

**City of Hyattsville
Race & Equity Task Force
April 26, 2022 7:00 PM
Zoom
Minutes**

Present

Task Force Members:

- Malcolm Clarke
- Jennifer Gafford
- Daniel (dah-nee-ehl) Vallejos-Avila
- Rodrigo Blanco
- Alicia (ah-lee-syah) Freemyn
- Daniel Amador

Council:

- Interim Mayor Croslin
- Councilmember Rommel Sandino

Staff:

- Staff Liaison Jan Guszynski
- Adrienne Augustus, Mental Health Programs Manager

Guests:

- Jocelyn Medallo
- Marshall Marshall
- Steve Woods

Meeting called to order at 7:06 PM by Chair Clarke

1. Welcome and Call to Order

Roll Call – Chair Clark

Acknowledgement of Meeting Guests - Staff Liaison Jan Guszynski

Approval of September and March Minutes – tabled until May 24th meeting

2. Meet City's Mental Health Programs Manager Adrienne Augustus

Adrienne Augustus:

- Joined the police department in September 2020 as the Media Relations and Mental Health Programs Manager.
- Responsible for most of the posts on the police department's Facebook page for the last year and a half. Please follow the police department's Facebook page as they are always

looking for more of the community to be able to connect with the department through social media.

- Also responsible for sending out press releases and making sure that the media receives the information it needs for the positive things that are happening at the department and some of the occasional not so great pieces of news like crime happening in the city.
- She is a mental health advocate, not a clinician. She stepped into the role with the goal of bringing different types of programs to the police department that will help give the officers and dispatchers training that allows them to best engage people who are experiencing some sort of behavioral health crisis, whether that's mental health or addiction related.
- Also works on programming that supports mental health programming that supports the mental well being for the officers and dispatchers.
- Under Chief Towers she was able to put together and launch a big program that includes all of the department staff. They have five civilians who are not dispatchers or officers that include Ms. Augustus, and they are participating in the **HCPD Mental Wellness Check-In Initiative**. The police department, City Council members, and the community in general have been incredibly supportive of a lot of the program ideas that she has put forward including this Wellness Check-In Initiative.
 - o The program requires all of the officers, dispatchers, and everybody at the department, must meet one-on-one in 50-minute wellness sessions with licensed mental health clinicians every quarter.
 - o Designed it to be required so that it would eliminate the stigma associated with the idea of mental health and seeing a therapist. If it's required, everybody's going, everybody knows everybody's going and no one has to make the decision to see or not see a clinician when they really may need support.
 - o The program is separate from the Employee Assistance Program. It's not tied to HR, it's not tied to the department in terms of reporting to the Chief or to supervisors. We have contracted with an agency called Interdynamics which happens to be in our county, and they have clinicians who have experience working with first responders.
 - o Now in our second round of quarterly wellness check-ins. The city council originally funded them with \$50,000 for one year of quarterly checks. Augustus was able to get a federal grant of \$118,000 over two years. This allowed us to pull in the Town of Brentwood police department who have five officers. The funds provide enough funding for individuals who want to see their clinician in between the required sessions to make those appointments in their personal time.
 - o The first round took place in December/January. There was a great press conference and there was positive local media coverage.
 - o Pre and Post session surveys were implemented so that the team, Augustus and two UMD interns, could see the data and review the feedback. Augustus does not have access to who said what on the surveys to maintain anonymity. The interns do have access. Participants need to understand that what they say to their clinician is not going to get back to Augustus, or the Chief.

- The sessions are not meant to be therapy, they are meant to be wellness checks.
 - Based on the survey data, there is a largely positive experience that people are having. 100% of the participants said they felt like their clinicians were good listeners.
 - Other agencies in the state and out of state have been asking for the details of the program. She is hoping that in the long run, this will turn out to be something that can be a blueprint for other agencies across the country to use
- There is another big program called the **Crisis Intervention Team program**. We also received a grant for two-year grant of \$230,000 from the Department of Justice. That grant will allow us to hire one to three, part-time mental health clinicians.
 - These individuals would be out on the street meeting law enforcement officers to engage people who are in crisis.
 - First part of the program is making sure we have officers CIT certified.
 - The CIT training is a specialized 40-hour training, where officers are taught how to recognize signs of mental health distress, how to interact with people who are experiencing some sort of a crisis or dementia, or maybe have a developmental disability.
 - We now have 10 recently certified CIT officers. Acting Corporal Evans and Officer Matthews/Lucas are our community as Community Action Team officers. They are both CIT certified, along with several others.
 - The training is available through Anne Arundel County, which has received CIT Internationals Award for Program of the Year in 2020. When their training is available, we let everybody at the department know so that they can opt in if they'd like.
- **MC:** Does anybody have any questions for Ms. Augustus?
- **AF:** I just wanted a little clarity about the role of the clinician with the officer. I used to work at CPAP which is Washington DC's Comprehensive Psychiatric Emergency Program. I specifically worked in psychiatric emergencies on the homeless outreach team. Every jurisdiction is different, but I'll just note that as a clinician, we did not go to calls with police, unless there was a threat of violence. We only call the police if absolutely necessary. There were specific police that we would call, but our goal was to reduce interaction with the police for the public if possible. So, I'm curious about whether there is an actual necessity for having police partnered with clinicians unless otherwise absolutely necessary or at risk of a violent incident, where a person is either a threat to themselves or to others?
- **Adrienne Augustus:** There are actually two things that are happening in our area right now. With our CIT program, the officers are responding if somebody calls 911 or if they call us directly on our emergency line at the police department. They're going to respond no matter what. The CIT officers, I'm hoping we have at least two on each squad, if they feel like they cannot manage the individual, then that's when they will call dispatch and

request one of our clinicians to go out. We would never send just one of our clinicians out because the call is coming in through our emergency line. But the other side of that, is that the county does have a civilian only response team. They're on the street right now but they're not fully operational by dialing 911. They are getting there. Having our own clinicians is going to be helpful, because that civilian only team only two teams of two on the street for the entire county at any given time. We have the Sante Group that has served the county for quite a while. There's another agency now, and we have a new one that's civilian only, coming up in the beginning of the fiscal year. I've been part of the conversations/meeting that they've been having every week at the county level, to make sure that when they implement the system in determining when a call goes to 911, the appropriate representative is dispatched.

- **AF:** I think it could be a really good thing for many folks who are living with mental illness who are homeless or living on the streets to have a civilian only space, particularly if someone is not necessarily a threat. You don't necessarily need to call the police because someone's having a mental health crisis. So that's a really great place for civilian folks to do an intervention that does not require policing necessarily. I think it could be helpful if there was some kind of public announcement or a separate phone number.
- **Adrienne Augustus:** So that's coming nationally. It's called 988. It's an easy to remember, shortened version, for what's currently funneled through to the National Suicide Prevention Lifeline. 988 will be what everybody dials instead of 911 when they feel like someone is experiencing a behavioral health crisis and they're not a danger.
- **DVA:** When you started working for the Hyattsville police department, were you not in the role that you are currently in?
- **Adrienne Augustus:** My title is Media Relations and Mental Health Programs Manager. Neither of those roles existed before I joined the police department. It was Chief Amal Awad who recognized the need for both. And as they were looking for the right people, she recognized that I had the experience. My professional experience is as a TV news reporter with a degree in journalism and then Corporate Communications and Public Relations. But then my personal side, has mental health advocacy and I worked for a short time for the National Alliance on Mental Illness and volunteered with them for several years. So, I was able to marry professional and passion.\
- **DVA:** Do you know what percentage of the customers, those who have been engaged with police, are registered with mental health agencies?
- **Adrienne Augustus:** Unfortunately, there's not a way to track that. At the municipal level, we use the reporting system that is designed at the county level. When I came into the department, the first thing I said was, "how are we tracking how often officers interact with people who have some sort of a mental health condition or are in crisis for

one reason or another?” And there was not a clear way to do that. Now that we have this new agency that's launching, there's a bigger look being placed from the county level down on being able to better serve people with behavioral health crisis. That sort of data tracking is being established. Now regarding people being registered, I don't know that that's something that could ever really be done. Because there are plenty of people who live with a mental health condition, go see their doctor, take their medication, and they live their life. And unfortunately, maybe one day they have a really bad day, and now they're interacting with the police. But there wouldn't have been anything prior to that where it would have been registered with their phone number or their address so that the officers would show up and know this person's diagnosis.

- **DVA:** I mean someone who received services from a single established mental health organization, like with a psychiatrist, and so have received medications.
- **Adrienne Augustus:** I think we're a long way off from being able to have that sort of data available partially because of HIPAA, which is basically the patient's bill of rights that makes sure that your personal information doesn't get distributed everywhere. What is being looked at is being able to have a record of previous calls that's available to not just within the one law enforcement agency, but also available to the civilian clinicians or civilian crisis response team members who are showing up, so that they have a better idea of what they might be walking into when they get to someone's home.
- **AF:** For the folks that are receiving public mental health services, that is very racialized and classed. The folks who are who may be living with a mental health diagnosis who are seeing their private doctor and can afford out-of-pocket psychotherapy or psychiatry may not be in any kind of public database or be receiving public services in the way that we understand it through a mental health clinic, because they have resources that other folks may not have access to.
- **Adrienne Augustus:** I think if people who were receiving public services were suddenly told that their names would be handed over to some other government agencies, particularly law enforcement, that people would probably stop going to get the social services.
- **MC:** I know that you mentioned that you had a goal of deploying the crisis team intervention training officer with every squad in the department. What does that mean?
- **Adrienne Augustus:** We have four patrol squads. My goal is that we have at least two CIT certified patrol officers on each squad. Separately, our officers have received Mental Health First Aid training. I will add that we're also asking our city council members for funding to bring in a caseworker as well so that this individual will be able to do follow up. We know that the clinicians who meet with the individuals on the street won't have the time or capacity to constantly keep up with everybody, but a caseworker supporting

the CIT program would be able to do a follow up the next day or a couple of days later. They would introduce themselves, find out what services the person needs and as how we can help. Maybe we can mitigate police officers from going out and dealing with a crisis over and over again, and help people really get to get back to being in a better place of life.

3. Administration Announcements/Debriefs

- LaToya Robinson has departed from the Race and Equity Task Force
- Equity Officer Update
 - o **Jan G.:** Shakira Hall Louimarre has accepted the position of Equity Officer and will start on May 23, 2022. She comes to us from DC. She is an organizer with Parents Amplifying Voices in Education (PAVE). Their mission is to advocate for quality schools.
 - o **Interim Mayor Croslin:** Write down questions for her and let her know what you are actually looking for in her.
- Driskell Park Update
 - o **Jan G:** There is a beautiful piece from Driskell's pine tree series that translated well into the two pieces of signage at the park. Hyattsville is working with Neighborhood Design Center to propose reimagining some of the physical assets, plants, and placemaking within the park. There will be a dedication ceremony for the official renaming of the park probably in June. There will be a series of roundtables in May devoted to City Perspectives, Youths and Programming, Art and Mentorship, and Nature. These roundtables hope to inform themes and ways to interpret who Driskell was as an artist, humanitarian, and educator. Ultimately, we will be building a unified park that welcomes the fabric and makeup of our community today.
- Cheri Everhart is seeking creative thoughts on Juneteenth.

4. Housing Plan Presentation – Daniel Vallejos-Avila

- Abstract presented.
- **MC:** Are there any questions regarding the Housing presentation?
- **DA:**
 - o Let's make sure we are including sources to give folks a sense of where the information is coming from.
 - o Given that we are the Equity Task Force, it's important for us to talk about all racial/ethnic groups. We focus a lot of Black and Latino, and the numbers seem to

point that that's where the biggest equity challenges exist, but to make our case stronger, it's important for us to show that inequities exist among these groups more than other groups.

- Is the point of the Equity Plan to provide a blueprint of recommendations for our Equity Officer and City Council as they move forward over the next several years? Or is it an assessment of the needs by the different section? If the answer is the former, I would like to explore adding a few explicit recommendations of things that have worked in other municipalities such as land trust and programs to subsidize living for certain groups.
- **MC:** I think that is the mandate of the task force to suggest improvements that we can make.
- **AF:** I imagine the new census data will shine some light on this disparity. I wonder about the lack of data about other equity issues for other communities like AAPI, folks with disabilities, people in different age groups.
- **Jan G:** Shakira can be a resource for you all. She can help refine the plan and tap resources with good data for you.
- Daniel Amador will take on the Community Engagement topic presentation since LaToya Robinson who was previously assigned to that section has left the committee. That topic is scheduled for August.

5. Open Discussion/Community Comments

- Jocelyn Medallo is a guest and applicant for one of the open slots on the task force.
- **Jocelyn Medallo:** If you could look 5-10 years forward, what is one accomplishment/change in Hyattsville that would measure as a success in terms of Race and Equity?
 - **MC:** More affordable housing and public transit.
 - **RB:** If there was a survey of the top 20 small cities where people would want to move to from a diverse perspective, that they would list Hyattsville.
 - **AF:** I would love to know my neighbors and be in deep community with one another. Also seeing families stay, and not being displaced or have to move because we can't afford to live here. Seeing people build intergenerational roots in this city brings me so much joy.
 - **JG:** I would also like to see people build intergenerational roots.
 - **DA:** My vision for Hyattsville would be that people are able to choose to live in Hyattsville regardless of where they are in their life journey and not be limited by the housing cost and job opportunities that exist in Hyattsville.

- **DVA:** That all immigrants from Africa, and Latinos are not seen as immigrants and also rent control.
- **Marshall:** Please explain what Mr. Vallejos-Avila report subject was supposed to be because it seems to him that this report was solely related to Latinos while omitting all other races and circumstances. If that was the intent, then fine, but if there was a different intent, then it seems that it is very incomplete.
- **DAV:** This was meant to be an addition and a focus on a group. This was not meant to ignore other groups.

Review Agenda for Next Meeting

- Approval of minutes for September, March, and April
- Equity Officer will address the group
- Aging and People with Disabilities presentation

6. Adjourn Meeting

MC Motion to adjourn meeting. RB move to adjourn. DVA second. All in favor.

Adjourned 8:38 PM