



DATE: November 15, 2022

TO: Mayor and City Council

FROM: City Manager
Fire Chief
Police Chief

SUBJECT: Dispatch Needs Assessment and Capacity Improvement: Presentation of Consultant Evaluation and Recommendations

RECOMMENDATION

That Council:

1. Receives a presentation by Federal Engineering Consultants on the City of Hayward Communications Center: Assessment and Strategy Implementation Plan Report (Dispatch Needs Assessment – Attachment II) and HEART Program Data Analysis Recommendations Report (Attachment III); and
2. Reviews and discusses recommendations presented (both from staff and the consultants) and provides direction to include staff's recommendations in the mid-year budget for Council approval.

SUMMARY

On May 18, 2021, Council received recommendations from the Public Safety Policy Innovation Workshop process. As a result, Council directed staff to begin implementing nine of the pilot projects in FY22 and authorized a budget allocation to support the projects. One significant project identified was to complete a Dispatch Needs Assessment and Capacity Improvement Plan (Needs Assessment) to support the new public safety projects and initiatives.

In October 2021, the City entered into a contract with Federal Engineering Consulting (FE) to conduct the Needs Assessment and develop a five-year strategic plan. The City expanded the scope of FE's contract to include business process analysis of the City's current dispatch and data systems in order to support the successful implementation and ongoing operation of the Hayward Evaluation and Response Teams (HEART) program.

FE has prepared a high-level overview of their findings from the Needs Assessment for the City's dispatch center, referred to as the Hayward Call Center (HCC), as identified in the "High-Level Strategic Implementation Plan" in Attachment II. The Strategic Implementation Plan

outlines a roadmap that identifies six areas of focus with prioritized next steps for the HCC and its leadership.

Staff recommends that all staffing, staffing support efforts, and recruitment initiatives be prioritized based on departmental and organizational needs. Today, HCC has 33 authorized full time equivalent (FTE) positions, of which only 24 are filled. At this point, staff recommends that six (6) new positions be added (in addition to filling all vacancies), which is the minimum necessary to begin implementation of new call processing protocols recommended by FE within the physical space constraints of the existing HCC facility.

Additionally, staff recommends prioritizing implementation of the following high priority FE recommendations:

- Implementation of additional training for HCC staff;
- Implementation of call processing protocols and training; and
- Implementation of a new Quality Assurance (QA)/Quality Improvement (QI) Program, including a Coordinator position.

FE has additionally prepared a HEART Program Data Analysis Recommendations Report (HEART Report), which proposes recommendations in four major areas: (1) System Mapping; (2) Mental Health Specific Call Assessments; (3) Diversion of Eligible Calls; and (4) Data Reporting and Sharing. The full report can be found in Attachment III.

BACKGROUND

On May 18, 2021, Council received recommendations from the Public Safety Policy Innovation Workshop process. As a result, Council directed staff to begin implementing nine of the pilot projects in FY22 and authorized a budget allocation to support the projects. One significant project identified was to complete a Needs Assessment to support the new public safety projects and initiatives. In October 2021, the City entered into a contract with FE to conduct a Needs Assessment and develop a five-year strategic plan.

FE provides subject matter expertise in emergency communications center services and social innovation related to police, fire, and EMS 9-1-1 services. Their experience includes assessing emergency communications centers to enhance operations and upgrade public safety technology meeting the growing demands of the community and assisting with the implementation of new behavioral health programs. FE also provides subject matter experts and coordinated a team that can assist with improvements to computer aided dispatch (CAD), records management systems (RMS) for police and fire, jail management systems (JMS), and other supporting technologies to support the City's HCC and HEART program. FE has over 50 consultants, specialists, and former first responders located in offices across the United States and Canada.

In August 2021, staff began preparation and mobilization of the HEART program, which implemented improved response models for behavioral health calls, including, but not limited to: substance abuse, mental illness, and homelessness. In order to develop programmatic

goals and response methods, staff also undertook an analysis to better understand frequent system users, call types, call frequency, and outcomes to inform and develop new program metrics and resource allocations for the HEART program. Staff is confronting some challenges completing this analysis due to difficulties extracting and aggregating historical data from existing data systems with current staffing resources and capacity. In addition, staff is concerned that the existing data issues will inhibit ongoing program monitoring, reporting, and analysis. During the six-month progress update Council work session on February 15, 2022, comments from both the public and the Council expressed concerns about the availability of program data to ensure transparency and to support evaluation of the HEART program. As a result, the City expanded the scope of FE's contract to include business process analysis of the City's current dispatch and data systems in order to support the successful implementation and ongoing operation of the HEART program.

FE's preparation of the HEART Report included multiple stakeholder interviews, a business process workshop conducted to help City stakeholders understand the HEART program and the business process workflows required to support the capture of critical data, and review of current staffing levels and processes. The HEART Report defines the data requirements, metrics, and reports necessary to measure the success of the programs in real-time and develop short- and long-term recommendations for improving the data collection, storage, and aggregation workflow to support project needs, as well as change management strategies to support their implementation.

DISCUSSION

To supplement this staff report are two reports provided to the City following the completion of FE's assessment: Attachment II presents the completed Needs Assessment and Attachment III presents the HEART Report. The following provides an overview of the recommendations from each of the reports.

Dispatch Needs Assessment

FE has prepared a high-level overview of their findings for consideration for the HCC, as identified in the "High-Level Strategic Implementation Plan" found on pages 21-25 of Attachment II.

The Strategic Implementation Plan outlines a roadmap that identifies six areas of focus with prioritized next steps for HCC and its leadership. Staff will share the immediate recommendations for implementation and funding needs.

1. Staffing

The HCC is at a critical staffing deficiency and before any other initiatives are implemented or considered, staffing must be increased to adequate levels.

FE has prepared a proposed staffing model and personnel count for the City of Hayward, with and without turnover (pp. 42). Additionally, FE prepared several recommendations for

consideration to increase staffing, including recruitment efforts (pp. 45). The City has begun addressing staffing deficiencies and efforts currently underway are discussed further below.

2. Training

To address training needs, FE recommends the City:

- Fill the Administrative Supervisor role immediately. This will provide the structure and oversight necessary for training, QA/QI, and change management through all the pieces of this multifaceted project/organizational upgrade.
 - Interim Operations Supervisor role has been filled as special assignment for 3 years; however, due to staffing shortages, this employee will go back to floor supervisor position, leaving this position vacant in January
- Implement a full academy/classroom training program for new recruits in the HCC. Adequate training and support of new recruits and current staff will go a long way in promoting retention in the HCC, assisting with the mitigation of the staffing crisis.
- Implement continuing education and professional development program for all staff.
 - Opportunities identified and professional development budget for 2023 approved
- Implement a full QA/QI program, along with a Coordinator position assigned to deliver the program.

3. Call Processing Protocol Implementation

FE recommends that the City:

- Conduct a workshop for stakeholders to align goals and determine how to utilize current data systems to aggregate the data needed to report on HEART program success.
- Procure and implement a structured, commercial call-taking and dispatch protocol for police, fire, and medical calls. This will streamline and accelerate training, provide consistency and standards, reduce risk and cost, and improve performance.
 - Immediate results are recruits who can be trained and are ready to work quicker, who feel prepared and confident to take on the role and will complete the training period and remain as employees.
 - Commercial protocol programs train employees – no need to do that portion in house. Reduces the training workload.
 - Medium and long-term results are standardization and consistency that is measurable through QA/QI processes, which also improves training, performance, and reduces risk and cost.
 - Additionally, this prepares staff for an integrated behavioral health call-taking and dispatch protocol/risk assessment process considering all aspects of the care continuum.
- Implement full medical call-taking in HCC once staffing capacity begins to increase – *the work to procure medical protocol should be in the #1 priority category. By the

time it is ready for implementation, staffing levels may already be at a level that can support it.

4. Governance/Organizational Model

As part of FE's assessment, they have found that the HCC has outgrown its current organizational model. The staffing, leadership, governance, operational, facility, and support model in its current state are not sustainable. To address these critical governance and organizational challenges, FE recommends:

- That HCC management be moved out of the Support Services Manager portfolio and onto its own.
- That HCC management be required to have specific Public Safety Communications experience, education, and training.
- That the City of Hayward work towards an independent Communications Center with its own leadership and support model. It will not live under Police or Fire but will report to a governance board/model where Police and Fire have equal representation; one agency is not perceived as a client of the other.
- That the City of Hayward create a governance model where equal representation of Public Safety agencies exists, and additional internal and external stakeholders are included. Ensure the model is sustainable for long term success and provides HCC management the autonomy, authority and support necessary to lead the center effectively.

5. Technology

FE recommends the City:

- Work toward accelerated implementation of call-taking and dispatch software and programs.
- Design and implement a two-way CAD to CAD interface between HCC and ACRECC for medical call information.
- Review and revise incident types/CAD codes for the Behavioral Health Project (as part of data mining and reporting, and risk assessment/protocol creation).

6. Facility

The HCC is currently housed in the Police Administration Building. There is limited space within the center to reconfigure the set up or add additional workstations. With the increase of recommended staffing levels to support HCC operations, additional space to install more workstations will be necessary. FE recommends:

- A redesign/reconfiguration of the current setup in the HCC to add more workstations for additional staffing, a training room with workstations and HCC technology (pp. 82).

- Securing a new location or existing facility for a purpose built/renovated Emergency Communications Center that serves the unique needs, both current and with the next 20-30 years in mind, of Public Safety Communications personnel, infrastructure, and technology (pp. 82).
- That a backup center be designated and implemented for HCC (pp.83).

Staff Recommendations for Prioritized Implementation

It is important to note that all staffing, staffing support efforts, and recruitment initiatives have been prioritized based on departmental and organizational needs. Today, HCC has 33 authorized full time equivalent (FTE) positions, of which only 24 are filled. The assessment recommends that 38 additional positions be added to meet the ultimate call volume and implement the recommendations stemming from the report. At this point, staff recommends that six (6) new positions be added (in addition to filling all vacancies), which is the minimum necessary to begin implementation of new call processing protocols recommended by FE within the physical space constraints of the existing HCC facility. Staff recommend the six new positions be four (4) call takers and two (2) Communications Operators. The HCC also physically does not have the space to accommodate all of the recommended position additions and several of the recommendations in the assessment address long term facility and space needs for the HCC.

To date, staff has already begun implementing more immediate changes to assist with recruitment and testing for dispatcher candidates. The Council has approved a hiring bonus and incentive program, which staff has implemented using salary savings and which is yielding some positive results. A process mapping workgroup was assembled with representatives from Dispatch, Human Resources, Fire, and Police. Analysis of the existing recruitment process and collaborative discussions showed areas where the recruitment and testing process can be streamlined for efficiency. This includes the suggestion for implementation of electronic skills aptitude tests called, "Criticall," which test a candidate's suitability for the high-stress and high multi-functions of public safety communications personnel. Additionally, the group is assessing candidate behavioral evaluation software that would assist in evaluating a candidate's ability to handle relevant work-related activities, problem-solving, coping with stress, and other factors, is being evaluated for implementation in the recruiting process. The work group will continue to identify ways to improve and bolster recruitment processes to streamline and produce the highest quality candidates possible.

The other high priority recommendation items that will require funding include: 1) implementation of additional training (approximately \$20,000 annually); 2) implementation of call processing protocols and training (approximately \$250,000-300,000 one time); and 3) implementation of a QA/QI Program, including Coordinator position (approximately \$170,000 annually).

HEART Program Data Assessment

Attachment III is the HEART Report, which proposes recommendations in four major areas: (1) System Mapping; (2) Mental Health Specific Call Assessments; (3) Diversion of Eligible Calls; and (4) Data Reporting and Sharing (see Attachment III - pp. 19-24).

System Mapping Recommendations:

1. **Recommendation 1:** FE recommends the two teams comprising the HEART program [Hayward Mobile Emergency Team (HMET) and Mobile Integrated Health Unit (MIHU)] work together to determine and formally delineate their roles to ensure efficient service delivery and to prevent duplication of services.
2. **Recommendation 2:** Identify method for diversion process at HCC call answer and triage point.
3. **Recommendation 3:** Complete a systems-mapping exercise to determine HEART, MIHU, and HMET program long-term approaches and integration with HCC and diversion at the point of dispatch.

Mental Health Specific Call Assessment Recommendations:

- **Recommendation 4:** Create policy and procedure, along with training for HCC staff, to triage behavioral health calls in initial call-talking process.

Diversion of Eligible Calls Recommendations:

- **Recommendation 5:** Identify which calls will be eligible for diversion to HMET and/or MIHU response.
- **Recommendation 6:** Ensure data inputs and disposition codes accurately reflect behavioral health response.
- **Recommendation 7:** Implement robust training for HCC staff and clinicians.
- **Recommendation 8:** Create and implement a quality assurance and quality improvement process for HEART, HMET, and MIHU.

Data Reporting and Sharing Recommendations:

- **Recommendation 9:** Implement a Data Analyst position exclusively for the support and success of the HEART program.
- **Recommendation 10:** Create a process for data reporting and sharing to bridge the gap between HMET and MIHU and eliminate siloed services and approaches within the HEART program.

The second phase of FE's work is to assist staff with the implementation of the recommendations presented as part of these assessments. Given current staffing levels, it would be impossible for current staff to be solely responsible for this implementation effort on top of their daily workloads. As such, staff recommends that one-time funds be set aside for an additional scope of work and contract amendment with FE to support our implementation efforts. Staff will return to Council with this item at a future date.

STRATEGIC ROADMAP

This agenda item supports the Strategic Priority of Enhance Community Safety and Quality of Life and Strengthen Organizational Health. Specifically, this item relates to the development and implementation of the following projects:

Project Q5, Part 5.c: Support Safety through Community-Centered Response and Enforcement Models; Implement Dispatch Needs Assessment and Capacity

Project Q5, Part 5.e: Implement Pilot Mobile Mental Health Response Team

Project R16 Extract and publish data from existing city systems to assist in key decision making across the City as well as providing deeper access to our community members (data-driven)

Project R18 Identify, assess and upgrade systems, infrastructure, and technology to modern architecture and design (modernize technology and systems)

FISCAL IMPACT

There are both one-time and ongoing expenditures necessary to implement the recommendations presented in the Needs Assessment and the HEART Report. While there are larger long-term recommendations and cost implications, staff has focused on prioritizing and phasing the recommendations to be fiscally prudent by identifying the recommendations that are critical for the HCC’s immediate need and success.

Ongoing Costs

1. Addition of six HCC positions – two (2) Communications Operators (\$164,316 each) and four (4) Call Taker positions (\$141,588 each)	\$894,984
2. Implementation of QA/QI program, including Coordinator	\$170,000
3. <u>Implementation of additional HCC training</u>	<u>\$20,000</u>
<i>Total</i>	<i>\$1,084,984</i>

Staff is currently working to identify funding for these various program elements. Depending on Council feedback this evening, staff will further refine the program funding needs and present these with the mid-year budget as necessary.

There will be one-time costs associated with the FE implementation contract and implementation of new call processing protocols and training. Staff will return to Council at a future time with these agreements.

NEXT STEPS

Staff requests feedback and direction on the assessments and recommendations presented this evening. Based on Council direction on the path forward, staff will continue to work on

the strategic implementation plan and will return as part of the mid-year budget with funding recommendations and additional next steps.

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