

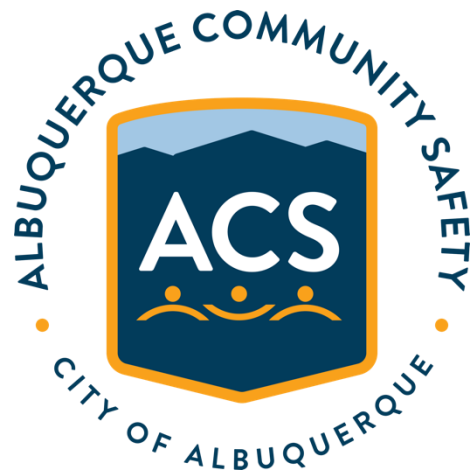


City of Albuquerque
Community Safety
Department

FY25 Q1 Report

October 2024

Jodie Esquibel, Director



(This page left intentionally blank)

Contents

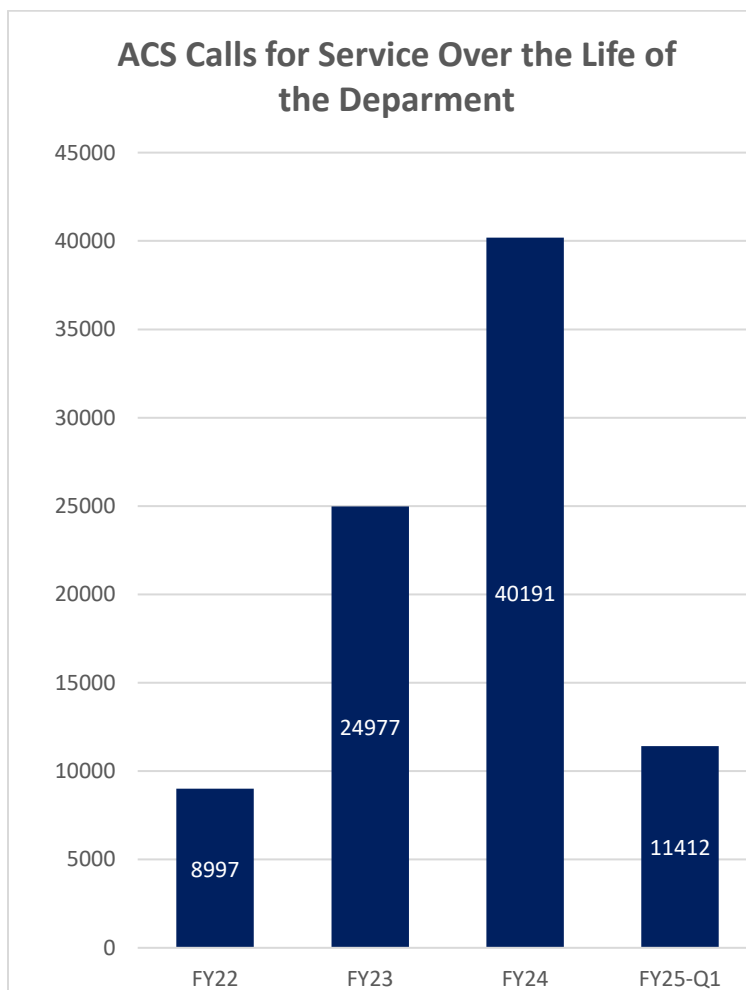
Contents	1
Programmatic Updates and Insights	1
Summer of Nonviolence.....	3
Pohlad Family Foundation & Minnesota Groups Visit ACS.....	3
New ACS Deputy Director of Field Operations	3
New ACS Field Operations Program Manager	3
Street Outreach ACS Connect to Care Events.....	4
Violence Prevention & Intervention Division.....	4
Key Takeaways – Programmatic Updates.....	5
Quarterly Metrics	6
Call Volume	6
Response Times.....	8
311 Call Outcomes	9
Call Outcomes	9
Violence Prevention & Intervention Data.....	11
Key Takeaways – Quarterly Metrics.....	13
Appendix A: Citywide Map of ACS Responses.....	14
Appendix B: Council District 1 CFS Map.....	15
Appendix C: Council District 2 CFS Map	16
Appendix D: Council District 3 CFS Map.....	17
Appendix E: Council District 4 CFS Map	18
Appendix F: Council District 5 CFS Map	19
Appendix G: Council District 6 CFS Map.....	20
Appendix H: Council District 7 CFS Map.....	21
Appendix I: Council District 8 CFS Map	22
Appendix J: Council District 9 CFS Map.....	23

(This page left intentionally blank)

Programmatic Updates and Insights

One quarter through the 2025 fiscal year, the Albuquerque Community Safety Department (ACS) has demonstrated continued growth and increasing capacity. FYTD, ACS has responded to 11,412 calls for service (CFS), on pace to surpass FY2024 by 13.5%. Over 80% of ACS calls for this period were directly diverted from Albuquerque Police Department (APD). These are calls primarily focusing on mental health, homelessness, and addiction that do not require a police response. ACS take on a portion of 911 calls that can be handled by trained behavioral health responders instead of police officers. Continuing at this pace, ACS is projected to respond to almost 46,000 CFS.

Figure 1: Total ACS Calls for Service over the Life of the Department



Quarterly Report: FY25-Q1

Table 1 and Table 2: Comparison of Call Types by Shift (Created Time and Dispatch Time)

Table 1 provides insight on ACS Call Types by shift that represent when (day, swing, graveyard) the call type was created while Table 2 demonstrates ACS Call Type by shift of when an ACS Responder team is dispatched (sent to respond to the call).

On average, about 97% of calls created within a respective shift are dispatched to the call for service during that same shift. The highest call type for ACS is Unsheltered Individual. In FY2025-Q1 there were 3,217 calls for this call type. Respective shifts responded to this call type at the following rates: Day 94%, Swing 94%, and Grave 98%.

Table 1: ACS CAD Events by Call Create Time – FY25 Q1

Call Type	Day	Swing	Grave	Total	Percentage
Unsheltered Ind.	1,265	1,100	852	3,217	39.32%
Wellness	688	774	357	1,819	22.23%
Welfare	423	518	245	1,186	14.50%
Behavioral Health	276	380	262	918	11.22%
Suicidal Ideation	168	268	172	608	7.43%
Disturbance	126	117	44	287	3.51%
Suspicious Ind.	38	41	20	99	1.21%
Panhandling	21	14	6	41	0.50%
Needle Pickup	3	1		4	0.05%
Com. Eng.	1			1	0.01%
Outreach		1	1	2	0.02%
Total	3,009	3,214	1,959	8,182	100%

Table 2: ACS CAD Events by Call Dispatch Time – FY25 Q1

Call Type	Day	Swing	Grave	Total	Percentage
Unsheltered Individual	1,186	1,032	837	3,055	38.30%
Wellness	685	767	351	1803	22.61%
Welfare	418	507	243	1168	14.64%
Behavioral Health	276	379	262	917	11.50%
Suicidal Ideation	166	266	172	604	7.57%
Disturbance	126	117	42	285	3.57%
Suspicious Ind.	38	40	19	97	1.22%
Panhandling	21	14	6	41	0.51%
Needle Pickup	3	1		4	0.05%
Com. Eng.	1			1	0.01%
Outreach		1		1	0.01%
Total	2,920	3,124	1,932	7,976	100%



Summer of Nonviolence

In FY2025-Q1 we concluded our Summer of Nonviolence campaign. The initiative was a collaborative effort by both Albuquerque Community Safety and Bernalillo County to promote a safe summer for youth and families.

The City and County hosted numerous events throughout the community, providing safe havens for youth. These events encompassed a variety of activities, from sports to library programs, outdoor movie screenings, and educational workshops where the youth was able to take the Summer of Nonviolence Pledge in a commitment to a violence free summer. In taking the pledge, the youth received a complimentary commemorative t-shirt.

Along with the pledge, families were also asked to take a Gun Violence Survey which included questions around firearms, gun violence impact on their lives, and an offer for assistance from our Community-Oriented Response & Assistance (CORA) Responders.

A total of 678 pledges were taken, while 1,122 Gun Violence Surveys were filled out during the 3-month campaign.

Pohlad Family Foundation & Minnesota Groups Visit ACS

In August, Pohlad Family Foundation, an organization that focuses housing stability and racial justice in the Twin Cities visited Albuquerque along with a larger group, made up of dignitaries from four different cities and ten organizations from Minnesota, including the National League of Cities to explore modern, innovative approaches to public safety, and the transformative success of ACS.

As part of their agenda, the group met with Mayor Tim Keller, Albuquerque Fire Rescue leadership, Albuquerque Police Department leadership, ACS community partners from Tenderlove, University of New Mexico Hospital, ABQ Street Connect, and with representatives from 911 Dispatch and 311. Some of the visitors also participated in ride alongs with Behavioral Health Responders and peer support staff from ACS's Violence Prevention Intervention division and attended an ACS Connect to Care pop-up resource event at Robinson Park.

New ACS Deputy Director of Field Operations

In August, ACS Director Jodie Esquibel announced the promotion of Walter Adams to Deputy Director of Field Operations. Adams began his journey with ACS as a Behavioral Health Responder, and steadily climbed the ladder within our department. His remarkable progression includes roles as a Behavioral Health Responder Supervisor and most recently as the Mental and Behavioral Health Division Manager. As one of the first five Responders in the department, Adams has immense institutional knowledge and hands on experience to lead the ACS Field team.

New ACS Field Operations Program Manager

In August, Deputy Director of Field Operations Walter Adams announced the promotion of Chris Blystone to ACS Field Operations Program Manager. Blystone previously served as Behavioral Health Responder, and most recently as a Behavioral Health Responder Supervisor. His new role



Quarterly Report: FY25-Q1

will include developing more structure within field operation, and provide additional support and guidance around Responder development and procedures.

Street Outreach ACS Connect to Care Events

The ACS Connect to Care initiative has seen significant success since its launch as a pilot initiative, engaging individuals experiencing homelessness and connecting them with critical resources. Launched in FY2024-Q2, the program's outreach efforts have now evolved into a weekly series of events throughout the city. This expansion reflects the program's growing impact, as it continues to serve unsheltered individuals by offering a broad range of services, including housing assessments, case management, medical treatment, and more.

With a collaborative approach that brings together city departments, local service providers, and community partners, ACS is able to strategically identify high-need areas for these pop-up events, ensuring that essential support reaches those who need it most. These events continue to expand further, with key stakeholders, including Congresswoman Melanie Stansbury's office and the New Mexico Department of Health, joining in to enhance services and support at upcoming events.

These events aim to offer services and support to unsheltered individuals, connecting them with critical resources. Depending on the individual's needs and qualifying factors, ACS provides a variety of services, including but not limited to:

- Housing assessments in partnership with the New Mexico Coalition to End Homelessness
- Section 8 housing assessments SOAR Referrals (SSI/SSDI Outreach, Access, and Recovery)
- Transportation to shelters Basic necessities
- Case management
- Medical treatment
- Narcan
- Resources for pets
- Domestic violence assistance Sex trafficking assistance

ACS selects event locations based on data identifying areas with high numbers of unsheltered individuals. Community partners and feedback from subject matter experts, such as the Albuquerque Police Department (APD), also influence location choices.

ACS's Street Outreach team hosted its first ACS Connect to Care at the tail end of FY2024-Q2. In FY2025-Q1, the events garnered the attention from Congresswoman Melanie Stansbury's camp and New Mexico Department of Health.

Violence Prevention & Intervention Division

ACS's Violence Prevention & Intervention Division holds four (4) programs that each target violence in the community from different angles: **Community-Oriented Response & Assistance (CORA)**, **Opioid Education and Prevention Program (OEP)**, **Violence Intervention Program (VIP)**, and **School-Based Violence Intervention Program (SBVIP)**.



Quarterly Report: FY25-Q1

In 2023 the **CORA** team began taking domestic violence and sexual assault cases as a pilot, working to support the incredible efforts of non-profit partners and our police department. In 2024, these cases comprised about 30% of the team's caseload and have allowed them to be capacity builders to the community. The team added a supervisor, and 2 additional responders in 2024, bringing their total to five.

The **OEP program** brought on three new peers this quarter. With the additional peers, OEP has been more connected with the ACS Connect to Care events--- disrupting cycles of addiction for our neighbors in the street.

VPI - During this quarter, ACS issued a Request for Bid (RFB) for Peer Support Services that would be compliant with both federal and city requirements. This RFB will allow for greater coordination and coverage with VPI's programming. Additionally, VPI's peers will appreciate greater support with benefits such as paid leave, allowing them to balance their work in the community with their commitments to their families.

With the Summer of Nonviolence initiative, the City and County hosted numerous events throughout the community, providing safe havens for youth encouraging them to take a pledge to nonviolence. These events encompassed a variety of activities, from sports to library programs, outdoor movie screenings, and educational workshops. Nearly 3,300 community members attended the events.

In July, the VPI division's **School-Based Violence Intervention Program (SBVIP)** finalized a new MOU with Albuquerque Public Schools. The program, which began at West Mesa High School, expanded to Atrisco Heritage High School. This program interrupts violence among youth by setting students on a pathway to success.

Key Takeaways – Programmatic Updates

- ACS is on pace in FY 2025 to surpass FY 2024's call for service number by 13.5%.
- Nearly 3,300 community members attended Summer of Nonviolence events. The campaign received over 670 pledges to nonviolence and over 1,100 individuals filled out gun safety awareness surveys.
- Walter Adams appointed Deputy Director of Field Operations succeeding now Director Jodie Esquibel.
- Chris Blystone named new ACS Field Operations Program Manager.
- SBVIP finalized new MOU with APS and expanded program to Atrisco Heritage High School.
- Connect to Care resources fairs partnered with New Mexico Department of Health.



Quarterly Metrics

Call Volume

FY25 Q1 total call volume was 19.8% higher compared than FY24 Q1. A significant factor is an increase in 9-1-1 calls (see Figure 3) much of this can be attributed to the fact that in FY24-Q1 ACS Responders were dispatched by Albuquerque Fire Rescue and are now dispatched by APD; as a result we've seen more calls from 911.

Responders are also self-initiating less often due the high volume of both 9-1-1 and 3-1-1 calls.

Figure 1: Q1 CFS Yearly Comparison -

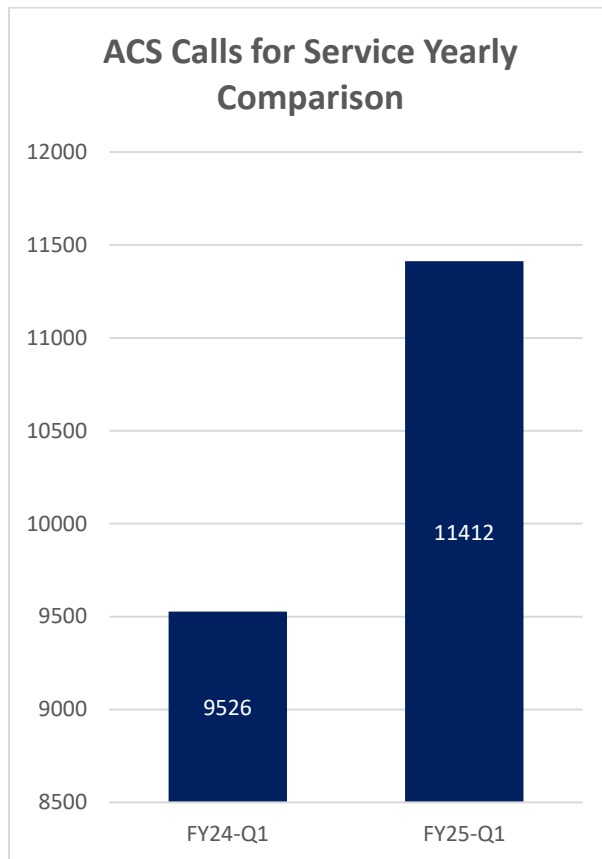
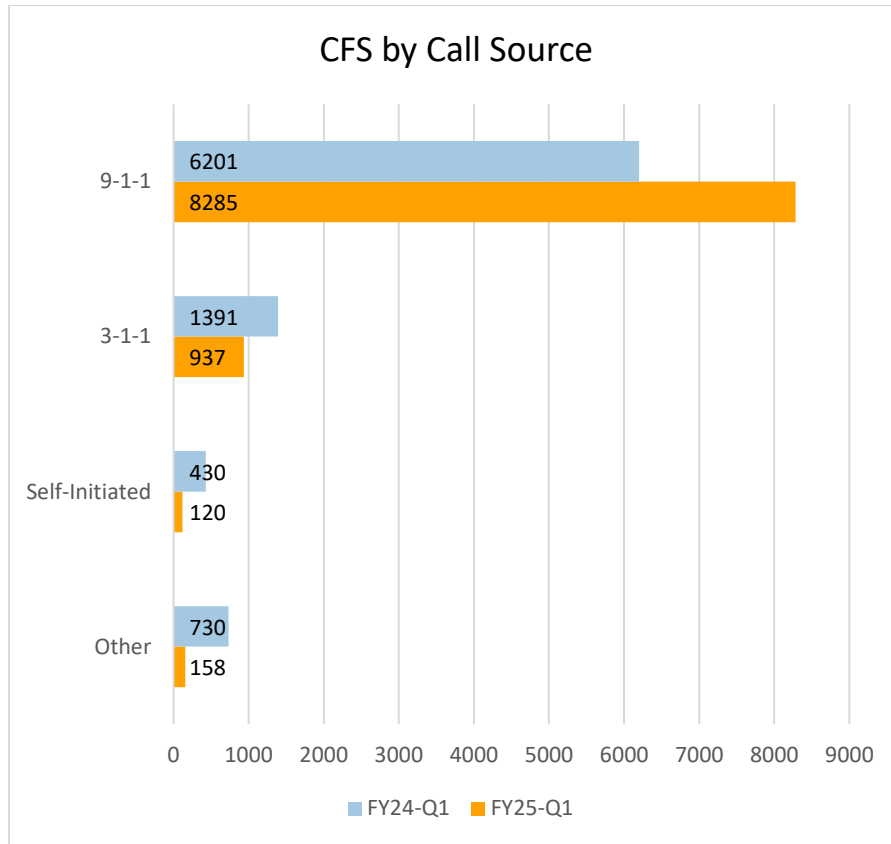


Figure 2: FY Q4 Call Sources Yearly Comparison



Quarterly Report: FY25-Q1

Response Times

ACS Responders prioritize higher acuity calls such as behavioral health and suicide-related issues. Each call is designated a priority level in our system. Table 5 below breaks down the average response times to respective priority levels (Priority 2 being the highest priority on the call while Priority 5 is considered the lowest).

A notable figure is the 18 minutes and 52 second timeframe that Responders averaged in arriving on scene to Priority 2 calls.

Table 3: Average Response Times by priority for Behavioral Health Responders – FY25 Q1

	Behavioral	
Priority 2	Create To Entry	00:03:45
	Entry to Dispatch	00:43:38
	Dispatch to Onscene	00:18:52
	Time On-Scene	00:28:51
	Create to Clear	01:32:51
	Calls	2,762
	% of Total Calls	27.31%
	Priority 3	Create To Entry
Entry to Dispatch		03:25:33
Dispatch to Onscene		00:29:07
Time On-Scene		00:17:16
Create to Clear		04:15:20
Calls		2,426
% of Total Calls		23.99%
Priority 4		Create To Entry
	Entry to Dispatch	08:48:11
	Dispatch to Onscene	00:30:48
	Time On-Scene	00:15:28
	Create to Clear	09:40:49
	Calls	900
	% of Total Calls	8.90%
	Priority 5	Create To Entry
Entry to Dispatch		09:34:37
Dispatch to Onscene		00:25:42
Time On-Scene		00:11:54
Create to Clear		10:39:17
Calls		154
% of Total Calls		1.52%
Grand Total		Create To Entry
	Entry to Dispatch	03:10:18
	Dispatch to Onscene	00:24:49
	Time On-Scene	00:21:58
	Create to Clear	03:59:47
	Calls	6,242
	% of Total Calls	61.72%



Quarterly Report: FY25-Q1

311 Call Outcomes

The average time to close an ACS 3-1-1 service request in FY2025-Q1 was 5 hours and 44 minutes, down from 37 hours and 25 minutes in FY2024-Q4 (**a 95.3% improvement**), and down from 41 hours and 43 minutes hours in FY2024-Q3. ACS continues to perform well within the expectations of a 72-hour window for 3-1-1 tickets. The significant decrease can continue to be credited for the department adding a ACS Triage Specialists at the Emergency Communications Center who quickly route calls and tickets appropriately for ACS. Secondly, department benefitted tremendously in the addition of Responders from ACS’s July Academy class. The department continues to meet the growing demand for our services.

Call Outcomes

ACS responses often have more than one outcome. This can be due to assisting multiple people on a call or addressing multiple needs. Table 7 below breaks down how often certain outcomes occur on ACS responses. Notably, about 1 in 16 calls result in transport to a service provider (822 total transports—56% more than this time last year) and 29.2% of calls result in no person being found.

Concerning safety, ACS Responders still only call out APD on about 1% of calls when they determine APD is more appropriate before they engage in that response.

Table 4: Frequency of Outcomes during ACS Responses – FY25 Q1

Call Outcomes	% of Calls w/this Outcome
No Person Found	30%
Performed Welfare Check	20%
Declined Services or Walked Away	13%
Directly Met Need	9%
Provided Information	9%
Transported	6%
No Action Required	3%
Connected to a Service / Resource	3%
AFR Call-out	2%
Other	1%
Responder Canceled for Safety Concerns	1%
APD Call-out	1%
Attempted Referral	1%
Other	1%



Quarterly Report: FY25-Q1

Table 5: Service Provider Transport Outcomes – FY25 Q1

Call Outcomes	# of Transfers to this Location
Presbyterian Kaseman Hospital	169
University of New Mexico (UNM) Adult Psychiatric Center	133
Gateway West	89
Other	74
Gateway Center First Responder Drop Off	68
University of New Mexico Hospital (UNMH)	61
Lovelace Medical Center Downtown	46
Presbyterian Hospital	41
Joy Junction	20
CARE Campus Detox (Formerly MATS)	19
Lovelace Women's Hospital	14
Veterans Affairs (VA) Hospital	10
University of New Mexico (UNM) Children's Psychiatric Center	8
HopeWorks	6
Presbyterian Rust Medical Center	6
Abq StreetConnect (Heading Home)	4
Albuquerque Opportunity Center (AOC)	4
God's Warehouse	4
The Rock at Noon Day	4
First Nations Community Healthsource	3
Albuquerque Health Care for the Homeless (AHCH)	2
Family Advocacy Center	2
First Choice Community Healthcare	2
Good Shepard Fresh Start	2
Albuquerque Sexual Assault Nurse Examiners (SANE)	1
CABQ Animal Welfare Department	1
Four Winds Behavioral Health	1
Haven Behavioral Hospital	1
Haven House	1
John Marshall Center	1
Safehouse	1
The Compassion Services Center	1
UNM Addiction and Substance Abuse Program (ASAP)	1



Quarterly Report: FY25-Q1

Violence Prevention & Intervention Data

The Violence Prevention & Intervention Division houses multiple programs that address violence in the community.

VIP Custom Notifications

ACS’s Violence Intervention Program (VIP), which it runs in collaboration with APD, defines success as helping participants exit the cycle of violence. This is defined through recidivism, or recurrent involvement in further violent crime. VIP maintains a 95% two-year running success rate of participants not recidivating in further violent crime.

VIP Peer Support Workers and APD officers identify and intervene with the individuals most likely to engage in gun violence. This intervention is called a Custom Notification. The tables below compare the outputs of the program to this time last year.

Table 6: Q1 VIP Custom Notifications Yearly Comparison

	FY24 Q1	FY25 Q1
Candidates for Customs Attempted	123	97
Custom Notifications Delivered	79	54
Clients Engaged in Services	22	22

In FY2025 Q1, VIP operated with limited staff, working to fill its open Division Manager, and Program Manager roles. Additionally, during this time, the department’s Social Services Manager was on personal leave. These were factors in the differential in custom notifications and engagements.

Table 7 OEP Insights

OEP	FY25 Q1
OEP Referrals	97
Candidates Engaged	41
Candidates Seeking Tx	12

The OEP team interrupts cycles of addiction by providing education and resources to individuals and families after an overdose. The team focuses on substance abuse with opioids. ACS OEP team receives referrals from partnered departments on individuals caught in cycles of opioid abuse and reaches out to them to offer services. When successful contact is made an engagement begins.



Quarterly Report: FY25-Q1

With the **School Based Violence Intervention Program (SBVIP)**, students are referred by teachers and staff based on history and risk to be involved in gun violence. Upon choosing to participate in the program, they are connected with a SBVIP specialist and other participating peers to share experiences, build connections, and improve academic performance. By providing direct intervention the program aims to reduce incidents of violence, improve student well-being, and create safer school environments, ultimately benefiting the broader Albuquerque community. The program is currently in West Mesa High School, and Atrisco Heritage High School.

SBVIP receives referrals by partnering with APS and utilizing their early warning indicator system. Perspective students are evaluated for fitness to the program and if the fit makes sense, the team will begin their wrap around services.

Table 8 Q1 SBVIP Insights

SBVIP	FY24 Q1	FY25 Q1
Students Referred based on (intake/referral) dt	1	12
Actively Engaged (based on case notes)	6	21

Connection to Services

A significant part of what VIP does is get participants to engage with services that meet their underlying needs. Table 12 breaks down the various types of services VIP have connected participants to this quarter.

Table 9: Types of Services VIP Referred Participants to during – FY25 Q1

Service	FY25-Q1
Peer Support	28
Trauma Recovery	19
Behavioral/Mental Health Services	16
Basic Needs	8
Shelter/Housing	3
Medical Services	3
Job Placement	2
Rental/Utility Assistance	2
Transportation	2
CVRC	2
Resource Navigation	1
Job Training	1
Higher Education	1
Substance Use Treatment/Counseling	1
Relocation	1
Family Counseling/Intervention	1
Legal Interventions	1
Child Care	1
Personal Identifying Docs	1



Quarterly Report: FY25-Q1

Community-Oriented Response & Assistance (CORA) Program

CORA Responders work with individuals, families, and communities to heal and move forward after traumatic events including shootings, deaths, and domestic violence. The table below shows the types of incidents CORA has received referrals for compared to this time last year. Notably CORA has seen a significant increase in referrals to support victims of domestic violence

Table 10: Q4 CORA Referrals by Incident Type Yearly Comparison

Incident Type	FY24 Q1	FY25 Q1
DV/Sexual Assault	26	32
Other	9	16
Homicide	12	11
Suicide	5	9
Gun/Other Violence	70	7
Other Deaths	9	2

This quarter, CORA assisted 173 individuals.

Table 11: Q4 CORA Impact Metrics Yearly Comparison

Impact Metric	FY24 Q1	FY25 Q1
Referrals Made	217	122
Referred Incidents	128	77
Adults assisted	107	68
Outreach operations	88	41
Children assisted	61	29
Community Engagements	8	0
Referrals Made	217	122

Key Takeaways – Quarterly Metrics

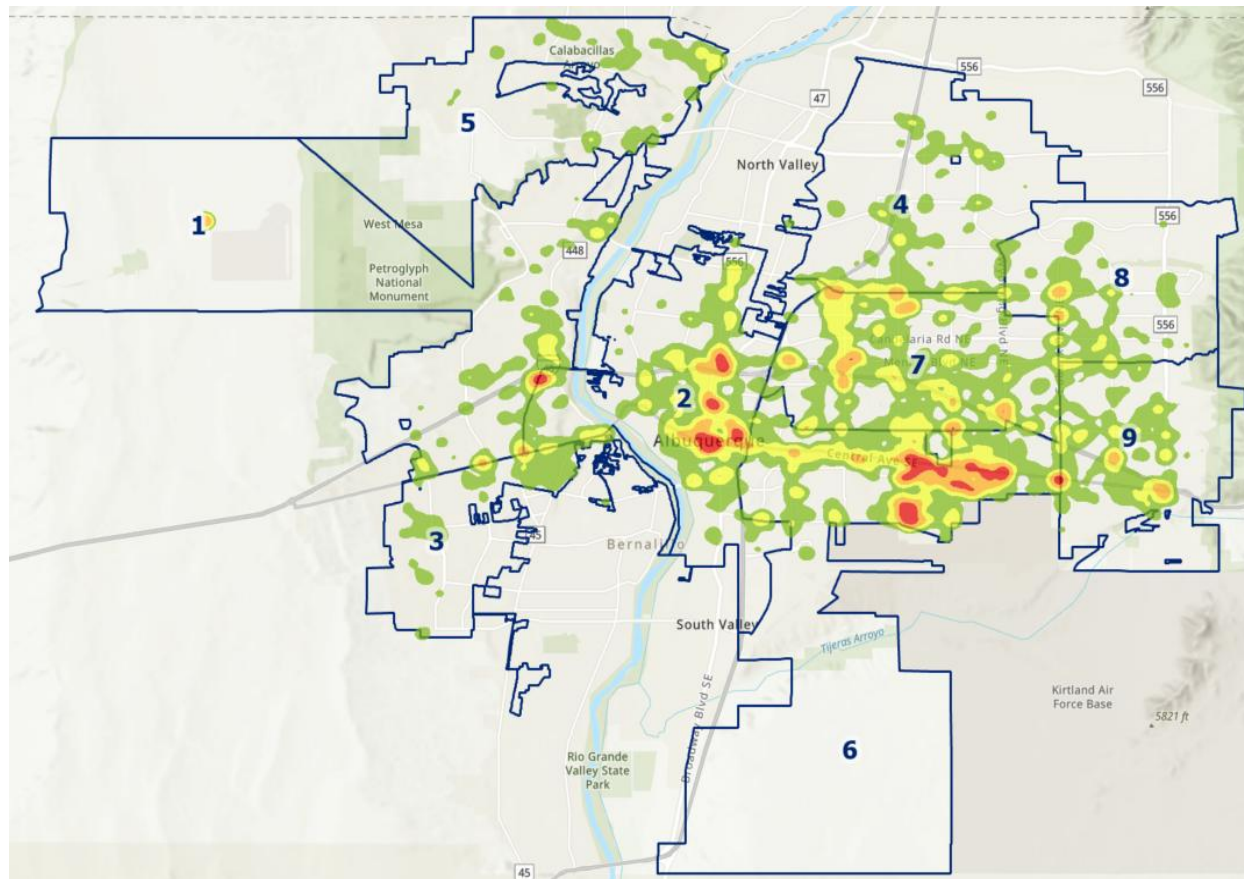
- FY25 Q1 call volume is 19.8% higher compared than that in FY24 Q1
- 95.3% improvement in closing 3-1-1 tickets
- Response times have increased. However, one of the goals of transitioning to APD dispatch was to help prioritize and streamline responses as the department is facing an increase in demand.
- A total of 800 ACS responses in FY2025 Q1 resulted in a transport to service providers or shelter.
- The Violence Intervention Program (VIP) is holding a 95% success rate.
- CORA Responders assisted 173 individuals.



Appendix A: Citywide Map of ACS Responses

Figure 3: Citywide ACS Responses during FY25-Q1

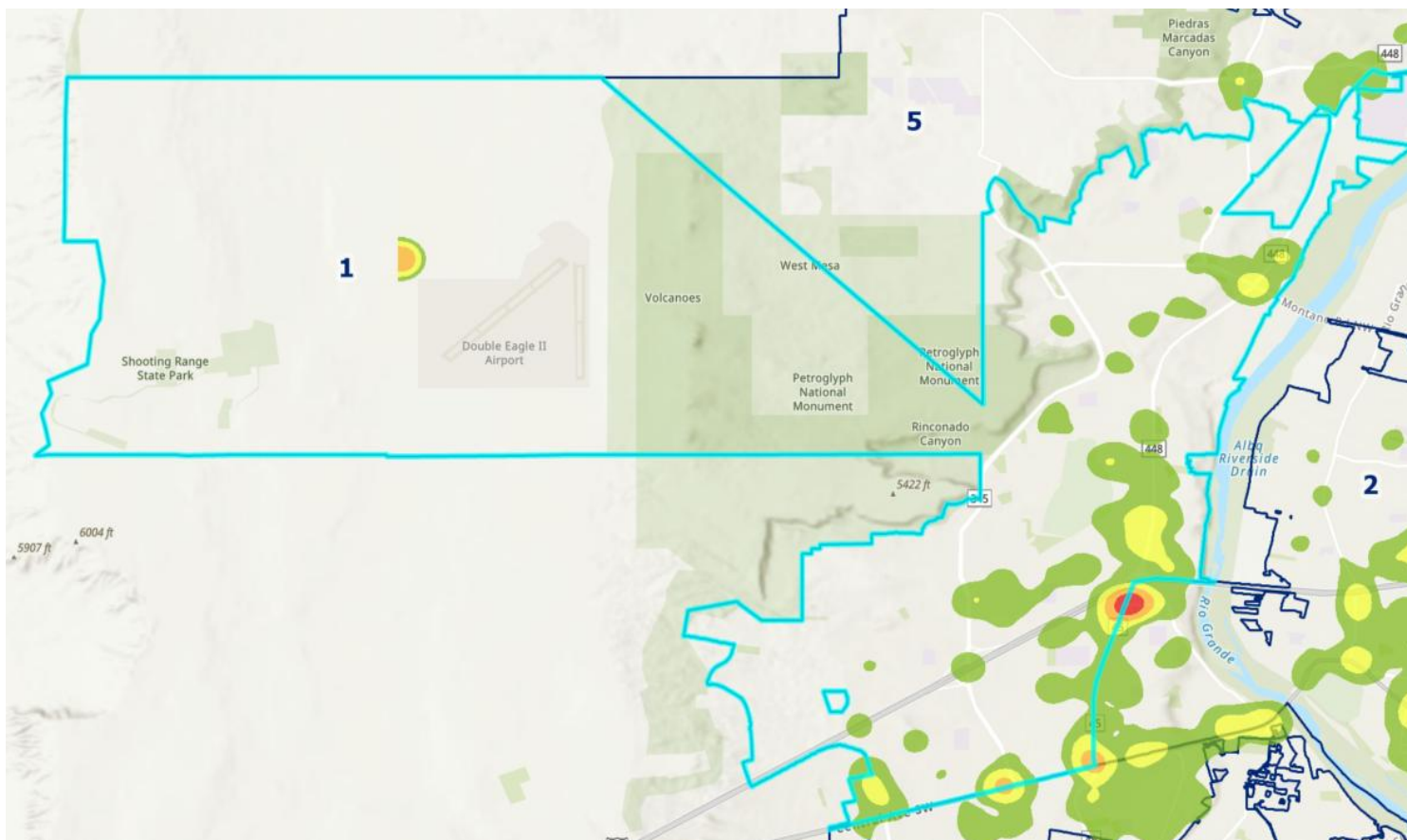
In FY25-Q1, ACS created 9,422 reports citywide, a 0.5% increase from FY24-Q4.



Appendix B: Council District 1 CFS Map

Figure 4: ACS Responses in CD1 during FY25-Q1

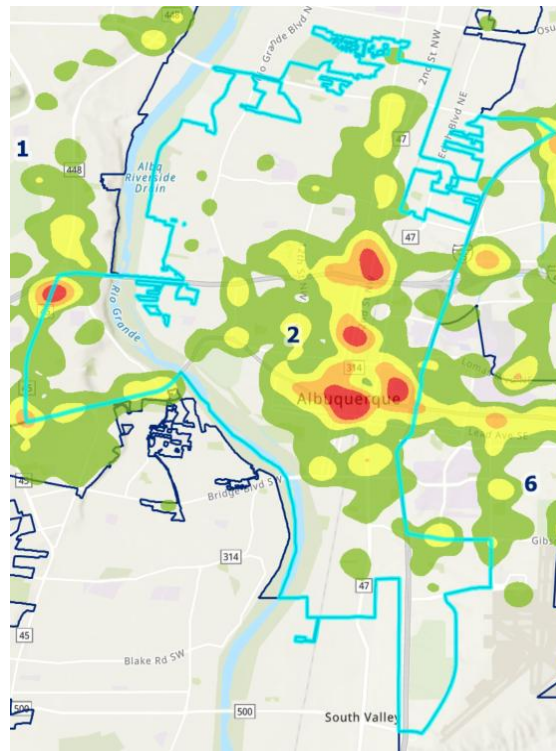
In FY25-Q1, ACS created 625 reports within Council District 1, a 9.2% decrease from FY24-Q4.



Appendix C: Council District 2 CFS Map

Figure 5: ACS Responses in CD2 during FY25-Q1

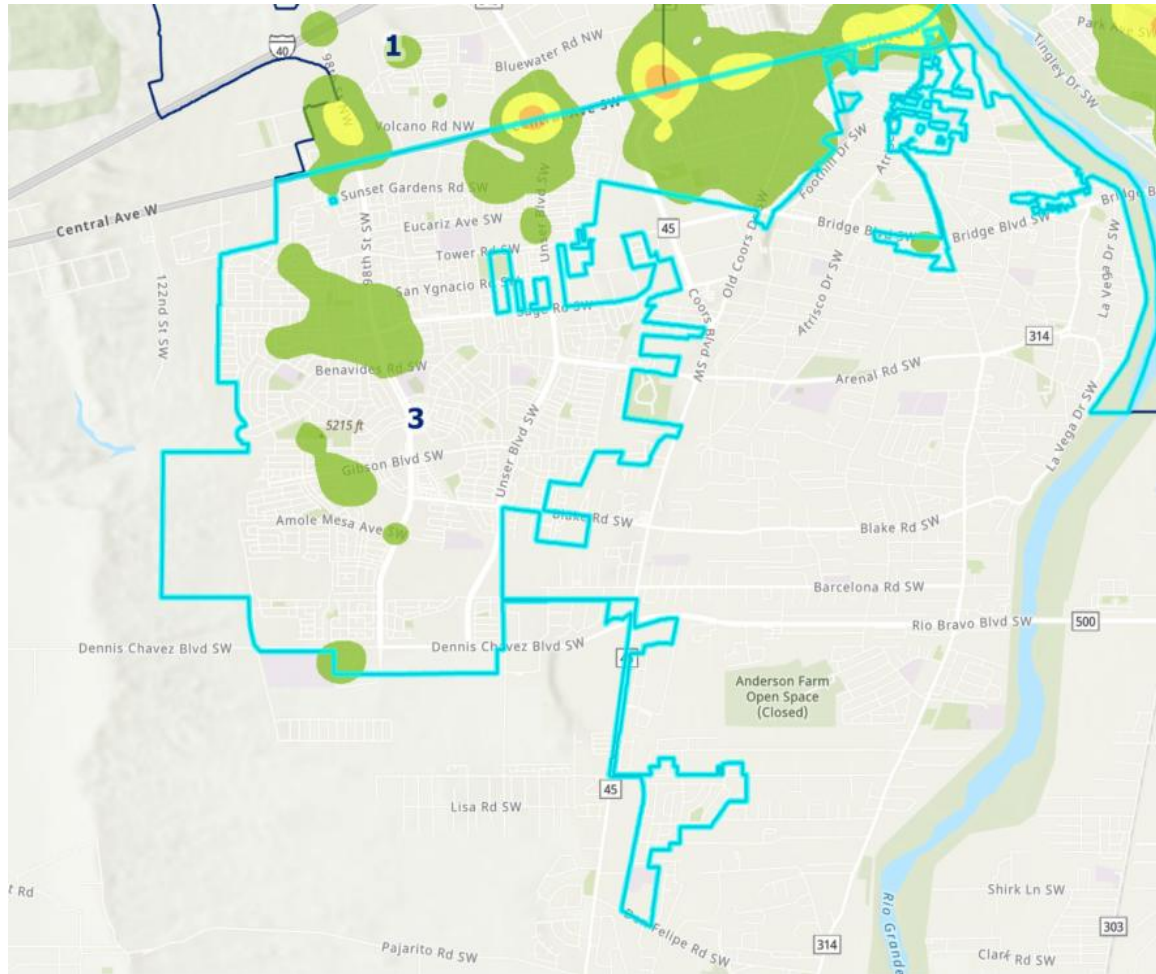
In FY25-Q1, ACS created 2,075 reports within Council District 2, a 0.09% decrease from FY24-Q4.



Appendix D: Council District 3 CFS Map

Figure 6: ACS Responses in CD3 during FY25-Q1

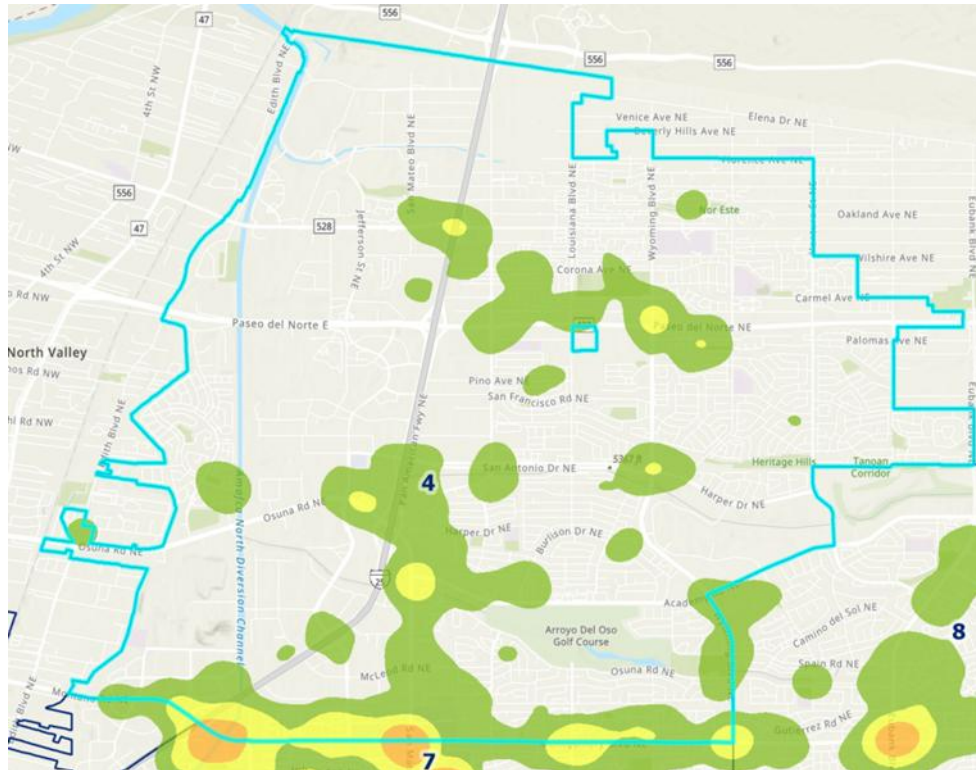
In FY25-Q1, ACS created 326 reports within Council District 3, a 3.5% decrease from FY24-Q4.



Appendix E: Council District 4 CFS Map

Figure 7: ACS Responses in CD4 during FY25-Q1

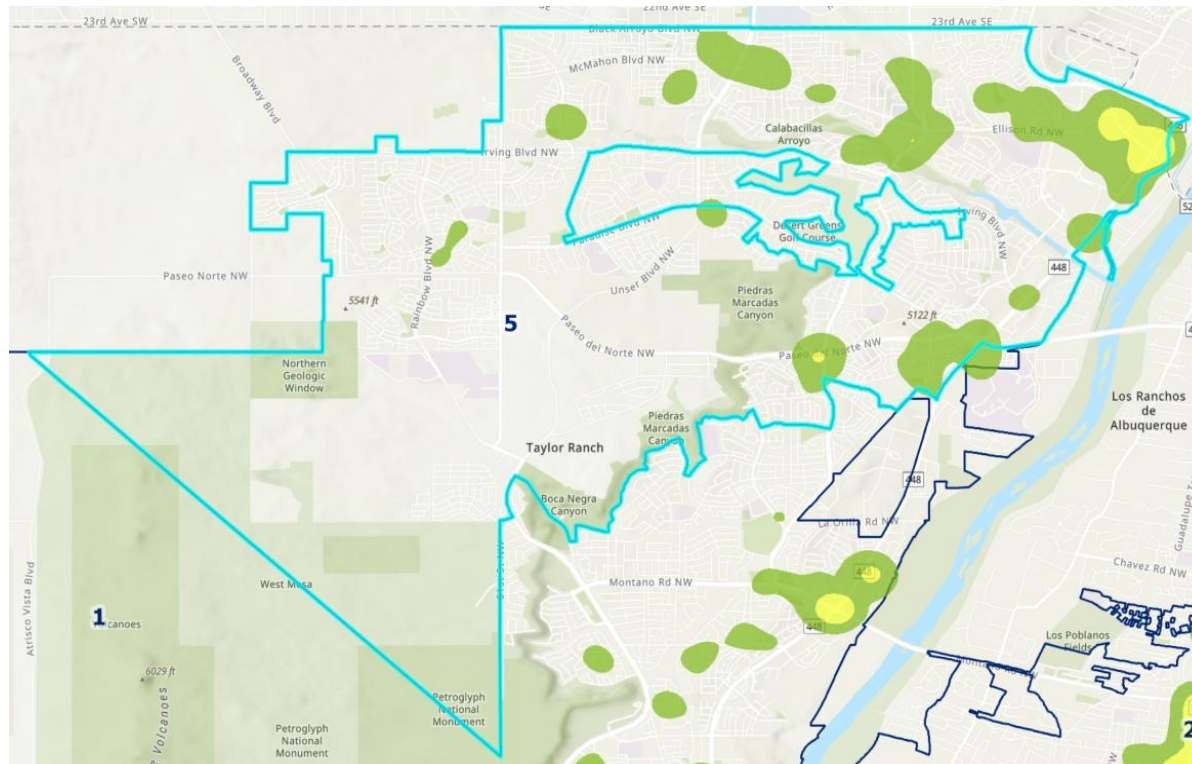
In FY25-Q1, ACS created 572 reports within Council District 4, a 19.5% increase from FY24-Q4.



Appendix F: Council District 5 CFS Map

Figure 8: ACS Responses in CD5 during FY25-Q1

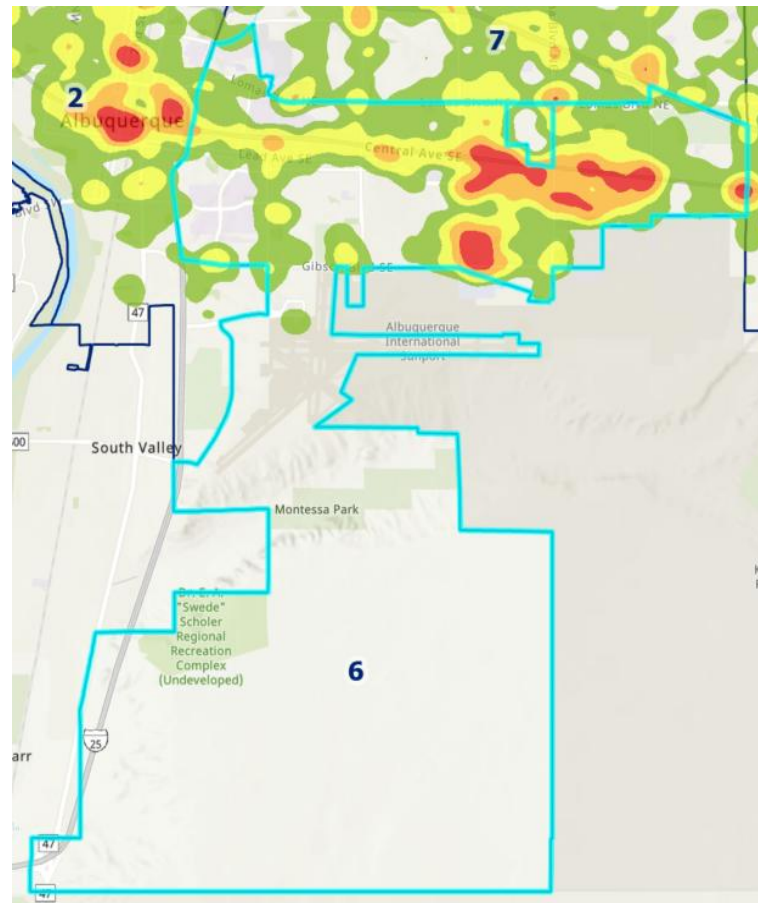
In FY25-Q1, ACS created 320 reports within Council District 5, an 5.9% decrease from FY24-Q4.



Appendix G: Council District 6 CFS Map

Figure 9: ACS Responses in CD6 during FY25-Q1

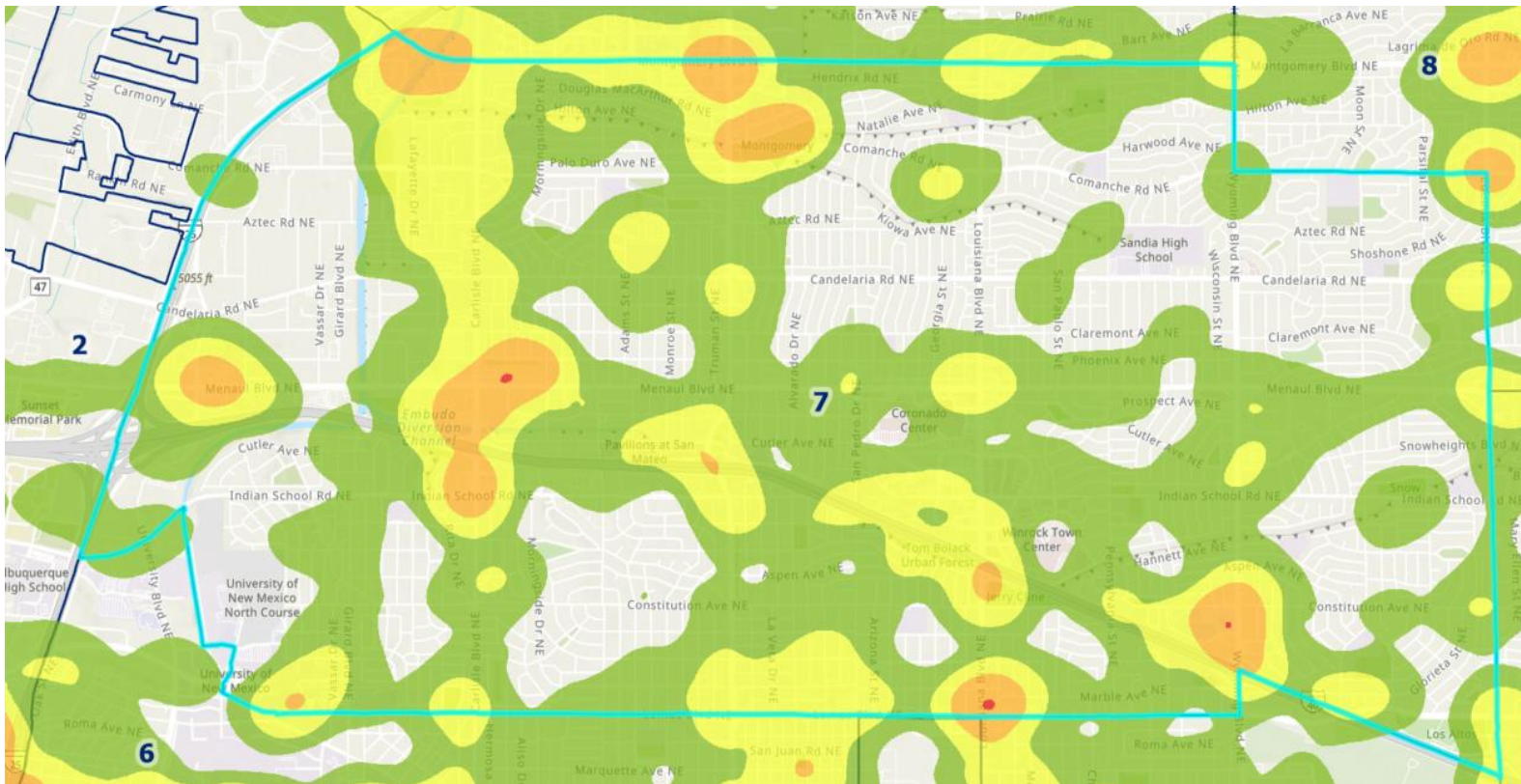
In FY25-Q1, ACS created 2,472 reports within Council District 6, a 1% increase from FY24-Q4.



Appendix H: Council District 7 CFS Map

Figure 10: ACS Responses in CD7 during FY25-Q1

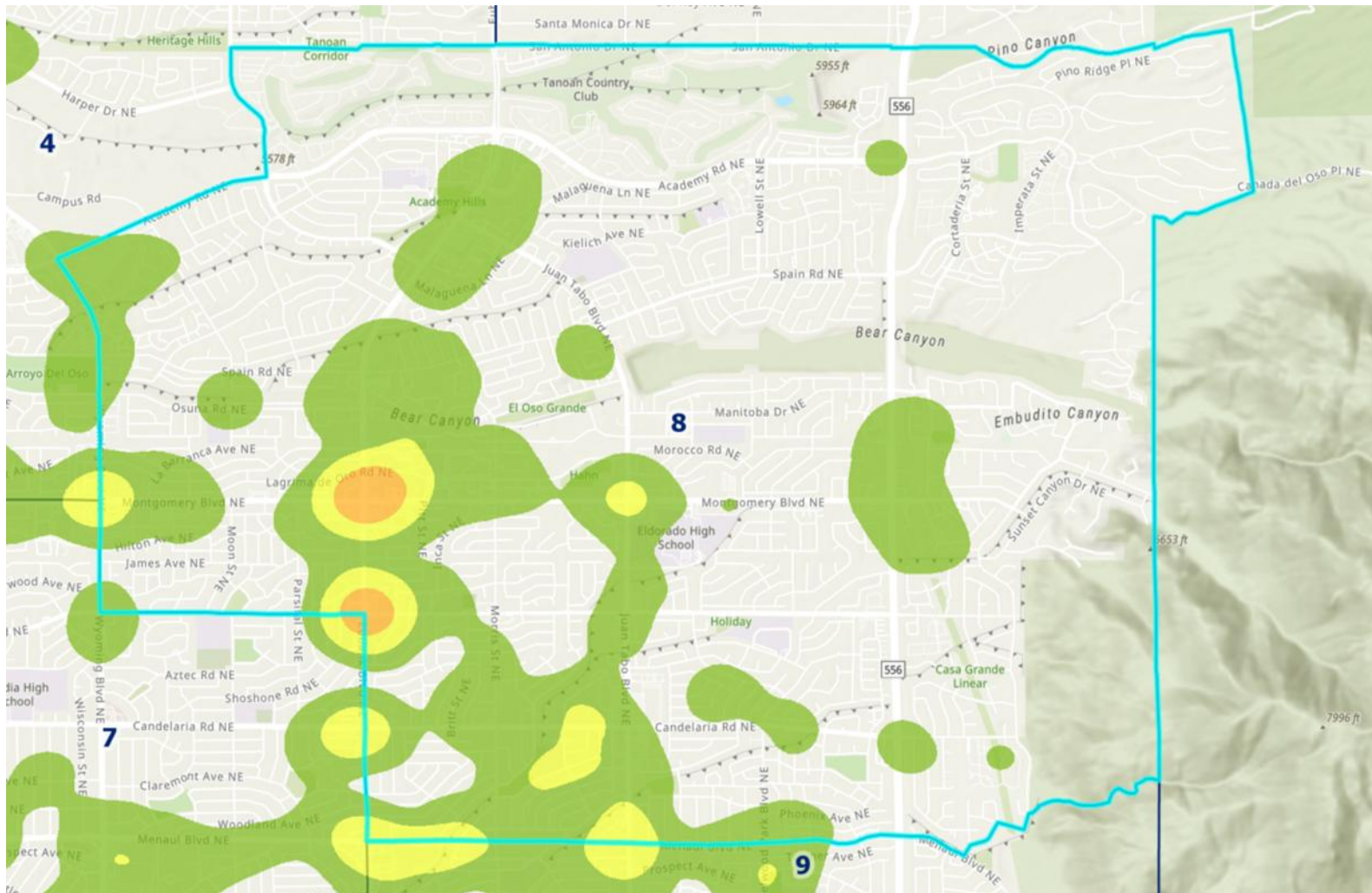
In FY25-Q1, ACS created 1,836 reports within Council District 7, a 9.7% increase from FY24-Q4.



Appendix I: Council District 8 CFS Map

Figure 11: ACS Responses in CD8 during FY25-Q1

In FY25-Q1 ACS created 478 reports within Council District 8, a 0.4% increase from FY24-Q4.



Appendix J: Council District 9 CFS Map

Figure 12: ACS Responses in CD9 during FY25-Q1

In FY25-Q1, ACS created 746 reports within Council District 9, a 7.4% decrease from FY24-Q4.

