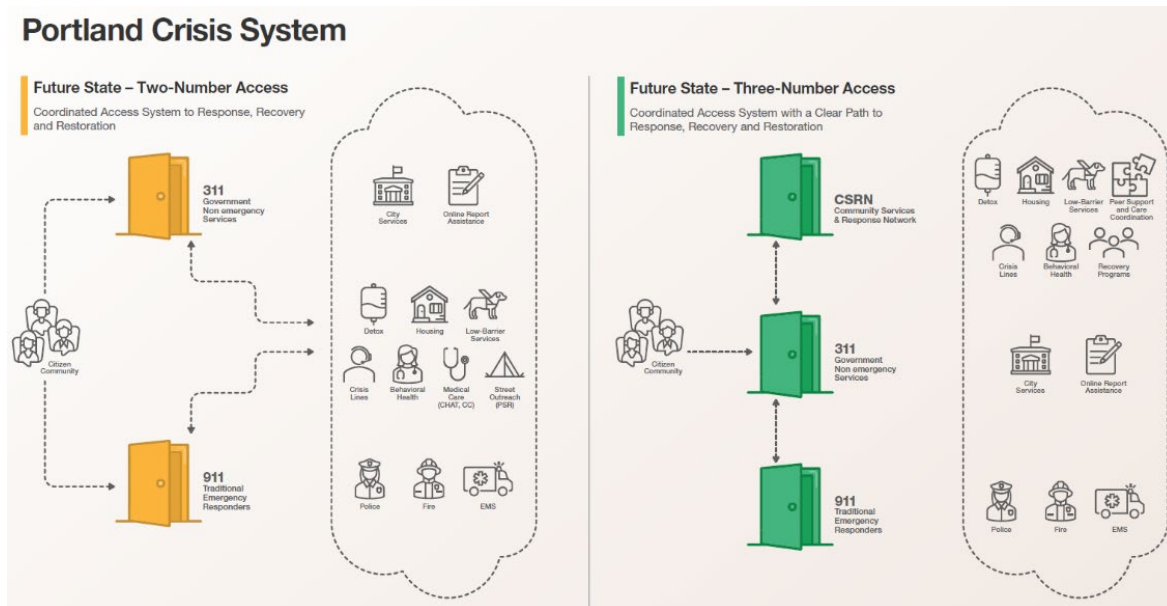


Figure 3: Crisis Response System

Future State: Coordinated access systems; paths to response, recovery, and restoration

As noted, in addition to 911 and 311⁷², MCP found there to be a plethora of numbers and acronyms of service organizations all trying to contribute to sending the right response to the right location at the right time. Through the FCR and CSRN concepts, the classification of calls begins with the community. There could be multiple ways to access each “type of service” (voice call, text, chat), but still, only two or three numbers promoted for access rather than the 60-plus entities that were identified during this study.

- Seemingly counterintuitive to reducing the number of access points that currently exist, a two-number model does not address the apprehension that the survey captured with contacting 911 or the desire expressed in the same survey to have a separate number to contact.
- Over the current system, through technology, either system may contribute to mitigating the impacts of the Hick-Hyman law⁷³ for real emergencies—time is of the essence, making inefficiencies and increased decision-making time associated with “over choice” unacceptable.
- Based on the survey results and community feedback, it is an informed assumption that a three-number system would likely result in more opportunities to exercise trauma-informed care and advance harm reduction than a two-number system.

⁷² 311 Implementation Plan reported 137 general information city phone numbers https://www.portland.gov/sites/default/files/2020-03/311_implementationplan_november2018.pdf?_ga=2.90384479.412308833.1678713924-2056253163.1665434786&_gl=1*1sckaba*_ga*MjA1NjI1MzE2My4xNjY1NDM0Nzg2*_ga_LH28Y7114F*MTY3ODc0MTk4OS4zOS4xLjE2Nzg3NDQ1OTQuMC4wLjA

⁷³Three connection points may mitigate the impacts of the Hick-Hyman law—“the time it takes for a person to make a decision increases as the amount of possible choices increase.” <https://www.mometrix.com/academy/hicks-law/>

The three-number access approach is not advocating for a new number; rather, it suggests exploring if the opportunity and capacity exist with the current system of numbers for a number that is already providing community services and committing to promoting it for CSRN access. An example of this already exists within the City N11 system and is highlighted in the PDX 311 Implementation Plan, shown to the right. As outlined in the plan, a coordinated 911–311–211 system would create opportunities to improve service delivery across all three systems.⁷⁴

Working Together: 911 + 311 + 211

311 systems are designed to complement 911 (police, fire, and medical emergencies) and 211 (community and health services) systems.

When combined, these services provide community members with easy access to a wide range of local government and community information and services.



A 311 Program could dramatically streamline community members' phone access to local information and services.

Who to call for help



911 To reach police, fire, medical emergency response for a life-threatening emergency or when a crime is in progress

137 City hotlines 311 For City or County information and services

211 For information and connections to community health and social services

For clarity, as seen in other cities and studies, the CSRN approach should not be confused with a “community first” approach. Rather, based on study findings and the unique qualities of the Portland MSA, selecting a three-number system rather than a two-number system provides those seeking assistance with clear and defined options, ultimately reducing call volume and allowing respective agency focus: BOEC providing 911 services for life, property, and threatening environmental events, 311 for governmental services, and the CSRN number for community-based service needs. Within the concept of operations are suggested safeguards bridging PDX 311 and the CSRN to lifesaving services to promote safety.

Hypothetically, *if PDX 311 (provided with the proper training) or the CSRN had PS3s available 24 x 7*, options could also be available if 911 is called and is not the appropriate avenue. If a resident or visitor to the Portland MSA, who is not familiar with an alternative response, called 911 to report a minor incident, such as a hit and run (property damage), rather than entering this incident into CAD and sending police, no matter what time of day, the caller would be offered the following options (in an order consistent with the situation), providing a consistent approach to services and reducing confusion:

- Provide the caller with the PPB online reporting website if the caller wants to report at their convenience.
- Advise the caller of PDX 311, where they can report the incident at their convenience.
- Warm transfer the caller to PDX 311, which can help them complete the online report process with a level of support consistent with the caller's capabilities. (Note: Legally, PDX 311 cannot fill out the report for callers.)
- Enter a traffic accident call into CAD, generating a call for service for a PS3 to handle.
 - Conversely, if an interface exists between CAD and the PDX 311 ZenDesk platform, entering the traffic accident call into CAD could queue to PDX 311 instead of a PS3.

⁷⁴ [311 Implementation Plan \(portland.gov\)](https://portland.gov)

3.3 Determining Call Typology and Response Allocation

This section describes the methodology for assessing call typology and response allocation to determine if a nature code is eligible (or not) for independent CSRN resource allocation and/or a co-response with 911 and 311 resources. This approach can be applied across all nature codes and involves two steps to evaluate and build a Call Typology and Response Allocation recommendation for each nature code.



As previously discussed, in general, three main priorities are common in public safety settings:

- High Priority (P1) – Present or imminent danger to life, major property damage, and/or suspect(s) of a crime involving loss of life or serious bodily harm may be in the area and might reasonably be apprehended. This may also include major crime scene protection, missing vulnerable subjects such as juveniles, disabled persons, the elderly or at-risk persons, and/or where foul play is suspected.
- Moderate Priority (P2) – Possibility for damage to property and incidents where the suspect may be in the area, and where a crime has just occurred within the last 15 minutes or five minutes if the subject is on foot.
- Low priority (P3) – Routine response to incidents where there is no present or potential danger to life or property, a suspect is no longer in the area and a crime scene is protected.

Considering these common priorities along with the proposed FCR and CSRN approach and the analysis provided in Section 2.2, the following is proposed to address inefficiencies and challenges within the current state of call typology (call type and nature codes) and associated call allocation, including both policy and resource recommendations.

Call Typology and Response

Responses to real emergency calls, as defined previously, are not the calls in question where the **probability of life-safety exposure (PLSE)** is *likely*⁷⁵ and the **consequences** are *heavy*⁷⁶ (e.g., structure fire, cardiac arrest, shooting). The calls in question are also not those that fall into the low acuity⁷⁷ category where the PLSE is *very unlikely* and the consequences *minor* (e.g., high system user, warning fire not near structure, delayed theft of a bike with an unknown suspect).

Rather, the challenge is with those calls for service that fall into the medium acuity category, which includes calls where the PLSE can straddle between *unlikely* and *possible*, and the consequences can rapidly shift from *minor* to *harmful* to *heavy*. These calls are where most of the controversy and risk exposure resides, requiring the ability to define the acceptable risk⁷⁸ level from the individual and service provider perspective for the service. While risk-based assessment tools are not uncommon, the proposed alternative response-focused risk assessment is new to specifically provide stakeholders with a methodology for future decision-making that may be the first of its kind as it applies to 911 typology and response matrixes.⁷⁹

Table 1: Call Typology and Response Matrix

Probability of Life Safety Exposure (PLSE)	Consequences (Impact)		
	Minor (small) (online, on phone, independent, referral)	Harmful (moderate/severe) (co-response)	Heavy (catastrophic) (traditional single/multi-discipline, combined incident)
Very Unlikely (low)	<ul style="list-style-type: none"> 311 only CSRN only 	<ul style="list-style-type: none"> 311 leads with CSRN support CSRN leads with 311 support 	<ul style="list-style-type: none"> 911 (medical, fire, and/or law) only
Unlikely (moderate)	<ul style="list-style-type: none"> 311 leads with CSRN support CSRN leads with 311 support 	<ul style="list-style-type: none"> 311 leads with CSRN support CSRN leads with 311 support 	<ul style="list-style-type: none"> 911 leads with CSRN support 911 leads with 311 support

⁷⁵ Definition of Likelihood Levels: Likely (very high) – Occurs very often, more often than every 10th connection, i.e., more frequently than 10% of the time/cases. Possible (high) - Occurs quite often, between 1 % and 10 % of the time/cases. Unlikely (moderate) – May happen, occurring between 0.1% and 1% of the time/cases. Very unlikely (low) – Occurs rarely, less than 0.1% of the time/cases. <https://ehealthresearch.no/files/documents/Appendix-Definitions.pdf>

⁷⁶ Definitions of Consequence Levels for patients and service providers <https://ehealthresearch.no/files/documents/Appendix-Definitions.pdf>

⁷⁷ There is no universal acuity scale however, definitions of low, medium and high acuity general sit on a continuum in which low acuity situations can share resources, require very little monitoring and require basic intervention to high acuity in which dedicated resources may be needed along with constant monitoring and require skilled interventions.

<https://degree.astate.edu/articles/nursing/high-acuity-nursing.aspx#:~:text=Patients%20who%20are%20severely%20ill,or%20less%20intensive%20nursing%20care.>

⁷⁸ Definition of Low, Medium and High-Risk Levels: <https://ehealthresearch.no/files/documents/Appendix-Definitions.pdf>

⁷⁹ NFPA uses a Community Risk Assessment (CRA) tool to evaluate a community's risks prior to the development and implementation of a Community Risk Reduction (CRR) plan TerraView™ (nfpa.org). The U.S. Department of Justice Office of Justice Programs (OJP) uses a public safety risk assessment clearinghouse for Pretrial, Jail, Prison, Parole, Probation and Releases: What Is Risk Assessment | Bureau of Justice Assistance (ojp.gov).

Probability of Life Safety Exposure (PLSE)	Consequences (Impact)		
	Minor (small) (online, on phone, independent, referral)	Harmful (moderate/severe) (co-response)	Heavy (catastrophic) (traditional single/multi-discipline, combined incident)
Possible (high)	<ul style="list-style-type: none"> 311 leads with 911 support CSRN leads with 911 support 	<ul style="list-style-type: none"> 911 leads with CSRN support 911 leads with 311 support 	<ul style="list-style-type: none"> 911 leads with CSRN support 911 leads with 311 support
Likely (very high)	<ul style="list-style-type: none"> 311 leads with CSRN and 911 support CSRN leads with 311 and 911 support 	<ul style="list-style-type: none"> 911 leads with CSRN and 311 support 	<ul style="list-style-type: none"> 911 leads with CSRN and 311 support

In addition to PSLE, consequences, and risk acceptance criteria⁸⁰, call types, nature code criteria, and availability of alternative responders need to be considered in building unit allocations based on the call typology and response matrix (Table 1). Where the matrix refers to “lead” and “support” roles, as it relates to risk/acuity, this indicates the initial recommended dispatch as the lead with the others serving in a supporting role if the incident requires additional services. Table 3 and Appendix E contain examples in the form of Call Typology Response Matrix Unit Allocations that demonstrate such scenarios.

Nature Code Criteria

While other studies may try to simplify typology to a two- or three-tiered system based on criminal or non-criminal events and the likeliness of arrest, many times, these studies only look at a single discipline in the ecosystem. It is not that simple when considering both traditional and non-traditional responders in a holistic public safety system. The response system needs to be agile to address unpredictability that is inherent to public safety even in what seems to be the most benign of situations and must also include pathways to protect non-traditional responders.

Variables need to be understood when determining the use of a particular nature code and a recommended unit allocation. EMD and EFD protocol usage streamlines nature code determination for medical and fire calls. However, other essential elements must be considered—especially when considering expansion to include alternative responses. Many of these elements were noted in various documents reviewed for this study and are listed in no order except for safety.

⁸⁰ Risk acceptance criteria should be based on the requirements for the service. <https://ehealthresearch.no/files/documents/Appendix-Definitions.pdf>

Table 2: Nature Code Criteria

Nature Code Criteria
<ul style="list-style-type: none"> • Safety – Direct and indirect (physical and mental health) to include callers, individuals in need, call-takers, traditional and alternative responders (i.e., current and future potential for the situation to be violent, hazardous conditions) • Time criteria – Proximity to time of occurrence such as in-progress, just occurred, or delayed • Responder proximity to the event – Closest unit to the event, availability (24 x 7 or not 24 x 7) • Responder with the needed capabilities, such as: <ul style="list-style-type: none"> – Ability to provide prearrival instructions. – Authority to place individuals on mental health holds. – Ability to enforce codes, laws, rules, and regulations. – Arrest authority. – Authority to possess tools to mitigate threats to life and property (e.g., gun, taser, automatic external defibrillator [AED], access to fire hydrants and lock boxes). – Capabilities to exercise special procedures based on training (e.g., CPR, first aid, mental health, Crisis Intervention Team (CIT), defensive tactics, animal care). • Suspect identity criteria – Known/Unknown

In coordination with existing policies, the nature code criteria, suggested call type considerations, and draft content of the call typology and response matrix should be used to affirm existing alternative call allocations and identify opportunities to expand alternative allocations.



Call Type Considerations

- 911 existing call types
 - F – Traditional firefighter response
 - M – Traditional EMT, paramedic, or ambulance response
 - P – Traditional armed law enforcement officer response
- 311 would potentially have a new call type of “C” with its own queue
 - C – City or County employee response for government services (e.g., public works, animal care and control, PBOT⁸¹, park rangers, etc.)
- The CSRN would potentially have a new call type of “A” with its own queue
 - A – Alternative CSRN (e.g., PS3, PSR, CHAT, Community Connect, 988, PDX Reporter, etc.)

⁸¹ Portland Bureau of Transportation

Whether part of a two- or three-number access system, the call types of “A” and “C” allow for separate CAD queues managed by current or different call-takers and dispatchers co-located in the BOEC ECC or another facility. These additional queues improve the allocating and tracking of resources and capturing metrics.

A draft example has been provided in Table 3, along with three others in Appendix E, for demonstrative purposes only. Examples of each response matrix scenario using the top 12 calls in each public safety response discipline and survey examples are being developed as part of the second phase with a public safety service provider staffing study.

Similar and complementary to FCR, the CSRN approaches service delivery and call allocation differently and must be supported by a robust public education campaign on how to use each number.

- The community must be provided with the knowledge and tools to self-assess a situation and education on how to use each tool. This translates into beginning the classification process as close in time to the point of occurrence as possible, further mitigating the Hick-Hyman law.
- To improve the reliability and consistency of triaging these types of calls across the Portland MSA, the City can provide the CSRN unit with its own call-taking and/or dispatch staff.⁸³
- To mitigate the risk of life-safety exposure to medium acuity calls, the CSRN (through its own dispatch staff) would be responsible for alternative response units (programmed into CAD) and providing immediate access to fire, medical, or police personnel through the Versaterm CAD without having to call 911.
- For overall efficiency, data collection and metrics analysis, the CSRN unit would use Versaterm CAD and RMS⁸⁴ securely partitioned⁸⁵ so that staff would be able to communicate and request emergency assistance for calls for service shunted from 311 and 911. It would not have access to fire, medical, or law data, thus maintaining system security and federal Criminal Justice Information Services (CJIS) requirements.

Table 3: Call Typology and Response Matrix Unit Allocation Example

Call Typology Response Matrix Unit Allocation Summary Example
<ul style="list-style-type: none"> • Call Typology and Response Matrix <ul style="list-style-type: none"> - PLSE rating = very unlikely - Consequences rating = minor - Risk Assessment = low • Nature Code Criteria Statement <ul style="list-style-type: none"> - Injured animal on the sidewalk - Owner unknown/not present - Training in animal care needed - Needs response by 24x7 entity • Current Response Allocation Information <ul style="list-style-type: none"> - Response allocation = data gap⁸² - Nature code = AANRES - Call type = F - Unit assignment/name = data gap • Recommendations <ul style="list-style-type: none"> - Response allocation = 311 response only - Nature code = AANRES - Call type(s) = C - Unit assignment/name = TBD based on unit naming policy

⁸² Inquiry for the unit recommendations tables from CAD is unavailable and is a data gap.

⁸³ Conceptually, the CSRN staffing model could have separate classifications and hiring requirements from those of a public safety telecommunicator. This could allow a broader candidate sourcing (e.g., people with lived experience, who are screened properly) to be trained for community-based situations and its resources. While reducing the need for public safety telecommunicators to know every applicable resource the City has offer, it is not anticipated to impact telecommunicator staffing negatively; rather it could create capacity for the existing staff's workload.

⁸⁴ Records management system

⁸⁵ Albuquerque, New Mexico's program employs this approach to leverage data collections and metrics analysis.

By educating the community, the risk is mitigated, and the mechanisms are in place to allow for additional nature codes to be eligible for CSRN services.

3.4 Recommendations

Based on the analysis provided, the following set of operational, policy, and technology recommendations constructs a 10-point alternative response call allocation strategy to address inefficiencies and challenges within the current state of call typology and associated call allocation.

Implementing this set of recommendations and aligning them with the future strategic planning initiative may help improve call flow efficiency; reduce unnecessary contacts with fire, medical, and police resources; and increase accountability for the outcomes of decisions made by users of the system—all of which are anticipated to contribute to the CSD achieving its goals to build alternative emergency service models, send the right responder to the call, and reduce the need for traditional public safety response.

It is important to acknowledge that there is not one magic solution to this challenge. The ecosystem will continue to evolve and the public's expectations for level of service and adequate response will constantly be changing along with it.

Ten-Point Alternative Response Call Allocation Strategy	
Policy Recommendations	
Strategies	Outcomes
<p>Leverage the CSD to provide a change management framework (policy, procedure, and algorithm) to streamline, coordinate, and detangle the existing services that continue to be introduced into the ecosystem.</p> <ul style="list-style-type: none"> [CSD] Create an advisory team to coordinate the intersection of all programs and evaluate reinstating (e.g., CHIERS⁸⁶), expanding existing, or adding new programs (e.g., expanding PSR capabilities or creating a specialized team to respond to welfare checks) in alignment with other identified models^{87 88}. Develop an alternative response monthly report to report workflow and process metrics like the BOEC director's report. 	<ul style="list-style-type: none"> Reduces duplication and provides clarity. Bridges gaps. Augments resources. Moderates major initiatives that change existing practices using technology in any part of the Portland public safety ecosystem. Provides all stakeholders with the opportunity to provide input. Promotes diversity and inclusion of thoughts and ideas. Prepares the workforce for change. Train all ecosystem stakeholders on policy and program expectations.

⁸⁶ Central City Concern Hooper Inebriate Emergency Response Service (CHIERS)

⁸⁷ [Law Enforcement Dispatched Calls for Service - DataSF Dataset Explainers \(gitbook.io\)](https://data.sfdataset.org/law-enforcement-dispatched-calls-for-service)

⁸⁸ [Albuquerque Community Safety — City of Albuquerque https://www.cabq.gov/acs](https://www.cabq.gov/acs)

Ten-Point Alternative Response Call Allocation Strategy

<ul style="list-style-type: none"> • Conduct annual surveys of the community and responder to determine if metrics are being met or if a course correction may be needed. 	<ul style="list-style-type: none"> • Provides reliable prerequisites for post-implementation metrics review and analysis. • Provides context for new program growing pains and captures data for mature program sustainability.
<p>Align current call allocation practices with policy and, as an alternative to the multitude of one-off policies (e.g., Directives 5.003, 7.016, 7.316, 630.26), draft a singular alternative response policy that reflects practices for decision-making and authorizing 911, PDX 311, and others receiving requests for service, to apply alternative response (including universal and convenient access to address accessibility).</p> <p>Policy outline:</p> <ul style="list-style-type: none"> - Call receipt - Call assessment/ classification/ triage - Call processing (dispatch/response) - Universal and convenient access <ul style="list-style-type: none"> • Evaluate and consider adopting the following alternative response policies and protocols directly related to mental health as they are released. <ul style="list-style-type: none"> - EMD Protocol 25 mental health enhancements - EMHD - NENA 988/911 standard • Monitor Oregon's 988-related activities and consider adopting 988 policies for transferring/receiving calls, public safety response, and mobile crisis team notification. <ul style="list-style-type: none"> - As 988 matures in Oregon, consider encouraging its use by the community. 	<ul style="list-style-type: none"> • Provides a collective policy that supports the receipt, assessment, classification, triage, and dispatching of alternative resources. • Provides consistency in application and expectation. • Reflects current practices. • Reduces occurrences of policy misalignment across multiple bureaus and response units. • Makes timely updates to policy more efficient. • Creates flexibility and discretion in responding to non-emergency calls. • Reduces fear of the potential consequences of deviating from established policies, particularly if something unavoidable occurs. • Mitigates risk associated with personal or municipal liability, as well as moral and ethical implications, and call-taker mental health if a decision unintentionally results in harm or loss of life. • Provides the tools and pathways necessary to make informed decisions. • Promotes shifting the mindset away from risk avoidance toward a more nuanced approach that prioritizes public safety and well-being.
<p>Deploy a robust multi-media public education campaign.</p> <ul style="list-style-type: none"> • Develop an interactive social media presence to highlight the progress of alternative response implementation. • Consider a public safety citizens academy to demonstrate how the ecosystem works. 	<ul style="list-style-type: none"> • Educates the public. • Provides the community with tools for self-assessment and education on how to use them. • Decreases misrouted calls for service. • Develops customer satisfaction. • Closes adoption time and use gaps.

Ten-Point Alternative Response Call Allocation Strategy

	<ul style="list-style-type: none"> • Provides transparency by capturing and reporting the progress of alternative response implementation. • Increases public awareness of change initiatives that will promote public trust.
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Operational Recommendations

Strategies	Outcomes
<p>Develop a centrally coordinated CSRN for resources that can be dispatched to respond to calls that do not require traditional 911 or 311 services.</p> <ul style="list-style-type: none"> • Create CSRN alternative response work unit or navigation center with positions that exclusively provide the community alternative response call-taking and dispatch services. • Develop a strategy for PDX 311 and primary CSRN entities (PS3, PSR, CHAT, Community Connect, etc.) to deliver services 24 x 7 x 365. <ul style="list-style-type: none"> – Until these strategies are realized, contingencies need to be identified, publicized, and educated on. • Expand PSR and other unit capabilities to take additional calls that do not statutorily require a police officer. 	<ul style="list-style-type: none"> • [CSRN] provides different hiring criteria for staff, which can promote hiring staff with lived experience or offer remote work opportunities that could improve employee retention. • [Contingency plan] provides a guideline for users when primary resources are not available. • Connects individuals needing assistance with services that can actively take steps to resolve and restore the situation. • Provides a possible career progression workflow for future BOEC employees.
<p>Adopt, commit to, and develop metrics to measure the success of an FCR approach to requests for service.</p> <ul style="list-style-type: none"> • Establish workflow and process metrics rather than outcome metrics and capture data consistently to evaluate the success of the approach and determine the effectiveness of the new services. 	<ul style="list-style-type: none"> • Improves the efficiency and consistency of call flow for individuals seeking assistance, regardless of the call source (e.g., 911, 311, non-emergency line, etc.). • Prioritizes efficiency, consistency, harm reduction, and ease of access for individuals seeking assistance while aiming to improve overall community-based service needs. • Focuses on measurable process and procedural improvements rather than specific outcomes and seeks to engage in harm reduction from the point of entry to services. • Provides a clear pathway to a known landing point for persons seeking assistance, with no more than two people involved in the process to

Ten-Point Alternative Response Call Allocation Strategy

	<p>receive the right response or service for their situation.</p> <ul style="list-style-type: none"> • Connects individuals needing assistance with services that can actively take steps to resolve and restore the situation. • Sets a framework for capturing data for determining success.
<p>Simplify the access to services by identifying a clear pathway to contact and dispatch resources assigned to the CSRN by developing and adopting a strategy for either a two- or three-number access system.</p> <ul style="list-style-type: none"> • Explore if the opportunity and capacity exist with the current system of numbers for a number that is already providing community services and commit to promoting it for CSRN access (e.g., 211). • Build safeguards that bridge 311 and the CSRN to lifesaving services to promote safety for all while also not dictating a particular response to accommodate laws, rules, regulations, and data that callers may not be aware of. Examples include: <ul style="list-style-type: none"> – Issuance of devices to CSRN resources that can send emergency signals directly to CSRN dedicated dispatchers if an event escalates. – Uniformed City workers having radio access to assigned dispatchers. 	<ul style="list-style-type: none"> • Reduces the current 60-plus options to only two or three coordinated, easily rememberable connection points: 911 for life, property, and threatening environmental events; 311 for current non-emergency government-based service needs; and an undetermined connection point number (e.g., 211) for community-based needs best served by responders other than fire, medical, or police. • Reduces the risk of confusion if an existing number familiar to the community is used. • Reduces the need for public safety response. • Reduces congestion on the 911 system. • Reduces duplication and provides clarity. • Engages in harm reduction. • Positively impacts the Hick-Hyman law. • Promotes the safety of responders (e.g., park rangers) and alternative responders (e.g., CHAT) that have not had a direct pathway to mutual aid if a situation were to escalate. • Addresses the apprehension that some have with contacting 911 while still providing a path to emergency services if needed.

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<p>Using call allocation assessment tools, help staff determine or validate if nature codes are eligible for alternative response and build a response typology based on risk assessment and nature code criteria.</p> <ul style="list-style-type: none"> Assess each nature code (and related to the CAD data, also “call type” and create an “A” for alternate and “C” for City where applicable) based on existing priority scale and criteria established for programs like PDX 311, PS3, and PSR. For those that are embedded into the EMD protocol, review Omega, Alpha, and Bravo determinants and any low-priority medical nature code to determine the feasibility of re-assigning them to the A “call type” for dispatch to alternative resources. 	<ul style="list-style-type: none"> Improves the efficiency and consistency of dispatch workflows for individuals seeking assistance, regardless of the call source (e.g., 911, 311, non-emergency line, etc.). Prioritizes efficiency, consistency, harm reduction, and ease of access for individuals seeking assistance while aiming to improve overall community-based service needs. Clearly articulates the situations that require a traditional response and those that may not. Creates flexibility and discretion in responding to non-emergency calls. Provides the tools and pathways necessary to make informed decisions. Promotes shifting the mindset away from risk avoidance toward a more nuanced approach that prioritizes public safety and well-being. Alternative resources become discernable from the broader yet restrictive categorization allowing metrics to be captured.
<p>Consider updates and enhancements to call processing protocols for call-takers (911 and 311) to better assess and triage calls for service that could benefit from the allocation of CSRN resources independently or in partnership with 911 and/or 311 resources.</p> <ul style="list-style-type: none"> Repair EMD and EFD system issues⁸⁹ (Consider outsourcing to make repairs if staff availability and related bottlenecks continue to be a roadblock). 	<ul style="list-style-type: none"> Balances practice and policies. Increases trust between community and call-takers to appropriately triage calls for service incorporating alternative resources. Aligns expectations and responses with front-line and partner agencies. Contributes to determining the feasibility of a nurse navigation program.
<p>Provide a robust organizational and employee awareness campaign that is scalable and repeatable, that includes alternative response training for staff that impact or can be impacted by the</p>	<ul style="list-style-type: none"> Public safety personnel have a better understanding of the resources available to the community and the appropriate means to access them.

⁸⁹ Integration of alternative resources into the response algorithm to handle the large number of low acuity medical calls should be subsequently considered. This joint initiative with relevant stakeholders should be prioritized but not one that is immediate until high and at-risk initiatives (e.g., larger systemwide issues) are addressed.

Ten-Point Alternative Response Call Allocation Strategy

implementation of new tools, policies, and technology.	<ul style="list-style-type: none"> Non-public safety personnel have a better resource pool at their disposal to affect meaningful change for or make appropriate recommendations to the public within the two- to three-contact model.
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Technology Recommendations

Strategies	Outcomes
<p>Leverage the functionality of existing technology, such as CAD, RMS, and ZenDesk and new technology, such as artificial intelligence.</p> <ul style="list-style-type: none"> Make all CSRN program units dispatchable in policy and in CAD-related software systems. Preprogram CSRN resources into nature code recommendations and create call types to accommodate City and alternative resource queues. Develop an interface between CAD and ZenDesk. 	<ul style="list-style-type: none"> Reduces response time by alleviating (or eliminating) call transfers. Supports FCR. Promotes all programs being in alignment. Improves prioritization and recording of incident calls, effective dispatch of responder personnel, and the ability to identify the status and location of field responders. Captures complete call lifecycle data for tracking and reporting on success metrics. Builds in safeguards that bridge 311 and the CSRN to lifesaving services to promote safety for all.

Anticipated Barriers

<p>It is important to note and acknowledge several barriers:</p> <ul style="list-style-type: none"> There will be varying degrees of differing political and operational perspectives that will need to be mitigated. The need for workarounds and defaults will exist until resources, including personnel, are available 24 x 7. There will be technology constraints until solutions can be procured, reprogrammed, or interfaces developed. The existing policy contradictions, lack of alignment, or non-existence of policies will continue to create confusion until addressed. There is a limitation to the efficiencies that can be gained and the confidence of 911 staff based on the need for call screening and triaging tools that need to be procured and implemented. Systemwide training will be required, which can take considerable time to complete and can only be accomplished once policies and procedures are developed.

Ten-Point Alternative Response Call Allocation Strategy

- There are facilities, equipment, and personnel components to be addressed, as the CSRN unit will need workspace, equipment, and staff.
- While there are several events that law enforcement officials agree do not require a police response or could be handled by resources other than police, collective bargaining agreements will need to be mutually and carefully reviewed to ensure that the interests of responders and the communities are met.
- Funding constraints may exist that will need to be addressed and captured in strategic as well as capital improvement planning.

Adjacent and contiguous recommendations that impact or are impacted by these core strategies are provided in Appendix F.

MCP thinks that both the two- and three-number system access options have merit and, if resources are committed to making it a success, both have the capacity to be viable solutions to making progress. However, MCP found the environment to be much more complicated than many probably realize, which will require a considerable amount of long-term effort, likely years, to see the impacts that so many are anxious for today. When exploring the basic options as to whether two access numbers, such as 911 and 311, are more suitable than creating a third number for CSRN access, the following should be considered.

Access to Public Safety, Local Government and Alternative Response Resources

- Capable of supporting and incorporating FCR and the CSRN concepts.
- Reduces the number of access points in the overall system and provides centralized coordination.
- Provides relief for police officers to focus on law enforcement tasks and rebuild community engagement.
- Requires a robust public education campaign.

Two-Number Access System (911 and 311)	Three-Number Access System (911, 311 and CSRN)
Does not alleviate BOEC call congestion.	911 call congestion will be further reduced over time, allowing staff to focus on 911.
By having to transfer, conference, or educate callers on the resources they need, call-taker time on task is the status quo.	Call-taker time-on-task conducting transfers is reduced by allowing quicker answering of emergency calls.
By having to transfer callers, call processing times remain status quo.	Call-taker available time-on-task for improved quality assurance related to customer services increases.
Community confusion is perpetuated—calling 911 means they get an armed officer.	65% of the community supports: “There should be a separate phone number for direct access to alternative responders such as Portland Street Response (PSR), Community Health Assess & Treat Team (CHAT), and others.

Access to Public Safety, Local Government and Alternative Response Resources	
Mixed results were reported when asked: “I trust the 911 call-taker, with the appropriate training, to determine the proper responder for my situation, even if it’s not who I initially requested,” indicating that training may be effective.	Provides a career path for BOEC trainees who do not possess the skill set to manage real-time emergencies and may be more successful handling lower acuity calls.
Does not address the theme of apprehension in calling 911 for fear of having a police officer respond.	Provides the opportunity to employ people with lived experience who can empathize and communicate with those in crisis from an experience perspective.
Calling 311 (to date) does not dispatch resources but rather notifies appropriate agencies of a call for service, which allocates their respective resources.	Community confusion is decreased, as now calling a separate number means an armed officer is, in most cases, not immediately allocated to their call.
Likely a quicker pathway to implementation.	Implemented efficiently and reduces risk of confusion if an existing number familiar to the community is used.
Operating in BOEC leverages existing infrastructure.	Co-locating in the same building as the EOC ⁹⁰ and BOEC leverages infrastructure but separates spaces, opening opportunities to hire without CJIS and other restrictions required by BOEC.
	Reduces risk for traditional public safety personnel because system users (including alternative response resources that are approved as part of the response network) have been educated, including on the risk associated with the response, and know what to expect when they knock on each door or approach individuals. As such, they are accountable for the outcomes of those decisions.

4 Conclusion

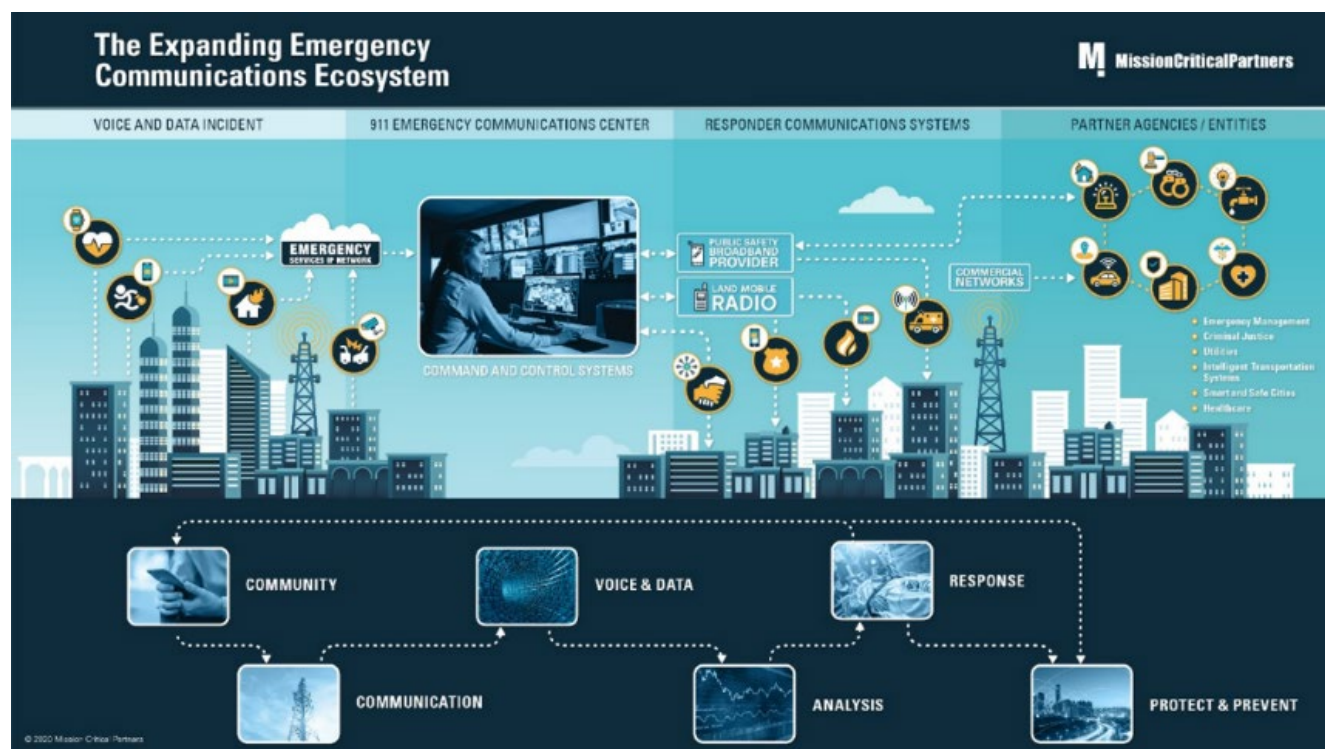
The City of Portland is taking a monumental step toward coordinating and balancing the constantly evolving ecosystem of public expectations with public safety to ensure the right response at the right time. These response options, all with their merits and challenges, can and should include the availability of both traditional and non-traditional experts that enable 911, 311, and alternative response professionals to safely manage the continuum of emergency and community-based service needs effectively, with compassion and empathy. The public safety communications ecosystem is changing, as shown in the graphic below, and transformational

⁹⁰ Emergency operations center

change is challenging but necessary if we are to provide access to appropriate and timely responses in support of our communities' needs.

Inconsistency of services, concerns expressed in interviews, surveys, and national studies regarding calling 911 highlight the need for consistent, reliable, timely, appropriate, and accessible responses.

For this to occur, alternative responders must be reflected in the response options available to 911, PDX 311, and community service networks for FCR and direct dispatch. There are many successful pilots in communities across the nation, and while there are numerous case studies to review lessons learned, a risk assessment tool for decision-making that weighs scenarios against low- to high-risk variables, allowing stakeholders to implement change with defined metrics to meet community and responder needs, should be used.



Safeguards bridging 311 and the CSRN to 911 lifesaving services, at a minimum, can be achieved by equipping all field responders with interoperable radio communications or other technological capabilities that communicate with a dedicated dispatcher. The suggested two or three service lines are encouraged to develop internal mechanisms and policies that allow immediate access to one another in the event of an emergency. This includes a single BOEC telecommunicator/dispatcher or CSRN dispatcher who can coordinate all resources on a single radio channel while those resources still belong to their individual organizations. Providing radio and other communications pathways increases situational awareness, prompting scene security, while a single dispatcher tracks and manages CSRN traffic.

The need for robust organizational and public education campaigns as keys to success cannot be overstated. After collecting the data from interviews and surveys, it was clear that gaps between what services are offered, by whom, and when are confusing, and clarity is desperately needed. A single public education campaign to address where citizen confusion lies today and the City's response to fix it is one of the most important steps in restoring public confidence in requesting emergency services.

The percentage of calls estimated to be eligible for alternative response across call, CAD, survey data and PDX 311 projections suggests an initial 33% eligibility goal for alternative response with another 10% potential for co-response.

While this approach is anticipated to reduce unnecessary contact with fire, medical, and police resources, it will take time for the data to be available to measure success. Many new services MCP encountered are in their infancy, and it is too early to determine their success. A coordinated effort will be needed to establish metrics and capture data consistently as both the CSRN and individual programs (e.g., PSR, PS3, PDX 311, and others) mature. A revitalization of community policing activities that reportedly fostered positive relationships and engagement between police officers and the communities should be revitalized as a result.

It is expected that with 911, PDX 311, and the CSRN functioning efficiently—along with proper funding for these programs—simultaneously, police officers' time would free up so their efforts can be redirected to proactive crime prevention and investigatory activities that have reportedly diminished due to current situations. Improving responses to all community members, including those that have been traditionally marginalized or underserved in communities comprised of people of color, immigrants, those with mental health needs or substance challenges, and those with intellectual and/or physical disabilities, will build a safer Portland for all.

While several recommendations have been provided for the City's consideration, MCP thinks that either a two- or three-number system that can access CSRN resources consistently has the potential to be successful—if implemented with the due care, collaboration, and funding required to bring the City's public safety (in particular police officers) and social justice (i.e., people disproportionately affected or underserved by access to medical, mental health/behavioral health resources) into balance.

Appendix A: Key Informant Interviews, Focus Group and Listen Session Themes and Trends Summary

Portland's seven (Scope A) considerations were assessed, conclusions drawn, and recommendations made to enhance operational capabilities, meet current community expectations and organizational needs, and identify strengths and opportunities.

Nine standardized questions—with slight modifications to accommodate the different audiences (elected officials, traditional responders, non-traditional responders, and community voices)—were used in the 61 focus groups, key information interviews, and community voice listening sessions.

Representatives from the below groups were invited to attend:

- Community Voices
 - Disability Community
 - Diversity/Social Justice
 - Domestic Violence
 - Faith/Religion Based Services
 - Houseless
 - Indigenous Community
 - Interpreting Services
 - LGBTQ+
 - Local Journalists
 - Neighborhood Associations
 - Police Accountability Groups
 - Sex Workers
 - Substance Use
 - Youth Services
- Partner Agency leaders and Practitioners
 - Collective Bargaining - ProTec17, PPA, PPFA, PPCOA
 - City and County Behavioral Health and Emergency Coordination
 - EMS/Ambulance Services
 - IT Staff
 - Local Public Safety Coordinating Council (LPSCC)
 - Park Ranger Responders
 - TriMet Transit Police
- Alternative Response Leaders and Practitioners
 - 311 Program Manager
 - Community Health Division
 - Portland Street Response
- Traditional Public Safety Leaders and Practitioners
 - BOEC Frontline and Leadership
 - County Sheriff
 - Fire/EMS Front Line and Leadership
 - Law Enforcement Frontline and Leadership
- Municipal Executives and Elected Officials
 - Advisory Boards and Commissions (PAC, FIT/COG and PCCEP)

- Chief Administrative Officer
- City Commissioners
- Fire and Safety Division Chief
- Community Safety Awardees
- Community Safety Division Managers
- County Elected Officials

Each session focused on:

- Call allocation (i.e., classification, screening, and triage) – **RESPOND.**
- Policy, operations, and technology considerations – **RESOLVE.**
- “One thing” participants wanted MCP to take away – **RESTORE.**

The following questions allowed stakeholder input and performance metrics to be analyzed.

- How does the way the current system allocates calls and dispatches resources impact public safety?
- How does the way the current system allocates calls and dispatches resources impact your role?
- What changes should be made to the system?
- What are the expected benefits if changes are made to the system?
- What are the specific needs of those who respond to quality-of-life calls for service?
- What alternative response resources are there that you may be aware of?
- What challenges (or benefits) exist with operationalizing recommendations?
- What are your priorities and what should the City's priorities be?
- How should conflicting priorities be navigated?

To maintain a level of anonymity, themes, trends, and “one thing” to remember takeaways (presented on the following pages) are not presented by day or audience. Consolidated themes are enumerated with data that supports the themes bulleted below each response.

RESPOND

1. Call Allocation – to include:

- a. Awareness of resources—service requests.
- b. What is the focus and scope?
- c. Who is responding to my call and why them?

- The community wants the limited resources prioritized and what they view as an acceptable wait time improved.
- There were repeated comments about police not showing up, new programs have not evolved, and the need for funding.
- If I am in a crisis, I want someone I know to respond to me, not a completely new person (continuity of care).
- Perceived PPB complacency when interacting with the community, particularly with people who live/work in settings that put them at increased/higher risk of exposure to hazards.
- When cops respond to a call that does not really require them, they say they cannot do anything and tell the caller to file an online report.
- Cops need to reset their outlook of what their job is. It is customer service-based and intimidation and being big in situations does not work.
- Effective reporting should not rely on “who you know” or complacency to the type of crime.
- Victim assistance programs are needed at the police department.
- We need safety and gun prevention in our neighborhood.
- While the criteria differ, there is a piece of common ground in that police do need to exist and will be called for across the spectrum (i.e., robbery, burglary, life in danger, domestic violence [but only in a gentrified neighborhood]); even the activists would call 911 for a medical emergency and fire (and some that have a broader experience [in that lost loved ones were not killed by police] would call if they heard gunshots).
- Harm reduction should be strived for from the point of entry into the public safety system—wherever that is.
- While showing promise and value at reducing police contact, the PSR is viewed by many as a political move to reduce pressure on the council and shield them from criticism rather than a sincere attempt at fixing a problem.
- There is a concern about uniformity across the precincts and services—singular leadership point of contact and communication regarding what a PS3 does.
- There are different views regarding methamphetamine (meth) drug-related calls and mental health (i.e., for dispatch, AMR asks if mental health is it due to drugs).
- Weapons like machetes and hatchets are common with the homeless population. Now, with the new meth, people are in psychosis and use their teeth, hands, and feet as weapons.
- “No call too small”—what is the response matrix and threshold of no response?

- What is the definition of a police officer and what is their job description in today's world?
- Why does 911 have to send someone to a call regarding a non-criminal issue? People need to be told to mind their own business. "Just say no." Callers should be advised that a response is not necessary.
- Stop catering.
- Grow a backbone and not respond to certain calls—draw the line.
- Police co-response to fire/EMS calls is not working. The community fears they still will be arrested.
- You should be able to request the type of service you want.
- Why do cops go to encampments? They are not emergencies. People dispatched to calls should be able to help not harm.
- 311 needs to be a priority for the City.
- The 311 scope is larger than 911 off-loading. As the service expands the clientele, it should be scalable in scope of service as well.
- 311 can triage and intake reports for the PBOT, parks, and all other bureaus.
- Direct navigation services (i.e., removing trash, removing sharps).
- The concept of a referral center is interesting but like other resources begs the question of who will maintain the resource list.
- When a 911 center serves multiple agencies and cities, it brings urban, suburban, and rural challenges.
- Learn from nationwide agencies that are successful with their protocols and processing.
- Overall positive feelings about using police and fire liaisons at the BOEC to do call-backs and triage calls.
- Better filtering of calls is needed.
- There should be a structure in place if there is a need for a response.
- Alternative response should be the default, not the other way around.
- Whatever the system, we want to do it well.
- Right resource for the problem at the right time—there can be a real focus on resources. (Resources are one of the challenges.)
- PS3s are not unarmed police officers; they are public safety support specialists and cannot "force" people to do anything. They exist to help officers, not create problems for them.
- PS3s need to expand their SOPs and create a logo identifying them as a unit, not PPB, since their current uniform colors are like law enforcement.
- While there is a need and a place for automation, when one has experienced trauma, such as being the victim of a crime, no matter how minor, there is a need and appreciation for a human connection.
- How can we improve outcomes for BOEC's service delivery?
- Here, it does not pay to be bold, proactive, and strategic. There is no discipline to adhere to it.
- Everyone needs to have a stake in the system.
- Appropriate resources are dispatched. Mental health transports and AMR are not the "go to" for a voluntary transport. PSR might be the resource.

- Lives are saved through this effort.
- Is 911 the right place for quality-of-life calls? One person's crisis may not be your crisis.
- Most issues revolve around mental health.
- How can we keep the system running safely while there is an active threat and situation on public transportation?
- While it is understood the mission alignment at BOEC is important (911 takes priority over all other lines), the non-emergency lines are the bulk of the calls received.
- There needs to be a prioritization of resources.
- How do we get back to doing public safety?
- There are uniformity challenges for PS3s between the precincts that could be resolved by a command structure and the public having a better understanding that PS3s are not police.

2. Public Confidence and Trust – to include:

- a. Having full trust and a belief in the powers of those responding.
- b. Influences on whether public safety will be called for assistance.

- The real pandemic is racism.
- At the end of the day, it comes down to the character and integrity of the individual.
- Harm reduction is needed.
- Fewer police officers should be sent that could turn a call bad because it triggers bad outcomes.
- Just leave us alone—if we need a cop, we will call one.
- Is there less crime in Portland or is it less confidence in public safety so people do not even call?
- We hear the desire that people should trust the police, but they must earn it.
- Cities outside of Portland have been conducting community outreach, listening sessions, etc. No uniforms. Neutral environment.
- Appropriating a non-police response will go a long way to build trust in different communities.
- Improve outcomes and build trust.
- When I call the police for a car burglar, the first question is about race. It feels discriminatory from the start.
- Our government is a fundamental problem that contributes to operations because they politicize police response. There has historically been little collaboration between bureau chiefs and bosses who do not like each other.
- We do not need armed militarized cops.
- Where is the accountability for the doctors who release patients from the hospitals after they are brought in by public safety?
- If the trust is not there, the right responder is difficult.
- “We protect us” cops do not know what the needs are. We have people in our community that render first aid. If people need the hospital, we take them ourselves because there are financial impacts and the lack of trust with medical staff for people that do not look like me.
- The only thing that will work is black community control and for responders to look like the community—control of their own community safety.

- There is a small percentage of cops of color here; there is some empathy, but it is not enough.
- Learning to navigate public existence. A person must figure out how to stay below the radar to be safe.
- I should not have to conform. “I don’t call 911, I call non-emergency.”
- The law/criminal justice system looks down on victims when they are assaulted or raped. There is little concern, and they look at it as if the victims should not have put themselves in that position.
- The police do not trust community-based organization responders to shooting scenes—they cannot get through the crime scene tape to support victims and their families.
- The commission form of government has weakened our city and the support it used to give to neighborhood associations.
- Whatever changes there are from a political aspect cannot be from the top down. There is no confidence.
- The PSR should be expanded into each neighborhood and staffed with people that know the community. Most police officers do not live here.

3. Confusion – to include:

- a. What is the mission?
- b. Who is available and responds?
- c. Lack of services.

- Collectively people are unsure of the specific alternative resources that are available and each one’s purpose.
- There is an inaccurate sense of resources and how they are allocated (including alternative resources).
- Numerous programs are being implemented independently with little awareness, alignment, or coordination across bureaus.
- The 26 bureaus in the City do not talk to each other. They do not talk or correlate with each other when trying to resolve issues. As a result, it feels daunting and hopeless.
- Policy makers are making prescriptive requirements that are not practical or in alignment.
- The needle of bureaucracy is hard to move.
- Some believe the tension resides at the elected official level (including tension between certain City and County elected officials).
- The concept was introduced that the tents along the sidewalks produce not only a livability situation for the whole community, but also a violation of the Americans with Disabilities Act in that someone who is disabled (regardless of how) cannot pass freely down a public street because of the obstructions the tents create.
- We are extremely tired and at an unsustainable pace.
- Solutions are never permanent because of our form of government.
- Rather than thoroughly vetting an idea to include having enough staffing for a program, the City will put something in place (like the PSR) and has not been able to fulfill the expectations.
- Improving resource allocation means sending the right resources to calls for service—not over-sending.

- Consider simply dialing 911 for emergencies and 311 for non-emergencies. Before doing this, 311 would need to be 24 x 7.
- Make it as simple as possible for citizens (maybe one number).
- Addressing current restraints could result in programs being duplicative. This calls for the question of whether the focus should be on expanding projects rather than creating new ones (e.g., the PSR and Project Respond).
- Camping issues are challenging. Citizens can be issued an exclusion ticket, which means campers cannot stay in place and need to move on.
- Overall, across the entire city and its resources, it is confusing knowing who goes on what type of calls and errors are being made (e.g., CHAT was dispatched to what should have been a high-angle rescue down a ravine but was because it was a camper).
- Alternative response is a good idea, but it is confusing to the public.
- There is a mixed perspective of which issue should be addressed first—homelessness, substance abuse, or mental health; however, the indication is that while providing shelter is humane, “housing first” as a concept does not work and substance abuse or mental health need to be addressed first. Some, in alignment with this study, want to see the response model change first. A barrier to this can be concerns about personal liability if they get an alternative response wrong.
- The PSR, PS3s, and CHAT need to be under the same bureau.
- There is a need to rethink the PSR—refine the intent and their limitations need to change (e.g., cannot go indoors, do not go out at night, etc.). If part of the point of this program is to get cops out of the business of going to societal and behavioral health calls, we should be focusing on the number of officer-involved shootings and its plus or minuses. What are the metrics?
- A shifting culture and the definition of who should be responding has received significant push back and is a challenge/barrier to change.
- Prioritize a shared definition—have a very clear shared definition of who should respond.
- A priority navigation framework is lacking, defaulting to the powers in the current government establishment.
- Expectations, and the work has become more complex.
- People express frustration because they do not know which pathway to take.
- There are numerous resources to choose from; a lack of resources, uneven scope alignment, and a need for consolidation of services causes confusion and, at times, frustration from those interviewed.
- Messaging—The type of service(s) available needs to be made clear to the public, so that access is easy and understood.
- The courts and legislators need to acknowledge there is not a one-sized-fits-all solution (e.g., immigrants, vets, seniors, kids, etc.).
- There is misalignment in the way the City is answering the phone lines that are supposed to be countywide rather than city-centric (i.e., PDX, 311).
- There are competing visions organizationally versus community—organizationally looking at only two numbers to call (911 or 311) compared to advisory committees looking at alternative response (the PSR, 311) being the oversight.

- There is a need for a referral pathway and end point that is supported by a maintained resource directory.
- There is often the problem of having nowhere to go—every place is closed because of the time (e.g., 2:00 a.m.) or the type of service is not or no longer available.
- Roles in the public safety spectrum are not well understood by other bureaus.
- There is a perception at one end of the spectrum that there is no compassion and empathy and, on the other end, there is so much that it has led to the consequences of “no pressure” to change, rather just support people until they die—providing people with things so they can keep doing what they are doing (e.g., doing drugs for the rest of their lives) is abuse and lacks compassion and empathy.

RESOLVE

1. Risks and Impediments

- Bottlenecks are apparent when implementing technologies that support alternative resources.
- City departments find themselves fighting with each other for priority needs.
- Complacency is increasing.
- The City does not have the tax base for what they “want”.
- There is not a single service that is a solution for call volume issues.
- Long wait times when calling BOEC, average of 53 seconds and in life-or-death situations this is unacceptable.
- There are call answering industry standards.
- Non-emergency calls at BOEC don’t fit in their portfolio.
- BOEC should continue to hold themselves accountable and transparent.
- City bureaus feel like they have to fight for or prove the need for attention. Being an independent entity could offer more timely decisions on what needs to be done.
- It can be noted that BOEC is stuck in the middle as an information clearinghouse due to its being a 24 X 7 operation.
- Decisions that involve city bureaus are often made without that bureau’s input.
- Sometimes the priorities may not be as conflicting as they might appear.
- While there have been reports of injuries to public safety personnel, there have been no deaths.
- Measure 110 was well intended but has been poorly managed.
- Disgusting waste land because of the drug problem.
- Portland has become a “destination” (but not in a good way).

2. Technology

- Automated call-distribution for 911 should be considered to eliminate the need for phones to ring.
- When moving from CT to radio – the ETC has to physically move plugs (2 in the jack).
- Need to take better advantage of technology – people who don’t know much about public safety technology are shocked that there isn’t a technical solution to some of these issues.

3. Funding

- Disproportionate public information resources assigned to other city bureaus (i.e., water) compared to public safety resulting in a need for a robust public communication initiatives and community engagement to inform public of alternatives, how to reach them, and for what.
- Over resourced and over policing = basic needs not being met and instead, the power of the state comes down on the under-served to keep them in their place.
- The problem is bigger than the City so we are looking to State for additional funding and resources.
- Measure 110 funding has had a myriad of unintended consequences.
- Fix dispatch, funding, reduce trauma on responders and offer administrative support.

4. Training

- Police desperately need mental health services themselves because their perception is completely distorted.
- Non-public safety people question that it takes 18 months to fully train a person in 911 to fruition.
- Ensuring that the call-taking staff are trained appropriately.
- PD training must change. They teach power dynamics and differentials. It's an intense dynamic when an armed cop comes to a call where there is no need for weapons.
- Need anti-racist training in government work.
- There is also a need to address the mental health of telecommunicators.

5. Metrics

- Need for actions and impacts metrics and long-term strategic visions and plans.
- Would like to see the data that supports the need for more resources. We need to find a way to deal with the frequent and repeat calls and balance risk.

RESTORE

1. Change management and Change Fatigue

- Need for change management (impacts change fatigue).
- Several references say that implementation of ProQA was rushed and that there are plans for it to be updated but that this has been slowed by the lack of staff to review and make the necessary changes now that it has been in place for some time.
- Get Portland to where it should be as a major city. Right now, it is a joke.
- There is more than a healthy level of skepticism that anything will change as a result of this report because of the barriers which are supported by past failures and the sheer magnitude of the problem (death by 1000 cuts).
- Need to treat this operation like a business rather than public office.
- Need to change the perspective on homelessness.
- Let real businesspeople run the business.

- Need a cultural change.
- Clean up the streets.
- Portland's reputation is restored.
- Understand that we are here to solve problems – we are ready but need the help of others.

2. Communication – Internally and Externally

- Deep collaboration, decisions and new conversations are needed between the City and the County.
- Communications clearinghouse – so communication is more structured.
- Communities are asked to give input, and we do, but then nothing happens.
- There is an overall feeling that “we” are doing nothing and that we are tolerating people living the way they are, which is traumatizing to those wanting to help too.
- There used to be a Portland Engagement program. Not sure if it is still there.
- Continuing indication that there is no general awareness of the outcomes.
- Need for public education campaigns. Education should include what to say and how to say what you need to get what's needed.
- There is an overall desire for the public to have an accurate sense of the resources available.
- Messaging to the public needs to be clear, simple, and easy to recall. There seems to be an appetite for change.

Appendix B: Portland Public Safety Response – Community Survey Results

As part of the call allocation and staffing study for the City of Portland, an anonymous community survey was distributed to help better understand two things:

- When it comes to a public safety (fire, medical, police) response, what are the communities' priorities?
- What are the communities' specific needs in requesting and receiving services that may involve mental and behavioral health, housing insecurity, or other safety-related but non-emergency situations?

The communities' participation in the survey is important as the City learns directly from community members about how the current system allocates calls and dispatches resources influences their decisions to seek assistance and what changes they think should be made to the system. To promote anonymity and transparency, maintain confidentiality, and encourage participation, the survey did not collect demographic, distinguishing, or personally identifiable information.

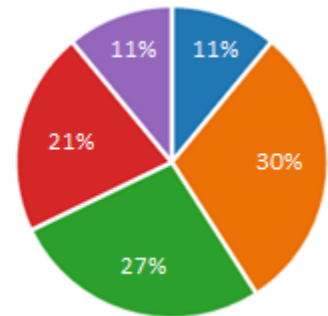
1020

Responses

Using the provided scale, what is your level of agreement/disagreement with each of these statements:

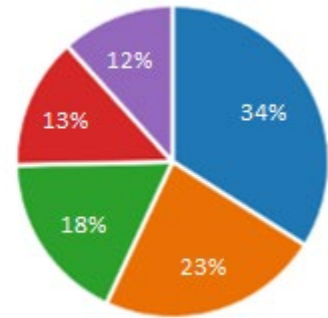
1. I trust the 911 call-taker, with the appropriate training, to determine the proper responder for my situation, even if it's not who I initially requested.

● Strongly Agree	112
● Agree	304
● Neutral	274
● Disagree	215
● Strongly Disagree	112



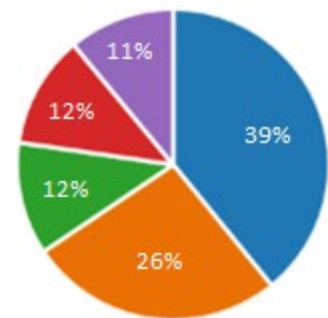
2. The community should be offered more service options besides police, fire, and emergency medical services.

● Strongly Agree	344
● Agree	233
● Neutral	179
● Disagree	138
● Strongly Disagree	119



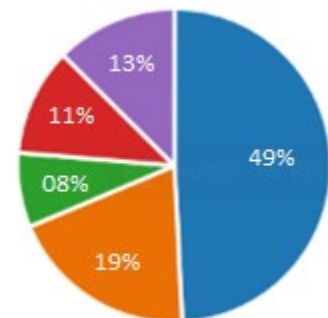
3. There should be a separate phone number for direct access to alternative responders such as Portland Street Response (PSR), Community Health Assess & Treat Team (CHAT), and others.

● Strongly Agree	398
● Agree	269
● Neutral	119
● Disagree	119
● Strongly Disagree	112



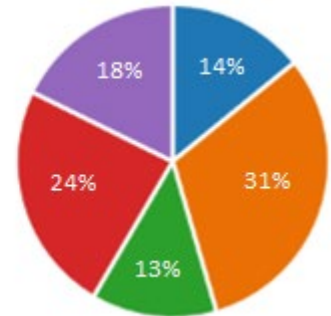
4. A police officer is the only option for calls related to activity that may be defined as criminal.

● Strongly Agree	501
● Agree	198
● Neutral	78
● Disagree	113
● Strongly Disagree	128



5. If it means getting the right response for my situation, I am okay not having an immediate response to situations that do not pose an imminent threat to life or property.

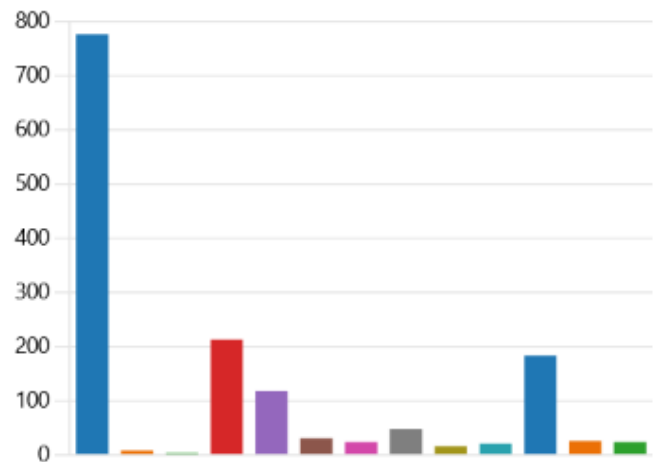
● Strongly Agree	144
● Agree	318
● Neutral	132
● Disagree	242
● Strongly Disagree	180



Keeping the concept of “safety for all” in mind, for each situation below, what is the response you believe is best suited for the situation? (Select all that apply.)

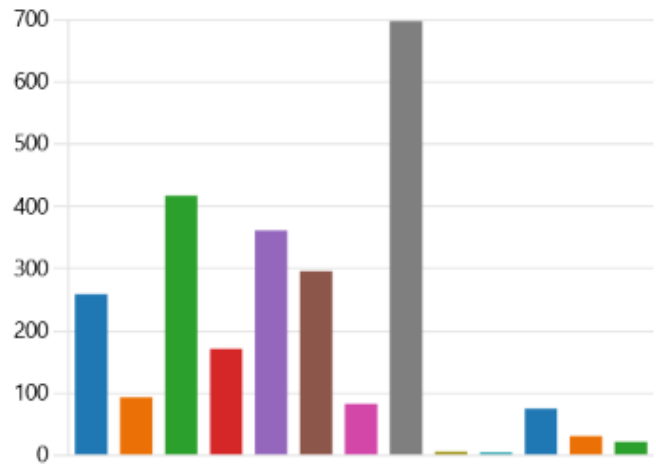
6. Suspicious persons, vehicles, or circumstances such as a person you do not know walking around outside on your property outside of your residence.

● Police Officer	775
● Firefighter	8
● Paramedic	4
● Public Safety Support Specialist ...	213
● Portland Street Response (PSR)	118
● Community Health Assess & Te...	31
● Community Connect	24
● Mental Health Professional	48
● City Bureau Employee (i.e., publi...	16
● No One (would handle online)	21
● No One (would handle myself)	183
● No One (would try and talk with...	26
● Other	24



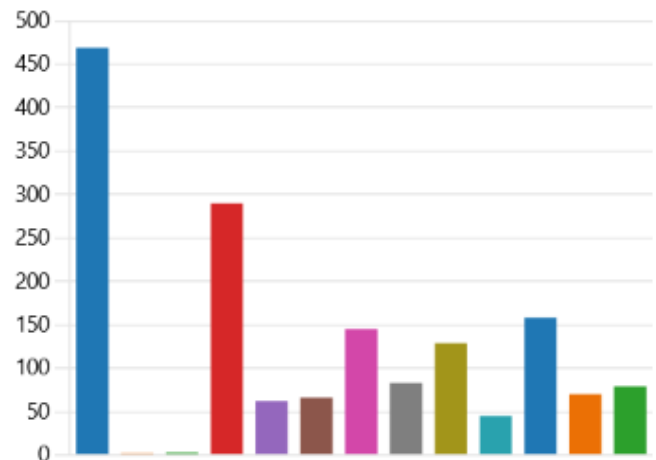
7. A family member or friend is experiencing a mental health or behavioral health crisis with medical issues including crisis response, suicide attempts or threats, and/or transport to detox.

● Police Officer	259
● Firefighter	93
● Paramedic	417
● Public Safety Support Specialist ...	171
● Portland Street Response (PSR)	361
● Community Health Assess & Te...	296
● Community Connect	83
● Mental Health Professional	697
● City Bureau Employee (i.e., publi...	6
● No One (would handle online)	5
● No One (would handle myself)	75
● No One (would try and talk with...	31
● Other	22



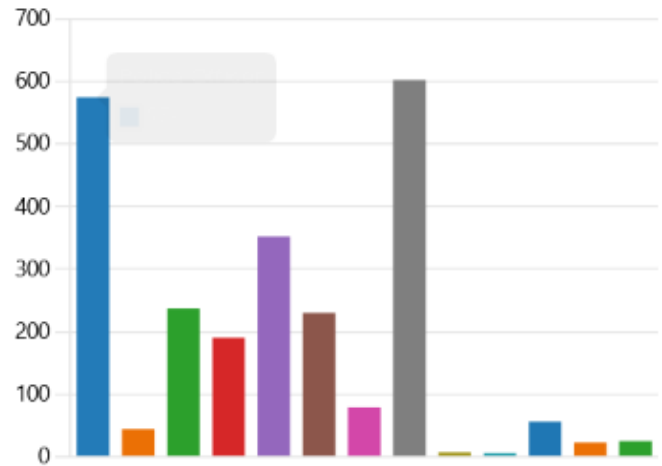
8. Private disputes including child custody issues, evictions, service of papers, etc.

● Police Officer	469
● Firefighter	2
● Paramedic	3
● Public Safety Support Specialist ...	290
● Portland Street Response (PSR)	62
● Community Health Assess & Te...	66
● Community Connect	145
● Mental Health Professional	83
● City Bureau Employee (i.e., publi...	129
● No One (would handle online)	45
● No One (would handle myself)	158
● No One (would try and talk with...	70
● Other	79



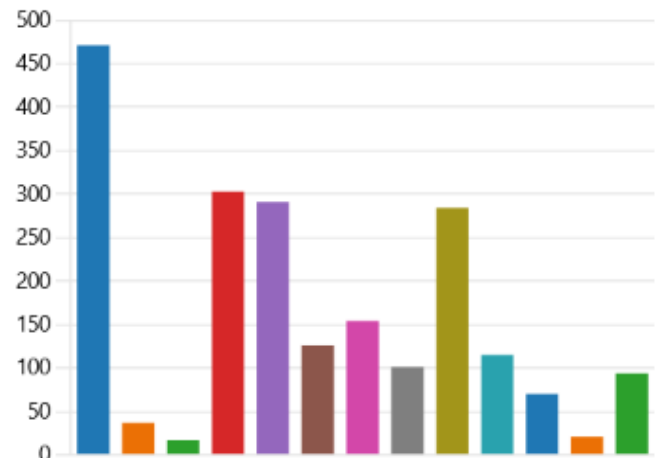
9. Behavioral health, such as a family member or friend who is experiencing a mental health or behavioral health crisis with violence.

● Police Officer	574
● Firefighter	44
● Paramedic	237
● Public Safety Support Specialist ...	190
● Portland Street Response (PSR)	352
● Community Health Assess & Te...	230
● Community Connect	79
● Mental Health Professional	602
● City Bureau Employee (i.e., publi...	7
● No One (would handle online)	6
● No One (would handle myself)	56
● No One (would try and talk with...	23
● Other	25



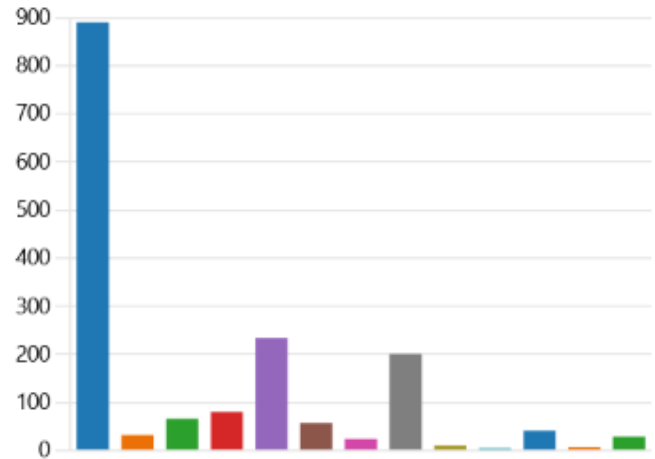
10. Reporting an encampment in your neighborhood.

● Police Officer	471
● Firefighter	37
● Paramedic	17
● Public Safety Support Specialist ...	303
● Portland Street Response (PSR)	291
● Community Health Assess & Te...	126
● Community Connect	154
● Mental Health Professional	101
● City Bureau Employee (i.e., publi...	284
● No One (would handle online)	115
● No One (would handle myself)	70
● No One (would try and talk with...	21
● Other	94



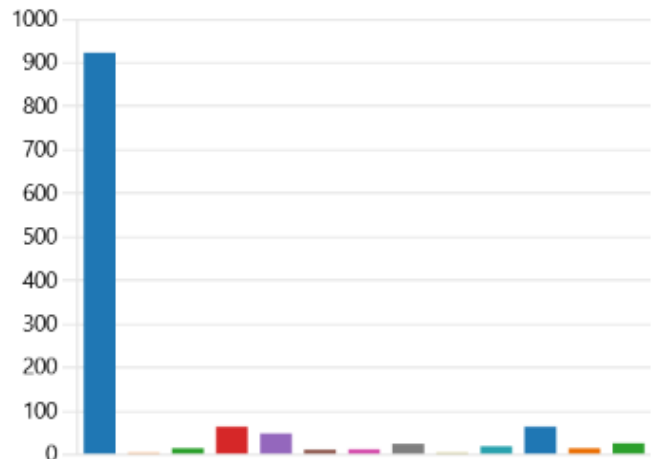
11. Witnessing a person swinging a machete on a crowded street.

● Police Officer	890
● Firefighter	32
● Paramedic	66
● Public Safety Support Specialist ...	80
● Portland Street Response (PSR)	234
● Community Health Assess & Te...	57
● Community Connect	24
● Mental Health Professional	201
● City Bureau Employee (i.e., publi...	10
● No One (would handle online)	5
● No One (would handle myself)	41
● No One (would try and talk with...	7
● Other	29



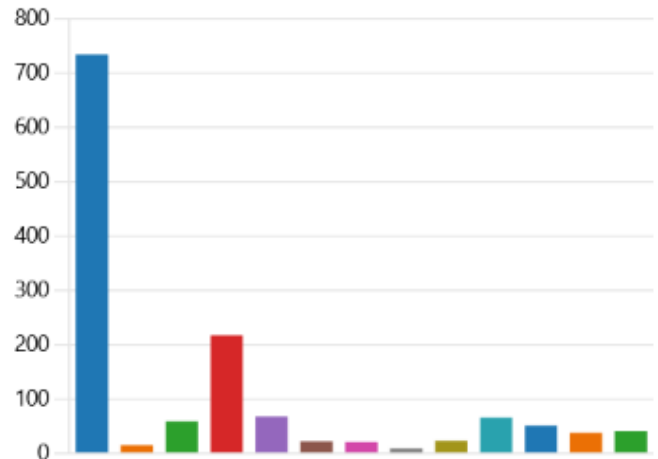
12. Taking or attempting to take anything of value from the control, custody, or care of another person by force or intimidation such as your necklace being taken at gunpoint.

● Police Officer	923
● Firefighter	4
● Paramedic	15
● Public Safety Support Specialist ...	64
● Portland Street Response (PSR)	49
● Community Health Assess & Te...	11
● Community Connect	12
● Mental Health Professional	25
● City Bureau Employee (i.e., publi...	4
● No One (would handle online)	19
● No One (would handle myself)	64
● No One (would try and talk with...	15
● Other	26



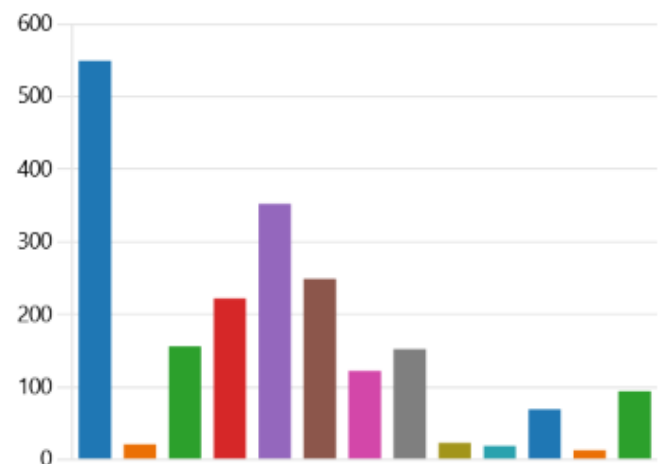
13. Hearing gunshots with no knowledge of a victim.

Police Officer	733
Firefighter	15
Paramedic	59
Public Safety Support Specialist ...	217
Portland Street Response (PSR)	68
Community Health Assess & Te...	22
Community Connect	21
Mental Health Professional	9
City Bureau Employee (i.e., publi...	23
No One (would handle online)	66
No One (would handle myself)	51
No One (would try and talk with...	38
Other	41



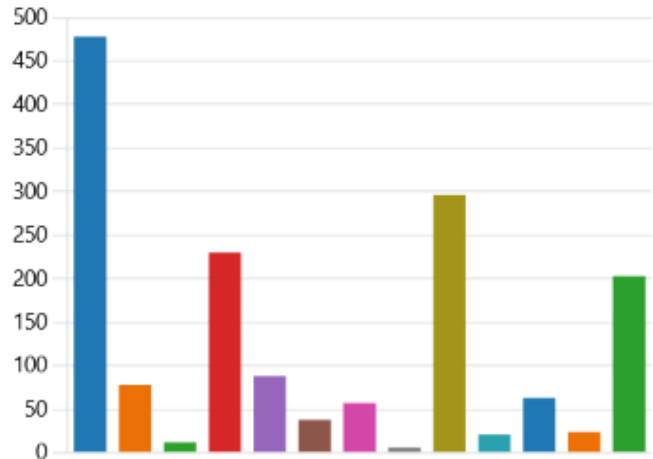
14. Watching one or more people on the street injecting drugs.

Police Officer	549
Firefighter	21
Paramedic	156
Public Safety Support Specialist ...	222
Portland Street Response (PSR)	352
Community Health Assess & Te...	249
Community Connect	122
Mental Health Professional	152
City Bureau Employee (i.e., publi...	23
No One (would handle online)	19
No One (would handle myself)	69
No One (would try and talk with...	13
Other	94



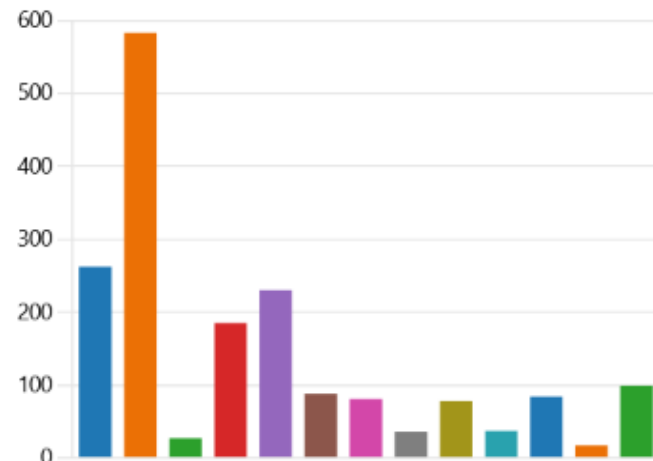
15. Animals that are either in danger or pose an immediate threat to the public.

Police Officer	478
Firefighter	78
Paramedic	12
Public Safety Support Specialist ...	230
Portland Street Response (PSR)	88
Community Health Assess & Te...	38
Community Connect	57
Mental Health Professional	6
City Bureau Employee (i.e., publi...	296
No One (would handle online)	21
No One (would handle myself)	63
No One (would try and talk with...	24
Other	203



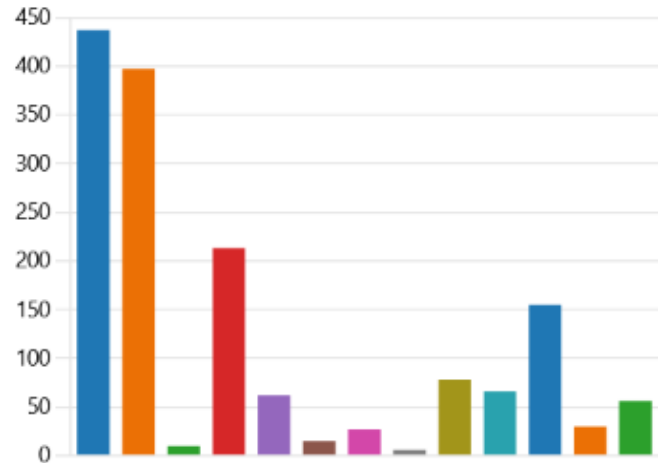
16. Seeing a warming fire.

Police Officer	262
Firefighter	583
Paramedic	27
Public Safety Support Specialist ...	185
Portland Street Response (PSR)	230
Community Health Assess & Te...	88
Community Connect	81
Mental Health Professional	36
City Bureau Employee (i.e., publi...	78
No One (would handle online)	37
No One (would handle myself)	84
No One (would try and talk with...	17
Other	99



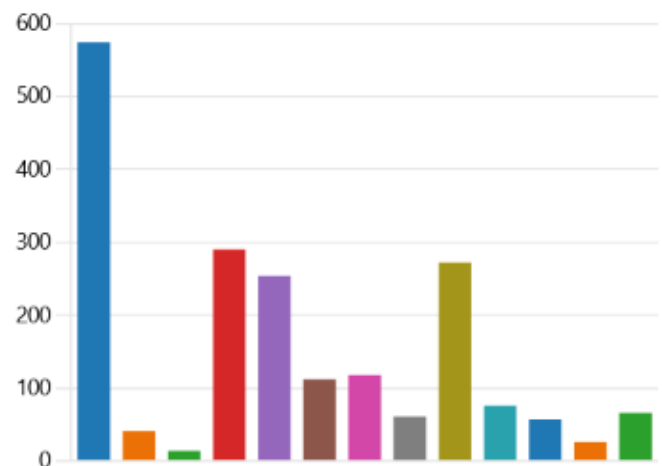
17. Hazardous or noisy fireworks.

Police Officer	437
Firefighter	397
Paramedic	10
Public Safety Support Specialist ...	213
Portland Street Response (PSR)	62
Community Health Assess & Te...	15
Community Connect	27
Mental Health Professional	6
City Bureau Employee (i.e., publi...	78
No One (would handle online)	66
No One (would handle myself)	155
No One (would try and talk with...	30
Other	56



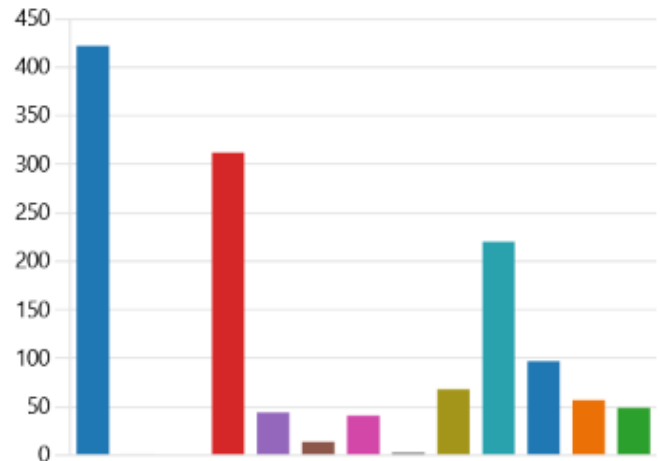
18. Illegal or hazardous parking including encampments on the side or the road.

Police Officer	574
Firefighter	41
Paramedic	14
Public Safety Support Specialist ...	290
Portland Street Response (PSR)	254
Community Health Assess & Te...	112
Community Connect	118
Mental Health Professional	61
City Bureau Employee (i.e., publi...	272
No One (would handle online)	76
No One (would handle myself)	57
No One (would try and talk with...	26
Other	66



19. Theft of a bicycle three days ago

● Police Officer	422
● Firefighter	1
● Paramedic	0
● Public Safety Support Specialist ...	312
● Portland Street Response (PSR)	44
● Community Health Assess & Te...	14
● Community Connect	41
● Mental Health Professional	3
● City Bureau Employee (i.e., publi...	68
● No One (would handle online)	220
● No One (would handle myself)	97
● No One (would try and talk with...	57
● Other	49

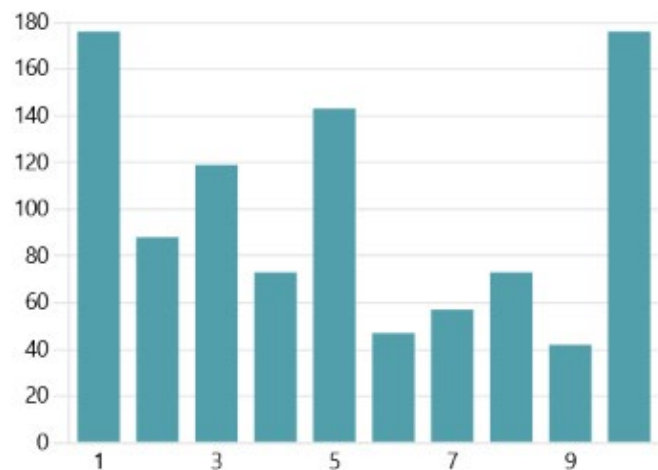


Please rank the following needs for requesting and receiving services.

These services may involve mental health, housing insecurity, or other safety-related but non-emergency situations from the most to least important (1 being the most important and 10 being the least important).

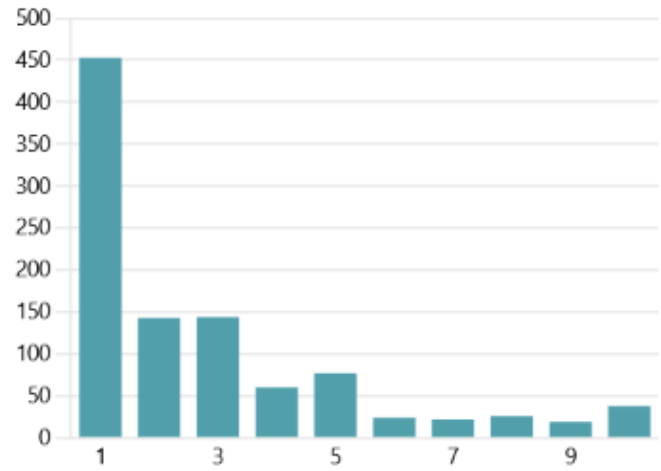
20. Alternative responders accessible through a phone number other than 911 or 311

5.15
Average Rating



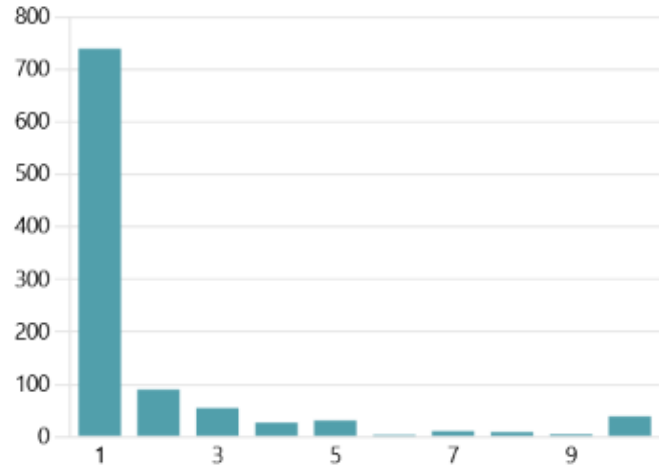
21. Connect with the right services for my needs without multiple phone calls

2.84
Average Rating



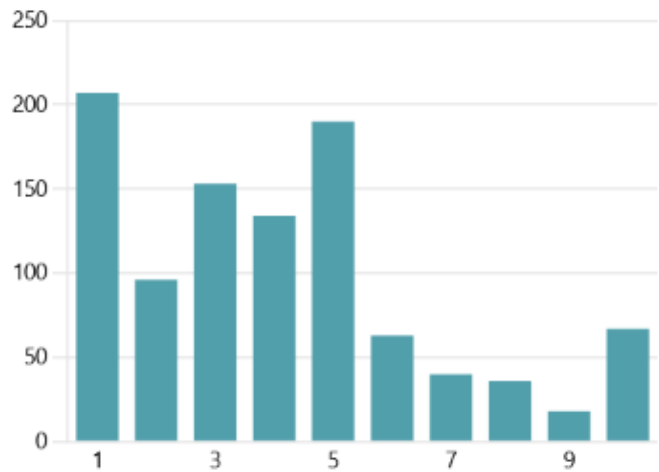
22. Faster on scene time from emergency services

1.94
Average Rating



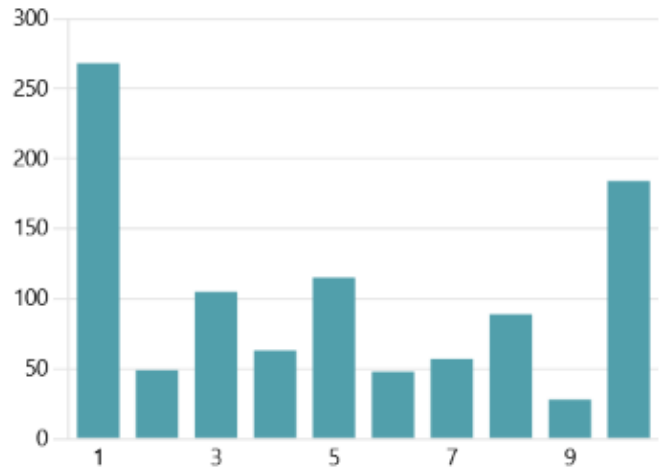
23. Ability to report non-emergency issues online

4.11
Average Rating



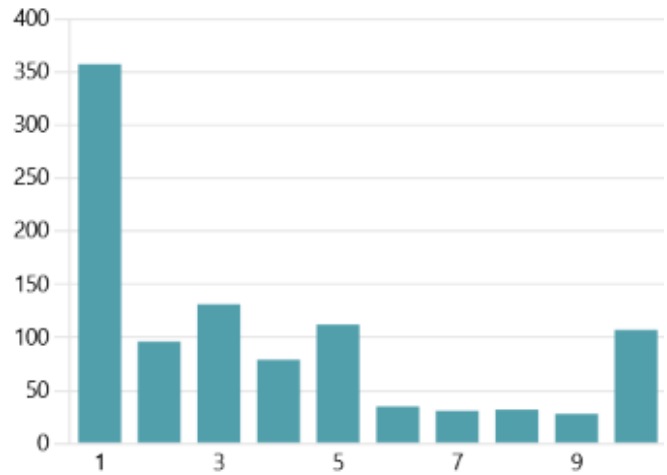
24. Response options other than a police officer

4.97
Average Rating



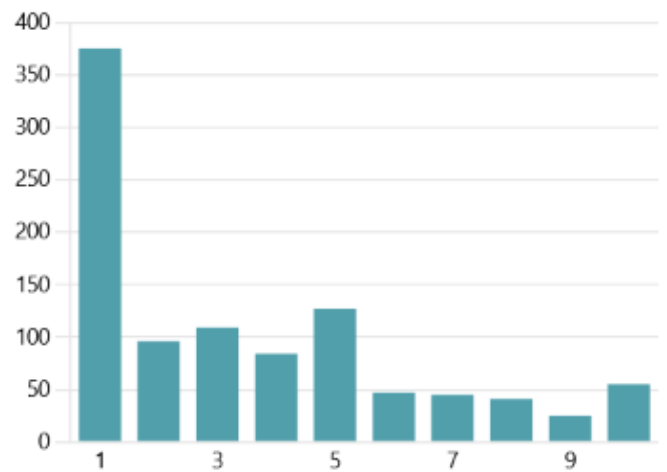
25. More community connection with police officers

3.79
Average Rating



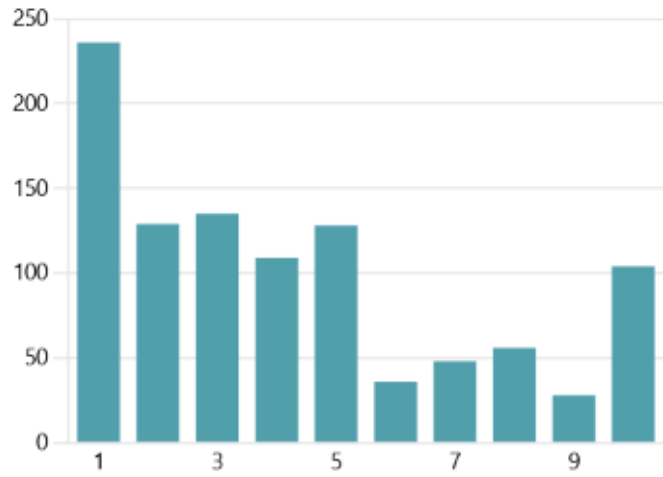
26. Not holding when calling 911 even when there is not a threat to life or property

3.55
Average Rating



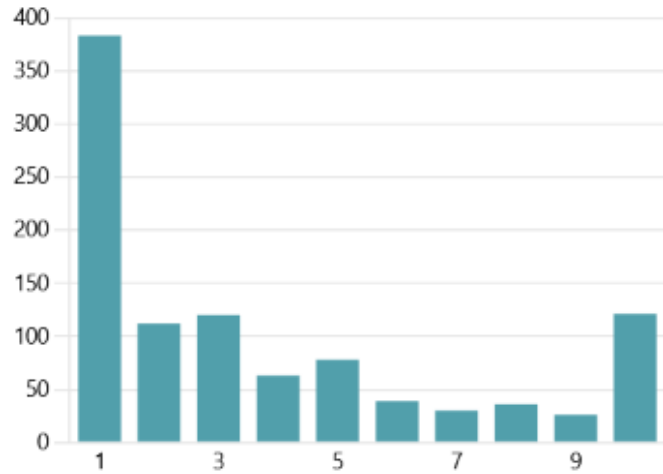
27. An easy-to-use directory of phone numbers for alternative services

4.23
Average Rating



28. Alternative services (i.e., 311, PSR, PS3, 988) being available 24 hours a day, including holidays

3.75
Average Rating



29. Other (List and ranking #)

● Other

156



Appendix C: Top 12 Nature Codes Analysis by Discipline

The following analysis examined the top 12 nature codes that were dispatched to those agencies that BOEC serves, per discipline⁹¹ (police, fire, medical) by number and type, and if they can be considered for an alternative response.

Number of Dispatches	Common Terminology	Eligible for Alternative Response	Comments
Top 12 – Fire Calls			
8,278	Unknown Type Fire Problem	No	
6,788	Portland Street Response	N/A	
5,332	Automatic Fire Alarm – Communications	No	
3,121	Lift Assist	Possible	Depending on patient status (i.e., no injuries), an alternative unit (like CHAT) may be more appropriate
2,643	Public Assist	Possible	Depending on the situation status (i.e., no injuries or potential for/or specialized equipment [i.e., heavy rescue] is not needed), an alternative unit (like CHAT) may be more appropriate
1,864	Illegal Burn	No	
1,187	Vehicle/Trailer Fire	No	
949	Automatic Fire Alarm – Residential	No	
944	Grass Fire	No	
941	Smoke in Area – Outside	Possible	Depending on the situation reported (i.e., no injuries), a specialized unit may be more appropriate
924	Audible Fire Alarm	No	
870	Fire Information	No	
33,841	Total Dispatches		

⁹¹ Using December 2021 to November 2022 CAD Incident Data

Number of Dispatches	Common Terminology	Eligible for Alternative Response	Comments
Summary	Of the top 12 fire nature codes, none have certain eligibility for alternative responders. Depending on the call description, EFD determinants for Alpha or Bravo lift assist and public assist may be eligible for an alternative response (e.g., CHAT or other), as does smoke in area-outside calls, (e.g., a squad or non-fire resource) to investigate. This approach may provide capacity in the 911 system, leaving an engine (paramedic) in service for higher priority calls. PSR data was limited as the program was not expanded until March 28, 2022. Previous to this date, PSR was only allocated to one neighborhood in the City. Once full data is available for year-over-year comparisons, increases may be demonstratively proven. Of the top 12 fire calls that are possible for alternative response, 20% or 6,705 of the 33,841 incidents are eligible.		
Top 12 – Medical			
2,848	Sick Person – Abnormal Breathing	No	
2,431	Traffic Accidents	No	
2,246	Patient Evaluation	Possible	
2,136	Semi-conscious Person – Not Alert	No	
2,133	Sick Person – Altered Consciousness	No	
2,071	Breathing Problem – Difficulty Speaking	No	
2,030	No Priority Symptoms, Pending Triage	Yes	EMD has ruled out priority systems – alternative response or nurse navigator eligibility
2,020	Sick Person – Unknown Complications – No Priority Symptoms	Yes	EMD has ruled out priority systems – alternative response or nurse navigator eligibility
2,006	Sick Person – Unwell/III	Yes	EMD has ruled out priority systems – alternative response or nurse navigator eligibility
1,993	Sick Person – Not Alert	No	
1,985	Abdominal Pain	No	
1,878	Chest Pain – Clammy	No	
25,777	Total Dispatches		

Number of Dispatches	Common Terminology	Eligible for Alternative Response	Comments
Summary	Four of the 12 EMS calls may be eligible for alternative responders (e.g., CHAT) if not already being conducted) that can evaluate the patient's condition and arrange for transport if needed, not necessarily a 911 ambulance. Deferring these calls creates capacity in the 911 ambulance system for priority calls. Low acuity calls for service (such as police requests for a Code 1 Medical, Sick Person – Unknown Complaint – No priority symptoms, Patient Evaluation, and Sick Person – Unwell/Ill) are possibly eligible for an alternative response. Low acuity calls where nature code selection is an Omega or Alpha EMD determinant, with medical authority approval, may be eligible for alternative response and, in the future, nurse navigator conferencing. There are some Bravo determinants in both the EMD and Fire protocols that could also be evaluated for alternative response with proper policy and outcome review. Of the top 12 EMS calls that are possible for alternative response, 8,302 (32%) of the 25,777 incidents are eligible.		
Top 12 – Law Enforcement Calls			
28,196	Suspicious Subject, Vehicle, or Circumstances	N/A	PS3s already handle low-priority calls for service, and law agencies promote filing online reports when situations meet described criteria.
25,429	Unwanted Person	Yes	Low-priority calls (Priorities 6 and 7 totaled 4,690 ⁹²), such as a subject sleeping in a doorway or a subject overstaying at a coffee shop, may be eligible for an alternative response.
24,231	Welfare Check	Yes	Non-priority welfare checks with no risk criteria may be eligible for an alternative response (Priorities 4, 6, and 7 totaled 23,121).
20,621	Disturbance – Priority	No	
16,882	Welfare Check – Priority	No	
15,903	Vehicle Stolen	Possible	PS3 may take if it does not involve potential evidence, suspects, or a crime scene.
15,895	Follow-up	Possible	PPB PS3 Impact Report states PS3s already respond to some of these calls, although it is not reflected in policy. Depending on call description, PS3s should be eligible to respond.

⁹² December 2021 to December 2022

Number of Dispatches	Common Terminology	Eligible for Alternative Response	Comments
13,389	Theft	N/A	PS3s already handle low-priority calls for service, and law agencies promote filing online reports when situations meet described criteria.
11,542	Attempt to Service Civil Papers	Possible	Of the total calls dispatched, 2,547 were Priority 6 and 7 ⁹³ .
9,563	Assist Citizen/Other	Possible	PPB PS3 Impact Report states PS3s responded to 82 of these calls in 2021, although it is not reflected in policy. Depending on call description, PS3s should be eligible to respond.
8,998	Vehicle Recovery	Possible	PS3 may take if it does not involve potential evidence, suspects, or a crime scene.
8,460	Parole and Probation Activity	No	
199,109	Total Dispatches		
Summary	<p>Law enforcement has done an admirable job in identifying low-priority calls where non-sworn personnel are the initial responders. For consideration, calls of a higher priority that may have some risk could have sworn personnel respond, secure the scene, and turn the incident over to a PS3 or other alternative responder (e.g., park rangers when appropriate). Expanding PSR capabilities (e.g., accessing indoor locations) or creating a new alternative response unit specifically for Welfare Checks should be considered. A total of 23,562 calls for service (23,089 calls and possibly another 473 WELCKP-Priority 4–7)—65.5 calls per day—over a year (excluding duplicate calls) warrants further consideration. Additionally, PS3 has the capability to respond to non-injury accidents with a refused name exchange incident. Even though PS3s have this capability, they do not possess the power to compel names as officers do. This garners speculation that an officer could be requested to assist with a large number of name refusals; however, an officer assisting to achieve citizen compliance to provide information does not require the same time commitment as having to remain on the scene and complete the report. Or, like ODOT, train PBOT personnel on how to manage these calls if vehicle/property damage warrants a response. Of the top 12 police calls that are possible for alternative response, 33% or 66,464 of the 199,109 incidents are eligible.</p>		

⁹³ It is noted that the police departments that BOEC serves do not serve civil papers. Call volume here represented Sheriff's Office workload.

Number of Dispatches	Common Terminology	Eligible for Alternative Response	Comments
Other			
17,670	Audible Monitored Alarm	No	Incorporate the use of verified/non-verified alarms for house and commercial building alarms – to determine the level of response best suited to respond.
4,047	Psychiatric Emergency (Omega-Alpha and perhaps, Bravo EMD determinants)	Possible	Incorporate a behavioral health co-response when transporting (to the hospital) a non-violent patient, i.e., suicide threat, to keep the patient stable through the remainder of their experience.
21,717	Total Dispatches		

Appendix D: Call Prioritization

Default police, fire and medical response priorities as defined in BOEC Policy & Procedure 5.003 Key Questions, Priorities & Call Entry Published June 13, 2022. Response priorities are assigned to nature codes and set by partner agency agreements. The priorities are:

Priority	Police ⁹⁴	Fire ⁹⁵	Medical ⁹⁶
1	<p>OCCURRING/IMMINENT DANGER TO LIFE</p> <p>Examples: person shot, stabbed, critically injured by assault, active shooter, subject brandishing a visible weapon at people in a threatening manner, armed robbery in progress or just occurred, officer needs help</p>	<p>Code 3 (lights and sirens) – Multi-Company Response</p> <p>Examples: CFIRE, RFIRE, WATRES, etc.</p>	<p>Fire and Ambulance Code 3 Response; Police AED Notification; PulsePoint Alert</p>
2	<p>OCCURRING/POTENTIAL THREAT TO PERSON</p> <p>Examples: physical assault in progress or just occurred, physical fight, suicidal, domestic dispute in progress, verbal argument, threats now, injury, traffic accident, residential burglary in progress or at occupied business</p>	<p>Code 3</p> <p>Examples: MISCF, SMOKES, etc.</p>	<p>Fire and Ambulance Code 3 Response</p>
3	<p>OCCURRING/POTENTIAL THREAT TO PROPERTY</p> <p>Examples: unoccupied commercial burglary in progress, vandalism in progress, vehicle theft in progress, premise check with damage/theft in progress, prowler, hit and run in progress (occurred in last 5 min), audible alarm –person onsite without code</p>	<p>Code-1</p> <p>Examples: ILBURN, COLD, etc.</p>	<p>Fire Code 3 Response and Ambulance Code 1 Response</p>
4	<p>EXPEDITED RESPONSE</p> <p>Examples: unwanted person blocking entrance or inside a location, suspicious person/vehicle/circumstance with subject present, theft in progress/just occurred within last 15 minutes (if on foot, 5 minutes if left in a vehicle), traffic hazard, unknown/non-injury accident, time-sensitive agency assist, sex offense in progress, death, stopped DUII</p>	<p>Code-1</p> <p>All other calls</p>	<p>Ambulance ONLY Code 3 Response</p>

⁹⁴ <https://www.portlandoregon.gov/police/article/676725>. High (Priority) - In-progress events where persons or high-value property are in immediate danger. Requires a multiple unit response. Medium (Priority) - In-progress events without an immediate danger to persons or property. Multiple units may be necessary for these calls. Low (Priority) - Events that may no longer be in-progress, so immediate response is not as urgent. Generally, requires a single unit.

⁹⁵ BOEC SOP 5.003 Key Questions, Priorities & Call Entry (6/13/22) Default Fire Response Priorities are assigned to call types and set by user agency agreements.

⁹⁶ BOEC SOP 5.003 Key Questions, Priorities & Call Entry (6/13/22). Default Medical Response Priorities are assigned to the MPDS determinant codes (CAD codes) by BOEC user agencies and the Multnomah County EMS Medical Director. Determinants in any level (ALPHA, BRAVO, CHARLIE, etc.) may have any of the following priorities assigned:

Priority	Police ⁹⁴	Fire ⁹⁵	Medical ⁹⁶
5	<p>ESCALATION PRIORITY</p> <p>Used internally to bump up the urgency on a call</p>	N/A	Fire ONLY Code 1 Response
6	<p>ROUTINE RESPONSE</p> <p>Examples: party, disturbances, civil stand-by, “car campers’/transient camps, suspicious person/vehicle/circumstances now gone, or no subjects seen, shoplifter/trespasser in custody–no problems, convenience response</p>	N/A	Ambulance ONLY Code 1 Response
7	<p>AS-AVAILABLE RESPONSE</p> <p>Examples: noise, cold report calls, parking problem, neighbor problem, civil problem without disturbance, property calls</p>	N/A	Fire Code 1 and Ambulance Code 1 Response
8	USER AGENCY ADMINISTRATIVE PRIORITY		

Appendix E: Call Typology Response Matrix Unit Allocation Examples

Call Typology Response Matrix Unit Allocation Examples: ⁹⁷	
Example 1	Example 2
<ul style="list-style-type: none"> • Call Typology and Response Matrix <ul style="list-style-type: none"> - PLSE rating = very unlikely - Consequences rating = minor - Risk assessment = low 	<ul style="list-style-type: none"> • Call Typology and Response Matrix <ul style="list-style-type: none"> - PLSE rating = unlikely - Consequences rating = harmful - Risk assessment = moderate
<ul style="list-style-type: none"> • Nature Code Criteria Statement <ul style="list-style-type: none"> - Injured animal on the sidewalk - Owner unknown/not present - Training in animal care needed - Needs response by 24 x 7 entity 	<ul style="list-style-type: none"> • Nature Code Criteria Statement <ul style="list-style-type: none"> - Intoxicated person that is outside near their personal tent and belongings - Training in mental health required - Needs response by 24 x 7 entity - Unpredictable behavior risk - Belongings may need to be secured if transported to detox or other facility
<ul style="list-style-type: none"> • Current Response Allocation Information <ul style="list-style-type: none"> - Response allocation = data gap - Nature code = AANRES - Call type = F - Unit assignment/name = data gap 	<ul style="list-style-type: none"> • Current Response Allocation Information <ul style="list-style-type: none"> - Response allocation = data gap - Nature code = PSR - Call type = F - Unit assignment/name = PSR
<ul style="list-style-type: none"> • Recommendations <ul style="list-style-type: none"> - Response allocation = 311 responses only - Nature code = AANRES - Call type(s) = C - Unit assignment/name = TBD 	<ul style="list-style-type: none"> • Recommendations <ul style="list-style-type: none"> - Response allocation = CSRN led with 311 support - Nature code = PSR - Call type(s) = A - Unit assignment/name = PSR1 – PSR"X", PS3 or City services entity to secure individual's property (TBD)

⁹⁷ Note an example of each of the response matrix scenarios is expected to be included using top 25 and/or survey examples as part of the provider staffing assessment report.

Call Typology Response Matrix Unit Allocation Examples:⁹⁸

Example 3	Example 4
<ul style="list-style-type: none"> • Call Typology and Response Matrix <ul style="list-style-type: none"> - PLSE rating = likely - Consequences rating = heavy - Risk assessment = high 	<ul style="list-style-type: none"> • Call Typology and Response Matrix <ul style="list-style-type: none"> - PLSE rating = very unlikely escalates too likely - Consequences rating = minor escalates too harmful - Risk assessment = low – moderate
<ul style="list-style-type: none"> • Nature Code Criteria Statement <ul style="list-style-type: none"> - Shooting just occurred at a hotel - Suspect fled the scene on foot - Medical prearrival instructions, ability to enforce laws, arrest authority, tools to mitigate threat to life needed - Training in medical care, mental health, crisis intervention team training, defensive tactics needed - Needs response by 24 x 7 entities - Suspect not being in custody impacts safety of the surrounding area 	<ul style="list-style-type: none"> • Nature Code Criteria Statement <ul style="list-style-type: none"> - Community Connect is out on a high system utilizer program visit when person begins having difficulty breathing - Person is home alone with pet, no family near by - Tools to mitigate threat to life needed - Training in medical care and animal care needed - Elevated to needing response by 24 x 7 entity
<ul style="list-style-type: none"> • Current Response Allocation Information <ul style="list-style-type: none"> - Response allocation = medical units, law enforcement units, crisis response team (data gap) - Nature code = SHOOTW - Call type = M, P - Unit assignment/name = data gap 	<ul style="list-style-type: none"> • Current Response Allocation Information <ul style="list-style-type: none"> - Response allocation = data gap - Nature code = None (self-deployed), 6C10 - Call type = None - Unit assignment/name = data gap
<ul style="list-style-type: none"> • Recommendations <ul style="list-style-type: none"> - Response allocation = 911 led with CSRN and 311 support - Nature code = SHOOTW - Call type(s) = M, P, A, C - Unit assignment/name = medical units, law enforcement, crisis response team, TriMet (TBD) 	<ul style="list-style-type: none"> • Recommendations <ul style="list-style-type: none"> - Response allocation = CSRN only - Nature code = COMMC - Call type(s) = A, M, C - Unit assignment/name = community connect, medical units, animal services unit (TBD)

⁹⁸ Note an example of each of the response matrix scenarios is expected to be included using top 25 and/or survey examples as part of the provider staffing assessment report.

Appendix F: Adjacent Strategy Recommendations

Operational Strategy Recommendations

- When considering reconfiguration, consider suffixes that indicate the time element of an event attached to nature codes—J/O for just occurred, IP for in-progress, and C for Cold.
 - Suffixes attached to a call type, such as “H” for Hot in BOEC’s configuration, allow for easy reading and recognition, particularly for field units when they are driving and viewing their mobile device(s).
- Once the broader systemwide EMD and EFD protocol response recommendations are repaired, consider implementing a nurse navigation program to provide additional alternatives for redirecting calls from a traditional responder response.
- Modify 911 and 311 call greetings that may be underway to not say PDX because BOEC and 311 serve the whole county.
- Add full-time 24 x 7 fire and police liaisons in BOEC to authorize no response or shunting of questionable alternative responses.

Policy Strategy Recommendations

- For alarms, implement a verified alarm program/policy.
- Explore how PSR and Project Respond can work more collaboratively together and leverage capabilities. Combine PSR and Project Respond for a more robust program.

Technology Strategy Recommendations

- Continue exploring the use of Versaterm’s Case Service and other artificial intelligence tools for call answering 10-digit telephone lines.
- Consider modifying the automatic call distribution (ACD) drop-in with a prerecorded greeting and phone tree changes.
 - For 911, stay on the line. For these types of services, press 3 for 311. For these types of services, press 4 for CSRN, etc.
 - When in a queue, advising the caller of the approximate wait time, offering options in lieu of holding, including online reporting or allowing the caller to leave their phone number to receive a callback, and informing callers that they will receive a call back within 24-48 hours.
- Consider engaging website architecture support to repair silos where programs are disconnected and hard to navigate to find services.
- Determine the feasibility of BOEC technical services managing its own resources rather than being part of the City network and having to rely on City IT services.
- Consider installing portal access equipment in libraries or other community locations so individuals can have consistent access to online reporting or virtual chat with 311, PS3, or other alternate response resources.
 - The small contact offices may not be appropriate because they are considered government or police.

Appendix G: City/County/State Alternative Program/Resource Numbers, Service Organizations, and Websites

The following list of city/county/state alternative program/resource numbers, service organizations, and websites was compiled as a result of the responses to the following question asked during the KILs, focus groups, and community voice sessions: “What alternative response resources are there that you may be aware of?”

While some may no longer exist or have changed, many respondents shared them in the context that they believed they were active. The descriptions, where provided, are also based on information received by respondents. This information, presented alphabetically, has not been altered to reflect the confusion contained within the current system.

1. 211
2. 311
3. 911
4. 988
5. 823-3333 – police emergency line; domestic violence callers have been asked to call this number and end up waiting for two to three hours.
6. 823-SAFE (7233) – now answered by 311; used to be a recorded message but now is a real person; when called received an email the next day and was put in a queue.
7. BHU (Behavioral Health Unit) – in 2014/2015 five officers teamed up with clinicians to run a threat assessment; day shift only; internal team with PPB – 2 sergeants, lieutenant, and mental health provider; use based on email referral; not 24 x 7.
8. Cascadia - this is a private entity that still exists; project respond may be run out of here.
9. Central City Concern
10. CHAT
11. CHD (Community Health Division) - under the fire department; runs CHAT, Community Connect (general health), and PSR.
12. CHIERS
13. CSN - Community Services Network; <https://www.csnpdx.org/>.
14. Cooling and warming shelters – Run by PBEM.
15. CRT – works with minority communities; 24 x 7.
16. DHS (Department of Human Services).
17. Fare supervisors or customer safety supervisors - These are non-threatening people who enforce code of conduct and support field services; they understand social services in all three counties; there are 42 of these individuals.
18. FIT (Focus Intervention Team) - one current area of focus is gun violence.
19. FITCOG (Focus Intervention Team Community Oversight Group) - June 2021; there are web articles related to Oakland, CA, state of Illinois and others that take focused deterrence approaches to policing with a focus on reducing gun violence; meets every other Thursday at 5:00 p.m.
20. HRAC (Homelessness Research and Action Collaborative) – Run through PSU; <https://www.opb.org/article/2023/01/25/oregon-portland-homelessness-housing-shelter-point-in-time-data/>; point in time survey needed for distribution of federal funds and grants.
21. Hooper Center - For detox is gone.
22. HOPE Team - provides homeless with snacks, cold weather equipment, etc.; managed by Multnomah County Sheriff's Office.
23. I-CARES

24. Impact Reduction Program
25. Incident Command Center on Homelessness – related to HRAC article.
26. Indigenous Assessment Community Team (ACT) – available through NARA.
27. Lands Management Team – works through PDOT
28. Lines for Life - is this related to 988?
29. NARA (Native American Rehabilitation Association).
30. Neighborhood Associations (NA) – impacted by politics in 2018/2019; been seen as an enemy.
31. NET (Neighborhood Emergency Team) - sometimes gets confused with NET; job is to deal with quality-of-life issues; used to have 20+ officers now has 12 including a sergeant and four officers per precinct.
32. NRT (Neighborhood Response Team) - One at each precinct. Sometimes gets confused with NET.
33. MCCL – is the county's crisis line.
34. Medical Examiner
35. OCCL (Office of Community & Civic Life) – Used to be called Office of Neighborhood; exists but is fraught with problems.
36. OHA (Oregon Health Authority)
37. One Point of Contact Campsite Reporting System – Can be accessed through PDX reporter, 311 or referral per BOEC policies.
38. ONI – years ago; criminal prevention specialist program; as PS3 expands could resume that type of role as community engagement portion of program.
39. On-line reporting websites each for PPB, Gresham and the County
40. OMHP – MHA – Mental Health Association of Oregon
41. PANOW (Project Access NOW) - <https://www.projectaccessnow.org/about-us/>
42. PBOT
43. PDX Reporter - <https://pdxreporter.org>.
44. PEP (Portland Engagement Project) – housed in the OCCL; Summer 2022.
<https://www.portland.gov/civic/portland-engagement-project>
45. Portland Street Medicine
46. PPI (Portland Patrol Inc.) - bike patrols, falls under NRT; livability issues; sergeant and four officers that work with them; started 20 years ago.
47. PS3 – There is interest in expanding the types of call they can take. Currently there are a lot of restrictions. They cannot take calls that have a known suspect. They just do property and are not trained to do investigative work. They can do tows but cannot write a citation – needs an officer to do that but they are not citing vehicles anymore (would have to be deputized by the city) 34 FTEs (started in 2019?) – could they be trained like what Phoenix is doing)
48. PSR – in part resulted from the DOJ settlement – consider designating them as essential so they can work weekends and holidays. Going 24/7 in March 2023.
49. RRT (Rapid Response Team)
50. Restorative Justice program
51. SCT (Services Coordinator Team)
52. SRO (School Resource Officers) - disbanded in 2020 based on the community voting to dissolve them; loss of intercept point early on.
53. SRT (Safety Response Team) - with 100 non-sworn which has achieved national recognition that can advocate for services in respective counties. (TriMet)
54. Street Roots Rose City Resource – a guide containing a list of services for people experiencing homelessness and poverty in Multnomah, Washington and Clackamas counties;
<http://rosecityresource.streetroots.org/#/>
55. SSCC (Street Services Coordination Center) – master list that is set based on priorities.
56. TIP (Trauma Intervention Program) - more generic and is run through fire/EMS; 24 x 7.

57. TriMet Safety Response Teams - buses and rails can use them.
58. Transport alternative – County paid Cab.
59. TRU (Telephone Response Unit)
60. Unity – is a drop-in mental health center; was created as a result of the hospital's fund or in part in 2016/2017.
61. <https://www.pdx.edu/homelessness/>
62. <https://www.portland.gov/sites/default/files/2022/pac-values-and-goals.pdf>

Appendix H: Top 25 Nature Code Descriptions⁹⁹

Nature Code	CAD Nature Code Description
SUSP	Suspicious Subject, Vehicle, Circumstance
UNWNT	Unwanted Person
WELCK	Welfare Check
DISTP	Disturbance – Priority
WELCKP	Welfare Check – Priority
VEHST	Vehicle Stolen
FOLLOW	Follow-Up
THEFT	Theft
CIVIL	Attempt Serve Civil Papers
ASSIST	Assist Citizen/Other Agency
VEHREC	Vehicle Recovery
P&P	Parole And Probation Activity
MISCF	Unknown Type Fire Problem
AREA	Area Check
AFALSE	Alarm – False; Chargeable
HAZARD	Hazardous Condition
ACCNON	Non-Injury Accident
AEXEMPT	Alarm – False; Exempt By Officer
PSR	Portland Street Response
SHOT	Shots Fired
SUSPP	Suspicious Subject, Vehicle, Circumstance – Priority

⁹⁹ Using December 2021 – November 2022 CAD extract data

Nature Code	CAD Nature Code Description
ASSLTP	Assault – Priority
ALMCOM	Automatic Fire Alarm – Comm
PREMCK	Premise Check
THEFTP	Theft – Priority

Appendix I: Number of CAD Incidents by Priority for Fire and Police¹⁰⁰

The number of police and fire CAD incidents are listed below by priority and the percentages of each. Medical incidents and their priorities were excluded because when calls are created, they are sent to AMR for dispatch using the CAD-to-CAD link, and not dispatched by BOEC. Therefore, the total workload numbers do not equal the total CAD incidents of 617,875.

	Fire	% of 46,137	Police	% of 457,318
Priority 1	1,014	2.20%	9,466	2.07%
Priority 2	7,577	16.42%	94,055	20.57%
Priority 3	26,742	57.96%	40,996	8.96%
Priority 4	42	0.09%	136,648	29.88%
Priority 5	5,106	11.07%	1,285	0.28%
Priority 6	161	0.35%	78,157	17.09%
Priority 7	30	0.07%	85,735	18.75%

¹⁰⁰ After EMD determinants are identified, the determinant is the call type used with no priority code assignment, which is left for determination by the ambulance contract provider.

Call Type	Number of Calls	Priority 1	Priority 2	Priority 3	Priority 4	Priority 5	Priority 6	Priority 7	Priority 8	Priority 9
Suspicious Subject, Vehicle, Circumstance	28,196	62	560	489	19,775	6	4,531	2,765		8
Unwanted Person	25,429	57	545	527	19,559		4,201	538		2
Welfare Check	24,231	47	890	158	20,646	2	2,058	383	3	44
Disturbance – Priority	20,621	49	19,452	223	703	2	113	76		3
Welfare Check – Priority	16,882	27	16,254	101	413	1	30	29	1	26
Top 5 Total	115,359									
Vehicle Stolen	15,903	2	9	113	131	3	5,149	10,494		2
Follow-Up	15,895	4	21	14	194	1	2,155	13,501		5
Theft	13,389	15	61	35	345	4	5,078	7,851		
Attempt Serve Civil Papers	11,542		4	2	8		21	11,506		1
Assist Citizen/Other Agency	9,563	7	327	84	7,460	3	915	757		10
Vehicle Recovery	8,998	16	145	233	1,199	11	1,755	5,635		4
Parole And Probation Activity	8,460				4		8,455	1		
Unknown Type Fire Problem	8,357	1	4,171	4,177		1	1	2		4
Area Check	8,160	51	330	249	6,938		458	128		6
Alarm – False; Chargeable	8,055	192	573	595	20		6,672	3		

Call Type	Number of Calls	Priority 1	Priority 2	Priority 3	Priority 4	Priority 5	Priority 6	Priority 7	Priority 8	Priority 9
Hazardous Condition	7,554		51	22	6,901		472	107		1
Non-Injury Accident	7,304	4	545	165	6,125	1	152	311		1
Alarm – False; Exempt By Officer	6,823	117	449	649	30		5,574	4		
Portland Street Response	6,788	1	14	2,608	1	2	15	2		4,145
Shots Fired	6,191	26	13	5798	72		133	149		
Suspicious Subject, Vehicle, Circumstance – Priority	5,661	15	53	5429		123	25	15	1	
Assault – Priority	5,416	17	4,863	45	442		23	25		1
Automatic Fire Alarm – Comm	5,354		1	5349					2	2
Premise Check	5,254	3	9	3865	412		907	58		
Theft – Priority	5,197	7	69	86	4933		59	43		
Remaining 20 Total	169,864									

Appendix J: Glossary of Terms

General terms associated with the 9-1-1 industry can be viewed in the *NENA Knowledge Base Glossary*, which defines terms, acronyms, and definitions. Intended users of this document are any person needing NENA's definition/description of a 9-1-1-related term(s). Link: [NENA Knowledge Base Glossary - National Emergency Number Association](#)

Terms introduced within this document are defined below.

Adequate Response: By general definition, an adequate response is a response that provides the most appropriate service or information. When public safety comes into play, the definition of adequate response is significantly more complicated—an infinite number of variables are not predictable. The public's expectation of adequate response when a real emergency occurs is that the public safety system will react swiftly.

Call Allocation: Call resource allocation can be described as the ability, generally through the computer-aided dispatch (CAD) system, to recommend a field unit or resource, where the dispatcher either accepts the recommendation or assigns another unit to the incident.

Call Type: What CAD data refer to as call types—and what has been commonly referred to in BOEC policies and the objectives of this report refer to as call types—are two different things. In CAD, typing relates to the overall architecture when there are multiple levels or algorithms in a work or call flow, and it is relied upon when one part of the flow is disrupted or ineffective. For example, CAD views “call types” as the service categories of F (fire), M (medical), and P (police). See Nature Code.

Community Services Response Network (CSRN): CSRN is a collaborative network of teams, programs, and services that specialize in providing community-based responses to calls for service in coordination with or independent of traditional fire, medical, or police response.

First Contact Response (FCR): FCR is a concept that promotes timeliness and equitability across all calls for service through policy setting of the expectation that an individual seeking assistance would receive an adequate response on first contact (if electronic) or without being required to talk to more than two people. As a metric, FCR would measure the percentage of contacts or calls that provide an adequate response as defined above.

Nature Code: What CAD data refer to as “nature codes” are what policies and the report objectives refer to as call types. The term nature code references a situation or event requiring services (e.g., ILBURN, ASSIST, THEFT). See Call Type.

Typology: By definition, typology is the study of, analysis or classification based on types or categories. Relating to this report, typology is the combination of call type and nature codes.