

*COMMUNITY ASSISTANCE  
AND LIFE LIAISON (CALL)  
PROGRAM*

**Comprehensive Equity & Process Evaluation**

Phase 2: Implementation Process and Fidelity, Acceptability, & Impact

*By*

*University of South Florida*

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Comprehensive Equity and Process Evaluation of the  
*Community Assistance & Life Liaison (CALL) Program*  
Phase 2: Implementation Process and Fidelity, Acceptability, & Impact  
*Funded by Foundation for a Healthy St. Petersburg*

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## INTRODUCTION & OVERVIEW OF EVALUATION PROJECT

### Background and Larger Evaluation Goals

The CALL program involves a partnership between the St. Petersburg Police Department (SPPD) and Gulf Coast Jewish Family Community Services (GCJFCS) to divert non-crime-related calls (e.g., mental health, wellness, substance use, homelessness) received by the emergency communications division to the CALL team instead of law enforcement. The CALL team (community navigators) responds to the calls, evaluates client needs, recommends services and resources, and conducts follow-up visit or check-ins. The team also provides a 24/7 crisis line number for clients to use in lieu of calling 911, police, or dispatchers.

The CALL program was initiated in February 2021, and took a multi-phase approach to gradually increase the number of events responded to by the CALL team without police involvement. At first, the CALL team was embedded within the Police Assisting the Homeless (PATH) unit, and then the CALL team took increasing responsibility for responding to calls independently. Since May 21, 2021, the program has been in full implementation, where the CALL team is responding to eligible events during their operating hours without police assistance (unless needed).

In 2022, the Foundation for a Healthy St. Petersburg (hereafter, foundation) contracted with the University of South Florida (USF) Center for Justice Research and Policy (CJRP) to conduct a “process” evaluation to determine whether the CALL program is being implemented equitably. The goal of the CJRP evaluation was to identify any unfair and avoidable aspects of the program and protocol that may deprive certain population groups of proportionate and/or equitable access to the resources<sup>1</sup>. The CJRP evaluation team proposed two phases of implementation. **Phase 1** was proposed as a *protocol and data review* to examine the extent to which: 1) protocols, administrative plans, formal program activities, and trainings of staff were administered with equity and inclusion and could potentially affect whether the program is implemented equitably; and 2) data obtained indicated that

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<sup>1</sup> Segone, M. & Bamberger, M. (Eds.) (2012). *Evaluation for equitable development results*. New York: UNICEF.

the CALL team was being dispatched equitably, across demographics of the client and the neighborhood characteristics, mental health and casework needs (e.g., community drivers), and representation in the community. **Phase 2** was proposed as the evaluation of the on-the-ground *processes* and *fidelity* of implementation (e.g., direct evidence of how decisions are made), *acceptability* by those with a vested interest in the program (e.g., police officers, community members), and perceived *impact* of the program, especially regarding equity concerns.

### Summary of Phase 1 Evaluation Results

During the Phase 1 evaluation, the CJRP evaluation team conducted a comprehensive process evaluation by reviewing written and reported protocols of implementation and analyzing archival data obtained from SPPD. The main goals were to determine whether implementation protocols were vulnerable to discriminatory practices, implicit bias, or inadvertent oversight and whether the data indicated that the program served the communities with relevant needs. The evaluation was completed in July 2022. The Phase 1 evaluation report was subsequently submitted to the funders and those who run the CALL program (SPPD and GCJFCS), and shared with the public in community forums and online. For detailed results, please visit: [CALL Program Phase 1 Evaluation](#).

In summary, using contact data from CALL responses made between May 2021 to and February 2022, the Phase 1 evaluation found that the CALL program made 3,794 non-crime contacts (both live referrals and proactive contacts), and SPPD officers responded to 2,859 non-crime calls (only live referrals) in that same time period, mostly due to CALL exclusion criteria (e.g., presence of a weapon, violence-related history). About 45% of CALL's contacts were "live" referrals, when they were dispatched directly by the emergency communication team (e.g., 911 calls), and the rest of the contacts were follow-ups to previously seen clients, proactive contacts with high-utilizers, and in response to officer referrals. Mental health issues represented the most common non-crime events to which the CALL team responded. Although the CALL team responded to fewer live referral calls from dispatch (37%) than did SPPD officers, the follow-up and proactive contacts are a major strength of the work being done by CALL. This structure allows the CALL team to provide continuous resources and proactively anticipate the needs of individuals.

In terms of equity, the results of the Phase 1 evaluation indicated that CALL services were provided similarly to communities regardless of sociodemographic characteristics and crime rates in those communities, with some exceptions. The results suggest that the program is highly *feasible* in

achieving equity in its current implementation. Importantly, the CALL program substantially reduced unnecessary contact between citizens and law enforcement. Nonetheless, a few instances of disparities were observed. For example, contacts that occurred in zip codes with higher-than-average economic disadvantage (e.g., unemployment, poverty) were more likely to be seen for initial contact than for follow-ups. Further, more youth-related calls (both disorderly juvenile and truancy) were made for clients with Black racial/ethnic identities and in census tract areas with more Black residents, poverty, and unoccupied housing units. Even more concerning, SPPD was almost two times more likely to respond to these youth calls and more than three times more likely to handle Marchman Acts (involuntary substance use orders) than the CALL team. Since youth calls were more likely to occur when the youth was Black and from lower income communities, this means that youth in those communities are less likely to be diverted from police contact.

### Updates since the Phase 1 Evaluation

CALL leadership and team members were responsive to the Phase 1 evaluation report, especially concerning youth engagement. As such, additions and changes were made to the program to address the reported disparities. First, the team hired a youth specialist to conduct proactive outreach with youth-serving agencies and to specialize in responding to youth-related incidents in the community. Second, the CALL team expanded their attempts to engage the community and inform them of the role of CALL. For example, the team has held informational and engagement events in the community and sponsored back-to-school events, wherein parents, youth, and community members are exposed to the mission of CALL and provided with the CALL 24/7 crisis line number. The CALL leaders shared with us a list of events and outreach activities of this kind (see Table 1). Second, the CALL team has since acquired a van that they can use for transport, which has a plexiglass divider between the front and back seats. As such, the team can rely less often on police officers for transport of clients who are Baker acted or otherwise referred to a psychiatric setting. Third, the 24/7 on-call line gets quite a bit of use, so that community members can reach out to the CALL team directly, without having to call 911 or be routed from the emergency communication division (ECD) dispatchers. According to the director of the CALL team, the on-call number receives about 50 calls per month, with many of these calls requiring a face-to-face follow-up. These efforts likely have had an added impact on community knowledge and perceptions of the program.

At the same time, updated dispatch data of events occurring between July 2022 and September 2023 (since the Phase 1 evaluation) that was provided by SPPD (see Table 2) indicates that police are still responding to a large percentage of youth-related events (929 by officers vs. 184 by CALL). The reasons for this continued pattern of SPPD involvement in youth disorderly seem to relate to safety concerns for the CALL team. The majority of callers to dispatch report that the youth cases to which SPPD responded could involve risk of violence. Thus, these calls are excluded from the CALL team. However, it is important to note that these numbers do not include officer referrals to CALL after they have cleared the scene at these youth events, or proactive contacts that CALL has made with families or youth outside of dispatch. Further, the interactions stemming from the on-call number are not included in the data from SPPD, which captures dispatcher-routed interactions only. Thus, diversion of some youth could be under-counted based on dispatch numbers. In sum, the efforts by CALL to divert youth and engage with communities are commendable and require more time to observe their full effects.

*Table 1: CALL Community Events, Partnerships and Outreach to Youth-Oriented Organizations*

Event Type	Agency	Youth Specialist/CALL Outreach Details
School Readiness	The Saturday Shoppes	<ul style="list-style-type: none"> <li>Gave out over 2,000 stuffed backpacks at Tropicana Field</li> </ul>
	Anytown Camp	<ul style="list-style-type: none"> <li>Provided school supplies to 15 children</li> <li>Created a continued partnership during summers with Anytown Camp</li> </ul>
	Mount Zion Church	<ul style="list-style-type: none"> <li>Participated in back-to-school event after church services, serving 212 children and families</li> </ul>
Holiday	Church Partners	<ul style="list-style-type: none"> <li>CALL coordinated a proactive, community-based, thanksgiving food drive in an area in St. Petersburg with higher poverty</li> <li>CALL donated food to approximately 50 families</li> <li>CALL helped distribute 250 turkeys, more than 200 bags of groceries, 235 snack</li> </ul>

		packs, and a gift card for each family (totaling more than 1100 people)
	St. Petersburg College, Amscot, The Kind Mouse, New Hope Missionary Baptist Church, Feeding Tampa Bay, Tampa Bay Watch, The City of St. Petersburg, Mayor's Office, St. Petersburg Police Department, St. Petersburg Fire Department and The Pinellas County Health Department	<ul style="list-style-type: none"> <li>• CALL donated and provided food, clothing, toys, and other items to 205 underserved families/710 people</li> <li>• CALL distributed 300 snack packs, 120 grocery bags, and gift cards for 185 families</li> </ul>
Extracurricular	Northeast Bandits	<ul style="list-style-type: none"> <li>• CALL interacted with children and paid for their registration and equipment needs for the football/cheer program</li> </ul>

*Table 2: SPPD Data on Event Types Dispatched to SPPD Patrol vs. CALL Team (07/01/2022 - 09/30/2023)*

EVENT TYPE	CALL	SPPD	TOTAL	% CALL	% SPPD
DISORDERLY JUVENILE	184	929	1113	17%	83%
MARCHMAN ACT	63	185	248	25%	75%
MENTAL PERSON	895	1174	2069	43%	57%
NEIGHBORHD DISPUTE	215	331	546	39%	61%
*PANHANDLING	56	1025	1081	5%	95%
SUICIDE THREAT	679	507	1186	57%	43%
TRUANCY	4	78	82	5%	95%
	<b>2096</b>	<b>4229</b>	<b>6325</b>	<b>33%</b>	<b>67%</b>

\*CALL is only sent to panhandling calls that involve children/families and individuals verbally requesting specific assistance.



## PHASE 2 EVALUATION GOALS AND METHODS

### Goals of Phase 2

In a November 21, 2022 meeting, there was agreement among the foundation, GCJFCS and SPPD representatives, and the CJRP co-director Edelyn Verona that a follow-up evaluation would allow for continued quality improvement. The proposed Phase 2 project would evaluate fidelity and processes of implementation and the perceived acceptability and impact of the program among multiple individuals and groups that have a vested interest in CALL. This phase of the evaluation could more directly identify processes that may explain disparities observed in Phase 1.

**The first goal** of Phase 2 was to evaluate the on the ground **implementation** of the program, both the **processes** by which implementation occurs and **fidelity** (the extent to which the program is being delivered as intended and ensuring equitable access). We attempted to obtain more direct evidence of the decision-making around the protocols for routing of calls, delivering services in the field, and ensuring access to services by the most impacted communities. This adds to the information obtained in Phase 1, which relied on indirect data (e.g., written protocols and contact data). **The second goal** examined the **acceptability and impact** of the program as perceived by key informants, especially the extent to which officers, CALL team members, and the community perceived the program as value-added, trusted, and addressing disparities in health access. Together, the goals of Phase 2 were achieved through two different methods: qualitative interviews with key informants and ride-along observations of the CALL team in the field.

### Methods of Phase 2

#### *Qualitative Interviews*

The primary method of gathering data for goals 1 and 2 involved conducting qualitative interviews with different informant groups. Individual interviews were conducted with 23 informants coming from the following groups. All but one of the interviews occurred through video calls or phone calls, with the one in-person interview held with a client. The interviews were conducted between April and August, 2023.

1. **CALL program leaders** ( $n = 4$ ) from the two organizations overseeing the CALL program, including administrators at GCJFCS, as well as program managers and the top-level of the SPPD;
2. **SPPD emergency communication division (ECD) staff** ( $n = 4$ ), such as call-takers or dispatchers, and their supervisors, who make decisions about which non-crime calls are routed to the CALL program vs. SPPD, depending on eligibility;
3. **CALL team members** ( $n = 3$ ), including the CALL team director, clinical supervisors, and community navigators who have the most contact with clients;
4. **SPPD officers** ( $n = 5$ ), including patrol and school resource officers;
5. **Clients** ( $n = 2$ ) served by the CALL team, who agreed to talk to the evaluation team (one of these interviews was conducted in Spanish by fluent interviewers); and
6. **Outside and community informants** ( $n = 5$ ), including (a) 3 Black/African-American community leaders who work with or live in areas with the highest call rates and/or have advocated for changes in policing (e.g., community organizers, those who marched in the spring and summer of 2020 for police reform), and (b) 2 community agency representatives who intersect with the CALL program in their professional roles.

Most interviews were conducted by two interviewers, a lead interviewer and a secondary interviewer, whereas some interviews were conducted with only one interviewer present (either Dr. Karen Liller or Dr. Edelyn Verona). Morgan Shayler and Emily Torres were present for some of the interviews led by either Dr. Liller or Dr. Verona.

Prior to conducting the interviews, we created semi-structured interview guides relevant for each type of interview group, that used both “open” interview format, to allow for free flow of information, and “closed” interview questions focused on pre-determined topics. See interview guides in **Appendix 1**. The interview guides reflected the information that we hoped to obtain from different groups. For example, in interviewing program leaders, emergency communication, and CALL team members (the first three groups above), we wanted to collectively evaluate fidelity and protocol adherence, challenges of program implementation and reach, suggested changes or recommendations, and safety concerns as perceived by those most intimately involved in the program. SPPD officers were interviewed to learn to what extent they have knowledge of the

program, rely on CALL or refer clients to the program, and perceive the CALL program as benefiting and/or enhancing the work they do (e.g., workload is lightened, provide enhanced services to the community). Interviews with clients were focused on examining the individual experiences and perceived impact of the program by those who were directly served. Finally, informants from outside agencies and community leaders were interviewed to learn about their level of knowledge of the program, their perceptions of the program's strengths or weaknesses for their communities, how their agencies or communities are impacted by the CALL program (if at all), and recommendations for the future. Information about the structural and community drivers of inequities in the communities with which these informants work was also discussed during these interviews to further understand potential equity barriers and impact.

Interviews were recorded, except in three cases (2 SPPD officers and 1 community leader), and the interviews were transcribed, with transcriptions stripped of all identifiers. The notes taken from the interviews that could not be recorded were also incorporated into our interpretations of the findings from the qualitative analyses. We endeavored to conduct enough interviews until saturation occurred (i.e., no new ideas or thoughts were heard) within each group of informants. Saturation was not always achieved. For example, our attempts to interview clients served by CALL resulted in only two interviewees due to barriers in attempting to recruit clients for which their information is held confidential by the CALL team.

A thematic analysis of the qualitative interviews was undertaken, using an a priori approach guided by initial interview questions and the goals of the project. After the transcripts were transcribed, the information that emerged from the interviews helped create our initial theme categories and develop a set of thematic elements consistent with the interview data obtained within and across the interviewer groups. Thus, the coding of themes was informed both by a priori goals and by the data itself (i.e., information provided by the interviewees). Identification of themes was conducted independently by the two main interviewers, Dr. Karen Liller and Dr. Edelyn Verona, who reviewed their notes and read all of the transcripts to develop individually extracted themes. For thoroughness and transparency, each set of themes developed independently by the two coders is included in **Appendix 2**. The two interviewers discussed their individual results and integrated them, reflecting substantial overlap in key insights, to create the final themes summarized in the Results section below.

### *Ride-Along Observations*

The second method used in this evaluation involved direct observations of the CALL team at work in the field. Information was obtained from ride-along observations with the CALL team, observing the processes by which the team received calls from dispatch, organized themselves in pairs, interacted with callers, and attempted to address issues in the field. Further information was obtained from informal conversations and interactions with CALL team members during these observations (or in-between calls for service).

Observations were conducted on four different days by three evaluation team members: Dr. Edelyn Verona observed two calls for service on two separate days, Morgan Shayler observed two calls for service in one day, and Emily Torres observed one call for service in one day. The study members spent about 2-3 hours with the CALL team during each of these days, and the observers also asked questions and engaged in conversations with the navigators for clarity on procedures. After the observations were completed, each observer wrote notes about their observations, and these were explored for common themes that expanded on the information obtained from the other sources, including Phase 1 data and Phase 2 qualitative interviews.

## RESULTS OF PHASE 2 EVALUATION

### Qualitative Interview Findings

The integrative themes coded by the two interviewers are included below under the two goals of the study and presented in no particular order. As a reminder, the first goal of Phase 2 was to evaluate the processes by which implementation occurred and the level fidelity or adherence to protocols. The second goal examined the level of acceptability and impact of the program, especially when addressing disparities in health access. See **Tables 3 and 4** for a summary of themes under each goal, respectively, and representative quotations from the interview participants.

#### *Goal 1: Evaluation of implementation processes and fidelity*

The first theme to emerge from the interviews that reflects implementation processes was consensus on the strong institutional support, shared mission, and collaborations that make the program successful (*Goal 1/Theme 1: Support and Collaboration*). The program, from its inception,

was supported by police organizations (including the police union), the city council, and community advocates who were calling for alternatives to the traditional police response. The fact that key leaders, such as the chief of police and community organizers, became involved and advocated for this change ensured that the model that was ultimately enacted (civilian-based responders) was efficient and value-added, and addressed the concerns of communities of color around over-policing. The interviews noted substantially fruitful collaborations between agency partners (SPPD and GCJFCS) and often with outside organizations and the public. As an example, interviewees coming from different groups independently articulated a shared mission of CALL: (a) to provide enhanced responses to the community and (b) to free officers to do what they were trained to do. This indicates that CALL partners and individuals involved are working toward the same goals and following this vision in their work. The quality of the communication and easy flow of information between the CALL team and the ECD staff was viewed especially as one of the most positive aspects of the program and an important reason for its current success (see Table 3 narrative). This constant communication allows program leaders to remedy issues quickly and for the program to evolve as needs in the community change. To enhance this success further, some interviewees recommended that the CALL team navigators, the SPPD, and the emergency communication staff more frequently share the outcomes of CALL efforts in the community, so that the officers and dispatchers can be aware of the outcomes of cases that they refer to CALL, keeping in mind confidentiality. This correlates to a 360-degree flow of information approach which should enhance overall knowledge of the program and help inform how to serve repeat clients.

The second theme that emerged under this goal involves acknowledgment of the increased resource needs of the CALL team (*Goal 1/Theme 2: Needed Resources for the Program*). It was clear from speaking to the CALL leaders and team members that the CALL staff are valued and provided with incentives (e.g., trainings, time off) and accommodations in their shift schedules to ease the strain of challenging work. At the same time, the interviews often reflected the fact that the CALL program can use more material and institutional resources, especially higher salaries for the CALL team members (see Table 3 narratives). This is especially important as the CALL team staff are diverse and many come from underrepresented communities themselves. According to some of the community-based organizations that intersect with CALL, the program can be enhanced by hiring even more qualified staff, especially additional CALL navigators with substantial clinical experience and credentialing. The GCJFCS has really worked to “stretch the dollar” with creative staffing approaches

and applying for grants to enhance services, and the city council has been generous in increasing the police budget to support the CALL program. However, informants often felt that it was not enough. As well, the community leaders we interviewed suggested that SPPD should allocate more funds that are not going to CALL currently, using whatever savings the SPPD receives from having fewer officers or fewer face-hours responding to non-crime/non-violent calls, to increase the quality of the CALL program and expand the services provided to the community.

The third theme under the implementation goal involved the effectiveness and limitations of the CALL team protocols and processes of implementation (*Goal 1/Theme 3: Protocols and Processes*). The protocols and decision trees developed, and the practices instantiated by the CALL team and emergency communication staff have been effective and efficient. The CALL team and emergency communication staff receive regular and constant supervision and engage in regular training to further define and operationalize events that are appropriate for the CALL team, and to learn how to address new issues as they arise (e.g., dementia, hoarding). The effectiveness of the protocols, and adherence to them, have resulted in a shift in the views of individuals (particularly police officers and emergency communication staff) who were initially skeptical of the program and concerned about the safety of civilian responders. Safety concerns have decreased substantially among all parties. Nonetheless, some of the protocols and practices raise equity considerations. More than one interviewee indicated that the number of non-crime calls routed to the CALL team is fairly small, relative to the ones routed to SPPD, which results in continued police interactions with special groups, including youth and those experiencing homelessness. The protocols allow for the exclusion of CALL services to many individuals in crisis if callers indicate that the person represents a risk for violence. As noted above, this is one of the reasons that youth calls may be routed to SPPD more often than CALL. In fact, the CALL team protocol has now switched to exclude panhandling calls, except under special circumstances (e.g., families or children involved), because the team found that individuals who were panhandling were not receptive to services or had already moved on when CALL arrived at the scene. The program may want to consider how to adapt some of the ways that they can provide assistance to individuals experiencing homelessness (as the CALL team is doing in regard to youth outreach, see Table 1). Further, more resources (e.g., extra staff, linked service support) can be provided to the CALL team to increase outreach for this group. Given evidence that some police officers express biased attitudes towards those experiencing homelessness (e.g., “homelessness is a choice”), and that the dedicated unit that handles homelessness in the city is made up of armed

officers, there could be an opportunity to divert more of these calls to behavioral health workers. These changes can be made balanced with the need to maintain the safety of CALL team members, with further discussion and creative problem-solving by all agencies involved.

*Table 3: Qualitative Interview Themes for Goal 1: Implementation Processes & Fidelity*

Goal 1 Themes	Features	Quotes from Interviewees
1. Support & Collaboration	Strong institutional support, shared mission, and fruitful collaborations between partners and between CALL and community agencies	<p>SPPD leader: <i>“This program is allowing police officers to do police work, but also working with the community and then also providing the citizens with follow ups.”</i></p> <p>CALL leader: <i>“We meet quarterly [with ECD staff] to talk about those things and vet them. I think my confidence is they understand it’s a moving target sometimes too, that we could plan for A but sometimes B happens. And they’re all vested in us coming up to handle it right. I have a lot of belief in their wanting [CALL team] to be safe and putting those in place. I think that communication helps, and I think it has to be constant, can’t be something like, okay, we’ve established this for CALL and we’re not going to talk about it again for a year.”</i></p> <p>Community agency rep: <i>“We collaborate constantly, and we’ve developed a mental status exam form that [CALL director] or the other supervisors will fill out if someone’s coming here voluntarily so that my staff can see that was assessed because we were running into the issue where a voluntary client would present themselves, but they weren’t orientated to the date, time, situation. We did develop that form in the midst of everything, and it’s been running very smoothly ever since.”</i></p>
2. Needed Resources for the Program	More material and salary resources needed for CALL, reallocating more funds from police budget	<p>CALL team member: <i>“We’re asking licensed staff to be out on the streets until midnight, in people’s homes, when I could be making double what I’m making right now, literally sitting in my pajamas and doing teletherapy. Not everyone is passionate about the work like I am or my team is, and with this type of work yes, you have to love the job, but compensation. These</i></p>

		<p><i>guys work hard, and if they're barely making ends meet, why would they want to stay?"</i></p> <p>Community agency rep: <i>"I think a lot of [CALL navigators] are bachelor's level, if I'm not mistaken, I think that that is something that could probably improve. I think it's just [supervisor at CALL] that's licensed, so they really can't give that clinical judgment on a Baker Act or initiate one."</i></p> <p>Community leader: <i>"I get that there are a lot of considerations, but I was definitely standing with the community advocates and those who said over half the budget is going to police, we don't need an increase in the police budget, we can use the funds more efficiently and I unite with that."</i></p>
<p>3. Protocols &amp; Processes</p>	<p>Effective protocols with an eye toward safety, can be adapted and expanded to meet the needs of more clients</p>	<p>ECD staff: <i>"Once you get [a call on 911] that is eligible for CALL, then you ask a few more questions to find out if there's any exclusionary criteria which would be violence, anything criminal going on, and we take it one step further. We research to make sure that there's no alerts on the person, so we run them through our system to make sure the best we can."</i></p> <p>CALL team member: <i>"Initially when we get the calls, we read them over and discuss them. We always go out in twos, or threes if we have someone who is training. We discuss the call, who's going to lead on the call. Normally, there's one person leading the call, engaging with the person, and the second person is there to assess the situation or the area or the environment that you're in to make sure you're staying safe for the person 'hat's engaging with the client.... So, one is normally engaging, the other one is usually doing everything else to make sure that once we figure out what we need to do, we start working on that second part of the call."</i></p> <p>ECD staff: <i>"[CALL's] a great step in the right direction, probably expanding more of what they would consider taking might be an area for expansion. What that would look like, I'm not sure. I don't have a great list of, I "they should go to this." We have talked about a few other things, and then, we kind of talk</i></p>



<p><i>ourselves out of it because obviously those are police; so probably over years, I would say now that we're comfortable with it, everybody's safe, we know the protocols, maybe expanding it a bit more instead of limiting it to these just six or seven [events] that we've decided on."</i></p>
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***Goal 2: Evaluation of program acceptability and impact***

For the acceptability and impact goal, the first theme that emerged reflects satisfaction with and positive impacts of the program (*Goal 2/Theme 1: Satisfaction and Impact*). It was clear that across all groups interviewed, the program is viewed as very positive and a value-added to the community, especially among those directly touched by CALL or who frequently intersect with the program. For example, the two clients who were served by CALL described the program as literally changing their lives, with the CALL team facilitating housing, long-term stability, and material resources as needed. The clients also described the navigators as highly skilled and incredibly empathic, showing concern, knowledge, and confidence when dealing with their cases (see Table 4 narratives). The leaders of the program, CALL team members, SPPD officers, and ECD staff unanimously rated the program quite high in effectiveness. There was a strong sense of fulfillment in being involved with CALL, especially by the emergency communication staff who now feel that they can route residents to needed resources, whereas before there were few options for persons in crisis who called 911. SPPD officers agree that CALL is a helpful resource in the community and rate the benefits of CALL highly. It was clear that some of the officers refer cases to CALL frequently, whereas others would like to have more contact. Representatives of community organizations who intersect with the CALL program (e.g., crisis stabilization units) appreciate the collaborative nature of the CALL team, allowing for more wrap-around care, with the CALL team working with residential settings to ensure client support in the community following discharge (see Table 4). Finally, some of the community advocates who called for changes to policing in 2020 are pleased that the city was responsive, and that there is a helpful alternative to police when residents are in crisis or in need of services.

A second theme under the acceptability and impact goal complements and problematizes the first theme in this goal. This theme revolved around the extent to which the program is being utilized and has fully realized its potential (*Goal 2/Theme 2: Utilization and Potential*). The program is

considered beneficial, as indicated in the previous theme, and both the ECD staff and SPPD officers noted that the CALL team handles a critical subset of the calls received (e.g., frequent utilizers of 911), which allow for longer-term stability for these clients and in turn, reduced use of emergency services in the future. At the same time, ECD staff noted that a small number of daily dispatch calls are routed to CALL. As noted in Goal 1/Theme 3, a large proportion of eligible event codes (e.g., mental health, substance use, disorderly youth) ultimately are not sent to CALL due to concerns about the safety of the team. The SPPD leaders provided some examples of these cases, such as when a call was made because youth were throwing items or when an adult was refusing to leave a convenience store. These types of cases were routed to SPPD instead of CALL, in the interest of caution for the safety of the CALL team. There was agreement among most informants that many cases that present a risk of violence are likely inappropriate for civilian responders. However, that many non-crime cases are excluded from CALL is reflected in officer reports that they have not noticed a difference in the nature and quantity of case load or calls to which they are dispatched. At the time of the interviews (April – August, 2023), the officers stated that they do not often refer cases to the CALL team (e.g., after they have cleared a scene), either because they are not familiar with what the CALL team can provide, above what is available to them as officers, or because they simply don't think of the option to request the CALL team. At that time, there was a sense that the potential of CALL may not be fully realized yet or that it is under-utilized and can be expanded in some ways (see Table 4 narrative). That is not to say the CALL team is not busy. They are making many contacts each day (as shown in Table 2 above), and making a difference as noted by clients. However, there is a question as to whether there are missed opportunities to serve a larger swath of the community. This can potentially be remedied if CALL is given more resources (see Goal 1/Theme 2) and are provided with more referrals from SPPD patrol officers in the field, after they have cleared the scene.

A third and last theme under this goal relates to the quantity and quality of CALL's community relations and communication to the public (*Goal 2/Theme 3: Public Communication and Relations*). The CALL leaders indicated that one of the challenges they have experienced is with messaging to the public about the program. Most of the individuals from the community whom we interviewed did not know a lot about the CALL program, although efforts by the GCJFCS in hosting community conversations and encouraging news reports has helped increase familiarity with CALL. This concern about lack of knowledge of CALL is also reflected in some of the comments by SPPD officers who, at the time of the interviews, were not as aware as they would like to be about the program. This can

reduce the impact of the program since fewer officer referrals are sent to the CALL team (see Goal 2/Theme 2 above). Finally, messaging to the public should emphasize the extent to which the program is addressing the needs of communities of color and those experiencing barriers to social services and mental health care. Several community interviewees described how some of the impetus for developing a program such as CALL came from the work of the Black community and marchers in St. Petersburg, who during the spring and summer of 2020, demanded reforms in how the police interacted with residents of historically disenfranchised communities. Despite this, at least two community leaders, who had been involved in the 2020 marches, were dismayed that leaders in Black and Brown communities were not consulted prior to the roll out of the program, which would have gone a long way in developing trust and support. They were clear that they are glad that the city followed through on this initiative, while they want more evidence that the program has an impact on their communities. For example, they would like to know whether the CALL program has had an impact on reducing policing strategies that they feel can be excessive. Most of those interviewed from communities of color expressed that they were cautiously hopeful about the program (“wait and see”), and they provided further recommendations as to how the program could be more culturally responsive and accessible to minoritized communities (see Table 4 narrative).

**Table 4: Qualitative Interview Themes for Goal 2: Program Acceptability and Impact**

Goal 2 Themes	Features	Quotes from Interviewees
1. Satisfaction & Impact	Program is positive and value-added, working with officers and community to better serve persons in crisis	<p>Client's mother: <i>"But I truly feel that these people, that this is one of the best things probably St. Petersburg has ever done as far as trying to help those in need within the community, these people go out there to listen, to try and understand and to do what's right, and that's their job and they have the time to do it, where the police officers, they want to get out there, get it done and get them out of their way."</i></p> <p>Community agency: <i>"With the coordination of care, if the CALL team is involved with a client that's here on my crisis unit, I can get their navigators in touch with my discharge planners and treatment team. And the information that they can provide so that we can ensure that we're giving them the proper treatment, their proper referrals. The CALL team helps assist</i></p>

		<p><i>with the referrals for discharge for their clients, so it's just a collaboration and the community coming together for the betterment of the client."</i></p> <p><i>Officer: "There were some calls for service that we went to that didn't necessarily identify as a CALL type of dispatch or request, if you will. However, once we got there and started investigating it and maybe saw either the conditions of the house or the tough position the children were in, or the tough position the moms or dads or families or grandmas were in, we would do our investigation that we were dispatched to, and then we would reach out to the navigators and have them come out and kind of follow up for us and offer whatever services they have."</i></p>
<p>2. Utilization &amp; Potential</p>	<p>Potential under-utilization of and low referrals to program, officer perceptions of workload</p>	<p><i>Community agency: "I think that's the limitation there and some of [the clients] have a history, because of their symptoms, of becoming violent ... [which] would rule them out as candidates for working with the CALL team. Even if the dispatcher could screen some way and ask a few questions about the situation right now. If the person's angry and they're punching walls or whatever, maybe not."</i></p> <p><i>ECD staff: "I would say maybe 10, 15% [of calls go to the CALL team]. That might be absolutely crazy. I don't know...I don't feel [there's a critical mass of calls for CALL]. I feel like mostly what we do is police work, and but this was always something that is regularly received. It's a definite constant. We get [calls that go to CALL] every day, all the time, so it is a portion of our work."</i></p> <p><i>Officer: "To answer your question directly, I haven't heard anything from anyone [about whether the CALL program has reduced officer workload]. However, being a police officer, you're able to monitor the radio and see what calls are going on. You'll tend to see a call come out and instead of it being assigned to a patrol officer, it goes right to CALL."</i></p>

<p>3. Public Communications &amp; Relations</p>	<p>Need to increase awareness and familiarity with the program, intersections with communities of color</p>	<p>CALL leader: <i>“And I think we were thoughtful about doing community conversations and getting our emblem out there and who we were and whatever, but that doesn’t mean the general population knows that, right? They’re not attending all those conversations, so that was a challenge at the beginning that, if I went back again, maybe I would analyze what else we could have done to have better exposure.”</i></p> <p>Community member: <i>“A lot of the south side of the city doesn’t get enough – what is happening in the most impacted communities? How are they being served there – what are the numbers for those communities – [is the CALL program] even serving the black/brown communities?”</i></p> <p>Community member: <i>“I know for a fact a lot of people going to stay closed to a person they can’t identify with. You can have the most degrees, all the certs that you want. But, if I physically can’t identify with you, I’m probably going to be a little apprehensive of releasing. There’s many men and women here in our community who are effective mentors because they probably shared experiences, so to have the CALL program have groundmen or those in the field, living, who have those bounced back lives. Who was once women in domestic situations, who were once orphans, who are excelling now. Who were once in prison, who has turned their life around, and who has businesses. Those people can identify and probably can warm up a situation a lot more than someone just coming in.”</i></p>
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**Findings from Ride-Along Observations**

The notes from the observations and ride-alongs revealed several important themes that relate to implementation processes and fidelity (Goal 1) and to acceptability and impact (Goal 2) of the program, including the types of call for services, the navigator characteristics and experiences, and evidence of frequent collaborations with various agencies and settings.

### ***Goal 1: Evaluation of implementation processes and fidelity***

In terms of Goal 1, the first theme from these observations indicated “truth in advertising”, and fidelity in implementation, in that the CALL team followed protocols as described in interviews and program materials. It was observed that CALL navigators have significant awareness of resources available to community members and collaborate with clients and these resources to facilitate long-term solutions beyond crisis care. They demonstrate a commitment to problem-solving and innovative ways to meet the critical needs of the community, consistent with interview comments (see Goal 1/Theme 3: Protocols & Processes). We observed the team meeting the needs of clients across various domains of service, from crisis stabilization, risk assessments, and housing assistance. A second theme was the observation of frequent communications with the emergency call takers/dispatchers in the course of their work, like what was reflected in the interviews (see Goal 1/Theme 1: Support & Collaboration). The ECD provided useful information on the nature of the calls and the needs of the clients to the CALL supervisor so that the CALL team could be better prepared when they arrived at the scene. CALL navigators or supervisors also received messages directly from clients they have served and from referral sources, and they interacted with and maintained contact with family members or concerned friends of clients. Some of these callers requested services for elderly community members who struggle with homelessness, dementia, and/or hoarding. Importantly, despite the CALL program being designed to provide short-term crisis stabilization, the CALL staff displayed patience and spent hours on follow-ups and referrals (often serving the same individuals on several occasions). This level of communication and engagement with partners and with the clients they serve is impactful.

Another implementation theme that emerged from these observations complements another of the themes from the interviews, namely the need to enhance the team’s resources and the navigators’ qualifications (see *Goal 1/Theme 2: Needed Resources for the Program*). Although it is helpful that the training and professional backgrounds of navigators vary, we observed that some of the navigators have no formal clinical training and less experience with mental health issues, which makes them less effective on some calls (e.g., knowledge around safety planning). There was at least one missed opportunity to offer bilingual services to a client. Operationally speaking, the availability of a CALL van has been an added benefit. At the same time, it was observed that the plexiglass van separator was not properly attached, and despite its availability and the desire of the navigators to

use the van, it was reported that navigators are often encouraged to use their personal vehicles so that the van is available should a client require transport.

### ***Goal 2: Evaluation of program acceptability and impact***

In terms of Goal 2, the ride-along observations primarily reinforced some of the information gained from the interviews (see *Goal 2/Theme 1: Satisfaction and Impact*), including strong confirmation of the substantial positive impact the program has on clients. Our observations confirmed in real time that clients and members of the community were receptive to, and provided substantive assistance, by the navigators, especially as the navigators demonstrated an ability to alleviate barriers that many face in receiving needed services. In addition, those connected to the CALL clients (e.g., those who requested CALL or police assistance on behalf of another individual) expressed appreciation of CALL navigators. These positive interactions make it more likely that general awareness of the program will increase among other community members, who may want to reach out to CALL for services, and thus increase the utilization of CALL (see *Goal 2/Theme 2: Utilization & Potential*). In fact, during one ride-along, it was found that a client had reached out directly to the team because they had heard about the services of CALL from a friend, who spoke highly of what the team could provide. Further, our observations revealed that services were overwhelmingly provided to individuals from underserved communities and those with lower means. The more people that the CALL team can reach, especially those coming from communities of color, the more that trust for the program will build across the city, which would address one of the themes from the interviews (see *Goal 2/Theme 3: Public Communications & Relations*).

## **SUMMARY AND RECOMMENDATIONS**

### **Summary, Key Insights and Considerations**

In summary, the CALL program has shown to be a positive step forward in diverting non-crime-related calls (e.g., mental health crises) received by the SPPD emergency communications center to the CALL team instead of law enforcement. Across both phases of this evaluation, we found quantitative and qualitative support for the strength of collaborations between the SPDD and GCJFCS (implementation processes); best practices embedded in CALL's protocols, trainings, and provision of

services in the field (implementation fidelity); satisfaction with the program by those who intersect with it (acceptability); and positive outcomes for many clients who receive needed services and crisis support (impact). At the same time, the evaluation indicated that the program's services are potentially underutilized, and its capabilities can be enhanced by increasing resources to the team and by re-imagining protocols so that the team can reach a more expansive group of people, while still ensuring safety of the civilian responders. The latter appears to be a dialectic that will be difficult to reconcile (e.g., if you increase the number and types of calls that are routed to CALL, is there is a concomitant increase in risks to safety?). At the same time, the program has shown the type of flexibility and innovation that will allow it to grow in new ways. For instance, under warranted circumstances, the CALL team has adapted to provide a co-response at the scene with police when requested. Changes in the program to enhance its impact and utilization will require further collaboration and increased resources.

A primary aim of both phases of the evaluation was to determine if the CALL program is implemented equitably in terms of its reach to priority populations and impact on those communities. Overall, the two phases of the evaluation indicated strong support for the equity considerations of the program, including in its training of staff and the communities to which the CALL team is dispatched. However, there is always room for growth. As noted in Phase 1 of the evaluation, more impoverished communities may receive fewer follow-up services, for various reasons which are likely not a result of negligence by the team, and youth-related calls for truancy and disorderly conduct were made more frequently for Black individuals. Furthermore, the police continue to respond to the majority of youth cases and almost all Marchman Act cases. Phase 2 of the evaluation similarly found potentially less of a "saturation" of CALL into the community, such that some of residents that have been historically disenfranchised require more evidence of impact and cultural responsiveness to develop trust in these services.

These perceptions are important to note. At the same time, our Phase 1 data and Phase 2 observations clearly indicated that CALL responds to the most underserved communities in St. Petersburg (see [CALL Program Phase 1 Evaluation](#)). The Phase 1 data also showed that CALL clients include an overrepresentation of Black individuals (n=937, 34.7%), whereas White (n=1532, 56.8%), Hispanic (n=77, 2.7%), Asian (n=33, 1.2%), and multiracial (n=70, 2.6%) clients were underrepresented in comparison to St. Petersburg's general population. The CALL program continues to monitor its reach in St. Petersburg, including the characteristics of the neighborhoods and clients served. The



client-served data since the Phase 1 evaluation, from October to December 2023, indicates that the CALL team is reaching clients that reflect St. Petersburg’s overall population, as shown in Table 5. Further, police Districts 1 (southeast part of the city) and 3 (southwest part of the city) comprise approximately 80% (n=3,478) of CALL’s responses in the field.<sup>2</sup> District 1 represents several areas considered to be “opportunity zones” (i.e., low-income communities).<sup>3</sup>

*Table 5: Demographics of Clients Served by CALL, October - December 2023*

Race/Ethnicity	% of Clients	Composition of St. Petersburg
Asian/Pacific Islander	0.10%	4%
Black	24%	22%
Hispanic	9%	8%
Multiracial/Other	2%	3%
White	28%	63%
Did not disclose	37%	

In totality, the data from both our phases indicate that CALL is providing services to those in need, including in communities of color, and it may take a while for perceptions and knowledge of the program to reach fully to the public. As such, there are questions as to whether the CALL team could use more resources, recruit additional trained navigators and lay staff to increase its social and cultural responsiveness, and raise substantially greater awareness about the program to the community.

**Recommendations**

Based on the findings of Phase 1 and Phase 2 evaluations, we provide the following recommendations and their rationale to help ensure the program’s future success. These include:

<sup>2</sup> SPPD district map: <https://police.stpete.org/employmentOfficer/documents/districts-sectors-map.pdf>

<sup>3</sup> For additional information on St. Petersburg’s Opportunity Zones, please visit: [https://www.stpete.org/business/economic\\_development/opportunity\\_zones.php](https://www.stpete.org/business/economic_development/opportunity_zones.php)

1. **Greater expenditure of resources for the CALL program itself and for the hiring of trained staff, including increases in navigator salaries and resources to make their work more efficient and expansive (e.g., transport vehicle, 24-hour coverage, more navigators).**

Although some informants recommended more licensed staff, the CALL leaders have data suggesting that CALL may not need additional full-time licensed staff with the current supports in place. The CALL team has currently four contracted clinicians (one Ph.D. and all licensed), with additional licensed GCJFCS staff (n=6) available to provide consultation to CALL team members as needed. Nonetheless, pay rates were considered low by CALL team members. However, market data thus far indicate that most CALL positions have base starting salaries for new hires that are between 74% to 87% of the market midpoint. The data on staff losses is also evidence that employees may be well-supported. The program's overall turnover rate per quarter has never exceeded 26%, with most turnover being voluntary or involving promotions (n=19, 82.6%). These data suggest that despite funding limitations that impact salaries, CALL leaders have been innovatively using available resources in ways that contribute to staff retention.<sup>4</sup> At the same time, the work of the CALL team can be considered more challenging than those of other professionals in the field, who can rely on remote work and stable clients, and the staff nonetheless expressed concerns about their pay to the interviewers. It is recommended that SPPD and GCJFCS consider how resources can be expanded to address these staff concerns and facilitate a greater reach of the program with added funds.

2. **Development of wider outreach and public communication campaigns that will increase awareness of the program, especially in the communities most needing services and with whom the program needs to develop trusting relationships.** This can include engaging in directed townhalls and meetings, with case studies presented that clearly show the success of the program. Another option is to form a **CALL advisory group** to include community leaders and members and representatives of relevant community agencies to increase efforts at collaborations. Importantly, the GCJFCS has recently become an anchor organization of the first Community Support HUB, which provides free walk-in mental health and social services to

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<sup>4</sup> Additionally, GCJFCS has used supplemental non-recurring grants to offer other incentives to staff (i.e., bonuses, paid trainings and certifications, free on-site services, team building days and activities) and opportunities for time off. Currently, CALL staff work four 10-hour shifts in order to have three days off: two consecutive days off and one day that falls on the weekend.

local residents. We see this is another opportunity to provide information to a large number of clients to encourage them to use CALL in lieu of other emergency services when appropriate.

3. **Consider including individuals with lived experiences (e.g., mental health history, returning citizens), with whom clients can identify, to join the team as lay navigators.** Their inclusion can increase the access and acceptability of the program and the extent to which the CALL team can reach clients for follow ups, as those clients may be known to the lay navigators, or the lay navigators have connections in those communities. The issue of cultural responsiveness, which is considered essential to increase trust among minoritized communities, came up in interviews with community leaders. These informants did not indicate evidence of a deficiency of CALL in this area; instead, these comments reflect a lack of direct engagement with the program among persons living in underserved communities. The lay navigator idea may help open more channels of communication and increase follow up contacts that are lower in those communities, as we found in the Phase 1 Evaluation.
4. **Development of further strategies whereby a greater number of youth can be reached by the navigators instead of police as the first point of contact.** Although the CALL program is conducting further proactive contacts and outreach with youth-serving organizations, the fact is that most crisis calls involving youth will come through emergency community dispatchers. One problem identified is that many of the youth calls to the emergency communication division indicate a risk for violence. The excluded youth cases should be discussed in more detail by CALL leaders and emergency communication staff to determine what level of risk these cases hold for the team, and whether there can be more flexibility allowed in the protocols (e.g., pivoting to a co-responder model more often or specifically in the case of youth-related calls).
5. **Greater attention to and knowledge of the population experiencing homelessness, including panhandling, so that the CALL team may be able to work more in concert with these individuals and become a more trusted source of assistance for them.** The recommendation is similar to the one above, regarding youth calls, where pivoting further to a co-response model may make sense in these cases to balance service needs of clients with safety for the

team. Even though a specialized unit for homelessness is available within SPPD, this unit is comprised of armed officers whom some clients may prefer to avoid. A positive development in this regard is that a CALL event type referred to as Call for Assistance (CFA) has been added to dispatch that would route CALL to those who request economic assistance. The City of St. Petersburg has also funded a full-time social worker to focus on homelessness, and it is recommended that CALL work closely with the social worker when combined assistance is appropriate.

6. **Increase opportunities for communication between law enforcement, ECD staff, and CALL, and shared trainings among them, that will familiarize officers to the CALL team and their services.** More regular engagements between these parties can include CALL communicating the types of outcomes of the clients served, especially those referred by officers, and what can be done to better serve certain clients in the future (360-degree process). This recommendation could address the potential under-utilization of CALL by police and increase police referrals to CALL, as their familiarity and trust in the program increases.
7. **Additional support for third-party evaluations is needed to shift the focus from just the evaluation of processes in implementation to evaluation of the actual outcomes of the program, and its substantive impact.** There is a need for third-party evaluations of whether the program has resulted in actual reductions in some policing strategies that are felt to be over-bearing and divisive across communities, or in arrests of persons in crises, where individuals may benefit from connection to services instead. This information was requested by community leaders and would be beneficial in justifying the program when communicating with the public.

## Appendix 1. Interview Guides

### Intro Script:

Our names are \_\_\_\_, and we are from USF's Center for Justice Research and Policy (CJRP). With funding from the Foundation for a Healthy St. Petersburg, we have been evaluating the CALL program (Community Assistance and Life Liaison Program) and the involvement of so many agencies and people who help support the program. As you know, the CALL program is a collaboration between the St. Petersburg Police Department (SPPD) and Gulf Coast Jewish Family and Community Services (GCJFCS) to route noncriminal/nonviolent emergency and crisis calls to case workers and community navigators, instead of law enforcement.

We are interviewing CALL program leaders, SPPD emergency communication staff and officers, community members, and other involved persons to learn more about their perceptions of the program. We are interested in hearing about your experiences with the program, as well as any recommendations and concerns you have about the program. There are no right or wrong answers here, and we would appreciate your candid views so we can advise as to the strengths and improvements needed for the program.

It is important to note that the information you provide will be kept confidential and would not identify any particular person, unless they want to be identified. Your name will not be connected to any of the responses, and we provide information at a group level (not individuals). The data collected by the Center for Justice Research and Policy (CJRP) is reported to sponsors and program leaders as a summary report. This means that no identifiable or raw data will be shared with sponsors, SPPD, or GCJFCS.

*For the purposes of accuracy, do you give us permission to record this interview? The interviews will be kept in a secure location and deleted later.*

### Program Leaders, Emergency Communication Staff, and Call Team Members.

#### General Questions:

1. Describe briefly your experience with the CALL program. Please include
  - a. If you were to summarize the mission of the CALL program, what would it be?

- b. [For those who chose to be part of the CALL program voluntarily, like team members] Why were you initially interested in the program? Do those expectations/reasons match your experience so far?
  - c. What are your responsibilities related to its implementation?
  - d. Describe some of the difficulties involved in diverting certain types of calls to the CALL team?
- 2. [For those involved before inception of CALL – especially the leaders of the programs] were there difficulties in implementing the CALL program, diverting certain calls to the CALL team, etc? If so, please describe the difficulties.
- 3. The CALL program has a prescribed steps to follow for events to be diverted to the CALL Team. Were there any difficulties in following certain steps or processes? For example,
  - a. What are things that have to be decided at the moment?
  - b. How do you think that not following the protocol in that instance affected the quality or type of services you can provide. What could be done better?
- 4. What changes might you make to the protocol and/or scope of the CALL program for better community response and services? Where are places that you feel that the program falls short? Is there more that can be done or more communities or people that can be served? If so, what are the current impediments to reaching these communities or people?
- 5. [For emergency communication call takers/dispatchers]: How do you determine which calls should be routed to CALL vs. SPPD, and do you consult with supervisors/managers each time decisions like this need to be made? When is supervisory consultation required?
- 6. On a scale from 1 to 5, where 5 is the highest and 1 is the lowest, how would you rate the benefits of the CALL Program in terms of the number of people served and the number of calls able to be diverted? What about outcomes for the clients and community? Please expound on your ratings more.
  - 1. Can you describe one or two real-life experiences with the CALL program that illustrate your previous responses on the program's efficiency and outcomes? Please note that individuals receiving services should remain anonymous.
- 7. Tell me about the **most recent experience** you had with the CALL program and what happened?
- 8. What do you find rewarding about this job? How well do you feel supported by the program? How might the program provide more support for you?
- 9. Do you have safety concerns about the program? Why or why not-and if yes how could these be alleviated?
- 10. What are your recommendations for the future of the CALL Program?
  - a. (if they do not know where to start, encourage them to brainstorm and can also remind them) It can be about the protocol, tips for new volunteers, structure of the organization, etc.

11. Anything else you want to add?

### SPPD Officers and Resource Officers

1. Describe briefly your experience with the CALL program.
  - a. Please include when you first learned of the program. What are your responsibilities related to its implementation?
  - b. If you were to summarize the mission of the CALL program, what would it be?
2. What were your initial thoughts about the program when you first learned about it? What do you think about the program now?
  - a. On a scale from 1-5, what was your level of support at its inception? What is your support level now? 5 means complete support and 1 is no support at all. Can you explain your scores with some examples? Make sure that you keep anonymous any citizens involved.
3. Describe how much involvement you have with the CALL Team and navigators. Would you like more or less involvement with the Team. Why?
4. How many times have you asked for follow up from the CALL team after you have arrived at a scene? In what circumstances did you reach out to the CALL navigators? What factors at the scene led you to believe that CALL would be able to help? How did you make that decision?
5. Do you feel as if your workload has been lessened due to the CALL program? Explain why or why not. In what ways has it been reduced and in what ways has it not?
  - a. On a scale of 1-5 how difficult was it to adjust your work routine and responsibilities to incorporate the program? A score of 5 is the highest difficulty and 1 is the lowest difficulty.
  - b. Anything that you would recommend changing in the current process to be easier for you and fellow officers?
  - c. Do you think CALL has been effective in diverting and responding to noncriminal/nonviolent calls for services? A score of 5 is the highest effectiveness and 1 is the lowest effectiveness.
6. Tell me about the **most recent experience** you had with the CALL program and what happened?
7. Do you still respond to noncriminal/nonviolent calls? Which ones? Do you think some of these that you still respond to would be better handled by the CALL team? Can you provide some examples, without revealing the identities of anyone being served?
  - a. What is your experience in responding to youth-related calls, like disorderly or truancy? How much do you think law enforcement should be involved in those calls, and why?

1. Do you think SROs at the schools should deal with youth concerns in school, or should the CALL team be called in? Why?
  - b. What is your experience in responding to panhandling and homelessness? How much do you think law enforcement should be involved in those calls, and why?
  - c. Are there important populations that can benefit from the program but are not currently served?
8. It makes sense that officers need to respond to calls that pose a risk of violence to the CALL team, but some of those calls also could benefit from mental health services. Do you have ideas about how we can provide services to those citizens who are committing crimes or are risks of violence, but may engage in those behaviors less if they receive services?
9. Do you think the CALL Program has produced added value for the community (yes or no)? Please explain your answer.
10. Anything else you want to add?

**Community members that have been or could be served by the CALL Team, interested community members from neighborhoods served by CALL or police**

1. For ALL:
  - a. Tell us a little bit about your community and where you live? What makes it special, what are its strengths, what are its needs? (Probe here).
  - b. On a scale from 1-5, rate the level of poverty (or having little money) of people who live in your community (5 is the greatest and 1 is the lowest).
  - c. Tell us about the housing in your community – such as housing security, cost of housing, rentals vs. ownership, evictions and abandoned dwellings. How can it be better?
2. Do you think people of color and other underprivileged people in your community are treated fairly by the police or other responders (e.g., EMT, rescue, fire department, CALL)? (Yes, No-please explain).
  - a. How can things be better for persons of color or your community?
  - b. What can officials do to help with the needs of these communities?
  - c. Have you observed problems with cultural responsiveness (not being culturally responsive) by officials, law enforcement, and service providers when they work with communities of color or people you know?
3. Describe for us what you know about the CALL program? Where did you first learn of the program and how you think it operates? (here is where we can probe for understanding).



4. From your knowledge about or experience with the program, on a scale of 1 to 5, where 5 is the complete trust and 1 is no trust, how much do you trust the CALL program and the people running it?
  - a. Does the CALL program make you feel safer in your community? Why or why not? Explain.
5. What do you think of the CALL team responding to emergencies instead of the police? Are there certain types of calls you think the CALL team should always respond? Which should they not respond to?
  - a. What do you think should be in the purview of the police?
  - b. What is your view on who should respond to panhandling or homelessness? Under what circumstances should law enforcement respond and when should CALL be the ones out there?
  - c. What is your view on who should respond to youth calls, like disorderly and truancy? Under what circumstances should law enforcement respond and when should CALL be the ones out there?
  - d. Do you think SROs at the schools should deal with youth concerns in school, or should the CALL team be called in? Why?
6. **[For those who have used the program or know of those who have used it]:**
  - a. On a scale of 1 to 5, where 5 is the best and 1 is the worst, how would you rate the Call program in terms of how it worked for your community, you and/or your family or friends? How satisfied were you with the response of the professionals?
  - b. Did the services and resources work well at the time of the issue? Did the service provide lasting impact into the future? Please explain.
  - c. Do you feel that the CALL team responded to your needs? Why or Why Not? (here we can get more specific about their needs and outcomes, look for a good example that represents how CALL team operates).
7. What would you recommend to make the program better? (probing here). Do you think the program is not reaching certain groups or people, and why not?
8. Anything else you want to add?

**Community Groups, Agency Partners, St. Pete Officials and policy makers, and other stakeholders:**

1. Describe for us what you know about the CALL program? Where did you first learn of the program and how you think it operates? (here is where we can probe for understanding).
2. Describe briefly your experiences with the CALL program. Please include when you first learned of the program and your involvement in it, if applicable.
  - a. If you were to summarize the mission of the CALL program, what would it be?]

3. **[IF APPLICABLE]** Describe if you supported the program at its inception and your level of support now? Please use a 1-5 scale for level of support at its inception and at this time, where 5 is complete support and 1 is no support. Explain your scores for this scale providing details of your experiences.
  - a. Please explain your reasons for the level of support you have for the CALL program-why was it needed? What did you have to weigh when deciding whether to support it or not?
4. **[For officials or policy makers]:** Did you think it was financially a good decision to fund the CALL program or put the effort into implementing it? Why or why not?
5. **[For community-based groups/agencies]:** Tell us a little bit about your agency/group and what are its goals.
  - a. What are the communities for which you are working? What makes these communities special, what are their strengths, what are their needs? (Probe here).
  - b. Do you think the CALL program is prepared to meet the needs of the people you work with/causes you are advocating for?
  - c. Please provide 1 or 2 examples of how CALL has affected your agency/the people you work with/your communities-this could be positive or negative. Is there value added with the CALL program? Why or Why Not? What are some ways that the CALL program has helped, and what are some ways it hasn't helped or made things worse?
6. Please discuss your knowledge of any of the evaluation results reported by the University of South Florida. (If they do not know of the evaluation a very brief review of the main findings can take place here)
7. Do you think persons with low means, people of color and other marginalized communities in St. Pete are treated fairly by police or other groups who respond to an issue? (Yes, No-please explain). How can we make this better for the St. Pete community?
  - a. Have you observed problems with cultural responsiveness (not being culturally responsive) by officials, law enforcement, and service providers when they work with communities of color or people you know?
8. Is the CALL program reaching the people and groups that need the help? Are there still gaps, especially with marginalized communities? Please explain. Who needs to be served that isn't getting served?
9. Are there certain types of calls you think the CALL team should always respond? Which should they not respond to?
  - a. What do you think should be in the purview of the police?
  - b. What is your view on who should respond to panhandling or homelessness? Under what circumstances should law enforcement respond and when should CALL be the ones out there?

- c. What is your view on who should respond to youth calls, like disorderly and truancy? Under what circumstances should law enforcement respond and when should CALL be the ones out there?
  - d. Do you think SROs at the schools should deal with youth concerns in school, or should the CALL team be called in? Why?
10. What can be done better with CALL? How can the protocol evolve to better serve the community/people you work with in your agency?
- a. If we could replicate the CALL program to other Florida communities, what should we keep, add, alter, or perhaps remove from the program?

**Spanish version of community member interview:**

1. For ALL:
  - a. Me puedes decir en que comunidad vives in St. Petersburg? Cuales son las cosas que te gusta de su vecindario, y que son los problemas que se encuentran en el? (Probe here).
  - b. En una escala de 1-5, cuanta pobreza se encuentra en su vecindario (5 es lo mas alto de pobreza y 1 es muy poca pobreza).
  - c. En su comunidad y vecindario, la mayoría de las personas rentan o son duenos de sus casas – apartamentos o casas individuales? Las personas son estables, viven ahi por muchos anos o hay mudanzas frecuentemente?
  
2. Piensa que la policia, bomberos y otros respondedores de emergencias tratan a la comunidad con respeto y sin racism? (Yes, No-please explain).
  - a. Que puede hacer para tratar mejor a la comunidad?
  - b. Y que ayuda necesita la comunidad que no estan recibiendo?
  
3. Que sabes de el programa de CALL? Cuando tuviste contacto con ellos? (here is where we can probe for understanding).
  
4. Que satifecha esta usted con la ayuda que le dio CALL? En una escala de 1 a 5, 5 es muy satisfecha y 1 es no satisfecha. Como la trataron?

- a. En que manera te ayudaron? La conectaron con servicios en la comunidad or le dieron articulos de necesidad?
  - b. La ayuda era sola lo que necesitaba en el momento, o continua usando los servicios con que te conectaron? (here we can get more specific about their needs and outcomes, look for a good example that represents how CALL team operates).
5. Basandote en tu experiencias con CALL, cuanto usted confia en la ayuda que ellos le dan a la comunidad. En una escala de 1 a 5, 5 es confianza complete y 1 es ninguna confianza.
- a. Usted cree que el programa de CALL le da mas seguridad a la comunidad. Por que or por que no?
6. Usted cree que los navegadores de CALL deben ser los que responden a emergencias, o debe ser la policia? Cuales emergencias deben ser en su cargo?
- a. Cuales llamadas or circunstancias deben ser el cargo de la policia?
  - b. Quien debe ayudar a las personas que no tienen donde vivir, y viven en la calle – cree que la policia debe responder a esas llamadas?
  - c. Quien deber responder a llamadas que se tratan de ninos o adolescentes que estan actuando con desorden o estan ausente de la escuela por se estan esquiando.
  - d. Y en las escuelas, con la disciplina o cuando hay peleas, quien debe responder?
7. Algunas recomendaciones para mejor usar el programa de CALL? Crees que el programa es adecuado para todos en la comunidad, or sirve solo para algunos?
8. Algo mas quiere anadir?

## Appendix 2. Interview Themes by Coder

### Interview Themes (Edelyn Verona)

#### *Summary of Threads in Interviews Across all Groups (with a focus on equity):*

- **Those touched by CALL experience it as very positive and value-added**, fills important niche across stakeholders – clients, community-based organizations, ECD, and officers (Reflected in: Leaders thread #1; Officers thread #1; ECD thread #2; Community thread #1)
- **CALL is not familiar to many across groups and may be underutilized** (Reflected in: Leaders thread #1; Team thread #2; Officer thread #2; ECD thread #3; Community threads #2 and #3)
- **CALL may be under-funded to achieve full potential** (Reflected in: Leader thread #3; Team thread #4; Community threads #2 and #3)

#### *Threads per Interviewee Group*

##### Threads in the Leaders interviews:

1. **Collaborations and connections:** program supported by community (protesters), police orgs, council; had right leadership and good police-GC collaboration; challenges with messaging to the public about the program
2. **Implementation challenges:** hard to hire qualified and diverse staff with low pay, early safety concerns have mostly been alleviated, dearth of long term resources to refer clients and community relies too heavily on Baker Acts
3. **Flexibility and Innovation:** CALL program has worked to stretch the dollar with creative staffing approaches, applying for grants to expand services, pivoting to address developing needs (dementia, youth)

##### Threads in the CALL Team interviews:

1. **Formulating the CALL mission:** worked on understanding what role they would play (crisis intervention vs. case management), diverting Baker Acts
2. **Communication gaps:** clients and public do not know about the program; working to educate the public, officers, and ECD about program; how to have more seamless communication with police about cases

3. **Challenges for implementation:** not enough community resources to refer clients, need more med support
4. **CALL team needs and support:** pay is low, shifts at night or weekend are hard to staff; GC supports and at the same time CALL is not as integrated; responsive to safety improvements and more can be done

Threads in the Officer interviews:

1. **Officers believe it is value-added:** agree that CALL can be helpful in many situations and rate them highly; some use them frequently and would like more contact
2. **May be underutilized:** Many said they do not call them out much or had little contact with them; most calls that come in involve violence/safety issues so CALL is not getting many; may not remind themselves that CALL is available
3. **CALL may not be decreasing officer burden:** Some report not noticing a difference - maybe don't notice the amount off their plate?; duplication of efforts with other units or officers available (SROs, PATH unit, county and school district resources)

Threads in the ECD interviews:

1. **Protocols and decision trees are thorough and tested:** Supervisor monitoring; regular meetings between ECD and GC; trainings to further define and operationalize events that are appropriate and not
2. **Strongly positive experience and communication between ECD and program staff:** Opinions changed quite a bit from initiation to now (concerns to now feel very value-added); ECD staff find the work more fulfilling now that they can provide services to callers; get good feedback from the public about CALL; CALL taken over frequent flyers in most cases
3. **Places for expansion are apparent:** Small number of calls are routed to CALL – although they are a critical part of the calls, especially frequent flyers; certain eligible event codes ultimately not sent to CALL to protect their safety (juveniles throwing things, person refuses to leave convenience store); can add more events in future (check welfares, shelters)?

Threads in the community interviews:

1. **Impact is felt by those who work closely with them:** clients speak of the long-term aid provided, empathy and confidence shown, ability to make clients feel safe and cared for; community organizations appreciate collaboration; community members feel it fills important alternative to police
2. **Many of the communities of color are cautiously hopeful:** many haven't seen first-hand the impact of program, many in the community haven't heard of it; weren't consulted in developing the program, even though they were the impetus for creating the program; not really reallocating police funds,

increased their budget to accommodate CALL; community needs to build trust in the program, cultural responsiveness needs to be shown

3. **Recommended improvements and expansions of program:** Still many people who can't be served by CALL due to history of violence or crime, police officers may be underutilizing it, not calling them after clearing a scene; navigators with more clinical experience or licensure would improve services and collaboration; some duplication of effort calls for expanding what CALL does
4. **Community members all agree there is still need for police:** want to call police for crime or violence situations; wished the police would come in with more of a "service mindset", better community relations, sensitivity to mental health and cultural differences

## Interview Themes (Karen Liller)

*Overall Reported from Leaders, Community, SPPD, Navigators, and EC: K. Liller interviews and review of all transcripts*

Code: **Positive Affirmation of Program with secondary codes underneath major categories**

- *Understanding that CALL is done for the citizens to enhance responses to their needs and frees officers to do what they are trained to do for the community overall good **understanding of CALL mission and its of support citizens and provision of resources (directly/indirectly)***
- *Positive communication among parties (police and Gulf Coast)-**good communication between Call and Gulfcoast***
- *Safety concerns for navigators (always there) but have lessened-**less safety concerns for navigators as program matured.***
- *Positive introduction of van for navigators **Van is a positive step for navigators***
- *Positive coordination of program/protocols clear-**good protocols***
- *Positive leadership and support from union and management/supervisors-**positive leadership and support***
- *Decrease in number of frequent callers-**decrease number of frequent flyers***
- *Generally, a sense of decreasing workload for police-**decrease workload for police***
- ***Ratings of between 4-5 for overall benefits/effectiveness**-Ratings increase over time-baseline ratings lower due to lack of familiarity and concern about navigators' safety*
- ***Should be dealing with youth issues***

Code: **Less Positive/Room for Growth**

- *Program is still invisible to some police and others/needs more press-known better-**program not known-need to get the word out***
- ***If clients have prior criminal history, not served by CALL.***
- ***Shared co-response model could be better***
- *Additional resources needed-**need for more resources including more trained staff (navigators)***



- *More follow up between Gulf Coast and police so police know what the navigators have done-this would enhance value (perhaps reports of activities circulated along with coffees, get-togethers)-**more 360 degree followup between working parts***
- *Adding welfare checks to the list of noncrimes addressed by CALL may not work because police may be needed as the person is deceased or there may be violence-should be decided case by case and should be referrals for CALLS and not direct calls perhaps.*

Code: **Areas of Concern (mostly on the part of community members)**

- ***Bias on the part of police officers***
- ***Need more funding***
- ***Should divide county funding by zip code***
- ***Need to fairly treat black and brown communities.***
- ***CALL should not viewed as a program that defunded police as police got increased funding***
- ***Need to show a ROI for CALL***
- ***Telling individuals who are in need to call 911 can be a problem as this is associated with police***
- *Learned that panhandling is not responded to immediately (unless requested) by CALL since the clients did not seem to want the help of the navigators.-**eliminated panhandling from response***
- *Concerning statements made by some police that some individuals want to be homeless and do not want help as they do not want to follow rules.-**people want to be homeless***