



Corporation of the City of
NEW WESTMINSTER

REPORT

Police Reform Working Group

To: Mayor Cote and Members of Council

Date: November 1, 2021

From: Police Reform Working Group

File:

Item #: 2021-493

Subject: Peer Assisted Crisis Team Pilot Project

RECOMMENDATION

THAT Council approve the City's participation in the Peer Assisted Crisis Team Pilot Project in New Westminster with the Canadian Mental Health Association and the City of Victoria, North Vancouver and the District of North Vancouver;

THAT Council approve \$65,000 toward the implementation of Phase 1 of the Peer Assisted Crisis Team Pilot Project in New Westminster;

THAT Council approve the City's Submission to the Province of British Columbia Civil Forfeiture Crime Prevention and Remediation Grant Program for up to \$94,000;

THAT a letter be sent to the local Members of the Provincial Legislative Assembly and Member of Parliament, creating awareness of the Pilot Project;

THAT Council approve the next steps and continued consultation with First Nations and other key stakeholders referenced in the Pilot Project; and

PURPOSE

Staff are requesting authorization to implement the Peer Assisted Crisis Team Pilot Project in New Westminster in collaboration with the Canadian Mental Health Association, to reduce the reliance on policing and city services for mental health crisis response in the community. Staff are also looking for authorization for the submission of a grant application to the Province of British Columbia, Civil Forfeiture Crime Prevention and Remediation Grant Program.

SUMMARY

The Police Reform Working Group has prepared a submission for the Provincial Special Committee on the Reform of the Police Act and are now building on the next steps for implementing the Peer Assisted Crisis Team (PACT) Pilot Project in New Westminster. This collaborative project is recommended to be implemented in collaboration with the Canadian Mental Health Association and with several other pilot cities across the Province. Staff are seeking authority to begin implementing the project as well as apply for funding to the Civil Forfeiture Crime Prevention and Remediation Grant program to implement Phase 1 and to the Province of BC to implement Phase 2 of the project.

BACKGROUND

Council is committed to developing a compassionate response to those experiencing mental health crisis and poverty across the city. We know we need to be bold to take steps to lift up the most vulnerable, especially those experiencing mental health crisis, poverty, and homelessness. We also know that we need different approaches to domestic and sexual violence which we refer to as crimes of power. There is a need for a suite of community responses to mental health crisis that prioritizes compassionate care.

On February 1, 2021 Council passed the following resolution at a Regular Council meeting:

THAT Council approve the recommendation from the Police Board contained in the letter dated January 25, 2021, to approve the New Westminster Police 2021 Budget Request, and direct the Finance Department to incorporate the recommendation into the draft 2021-2025 Budget Bylaw and proceed with public notification of the draft Bylaw;

THAT Council formally endorse the June 30, 2020, motion of the Police Board, as noted in item 4.2 in the Police Board Minutes for that meeting, and set out below in order to create a common basis for further discussion:

THAT: The New Westminster Police Board:

- 1. Supports deprioritizing the New Westminster Police Department's resources away from the enforcement of laws that criminalize the survival of society's most vulnerable people that would be better served by a public health or community care framework.*
- 2. Will engage with the Provincial Government to work with the city to develop a new model to address crisis health management with the goal of creating a pilot community based crisis management program that:*
 - a. Is informed by destigmatized, de-colonial and anti-racist practice;*
 - b. Is rooted in non-violent crisis intervention and de-escalation;*
 - c. Is rooted in compassion and mutual understanding;*
 - d. Is informed by best practices and lived experience;*

- e. *Provides participants a better understanding of issues around mental health, addictions and trauma;*
 - f. *Provides participants tools to help someone experiencing a mental health or substance use emergency;*
 - h. *Considers place-making opportunities to counter the perception and incidence of street disorder and chronic street nuisance; and*
 - i. *Reduces call volumes for police response, while redirecting more appropriate resources as applicable.*
3. *Supports the review of the use, deployment and training related to police equipment/weapons and that this work be done in collaboration with the Provincial Government's call to amend the Police Act.*
4. *Develop and adopt a Diversity and Inclusion Framework to guide the direction of Community policing and include the following goals:*
 - *Have a workforce this is broadly reflective of the community;*
 - *Identify and address barriers to diversity within organizational systems;*
 - *Attract and retain a talented workforce skilled at working in an inclusive and respectful manner with one another and with the community;*
 - *Create processes, policies, plans, practices, programs and services that meet the diverse needs of those they serve;*
 - *Establish a senior leadership action group to oversee equity, diversity and human rights initiatives;*
5. *Will request the development and implementation of a culturally-safe engagement plan to include and consider the personal experiences and voices of residents or groups who have or represent those who have experienced discrimination in helping to shape any proposed police reforms. This work will be done in collaboration with New Westminster City Council.*
6. *Will engage with members of the New Westminster Police Department with the goal to develop understanding, input and support for new directions for NWPD.*
7. *Will request a comprehensive report on police reforms to be presented to the New Westminster Police Board and New Westminster City Council by the end of 2020. The report will include a comprehensive scan of police reforms being conducted across North America and best practices in crisis health management at the local level.*
8. *Will request to work with and in collaboration with New Westminster City Council on the above stated work.*
9. *Requests that this work be integrated into the upcoming New Westminster Police Department Strategic Plan.*

THAT Council request that the Police Board adopt an action plan in order to make initial changes aligned with the above-noted June 30, 2020, motion, in the short term.

Special Committee on Reforming the Police Act

In parallel to the strategic direction of the City of New Westminster, the Province of British Columbia was preparing to reform the Police Act and created a *Special Committee on Reforming the Police Act*.

The Provincial Committee is anticipated to make recommendations on the following:

1. Reforms related to independent oversight, transparency, governance, structure, service delivery, standards, funding, training and education, and any other considerations which may apply respecting the modernization and sustainability of policing under the **Police Act** (R.S.B.C. 1996, c. 367) and all related agreements.
2. The role of police with respect to complex social issues including mental health and wellness, addictions, and harm reduction; and in consideration of any appropriate changes to relevant sections of the **Mental Health Act** (R.S.B.C. 1996, c. 288).
3. The scope of systemic racism within British Columbia's police agencies, including the Royal Canadian Mounted Police, independent municipal police and designated policing units, and its impact on public safety and public trust in policing.
4. Whether there are measures necessary to ensure a modernized Police Act is consistent with the United Nations Declaration on the Rights of Indigenous Peoples (2007), as required by section 3 of the **Declaration on the Rights of Indigenous Peoples Act** (S.B.C. 2019, c. 44).

The Province has identified key drivers to support change in the Police Act and is included for information (Attachment 1). A final report is anticipated in the Spring of 2022.

Police Reform Working Group Deliverables

In order to begin taking action in the community, in March 2021, Council approved the following direction, based on the input from the Reconciliation, Inclusion and Engagement Task Force:

- a. Provide direction on three engagement approaches identified.
- b. Establish a new "Police Reform Working Group" comprised of small group of Councillors, City staff and industry experts.
- c. Provide direction on the question of community representation on the Police Reform Working Group.
- d. Identify that research be included in this report as part of the mandate of the proposed "Police Reform Working Group".

The Police Reform Working Group, comprised of Councillor Nadine Nakagawa (chair), Councillor Jaimie McEvoy and Councillor Mary Trentadue as well as staff, prepared a submission, in April 2021, to the Special Committee on Reforming the Police Act that called for greater municipal change. The submission to the Province of BC is included for information (Attachment 2). The City was also asked to present directly to the

Special Committee on Reforming the Police Act with other key municipal governments, in July 2021.

The submission focused on the need for municipal change and was based on community feedback. It acknowledges that no amount of change to the BC Police Act or Mental Act alone can replace the need for greater structural change that would reduce the criminalization of poverty or social condition due to deficits in coordinated, region-wide approaches to housing, healthcare and community services. It emphasizes the bold steps needed to lift up the most vulnerable, especially those experiencing mental health crisis, poverty, and homelessness.

Specific recommendations for change were created to amplify and center the voices of racialized, indigenous, homeless and vulnerable members of our community who have been living at the intersection of historical and systemic marginalization.

EXISTING POLICY AND PRACTICE

The Community Impact of the Mental Health Crisis

The City of New Westminster is facing multiple crises and the impact on city services and the community is significant. The New Westminster Police Department (NWPD) reports that they respond to an average of 4 mental health-related calls per day. The Fire Department is increasingly called to respond to overdose events and other health-related concerns, while Bylaw Enforcement Officers report a 93% increase in calls related to homelessness and poverty over the last year. The impact of these calls is also felt outside of traditional avenues of response. Both Parks and Recreation, Engineering and the Library similarly report more incidents involving persons living with a mental health or substance use condition.¹

The City of New Westminster is highly attentive to these calls for service and the deepening social and health inequities they represent. In the submission to the Special Committee on Reforming the Police Act, councilors articulated a vision of “community, safety, security and care... across a spectrum of need” and called for new “non-carceral alternatives to respond to behaviors, situations, and crimes caused by poverty and desperation – including homelessness, addiction, and mental health emergencies.”² The submission specifically identifies the need for a pilot program and a readiness to undertake it.

Health and police partners are not far behind. New investments from Fraser Health Authority are targeted to meet the needs of people living with a mental illness and/or substance use. Recently, a second Rapid Access Addictions Clinic (RAAC) opened at the newly built Mental Health and Substance Use Centre on the Royal Columbian Hospital campus.³ The NWPD have similarly taken concrete steps to respond to mental

¹ City of New Westminster. (2021). *Presentation to the Special Committee on Reform of the BC Police Act*. Retrieved from: <https://www.newwestcity.ca/task-forces/articles/7969.php>

² See note 1, City of New Westminster.

³ Fraser Health. (February 2021). *New Rapid Access to Addiction Care Clinic opens in New Westminster to support*

health calls that fall outside of their mandate and have established a dedicated mental health intervention position.⁴ A pilot program can build on these investments and actions, to meet people where they are at and provide a compassionate response that connects them to available services.

Overcoming the Stigma of Mental Health

For many people experiencing a mental health crisis, their family members and bystanders fear calling 911 because a police response links the situation to criminality, creates power imbalances that raise the risk of violence, and ultimately, reinforces stigma. Mental health care responses to mental health crises are universally considered the best practice. For example, the leaders of CIT International – a group consisting primarily of police – now argue that only a mental health care response is appropriate for a mental health crisis. In the CIT International's recent best practice guide, they note that even co-response models (police and mental health workers) are an inappropriate response because they still involve the police.⁵ Other police leaders concur and call for mental health workers in lieu of police. The International Association of Chiefs of Police states that “the mere presence of a law enforcement vehicle, an officer in uniform, and/or a weapon ... has the potential to escalate a situation when a person is in crisis.”⁶

Setting a New Direction

The City's Provincial submission begins to develop a vision with respect to community safety and livability. Starting from a place of compassion and inclusion, everyone in our City should have a positive sense of place, to have a home, and to enjoy access to food, integrated health services and full employment with a livable income. There is advocacy for the decriminalization of drugs, and that the sources of poverty and desperation are addressed at their root cause. The community should be supported by strong, intergovernmental collaboration within a sustainable and regenerative environment.

The City believes that at the heart of improved public safety and security is a gap between current approaches to policing and the City's ability to achieve this vision. In order to close this gap the City is advocating for movement away from traditional policing models that would then expand supports and services for our most vulnerable. To that end the City's specific recommendations focus on four key areas:

1. Develop a new model of community response,
2. Center the voices of racialized and vulnerable populations,

people in Fraser Health who use substances. Media Release. Retrieved from:

<https://www.fraserhealth.ca/news/2021/Feb/new-rapid-access-to-addiction-care-clinic-opens-in-new-westminster-to-support-people>

⁴ New Westminster Police. (2013). *Mental Health Unit*. Retrieved from: <https://www.nwpolice.org/community-services/mental-health-unit/>

⁵ Usher, L., Watson A.C., Bruno, R., Andriukaitis, S., Kamin, D., Speed, C. & Taylor, S. (2019). *Crisis Intervention Team (CIT) Programs: A Best Practice Guide for Transforming Community Responses to Mental Health Crises*. Memphis: CIT International.

⁶ IACP Law Enforcement Policy Center. (2018). Responding to Persons Experiencing a Mental Health Crisis. Retrieved from: <https://www.theiacp.org/sites/default/files/2018-08/MentalIllnessBinder2018.pdf>.

3. Understand the current state of data collection, interpretation and control, and
4. Reconsider Police Board appointments and budgeting for collaboration.

Creating Change: Designing a Pilot Project for Compassionate Response

On April 26, 2021, Council approved the following next steps toward establishing a pilot project.

1. Develop partnerships and alliances to deliver the recommendations outlined to include key service providers and not for profit organizations;
2. Develop an action plan for delivery of the vision and recommendations;
3. Meet with the Province of BC and the Minister of Public Safety to discuss implementation;
4. Work with the New Westminster Police Department to develop innovation and collaboration in implementation;
5. Determine success indicators and targets; and
6. Evaluate after one year.

Best Practices in North America

Other jurisdictions have demonstrated that non-police approaches to mental health crisis save money, free up police resources for re-allocation towards preventing and solving crime, reduce stigma of mental illness and substance use, and divert people from unnecessary use of hospital emergency rooms and interactions with the criminal justice system.⁷ Integrated teams are connected to health and police agencies and operate on a spectrum of services, from police only response to calls with significant risk of assault or violence to a civilian-led response to calls that pose no threat to others and require only a health or social intervention.

The longest established and most well-known example of a non-police response is the CAHOOTS program based in Eugene, Oregon. Since 1989, CAHOOTS has deployed teams of civilian crisis responders to health and social service-related 911 calls. CAHOOTS staff are trained to provide a wide range of care, including wellness checks, mental health crisis interventions, substance use-related de-escalation, family conflict mediation, and basic medical treatment. In addition, CAHOOTS offers connections and transportation to services to help support people to manage their health and address non-acute social needs. Their goal from their inception has been to create an alternative to police response for people with unmet health and social needs whenever possible. In 2019, the teams responded to more than 24,000 calls or approximately one-fifth of total 911 dispatches, and only called for police backup 1 percent of the time. The model has

⁷ Reach Out Response Network. (2020). *Final Report on Crisis Response Models for Toronto*.

also proven cost-effective. The Eugene Police Department, estimates that the cost of dispatching police is \$800 per call. CAHOOTS reduces the need for police response, saving an estimated \$8.5 million each year.⁸

Funding Opportunities

There are several funding sources being investigated for this project to supplement the support of the City and CMHA. Applications for funding from the Provincial Civil Forfeiture Crime Prevention and Remediation Grant program are now being accepted. The annual Civil Forfeiture Crime Prevention and Remediation Grant Program provides one-time funding to organizations from across BC for the implementation of crime prevention and remediation projects. This year's call for applications is open from October 13 to November 24, 2021. Grants are typically under \$100,000.

The Application guidelines can be found at this link: [Application Guidelines](#). The funding streams are listed below:

- [Crime Prevention](#)
- [Indigenous Healing](#)
- [Restorative Justice](#)
- [Gender-based Violence](#)
- [Domestic Violence Prevention / Intervention Programming](#)
- [Human Trafficking; Sexual Exploitation; and Sex Worker Safety](#)
- [Child and Youth Advocacy Centres](#)

Hearing the Voices in our Community

We are at a pivotal time in our community with multiple crises exacerbating increased community needs. The City's Provincial submission is actively working to honour the calls for change from Canada's Truth and Reconciliation Commission, and the Inquiry into Missing and Murdered Indigenous Women and Girls. The City hears the voices of the BIPOC community and Black Lives Matter, while finding our way through a global pandemic and opioid crisis which continues to hurt our communities and residents unequally.

We are also in the midst of a climate crisis which, when factored into our work as a municipality, can make these challenges seem daunting, and insurmountable. These challenges present a unique opportunity to advance public safety and security away from its colonial and paternalistic structures, in favour of a model that is solidly built on the values of compassion, social justice and inclusion.

The Police Reform Working Group recommends the path forward to be collaborative, compassionate and inclusive of all voices in our community to develop the solution.

⁸ White Bird Clinic. (2018). *Crisis Assistance Helping Out On The Streets*. Retrieved from: <https://www.mentalhealthportland.org/wp-content/uploads/2019/05/2018CAHOOTSBROCHURE.pdf>

DISCUSSION

As part of next steps, staff are recommending the City participate in the PACT pilot project, currently managed by the Canadian Mental Health Association (CMHA), which also includes the City of Victoria and the City and District of North Vancouver, with the support from the Province of British Columbia. As there is an increasing need to create an alternate response to mental health crisis in New Westminster, the timely adoption of action to support our most vulnerable is recommended.

From Criminal Response to Health Response: the PACT Pilot Project

Staff reached out to the CMHA after they presented to the Metro Vancouver Mayor's Council in the Fall of 2020. The PACT pilot project supplements police response to 911 dispatch or crisis calls related to mental health and substance use. The pilot project represents a paradigm shift for mental-health calls — from a criminal response to a health response. The service pairs a mental health professional with a trained peer crisis responder to provide culturally safe, trauma-informed support to New Westminster residents, specifically those who are unhoused and at a higher risk of experiencing distress that may lead to police contact and criminalization. The goal of the service is to keep people living with mental illness and/or using substances connected to their communities and voluntary health and social services. The number of police contacts, Section 28 apprehensions under the Mental Health Act, arrests, repeat offenses and incarcerations is expected to decrease during hours of operation.

CMHA BC Division is positioned to facilitate the co-development and evaluation of a PACT for the City of New Westminster. The service itself will be operated by a local community agency that holds trusting relationships with the target population. Project activities are proposed to initiate November 2021 with the formation of a community planning table (CPT) and extensive stakeholder engagement. The information collected during this initial phase will inform the co-development of a service model at the CPT through the months of June and August 2022. The operation of the PACT will commence Fall 2022 and the collection and analysis of service data will continue throughout 2022-2027 for the purposes of evaluating its performance and alignment with community need.

The New Westminster Police Reform Working Group have laid a foundation for work to begin within the municipality. Public need and political will have combined to create a rare opportunity for progressive change. There is growing consensus as to why and what needs to be done, but a gap remains as to how. The CMHA BC Division is uniquely positioned to address this gap by convening a cross-sector community planning table, engaging stakeholders, and supporting the development and evaluation of a civilian-led model of crisis response.

Next Steps

It is recommended that CMHA BC Division facilitate the co-development of a civilian-led mobile mental health crisis team for the City of New Westminster. The two phases are described below:

A. Phase 1:

Project activities include convening a community planning table, leading stakeholder engagement and co-developing a service model. The goal of this phase of the project is to build community consensus on the need for and development of a civilian-led mobile crisis team and support the City of New Westminster to secure a local community agency to pilot the service.

Project Start Date: November 2021

Project End Date: November 2022

- November 2021 - January 2022: CMHA BC will convene a Community Planning Table comprised of NWPD, City of New Westminster, Fraser Health, First Nations representatives, community agencies and people with lived and living experience of mental illness, substance use and interactions with police. The Table will build on the work of the Police Reform Working Group, meet on a bi-monthly basis and steward the co-development process for the civilian-led mobile crisis team.
- January – June 2022: CMHA BC will engage key stakeholders to determine their requirements and considerations for a civilian-led mobile crisis team. The list of stakeholders will be developed at the Community Planning Table, but aim to include frontline responders, community service providers, urban Indigenous communities, and people with lived and living experience and their families. The methods of engagement will range from one-to-one interviews, to focus groups, to town halls depending on preference and suitability.
- June – August 2022: CMHA BC will combine the input from the Community Planning Table and the findings from the stakeholder engagement to develop a detailed proposal of a civilian-led mobile crisis response team for consideration by the City. The final proposal will be informed by best practices from other jurisdictions who have successfully operated a similar model, yet attend to the specific needs identified by New Westminster communities.
- August 2022 – November 2022: CMHA BC will facilitate a Request for Proposal (RFP) process that will elicit, assess and determine an appropriate community agency to lead operations and pilot the team. The Community Planning Table will nominate a sub-committee to review the proposals and support the City's decision.

B. Phase 2

This phase will entail the operation and evaluation of a 5-year pilot of a mobile mental health team that embodies existing best practices for non-police crisis response and meets the identified needs of communities. The City will need to contract with a trusted community agency to operate the mobile mental health teams. CMHA BC will support data collection and undertake data analysis and reporting for the purposes of evaluation.

The proposed hours of operation are 24/7, 365 days. The teams are composed of a peer worker and a mental health professional, who will work three consecutive shifts (8 am to 4 pm, 4 pm to 12 am, and 12 am to 8 am).

The total staffing cohort for the teams is fourteen 1.0 FTEs and one 0.6 FTE. This includes one Project Manager and two Supervisors. The service also requires a van to transport individuals to walk-in clinics, shelters, overdose prevention sites, food banks, clubhouses, hospitals, and the like, as needed.

Dispatch and Referral

The service will have a new dedicated number for mental health and substance use crisis events that anyone can call. The receiver of those calls will work with the team at the contracted agency and complete an initial assessment on whether to dispatch PACT or redirect the call to police. Other service agencies can directly refer to PACT such as police who can redirect calls from 911 dispatch and crisis line workers who can contact the service for an in-person follow up.

Similar services from other jurisdictions are integrated with 911 and train dispatchers to assess for mental health risk and triage calls, accordingly. Others are integrated with police and train crisis response teams on the use of police radios. Both of these options may be considered for inclusion within this service at the outset or at a later date.

Response Times

The average response time for the mental health crisis response team will be the same as the current average response of police to non-mental health crises – or less time.

Monitoring

The pilot will be monitored by a subcommittee of the community planning table. Membership will be informed by the findings from the stakeholder engagement and include at minimum 25 % people with lived and living experience of mental illness, substance use and interactions with police. The goal is to reflect the diversity of the

population who access the service. Additional members may include city councilors, healthcare staff, police officers, members of the local First Nations and community service providers.

The subcommittee will be empowered to request and obtain data from the municipal police force and health authority to support the evaluation and propose improvements to the service. Participants' personal information will not be shared at this subcommittee or with police or health agencies. The New Westminster Police Department is currently reviewing data that may be helpful for the subcommittee. All such data will be held by the contracted agency in accordance with applicable privacy legislation.

Data collection

Data will be collected by the contracted agency and analyzed by CMHA BC every three months, once the pilot is operational. The data will be provided to the subcommittee who will have the right to request additional data, as needed. The contracted agency must protect the privacy and autonomy of those receiving services from the mental health crisis teams. Data from this project will not be admissible in criminal cases. Summaries of the data collected, as well as the management and privacy plans, will be made transparent and accessible to the public.

Staff are recommending the implementation of the PACT pilot project in collaboration with the CMHA.

SUSTAINABILITY IMPLICATIONS

This project will enhance the livability for those most vulnerable in our community and create a stronger community of care so that all have the opportunity to thrive in our city.

FINANCIAL IMPLICATIONS

The proposed budget for this project is seen below.

Phase 1

The overall cost for Phase 1 will be \$94,800. The cost implications for the City will be \$65,000 and include \$30,000 for initial start-up funding to CMHA. This contribution is consistent with the contribution by all pilot sites participating in the project and will ensure an equitable contribution across all participating cities. The City will also require additional administration support to ensure consultation and other obligations are met. This is estimated at approximately \$35,000 for the first year. This funding may be partially reimbursed based on senior government funding received.

Phase 2

This phase of the project will cost an estimated **\$1.18 million** annually for five years. The budget includes some up-front costs such as the Client Management System used for data collection and evaluation that will not extend beyond the first year.

To sustain the pilot for a period of five years, CMHA BC and allied municipalities will continue to work with the Province for additional investment that aligns with the mandate letter priorities of the Ministry of Mental Health and Addictions, Ministry of Public Safety and Solicitor's General, and Ministry of Health.

Staff are recommending the contribution of \$65,000 to the PACT pilot project. These funds will come from existing city budgets.

Staff also recommend submissions to the 2021-22 Civil Forfeiture Crime Prevention and Remediation grant program for Phase 1 and a joint submissions to the Ministry of Public Safety and Mental Health and Addictions for the five year PACT Pilot Project.

OPTIONS

1. Council approve the City's participation, in the Peer Assisted Crisis Team Pilot Project in New Westminster with the Canadian Mental Health Association and the City of Victoria, and North Vancouver and the District of North Vancouver;
2. Council approve \$65,000 toward the implementation of Phase 1 of the Peer Assisted Crisis Team Pilot Project in New Westminster;
3. Council approve the City's Submission to the Province of British Columbia Civil Forfeiture Crime Prevention and Remediation Grant Program for up to \$94,000;
4. A letter be sent to the local Members of the Provincial Legislative Assembly and Member of Parliament, creating awareness of the Pilot Project; and
5. Council approve the next steps and continued consultation with First Nations and other key stakeholders referenced in the Pilot Project.
6. Provide other direction to staff.

Options 1, 2, 3, 4 and 5 are recommended.

CONCLUSION

The Police Reform Working Group has prepared a submission for the Provincial Special Committee on the Reform of the Police Act and are now building on the next steps by implementing the Peer Assisted Crisis Team (PACT) Pilot Project in New Westminster. This collaborative project is recommended to be conducted with the Canadian Mental Health Association BC and several other pilot cities across the Province.

Staff are seeking authority to begin implementing Phase 1 of the pilot project as well as apply for funding to the Civil Forfeiture Crime Prevention and Remediation Grant program and to the Province of BC to implement Phase 2 of the project.

ATTACHMENTS

Attachment 1: Key Drivers for changing the Police Act

Attachment 2: Submission to the Special Provincial Committee on the Reform of the Police Act

APPROVALS

This report was prepared by:

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This report was reviewed by:

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This report was approved by:

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