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

City Council Work Session, November 15, 2022
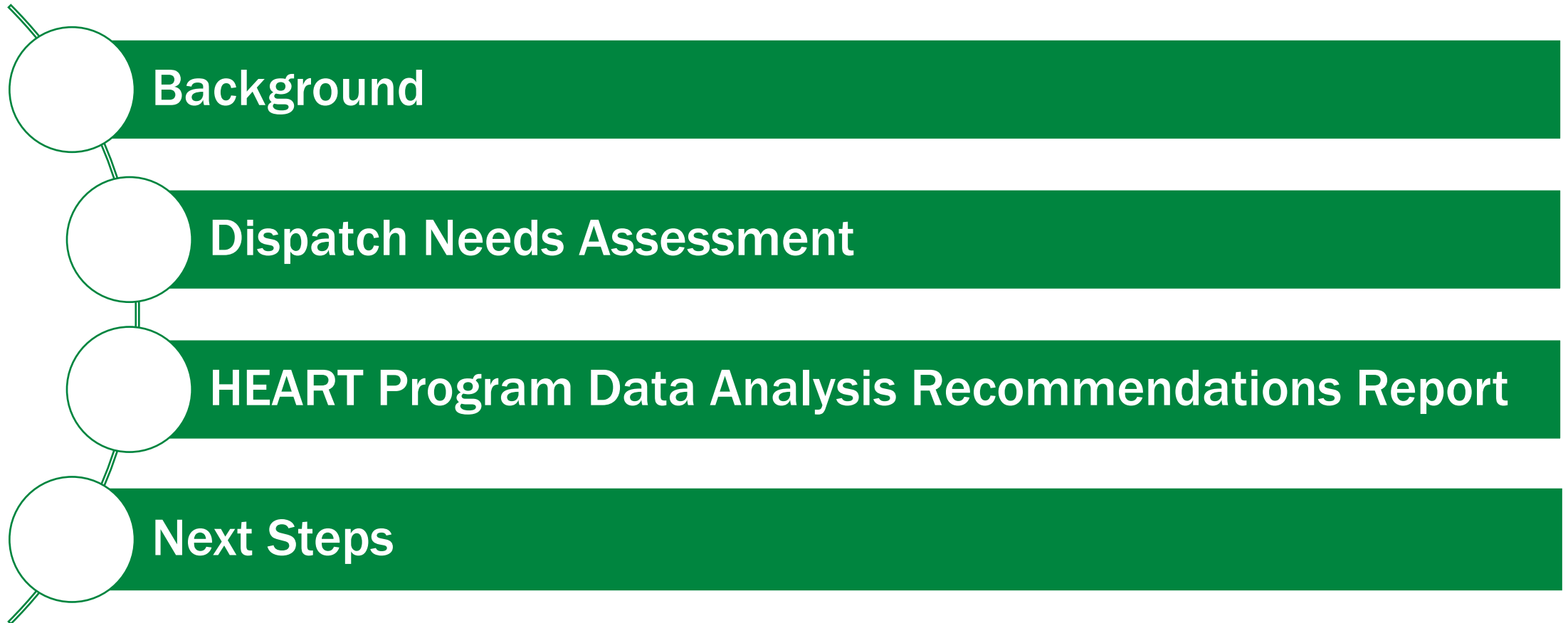
Kelly McAdoo, City Manager
Garrett Contreras, Fire Chief
Bryan Matthews, Acting Police Chief

HAYWARD

Presentation Outline

Background

Dispatch Needs Assessment

HEART Program Data Analysis Recommendations Report

Next Steps

Background

- **July 2020:** Council directs staff to conduct community engagement following George Floyd's murder
- **Fall 2020:** Community Conversations &Survey
- **Spring 2020:** Public Safety Policy Innovation Workshop to address concerns raised in community engagement
- **May 2021:** Council directs staff to implement 9 recommended pilot projects
  - One of these projects was the Dispatch Needs Assessment and Capacity Improvement Plan (Needs Assessment) to support the new public safety projects and initiatives
- **October 2021:** City entered into a contract with Federal Engineering Consulting (FE) to conduct Dispatch Needs Assessment

Dispatch Needs Assessment Recommendations

Presentation by Federal Engineering

HAYWARD

Dispatch Needs Assessment
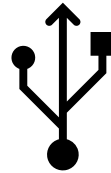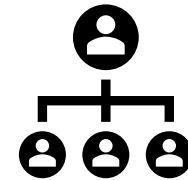# High-Level Strategic Implementation Plan
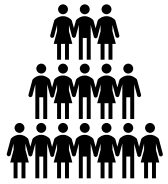
| Staffing | Training | Protocol | Technology | Governance/ Organizational Structure | Facility |

HAYWARD

1. Staffing

Increase Overall Staffing

- Recommendation to increase staffing from 33 positions to 62 HCC employees with turnover factored in to support current workload
- Currently 24 of the 33 authorized positions are filled
- 38 additional staff are required to achieve FE's recommended staffing level

Establish Minimum and Optimum Staffing Levels:

- A minimum staffing complement of eight employees on duty at all times, and ten employees on duty during peak time hours in the HCC

Current Efforts to Address Staffing

- Staff has already begun implementing changes to assist with recruitment and testing for dispatcher candidates
- Council approved a hiring bonus and incentive program, which staff has implemented using salary savings
- A process mapping workgroup was assembled with representatives from Dispatch, Human Resources, HFD, and HPD
- Analysis of the existing recruitment process and collaborative discussions showed areas where the recruitment and testing process can be streamlined for efficiency
- The work group will continue to identify ways to improve and bolster recruitment processes to streamline and produce the highest quality candidates possible

HAYWARD

2. Training

Fill Administrative Supervisor role immediately

Implement full academy/classroom training program for new recruits

Implement continuing education & professional development program for all staff

Implement full QA/QI program, along with a Coordinator position assigned to deliver the program

HAYWARD

3. Call Processing Protocol Implementation

Procure and implement a structured, commercial call-taking and dispatch protocol for Medical, Fire, and Police calls

Implement full medical call-taking in HCC once staffing capacity begins to increase

HAYWARD

4. Technology

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 Behavioral Health Project (as part of data mining and reporting, and risk assessment/protocol creation)

Explore major case management software for HEART that enables data entry from all units/agencies and can provide statistical dashboard of outcomes

HAYWARD

5. Governance/Organizational Model

Move HCC management out of Support Services Manager portfolio

Work towards an independent Communications Center with its own leadership and support model

Communications Center Administrator be provided the authority and autonomy to make operational decisions for the Call Center

Create governance model where equal representation of Public Safety agencies exists, and additional internal and external stakeholders are included

6. Interim Facility Recommendations

A redesign/reconfiguration of current set up in the HCC is necessary to add more workstations for additional staffing positions

A back up facility is necessary as soon as possible

A training room with workstations and HCC technology – CAD, phone, radio, is necessary for recruit training/classroom academy training

A private room for Supervisors for 'one-on-one' meetings or coaching conversations

Staff Recommendations for Prioritized Implementation

- **Staffing is at critical levels; immediate priority is to increase staffing levels to support workload**

- Implementation of additional training

- Implementation of Emergency Medical Dispatch protocols and training

- Implementation of QA/QI program with Coordinator

Staff Recommendations for Prioritized Implementation

Recommendation	Fiscal Impact
Staffing is at critical levels; immediate priority is to increase staffing levels to support workload and implementation of new protocols • 2 Communications Operators ($164,316 each) • 4 Call Taker positions ($141,588 each)	$894,984
Implementation of QA/QI program with Coordinator	$170,000
Implementation of additional training	$20,000
Implementation of Emergency Medical Dispatch protocols and training	_To be determined_
Total	***$1,084,984***

HEART Program Data Analysis Recommendations

Presentation by Federal Engineering

HAYWARD

Workshop Outcomes and Recommendations

SYSTEMS MAPPING
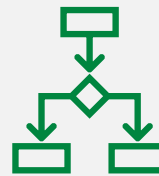
MENTAL HEALTH CALL ASSESSMENT

DIVERSION OF ELIGIBLE CALLS
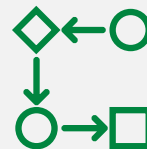
DATA REPORTING AND SHARING

Systems Mapping

Recommendation 1: MET/MIHU work together to determine and formally delineate their roles to ensure efficient service delivery and to prevent duplication of services.

Recommendation 2: Identify method for diversion process at HCC call answer and triage point

Recommendation 3: Complete a systems-mapping exercise to determine HEART program long-term approach and integration of HCC and diversion at the point of dispatch

HAYWARD

Mental Health Call Assessment

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

Diversion of Eligible Calls

Recommendation 5: Identify which calls (if any) will be eligible for diversion to HMET and/or MIHU response

Recommendation 6: Ensure data inputs and disposition codes accurately reflect behavioral health response

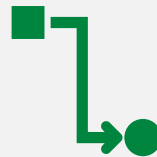**Recommendation 7:** Implement robust training for HCC staff and clinicians

Recommendation 8: Create and implement a quality assurance and quality improvement process for HEART

HAYWARD

Data Reporting and Sharing

Recommendation 9: Assign a Data Analyst position exclusively for the support and success of HEART

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.

HAYWARD

HEART Program Next Steps

Set up a working group that will:

1. Determine whether HEART goals (HMET and MIHU) will be crisis response or dispatch diversion

2. Conduct a systems mapping exercise to identify who responds to certain calls for service

3. Create a "mutually agreed to" call evaluation matrix that assesses risks for identified call types

4. Investigate a dashboard program that meets the data mining needs for stakeholders

H HAYWARD

Timeline to Implementation

- **November:** Council work session

- **January/February:** Council to approve final recommendations and any budget requests

- **Early 2023:** Implementation begins

Staff will continue to implement changes to assist with recruitment and testing for dispatcher candidates to address critical staffing shortages

Work Session Format

- Public Comments
- Council Questions and Discussion