

WHEREAS, effective models of alternative responses to mental health crises, neighbor disputes, and other incidents have been developed and implemented through a joint partnership between the cities of Eugene and Springfield, Oregon. Crisis Assistance Helping Out On the Streets (CAHOOTS) is a 31 year-old program that provides services such as crisis counseling, suicide prevention/intervention, conflict resolution, substance abuse, housing crises, non-emergency medical care, and transportation in the Eugene-Springfield metropolitan area. CAHOOTS is run by the White Bird Clinic, and each CAHOOTS team consists of a medic and a crisis worker trained in trauma-informed care and de-escalation; and

WHEREAS, CAHOOTS responds to approximately 20% of all calls for service to the Eugene and Springfield Police Departments, and the Eugene Police Department estimates that CAHOOTS saves the department \$8.5 million on average annually-nearly 12% of their \$68 million budget. Notably, only 1% of calls directed to the CAHOOTS program required additional support from police; and

WHEREAS, CAHOOTS-style programs are being planned in cities including Denver, Colorado; San Francisco, California; Oakland, California; and Albuquerque, New Mexico; and

Committee on Health and Human Relations

WHEREAS, in a city the size of Chicago, such a model can only meet the needs of our diverse communities if it is part of the public mental health system, and strengthens and expands the existing network of CDPH mental health clinics; now, therefore,

BE IT ORDERED by the City Council of the City of Chicago:

1. That the Commissioner of the Chicago Department of Public Health (CDPH), the Chicago Budget Director, and the Commissioner of the Office of Emergency Management and Communications, and in consultation with the City Council of Chicago and its Health and Human Relations Committee, shall work together to develop a plan to include a publicly funded and operated, Chicago Crisis Response and Care System within the CDPH to establish 24-hour crisis response teams throughout Chicago dispatched from a network of public community mental health centers, to be included in the 2021 City of Chicago budget proposal. The Chicago Crisis Response and Care System proposal shall include the following elements:
 - a. The network of public mental health centers will expand to include enough facilities to serve the full City of Chicago.
 - b. Public mental health centers shall include community and consumer oversight through the establishment of a community advisory council at each center.
 - c. Crisis Coverage shall operate 24 hours per day with at least two vehicles constituting a Crisis Response Unit (CRU) in circulation for each center at all times.
 - d. Each Crisis vehicle shall have two staff, a Clinical Social Worker and an Emergency Medical Technician or Registered Nurse.
 - e. Clinical Social Workers providing Crisis Coverage shall also have time in their weekly

- schedules for the performance of other duties including follow-up case management, public engagement, special projects with community members, professional development, and providing preventative educational services.
- f. Each of the public centers shall be staffed by additional Clinical Social Workers, Case Managers and Restorative Justice practitioners to provide a continuum of care appropriate to the range of needs expected in the community.
 - g. Calls to dispatch a crisis team shall be directed by the Office of Emergency Management and Communications (OEMC) through a new city line (i.e., 211) and through qualifying calls made to either 311 or 911.
 - h. OEMC and CDPH shall seek technical assistance from White Bird Clinic for the development and implementation of the service.
 - i. Include multiple scenarios, timelines, and associated costs for scaling up the model over time.
 - j. Timeline scenarios must include an implementation start-date before the end of 2021; and

Committee on Health and Human Relations

- 2. That funding for this Chicago Crisis Response and Care System and the connected clinics will be appropriated from the CPD, including its Overtime budget line, and said funds will be re-allocated to the CDPH.
- 3. That the Health and Human Relations committee hold a hearing to take place no later than October 30, 2020 in order to allow for public testimony to inform the planning process for the Chicago Crisis Response and Care System.

Alderman 33rd Ward

The following legislation is being introduced by Rossana Rodriguez-Sanchez, co-sponsored by

Daniel LaSpata

Alderman Ward 1

Alderman Ward 8

Alderman Ward 2

Alderman Ward 9

Alderman Ward 3

Alderman Ward 10

Alderman Ward 4

Alderman Ward 11

Alderman Ward 5

Alderman Ward 12

Alderman Ward 6

Alderman Ward 13

Alderman Ward 7

Alderman Ward 14

Committee on Health and Human Relations

Alderman Ward 27

Alderman Ward 28

Alderman Ward 29

Alderman Ward 30

Alderman Ward 19

_Jeannette Taylor

Alderman Ward 32

Alderman Ward 33 _Rossana Rodriguez Sanchez_ Alderman Ward 34

_Carlos Ramirez-Rosa

Alderman Ward 35

Alderman Ward 24

Byron Sigcho Lopez_

Alderman Ward 25

Alderman Ward 38

Committee on Health and Human Relations

Alderman Ward 39

Andre Vazquez

Alderman Ward 40

Alderman Ward 41

Alderman Ward 42

Mayor Lightfoot

Alderman Ward 43

Alderman Ward 44

Alderman Ward 45

Alderman Ward 46

_Matthew Martin

Alderman Ward 47

Alderman Ward 48

Maria Hadden

Alderman Ward 49

Alderman Ward 50

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VALENCIA

Chicago City Council Co-Sponsor Form

Document No.:

Call for development of Chicago Crisis Response and Care System within Chicago Department of Public Health to be included in 2021 budget proposal

Adding Co-Sponsor(s)

Please ADO Co-Sponsor(s) Shown Below ^(Principal Sponsor's Consent Required)

(Signature)

(Signature)

Principal Sponsor:

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(Signature)

*Removing Co-Sponsor(s) Please REMOVE Co-Sponsor(s) Below - {Principal Sponsor's
Consent NOT Required}*

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Date Filed:

Final Copies To Be Filed With: • Chairman of Committee to which legislation was referred
• City Clerk

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