

Evaluating the Impact of Alternative Responses to Crisis Calls: New Projects in Policing & Responding

In partnership with the <u>North Carolina Association of Chiefs of Police</u> and local stakeholders, the <u>UNC</u> <u>School of Government Criminal Justice Innovation Lab</u> (the Lab) is conducting two evaluations of North Carolina alternative responder programs. These programs reduce or remove law enforcement's role in responding to certain crisis calls—such as those involving behavioral health issues or homelessness and connect people to services to address root causes of behavior. The first project is an evaluation of an existing program in the City of Burlington. The second is an evaluation of a pilot program in Orange County. These evaluations build on the Lab's earlier work, including a <u>report</u> and <u>national webinar</u> on existing and planned-for alternative responder programs in North Carolina.

The Burlington Law Enforcement Crisis Counselor Program



The Burlington Police Department's Law Enforcement Crisis Counselor (LECC) Program is a co-responder model. A clinical mental health counselor responds with law enforcement to behavioral health-related calls, to provide care at the scene and connect people to

services. The counselor also follows up with community members to prevent future involvement with law enforcement. First piloted in 2015, the program was expanded in 2016 to help the Department respond to increasing mental health-related calls.



Orange County Crisis Assistance, Response, and Engagement Program

In early 2024, Orange County stakeholders will launch a two-year pilot called the Crisis Assistance, Response, and Engagement (CARE) program. The pilot is limited to calls for assistance to the Chapel Hill Police Department. It involves embedding a behavioral

health specialist in the 911 call center to address and resolve relevant crisis calls and establishing a non-police mobile crisis unit to immediately respond to certain calls. The program's goals include removing police from behavioral health crises that present no immediate public safety risk and connecting people to services.



Evaluation Goals

Both evaluations will examine the programs' impacts across a variety measures, including the number of people served and gaps in service, law enforcement time saved, emergency room visits avoided, criminal justice outcomes, officer and community

sentiment about the programs, and return on investment. The findings will help stakeholders understand the programs' impact and provide information for other communities considering similar efforts. Both projects are expected to conclude by December 2025.

For more information, contact <u>Hannah Turner</u>, Lab Project Manager.

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