



CAMBRIDGE CITY COUNCIL

May 20, 2021

Mr. Anthony Wilson
Clerk of Cambridge
Cambridge City Hall

Dear Mr. Clerk:

Please include this correspondence on the agenda as part of *Communications and Reports from Other City Officers* for the City Council meeting scheduled for May 24, 2021.

On June 29, 2020, [the City Council passed a policy order](#) stating that “the City of Cambridge should consider and evaluate an effective, unarmed, Public Health and Human service response mechanism...to redefine what Public Safety looks like, and develop an alternative public health response with the ultimate goal of decreasing arrests, increasing connections to critical housing, addiction and other services, and ensuring that Public Safety feels safe for all residents.” To initiate this process, the City Manager convened a Task Force – comprised of Cambridge residents coming from a variety of differing backgrounds, experiences, and viewpoints – that was charged with developing a set of recommendations that would speak to the policy order’s stated goals.

These recommendations, and the work that went into arriving at them, are being now being presented to the City Council and the Cambridge community, in the form of the attached *City Manager’s Public Safety Task Force Report*. As the Co-Chairs appointed to this task force, we shall now turn our attention to working with the City Manager to commence a robust process of soliciting public feedback on these recommendations, and ultimately the City Manager shall be charged with actualizing the recommendations in the coming months. We look forward to embarking upon the next phase of this process, and to gaining the community’s feedback on the attached report.

We would also like to thank all of the Task Force members who volunteered virtually every Tuesday evening over the past several months, not to mention time outside of scheduled meetings, to address this crucial conversation.

Sincerely,

City Councilor E. Denise Simmons

City Councilor Marc C. McGovern



CAMBRIDGE CITY COUNCIL

REPORT FROM THE PUBLIC SAFETY TASK FORCE

BACKGROUND AND OVERVIEW

On May 25, 2020, 46-year-old George Floyd, an African-American individual, was murdered during the process of his being arrested (for allegedly using a counterfeit \$20 bill) in Minneapolis, MN. This horrific, senseless act of racially-based police brutality ignited a firestorm across the country, as protesters took to the streets in cities across America and demanded that the country begin to face up to its systemic racism, and particularly to the tragic, far-too-numerous incidents of people of color being harassed, brutalized, and murdered by police officers.

To be certain, cities like [Minneapolis](#)¹, of [Kenosha](#)², or [Louisville](#)³— each of which had a high profile incident of police-initiated, racially-based violence and/or murder that made it to national headlines in 2020 – represent the most extreme examples of police departments that are anathema to the very concept of “public safety;” rather than serving as a department designed to keep the peace and protect people, these police departments have demonstrably failed in their core mission of keeping all residents safe, and have even targeted some of the members of their community for harassment, violence, and murder.

Not all police departments engage in the kinds of shameful, unconscionable actions that the above-cited police departments have done – yet the national condemnation that came about following the murders of Mr. Floyd, Breonna Taylor, Ahmaud Arbery, and far too many other people of color at the hands of police officers has forced conversations in communities of all experiences. Even cities like Cambridge, where the Police Department is looked to as a national leader in proactive, progressive, community-based policing, have seen a groundswell of support for re-examining the concept of how we keep the members of our community safe, and what the best practices in public safety truly ought to be.

In the weeks following Mr. Floyd’s murder, members of the community, of the City Council, and of organizations providing various social services throughout Cambridge began to consider that one way to decrease the footprint of the Cambridge Police Department in our community would be to re-examine how the City responds to emergency calls from members of the public, in recognition of the fact that 911 calls tend to be one of the predominant gateways between members of the public and the criminal justice system. The notion that perhaps redirecting certain categories of these 911 calls away from the CPD and instead having a different systemic response – particularly by first responders who do not carry weapons – began to gain currency.

CURRENT WORK OF THE CAMBRIDGE POLICE

Before discussing reducing the footprint of the Cambridge Police Department in our community, it is important to have a greater understanding of what that footprint currently consists of. There is, of course, the work that falls under what we traditionally think of as “police work,” i.e., the [investigation of major crimes](#)⁴ such as thefts, burglaries, sexual assaults, murders, as well as engaging in [regular patrols](#)⁵ of various neighborhoods as part of a [community policing](#)⁶ effort. Yet, in recent decades, the Cambridge Police have also increasingly engaged in work that might be classified under “connecting individuals with

social services.” This work includes continual [outreach to the local unhoused community](#)⁷ and connecting unhoused individuals to the appropriate short-term and long-term support services, responding to 911 calls concerning those [experiencing mental health crises](#)⁸, responding to 911 calls from those in the midst of domestic disturbances and/or [domestic violence situations](#),⁹ and [working with young people](#)¹⁰ in danger of getting swept up in the criminal justice system, offering them a more positive path.

In this work, the Cambridge Police have fostered important strategic alliances with a number of community partners, including the [ROCA](#)¹¹ organization (for helping to divert young people from the criminal justice system, and helping those exiting prison with their reentry into society), [First Step](#)¹² (assisting with homelessness), [Transition House](#)¹³ (for working with survivors of domestic violence), and the [BID outreach workers](#)¹⁴ who work to connect people in Central Square with critical support services.

As in other communities, the Cambridge Police have gradually assumed [more and more](#)¹⁵ of this work in connecting community members with social services and similar [obligations over time](#)¹⁶ as funding for federal, state, and private departments [and programs](#)¹⁷ has gradually disappeared or been redirected.

ASSESSING CITY’S CURRENT EMERGENCY RESPONSE DATA

In an effort to better understand the types of emergency calls that typically come in to the City, and the volume \ by neighborhood, the Department of Emergency Communications and 911 compiled a summary of all [psych/pink slip](#)¹⁸ incidents by neighborhood, and included the corresponding Reporting Areas (RA) for total incidents by year. In the initial review, the highest area of these types of calls for the past 5 years are as follows:

Five (5) year avg:

- Cambridgeport
- North Cambridge
- Mid Cambridge
- Riverside
- The Port

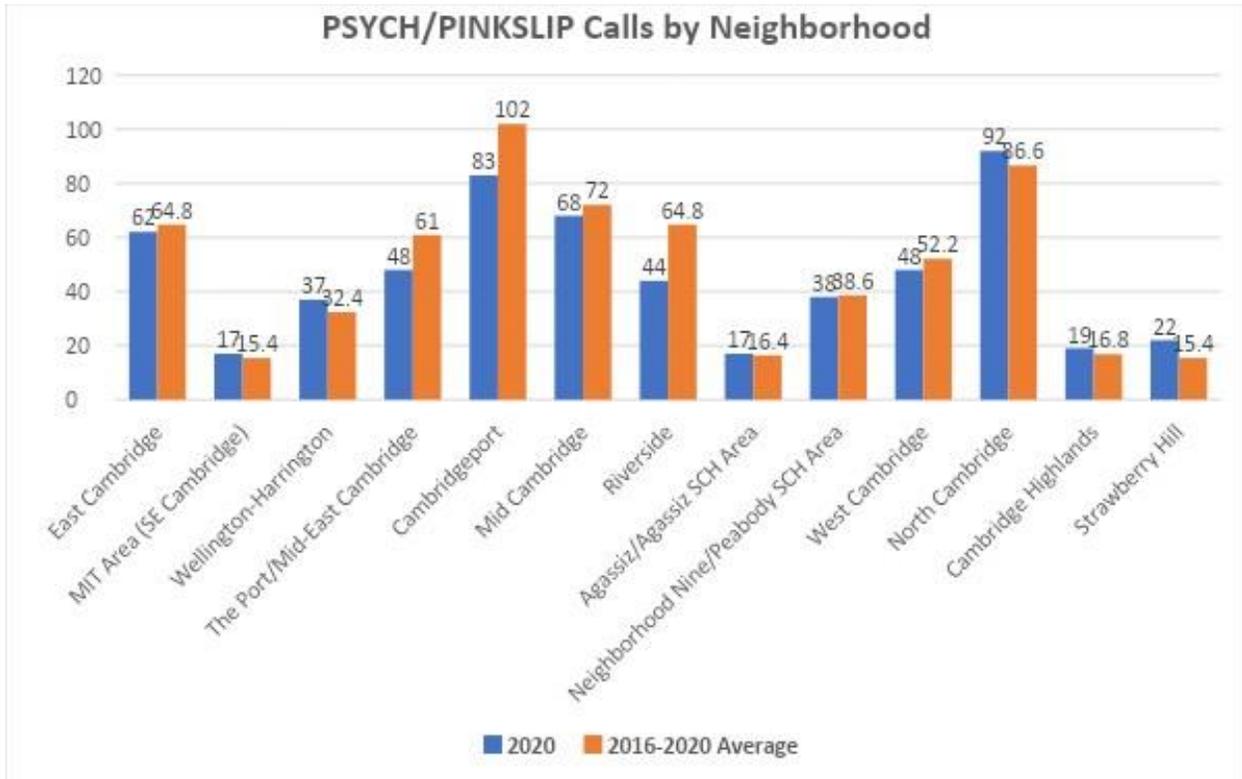
2020

- North Cambridge
- Cambridgeport
- East Cambridge
- Wellington/West Cambridge (tied)

This summary also includes the map of reporting areas within the neighborhoods defined. “Neighborhoods” is the macro lens we use to capture call data and the Reporting Areas are the micro lens within the neighborhood. The Reporting Areas are the shortest segment within the neighborhood that we use for response plans and to ensure anonymity [**See Appendix A**].

4/13/21 RA/Neighborhood PSYCH/PINKSLIP Breakdowns

This document lists the breakdowns of PSYCH and PINKSLIP calls per reporting area (RA) per Cambridge neighborhood.



The Department of Emergency Communications and 911 also prepared a map of all 911 calls pertaining to mental health emergencies placed to the Cambridge 911 system in 2020, broken down by neighborhood. The darker the neighborhood on the map indicates a greater number of calls in that area. [See Appendix B]

The above referenced information provides a general overview of the kinds of calls that have been coming into the City’s 911 system in recent years, and this information provided a reasonable starting point for the City to begin deliberating on where, and how, we might be able to re-imagine a different kind of emergency response, and how we might reduce the footprint of the Cambridge Police in our community.

INITIATING CITY REVIEW OF PUBLIC SAFETY MODEL

In response to the public’s strong desire for the municipal government to begin taking firm steps reviewing how the City handles its public safety responsibilities, and to the demands that the City be willing to consider new models of public safety and emergency response, the [City Council took up and passed the following policy order on June 29, 2020](#):¹⁹

WHEREAS: The Cambridge City Council recently declared racism as a Public Health crisis; and

WHEREAS: The recent murders of George Floyd, Breonna Taylor and others have elevated the conversation around where traditional Public Safety and policing intersects with social services, and there has been a national call for alternative emergency responses for non-emergency related situations; and

WHEREAS: Currently the definition of Public Safety only includes Police, Fire and EMTs, and said definition must be redefined to include Public Health and Human Services; and

WHEREAS: The Cambridge Police Department is the only response option when non-violent calls are received by Emergency Communications Department, calls that involve mental health, housing and homelessness issues, grief and trauma response, suicide prevention assessment and intervention and others that could be better served by an unarmed Public Health and Human Services response; and

WHEREAS: The Cambridge Police Department has made tremendous efforts in the last decade to intentionally reconceptualize public safety, which currently includes programs performed by non-sworn employees such as; social workers who specialize in mental health and addiction recovery, domestic violence advocates, an on-staff Child Psychologist, and more, and this model would not be intended to replace those program, but to enhance and create a co-response alternative model that includes the Public Health and Human Services departments; and

WHEREAS: Unarmed alternative emergency response programs exist across the country that can serve as a model for Cambridge to develop a program that works for our community; and

WHEREAS: Programs like [CAHOOTS](#)²⁰ (Crisis Assisting Help on the Streets), in Oregon work in tandem with Emergency Communications to triage whether traditional Public Safety is dispatched, or an unarmed team that is better prepared to perform Health and Human Service functions; and

WHEREAS: The CAHOOTS model consists of a medic (either a nurse or an EMT), and a crisis worker (who has at least several years experience in the mental health field). CAHOOTS provides immediate stabilization in case of urgent medical need or psychological crisis, assessment, information, referral, advocacy, and (in some cases) transportation to the next step in treatment; and

WHEREAS: CAHOOTS offers a broad range of services, including but not limited to:

- Crisis Counseling
- Suicide Prevention, Assessment, and Intervention
- Conflict Resolution and Mediation
- Grief and loss
- Substance Abuse
- Housing Crisis
- First Aid and Non-Emergency Medical Care
- Resource Connection and Referrals
- Transportation to Services; and

WHEREAS: The City of Cambridge should consider and evaluate an effective, unarmed, Public Health and Human service response mechanism, like in Oregon, Miami, Dallas, Nashville and others to redefine what Public Safety looks like, and develop an alternative public health response with the ultimate goal of decreasing arrests, increasing connections to critical housing, addiction and other services, and ensuring that *Public Safety feels safe for all residents*; therefore now be it

ORDERED: That the City Manager confer with the Cambridge Police Department, Emergency Communications Department, Department of Public Health, Department of Human Services and other relevant departments to determine the feasibility of an alternative Public Safety Crisis Response System, which department would be responsible for it, and how it would be funded and implemented in FY2022, and report back to the Council by September 14th; and be it further

ORDERED: That the City Manager discuss any such alternative with community members.

Following the passage of this policy order, the City Manager set to work in establishing a Task Force that would be comprised of Cambridge residents from various backgrounds and experiences who would be asked to develop recommendations on the feasibility of establishing an alternative Public Safety Crisis Response System, including which department would be responsible for it, and how it would be funded and implemented in FY2022. The members of this Task Force, which was Co-Chaired by Councilor Marc C. McGovern and Councilor E. Denise Simmons, were:

Rae Simpson, PhD	Cambridge Resident and Mental Health Advocate
Imam Dr. Khalil Abdur-Rashid	Muslim Chaplain at Harvard University
Rev. Jaron S. Green	Senior Pastor Union Baptist Church
Pastor Ellis Washington	St. Paul AME Church
Rev. Irene Monroe	Cambridge Resident, Public Speaker, Broadcaster
Christopher Schmidt	Cambridge Resident
Loren Crowe	Cambridge resident and Management Consultant
Samuel M. Gebru	Director of Policy and Public Affairs, Black Economic Council of Massachusetts
Catherine Pemberton	Cambridge resident and Health Care and Wellness consultant and system navigation specialist
Tina-Marie Johnson (TMJ)	Cambridge Youth Council Facilitator
Chandra Banks, Ed.M.	Conflict Mediator, Cambridge Public Schools District
Christina Giacobbe	Director of Emergency Communications and 911
Queen-Cheyenne Wade	Black Response and Community For Us, By Us
Leo Gayne	Public Relations Officer, East Cambridge Savings Bank
Tyrone Bellitti	My Brother's Keeper Cambridge Task Force

Beginning on February 2, 2021, this Task Force convened for the first time to discuss their charge (as provided by the City Manager):

To Examine ways to limit the Police Response to calls for service without diminishing Public Safety or Community Safety, while increasing Community Cohesion to include restorative processes.

The Task Force would go on to meet on a near-weekly basis, hearing from the following people and organizations:

CHRISTINA GIACOBBE (Cambridge 911): spoke to 911 data and how the Cambridge Police Department responds to mental health emergencies. Christiana spoke to call volume, Emergency Telecommunications Dispatchers (ETD), Role of ETD, Emergency Medical Dispatch (EMD), Emergency Medical Dispatch (EMD), EMD – Chief Complaint (Psych/Suicide).

Christina Giacobbe's presentation can be viewed here:

https://drive.google.com/drive/u/0/folders/1GfHd_yKTp076X2Iclgmm03tS0sI8kLrh

DR. JAMES BARRETT spoke to the history of CPD prior to the Youth and Family Service Unit in 2008, the organizational structure of the Family and Social Justice Section, the Sequential Intercept Model, the FSJS Case Management Process, Cambridge's Response to Mental Health, Juvenile Diversion Program and its outcomes.

Dr. James Barrett's presentation can be viewed here:

https://drive.google.com/drive/u/0/folders/1GfHd_yKTp076X2Iclgmm03tS0sI8kLrh

QUEEN-CHEYENNE WADE and DARA BAYER of The Black Response spoke to their mission as “a group of Black and Brown Cambridge residents and former residents who are concerned about the input and progression of the #DefundthePolice campaign, especially in regards to engagement with the Black communities in Cambridge.”

Queen-Cheyenne Wade and Dara Bayer's presentation can be viewed here:

https://www.canva.com/design/DAEYTac7gig/sMPsVOKF9-3hJC7P1YIudA/view?utm_campaign=designshare&utm_source=sharebutton

ELLEN SEMONOFF, Assistant City Manager of the Department of Human Service Programs, provided an overview of the social service programs overseen by the City.

DEPUTY SUPERINTENDENT ROBERT LOWE and OFFICER ERIC HELBERG spoke about the social services -- such as outreach to the local unhoused community and connecting these individuals with the appropriate services, working with those experiencing mental health crises, and working with domestic violence survivors -- that is conducted by the Cambridge Police Department.

Deputy Superintendent Lowe and Officer Helberg's presentation can be viewed here:

https://drive.google.com/file/d/19dE586bMLq1ShWS-ZNmb_AkrFdKuoy1V/view?usp=sharing

RAHSAAN D. HALL, Esq of the American Civil Liberties Union of Massachusetts, spoke with the task force to provide his sense of how this work might evolve from the standpoint of the ACLU.

DR. ROBERT SAMPSON, Harvard University, presented to the task force in regards to Social Efficacy and [Community Cohesion](#)²¹.

RACHEL BROMBERG and ASANTE HAUGHTON, Co-Founders of the [Reach Out Response Network](#)²², Toronto (and coordinators of the International Mobile Crisis Services Association, a network of individuals from alternative mobile crisis initiatives across the US and Canada) also presented to the task force.

LIZ SPEAKMAN, Coordinator of the [Domestic and Gender Based Violence Prevention Initiative](#)²³, presented to the task force.

CAMBRIDGE POLICE SUPERINTENDENT CHRISTINE ELOW spoke to the task force on domestic violence laws and department initiatives.

TASHA FERGUSON, Director of Emergency Services Programs at Boston Medical Center, presented to the task force on the [Boston Emergency Services Team](#)²⁴

KATIA SANTIAGO-TAYLOR, Advocacy and Legislative Affairs Manager at the [Boston Area Rape Crisis Center \(BARCC\)](#)²⁵; spoke to the task force, as did **VALERIE DRUCKENMILLER**, LCSW Community Advocate at [Transition House](#)²⁶, and **CHARYTI REITER**, Executive Director of [On the Rise, Inc](#)²⁷.

These initial meetings were presented in order to become more familiar with the City's existing police department and current emergency response model, and to learn about alternative response systems and approaches that other communities have utilized. The summaries of these meetings can be found on the [City's website here](#).²⁸ After absorbing this information, the members of the Task Force split off into

sub-groups of two or three to commence formulating recommendations around each of the following areas: Mental Health, Domestic Violence, Restorative Justice, Homelessness, Other Community Safety Options, and Community Outreach. The subgroups met over a period of weeks and then reconvened to present their thoughts and ideas to the larger group on May 4, 2021. **Please see Appendix C for the recommendations from the sub-groups as presented at that meeting.**

TASK FORCE RECOMMENDATIONS FOR NEXT STEPS IN THIS PROCESS

The Task Force Co-Chairs have taken the ideas, recommendations, and concepts provided by each of the subgroups and have distilled them into the recommendations outlined below, which represent the Task Force's response to the charge it was provided with by the City Manager upon its formation. It should be noted that, as public input is solicited and received, these recommendations may evolve.

PRIMARY TASK FORCE RECOMMENDATIONS:

1. The City of Cambridge should create a new Department, called the Cambridge Department of Community Safety (CDCS), which has primary responsibility over city services and all 911 calls related to the following categories:
 - Mental health emergencies, including some suicide-related calls and wellness checks
 - Unhoused residents
 - Non-emergency medical services
 - Substance abuse incidents
 - Public nuisance complaints
 - Crisis counseling
 - Grief and loss counseling
 - Resource connections and community referrals
 - Emergency transportation services to community resources
2. The new Cambridge Department of Community Safety should be a City Department organized outside of, and entirely independent from, the Cambridge Police Department and any other emergency services department, though we recognize, that like the CAHOOTS model, there may be instances when a police response is required. At such a time, we recommend that members of the CDCS should remain on scene, if safety allows, to provide additional support.
3. The Cambridge Department of Community Safety should consist of a Director, as well as enough staff to allow for a Peer/Professional model of response, and of support staff. The "response staff" will be large enough to allow for no less than 2 staff to respond to any calls that fall into the above categories on a 24/7 basis. "Peer" will be defined as a non-professional, non-licensed, community member. "Professional" will be defined as a licensed social worker or licensed mental health professional.
4. The Cambridge Department of Community Safety should be fully integrated into the city's 911 system, and should have at least one staff member, trained in mental health/social work, serving as a CDCS liaison staffed within the City's 911 Emergency Response Unit on a 24/7 basis to handle and triage calls and to help determine if the call is appropriate for the CDCS or another emergency response. The DCS liaison should be fully informed of what services the CDCS can provide.
5. In addition to being reachable via 911, the Cambridge Department of Community Safety should have its own three-digit number other than 911. We recognize that many people, at least for the foreseeable future, will call 911 as that is the number they are most familiar with, which is one reason why we recommend a CDCS liaison be placed within the 911 unit.

6. CDCS responders should be equipped to contact CPD or other city emergency services for safety on calls using existing emergency service communications networks.
7. The new CDCS should be a uniformed service, but those uniforms should be impossible to confuse with police uniforms. CDCS responders will be unarmed.
8. CDCS responders will require significant training in de-escalation strategies and should not be required to engage if they feel the situation is a danger to themselves or others. CDCS responders should be equipped with radios to allow them to call for CPD support if needed.
9. The Department of Community Safety should have an auxiliary response capability, as opposed to a primary response capability, to assist other emergency responders with incidents of domestic violence or other similar incidents of interpersonal violence or disturbances. The CDCS should have trauma-informed staff or community partners who can be dispatched 24/7 to a domestic violence incident with the police, and to assist survivors of a domestic violence incident after the scene is clear, as the individual situation warrants. These CDCS staff or community partners should be able to provide assistance directly and also be able to connect survivors and others at risk with existing community resources.

OTHER RECOMMENDATIONS:

1. The City should allocate sufficient funds to engage in a comprehensive community process that reaches out to all members of the community, **with an emphasis on those who have been most negatively impacted by structural and institutional racism**, to solicit feedback and refinement from the public on these initial recommendations of this task force. We recognize that there are community conversations already taking place on this issue and any community process should reach out to and take into account the work being done by these organizations for consideration.
2. The City should allocate sufficient funds to hire a facilitator or facilitators with experience in this area to organize and lead the aforementioned broad community process.
3. After soliciting and incorporating comprehensive public feedback on these recommendations, the City should consider funding a pilot program (or programs) to begin the process of creating an alternative response to specified public safety calls that could grow into the Department of Community Safety if successful.
4. The City and the Department of Community Safety should consider enhancing partnerships with organizations already addressing these issues in the community, potentially through increased funding to these organizations. For example, the City should fund a new position at Transition House - The Director of Equity and Justice. The position will work strategically to advance our mission to end domestic violence and strengthen our work through an anti-racist lens. This role is focused on internally examining and transforming our work to best meet the needs of survivors from all walks of life and externally on fostering community relationships to learn, apply, and share transformative practices.
5. The City should establish a **citywide respite center** for unhoused individuals that can provide a safe space as well as services, including (but not limited to): counseling, showers, meals, haircuts, clothes, laundry, etc.
6. While the new CDCS should have primary jurisdiction over calls and services that have long defaulted to CPD, the City should continue to invest in CPD training and resources that have helped the department better work with the city's vulnerable populations over the years. CPD should maintain its co-response model, innovative training modalities, and Family and Social

Justice Section. There will always be a need for increased social justice training and diversion opportunities within CPD.

7. The City should further explore and invest in restorative justice practices, including the possibility of creating an Office of Restorative Justice, possibly within the Department of Community Safety.
8. A new position, the Manager of Community Engagement, should be established within the City Manager's Office, to ensure a more uniform level and model of community outreach and engagement exists throughout all City departments.

ADDITIONAL AREAS TO CONSIDER:

1. Because of its proven track record of success, the City should look to the CAHOOTS program as a model for the scope and breadth of services the Cambridge Department of Community Safety might eventually provide, as well as for lessons learned and best practices. At the same time, the City should recognize that the CAHOOTS program as it exists today evolved over decades in response to specific needs and aspirations in its local community, which may not be the same as those that exist in Cambridge today. Gathering comprehensive community input to shape, refine, and edit these recommendations now and over time is crucial to the long term impact, success, and viability of the CDCS, both as the department is being formed and as part of its operations into the future. The program of the CDCS must be the program set by the community.
2. Mandated Reporting: We understand that like all systems, mandated reporting and mental health services have deep roots in racism and white supremacy culture. We also understand that at times mandating reporting is necessary when one or more people are at risk to themselves or others. How mandating reporting fits in to the Department of Community Safety needs further review, keeping in mind state law and liability issues.
3. The City should conduct a full needs assessment of programs and non-profit agencies working with domestic violence, homelessness, and mental health, in the City of Cambridge to create a comprehensive mapping of what services are available outside of the City and how those services can better work together to create a stronger safety net for those who need support.
4. Following the full implementation of these recommendations and the transfer of primary responsibility for the above listed categories of 911 calls, the City should continue to look at ways to transfer responsibility for emergency calls for non-violent incidents away from the Cambridge Police Department to the Department of Community Safety or to other city departments.

UNFINISHED BUSINESS AND AREAS OF DISAGREEMENT

As the recommendations of this committee are taken to the members of the public for consideration and feedback, and as the City Manager seeks ways to actualize the final recommendations that are ultimately brought forward to him, it is critical that these recommendations be viewed through the [language of the policy order that initiated this process](#):²⁹ “The City of Cambridge should consider and evaluate an effective, unarmed, Public Health and Human service response mechanism, like in Oregon, Miami, Dallas, Nashville and others to redefine what Public Safety looks like, and develop an alternative public health response with the ultimate goal of decreasing arrests, increasing connections to critical housing, addiction and other services, and ensuring that Public Safety feels safe for all residents.” It is equally critical that people be mindful that this same policy order directs that “...the City Manager [should] confer with the Cambridge Police Department, Emergency Communications Department,

Department of Public Health, Department of Human Services and other relevant departments to determine the feasibility of an alternative Public Safety Crisis Response System, which department would be responsible for it, and how it would be funded and implemented.” While the members of this task force engaged in thoughtful discussions and deliberations in coming up with recommendations, there are some instances where these recommendations are being offered more as general guideposts and governing principles that, it is hoped and expected, the City Manager and other appropriate City personnel will flesh out and incorporate into a viable final product.

It is also important to note that not every decision and recommendation contained in this report represents a 100 percent consensus among the task force members. Indeed, the biggest area of disagreement among some of the members was the very structure of this task force and of this process. Some task force members suggested that this process should begin with a series of public meetings in which the members of the public would be presented with “a blank slate” upon which they could voice their opinions, concerns, and criticisms of the City’s current public safety policies and procedures, before moving on toward providing ideas for re-imagining those policies and procedures. Other task force members urged that every meeting of the task force should be open and viewable to all the members of the public. Still other task force members urged that additional members of the public, from different backgrounds and with differing experiences and viewpoints, should be invited to either present to the task force or be made members of the task force. And, lastly, some task force members argued that the scope of this task force was too limited.

Again, the contents of this report represent the broad consensus of the majority of the task force members, and the task force Chairs took pains to respectfully address any concerns that were raised throughout this process. The members of the task force were advised that, as this was a working group convened by the City Manager, it was his discretion as to whom would be invited to participate and how the process would be structured (and, it should be noted, this is similar in structure and operation to a number of other City Manager-convened working groups that have been convened in recent years). As to the scope of work, this was dictated by the initial policy order that called for the task force’s creation, and neither the City Manager nor the task force chairs have ruled out the possibility of re-convening this task force, or convening a similar task force, to examine other related public safety issues in the future.

NEXT STEPS AND FINAL THOUGHTS

The items listed in the sections above represent the *initial phase* of recommendations to the City Manager. As noted earlier, it is important to note that not every element of this report was fully agreed upon by every member of the task force. We have tried to make clear those areas where there were some elements of disagreement, or where the task force felt it necessary to leave some room for the City Manager, the Police Commissioner, and other appropriate City staff to exercise their discretion and best judgment. This report, however, represents the best attempts of the Co-Chairs to synthesize the work of this task force into a cohesive document that can be presented to the public, and that can ultimately be acted upon by the City Manager.

The next step in this process includes reporting these recommendations – as well as discussion of how these recommendations were arrived at – to the Cambridge community, and actively soliciting the feedback of the public. This is a critical and necessary part of this process, and it must be understood that, based upon the feedback from the Cambridge community, the recommendations contained in this report may evolve. It is also important to note that, concurrent with (and parallel to) the work of the City Manager’s appointed task force over these past several months, various members of the Cambridge community have been engaged in similar discussions and re-imaginings of how the City should approach matters pertaining to policing and public safety. Should recommendations from those independent efforts be presented to the City Council, the task force Co-Chairs will work to ensure that these be given their

due consideration, while remaining respectful of the hard work engaged in by the members of this task force, and of the charge they were given by the City Manager.

This report is now being formally submitted for the record to the City Council. Following this submission, the next phase of work – presenting these recommendations to the public at large, and soliciting the public’s feedback – must and shall commence, followed by the City Manager’s review and implementation.

Sincerely,



City Councilor E. Denise Simmons



City Councilor Marc C. McGovern

Date: May 24, 2021

APPENDIX A

Below are summaries of the Reporting Areas within the neighborhoods defined by the Department of Emergency Communications and 911. “Neighborhoods” is the macro lens we use to capture call data and the Reporting Areas are the micro lens within the neighborhood. The Reporting Areas are the shortest segment within the neighborhood that we use for response plans and to ensure anonymity.

East Cambridge					
Reporting Area	2016	2017	2018	2019	2020
101	7	5	5	10	10
102	5	9	4	4	3
103	4	5	6	8	5
104	9	4	9	5	4
105	13	10	12	9	14
106	4	9	9	4	5
107	6	7	13	7	5
108	8	13	21	18	16
Total	56	62	79	65	62

MIT Area (SE Cambridge)					
Reporting Area	2016	2017	2018	2019	2020
201	4	2	0	0	2
202	0	5	10	4	4
203	0	2	3	4	2
204	3	3	9	4	6
205	1	2	1	3	3
Total	8	14	23	15	17

Wellington-Harrington					
Reporting Area	2016	2017	2018	2019	2020
301	15	5	10	7	10
302	10	7	4	8	7
303	1	0	0	1	0
304	8	5	3	8	6
305	9	7	15	2	14
Total	43	24	32	26	37

The Port/Mid-East Cambridge						
Reporting Area	2016	2017	2018	2019	2020	
401	0	2	2	0	0	
402	1	0	4	0	0	
403	9	10	10	11	7	
404	14	7	7	6	11	
405	16	6	6	8	3	
406	8	3	1	1	2	
407	0	0	2	1	0	
408	2	3	2	3	5	
409	9	10	10	21	14	
410	0	0	2	0	0	
411	10	11	14	25	6	
Total	69	52	60	76	48	

Cambridgeport						
Reporting Area	2016	2017	2018	2019	2020	
501	33	36	37	48	23	
502	14	24	20	15	21	
503	4	1	0	2	2	
504	5	9	7	12	9	
505	0	1	2	1	0	
506	19	17	6	6	4	
507	7	7	13	7	5	
508	17	11	5	3	11	
509	2	1	2	5	2	
510	14	8	4	2	6	
Total	115	115	96	101	83	

Mid Cambridge						
Reporting Area	2016	2017	2018	2019	2020	
601	23	18	12	21	15	
602	9	9	12	5	6	
603	6	7	10	3	2	
604	9	9	5	3	5	
605	5	12	14	5	9	
606	3	5	1	5	11	
607	3	3	11	8	8	
608	0	0	0	0	1	

609	2	0	2	0	1
610	3	7	3	4	2
611	3	0	2	3	2
613	5	6	11	5	6
Total	71	76	83	62	68

Reporting Area	Riverside				
	2016	2017	2018	2019	2020
701	21	17	24	34	9
702	9	12	7	6	4
703	2	0	0	1	2
704	1	1	6	2	5
705	2	2	2	1	1
706	6	8	6	11	10
707	9	14	6	7	5
708	10	22	12	19	8
Total	60	76	63	81	44

Reporting Area	Agassiz/Agassiz SCH Area				
	2016	2017	2018	2019	2020
801	1	0	1	2	1
802	2	0	1	1	0
803	0	3	0	2	4
804	10	11	9	11	8
805	0	4	4	3	4
Total	13	18	15	19	17

Reporting Area	Neighborhood Nine/Peabody SCH Area				
	2016	2017	2018	2019	2020
901	2	1	0	4	3
902	4	3	2	3	2
903	3	2	2	2	2
904	0	1	1	0	0
905	3	3	6	2	2
906	2	0	1	0	1
907	0	1	0	1	1
908	1	0	2	1	1
909	1	8	1	4	3

910	7	12	11	12	9
911	0	1	1	0	2
912	4	11	14	14	11
913	1	0	0	0	1
Total	28	43	41	43	38

Reporting Area	West Cambridge				
	2016	2017	2018	2019	2020
1001	3	1	1	0	0
1002	46	26	29	34	24
1003	1	0	1	5	2
1004	1	1	3	0	1
1005	1	0	1	0	3
1006	2	0	0	5	1
1007	0	1	1	0	0
1008	1	2	1	0	1
1009	2	1	3	0	1
1010	0	0	0	0	1
1011	0	1	0	1	2
1012	0	1	2	1	3
1013	0	1	0	1	0
1014	4	5	1	1	4
1015	3	1	1	0	1
1017	2	4	6	4	4
Total	66	45	50	52	48

Reporting Area	North Cambridge				
	2016	2017	2018	2019	2020
1101	8	6	5	12	8
1102	9	11	21	17	8
1103	7	3	0	1	6
1104	7	2	5	10	8
1105	2	2	2	3	1
1106	7	4	3	3	5
1107	4	3	2	6	2
1108	4	5	1	10	6
1109	9	20	12	16	15
1110	21	18	19	23	27
1111	1	3	2	3	3

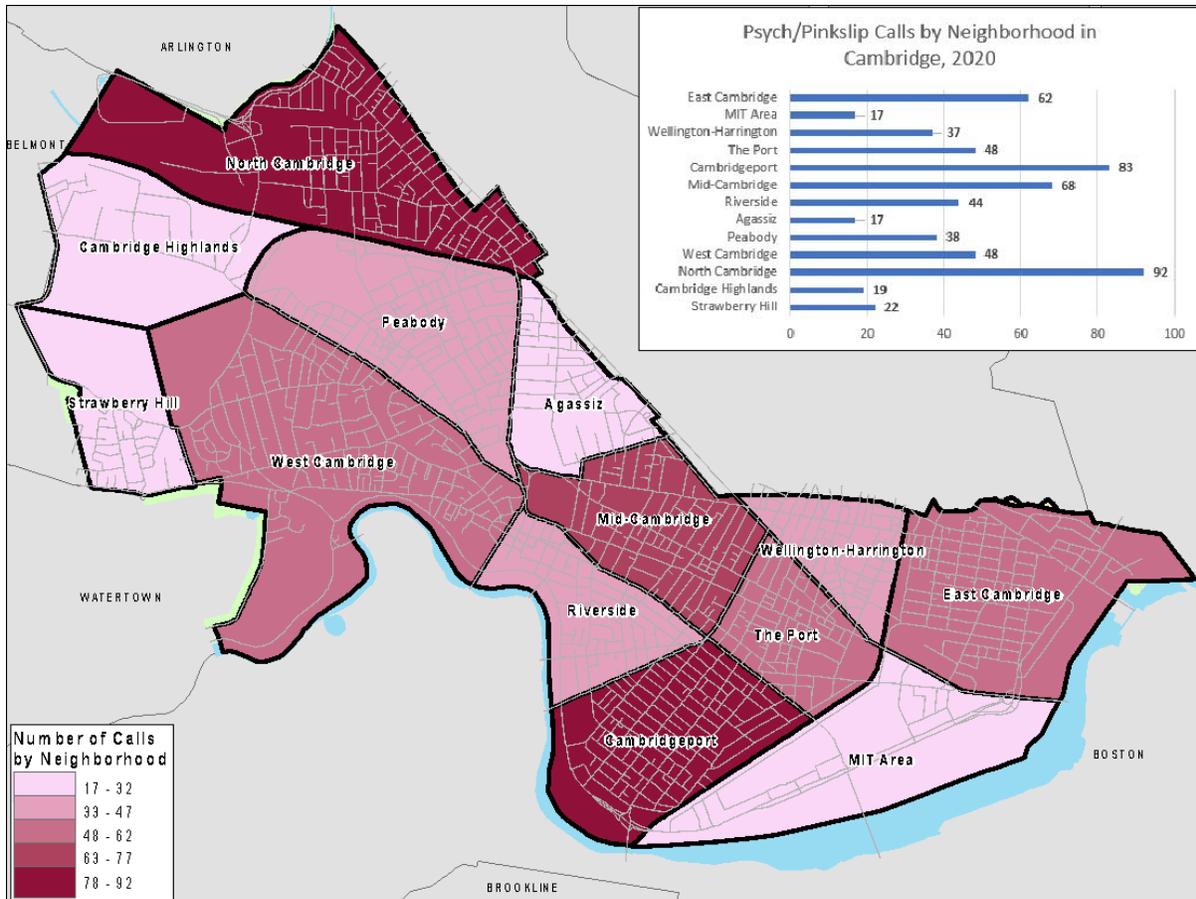
1112	0	4	1	3	2
1113	0	1	0	0	1
Total	79	82	73	107	92

Cambridge Highlands					
Reporting Area	2016	2017	2018	2019	2020
1201	6	7	5	7	8
1202	6	3	6	9	6
1203	2	2	2	2	3
1204	2	1	2	3	2
Total	16	13	15	21	19

Strawberry Hill					
Reporting Area	2016	2017	2018	2019	2020
1301	2	3	7	5	4
1302	1	2	3	1	7
1303	6	6	13	6	11
Total	9	11	23	12	22

APPENDIX B

The Department of Emergency Communications and 911 also prepared a map of all 911 calls pertaining to mental health emergencies placed to the Cambridge 911 system in 2020, broken down by neighborhood. The darker the neighborhood on the map indicates a greater number of calls in that area.



APPENDIX C

Reports from the Task Force Sub-Groups

In April, after collaborating as a full Task Force since February, the Task Force split up into sub-groups of two or three to commence formulating recommendations around each of the following areas: Mental Health, Domestic Violence, Restorative Justice, Homelessness, Other Community Safety Options, and Community Outreach. The subgroups met over a period of weeks and then reconvened to present their thoughts and ideas to the larger group on May 4, 2021. The recommendations found in these reports represent the recommendations of the members of the sub-groups only, not the full Task Force. The reports were discussed and synthesized by the full Task Force and that process was a major component of the Task Force's work that led to the final recommendations and next steps presented in the main report.

The reports from the sub-groups are presented here in full:

MENTAL HEALTH

The goal of the subcommittee focused upon Mental Health issues was to deliver recommendations that could begin to identify key areas to consider when setting up a program for non-police response to mental health calls. The subcommittee did not reach consensus on what the new structure should look like, with some members feeling that there needed to be more work to flush out details of such a service.

All members agreed that creating a new, non-police response is complex, as it involves other systems, such as mental health support in the community, mental health infrastructure, community supports, religious organizations, non-profits and fitting in the numerous services already being offered by the Cambridge Police Department.

All members agreed that the information obtained during this Task Force from February to April 2021 was valuable and should be used to inform and shape next best steps to move from discussion to design to action and implementation.

There were subcommittee members who were comfortable laying out a framework, based on the information obtained during the Task Force process, their own research, and their own experience, to offer the following outline of a service that should be considered:

- Peer/professional model. Two people per call. One a "Peer Counselor" and one a social worker/mental health professional
- Calls would come into a new three-digit number, with the understanding that many calls will continue to go through 911
- Staff 911 with a social worker/licensed mental health professional to triage calls (Response to call will depend on specifics of the situation)
- This new "unit" will be housed outside of the police department, but work in conjunction with the CPD Clinical Support Services Unit and other City Departments
- Will not provide case management services

- We understand that there will be times when police involvement may be necessary, but during those times, all efforts should be made to have the non-police responders take the lead and for the police only to be involved if the situation becomes unsafe
- Will respond to the following types of calls:
 - Suicide related calls
 - Mental health related calls
 - Welfare/wellness checks
 - Conflicts with encampments
 - Calls for unhoused members of the community
 - Public Nuisance calls
 - Transportation to services that don't require an ambulance
 - Death notifications

Policy recommendations would be: That the City Manager establish a new public safety unit that sits outside of the Cambridge Police Department to address calls related to: Suicide, mental health crisis, welfare/wellness checks, conflicts with encampments, emergency services for unhoused community members, public nuisance calls and transportation to services that don't require an ambulance. This unit will work in conjunction with other city departments and services, as well as with non-profits in the community. This unit will be staffed in a "peer/professional" model with enough staffing to allow no less than 2 staff to go out on every call, 24 hours per day, 7 days per week. In addition, social work/mental health staff will be added to the 911 Emergency Response Unit to triage mental health calls to determine the appropriate response.

DOMESTIC VIOLENCE

The subgroup looking at issues pertaining to domestic violence presented the following report to the larger task force:

WHAT DOES THE NEW STRUCTURE LOOK LIKE?

In order to fully propose a new structure for responding to domestic violence calls outside of the criminal justice system, a needs assessment should be conducted along with additional response policy review, training, explore other follow up models, improve court process and additional awareness campaigns on resources in the community. Additionally, after several meetings with key stakeholders in the community, it has been determined that many of the current structures responding to DV are working very well. Stakeholders requested that the DV Advocates at CPD be noted as key assets to the successful responses to DV survivors across Cambridge. The many discussions included key areas of strength as well as needs for change. All agreed that any changes should only be made after a comprehensive need assessment is completed. As such, the subcommittee is recommending the following:

Assess DV Needs in Cambridge

The Domestic and Gender-Based Violence Prevention Initiative (DGBVPI) is currently working to engage and mobilize Cambridge's communities, agencies, and City departments to change attitudes, behaviors, policies, and practices to prevent and bring attention to domestic and gender-based violence. To do this work, technical assistance is required to assist, develop and market a DV need assessment survey and complete a report on recommendations to deliver enhanced services and unmet needs. This work would also allow for the continued efforts of the Coordinator of the DGBVPI who has worked on creating a shared understanding of Racial Justice in the context of Gender-Based Violence through public events, small group discussions and day long workshops. As a next step in this work, the Coordinator seeks to work with groups of providers and a consultant in launching a need assessment on the pathways

and barriers to justice for Black, brown and other marginalized survivors of domestic violence (DV) and sexual assault (SA).

Enhanced Dispatch/Police Response Policy Review

- Trauma Informed Officers dispatched to all DV and sexual assault calls.
- DV Advocate availability to respond after scene is clear for after care/follow up.
- Improve Police Response through decision-making model.
- Having clear policy/criteria for officers to arrest based on assessment.
- DV worksheet enhancement to include more objective decision-making flow chart.
- Map processing for protocols for diversion programs.
- Modifications to DV Lethality form to include mapping process.

Training

- All employees in ECD (911), CPD Officers get Trauma Informed Training.
- Provider Training for DV/Sexual Assault partners regularly as well as ECD/911.
- HU/MIT Officer trained in DV/CIT
- Judges and ADA's to have DV training

Review Reporting Process for DV/Sexual Assault and Investigation Process including child abuse reporting by CPD

Explore follow up models for services to improve service delivery for DV calls

- Focused Deterrence model could be used for abusers.
- Utilize the CAB HART (Cambridge, Arlington, Belmont High Risk and Assessment Team) model as a mechanism for connecting abusers to resources.
- Community based DV Advocate follow up/DV advocate after scene/incident.

Improve Court Process

- Reemphasis when appropriate on referrals to EMERGE for 209A violations.
- Continuity planning and policy for Victims Advocate Policy when court is not operational, evacuation etc. as outcome cannot rely on police to facilitate as we saw this during the pandemic.

Enhanced Awareness Campaign

- Campaign
- Flyers
- Social Media
- City Annual survey – questions focused on DV
- School backpack communication
- Annual report
- City newsletter

Language Access

- Create and implement culturally and linguistically appropriate materials for victims of Domestic and Sexual Assault.
- Ensure linguistically appropriate access to resources.

Prevention/Education

- Create and implement widespread prevention education across the community.

WHAT SHOULD THE POLICY RECOMMENDATIONS BE, HOW WOULD THIS NEW POLICY WORK?

- Upon completion of a needs assessment, evaluate program needs, roles and positions to enhance services for DV services outside of the criminal justice system and to improve processes within criminal justice system.
- Consideration for a Social Worker to be available 24X7 for calls directed to ECC/911.
- Require data sharing policy for metrics for service providers to ensure we have a global picture of community needs.

Staff Needs

- Need additional FTE for CPD DV advocate as the position is grant funded and supports vital assistance in identifying resources for victims/abusers.
- Consider assigning Trauma Informed Officers to DV Unit.
- Create new position at Transition House - The Director of Equity and Justice. The position will work strategically to advance our mission to end domestic violence and strengthen our work through an anti-racist lens. This role is focused on internally examining and transforming our work to best meet the needs of survivors from all walks of life and externally on fostering community relationships to learn, apply, and share transformative practices.
- Review racial differences in DV arrest.
- Review all police and dispatch policies.

HOW WOULD PEOPLE ACCESS THIS SERVICE?

- Victims will still be able to contact 911 if they choose however instead of CPD response, Social Worker could discuss options/resources in real time to callers.
- Enhanced resources to support 7X24 hotline at partner agencies.
- Traditional partner agencies contact through existing or enhanced services.

RESTORATIVE JUSTICE

The subgroup focusing on Restorative Justice recommended the establishment of an Office of Restorative Practices.

The Office of Restorative Practices of Cambridge, MA would exist in alliance with grassroots and government sanctioned national, state, and regional entities for Restorative Justice. Its services would be aligned with state expectations for access to services for residents of Massachusetts. It would employ a Leader with a background in Restorative Justice Practice and training, as well as a variety of other means of preventing violence and managing conflict. The Leader would have experience in large scale program implementation and evaluation, and a background in mental health and universal Public Health strategies. The Leader would have the ability to provide collaborative leadership within the Department and participate collaboratively with other city Departments.

The Clerical staff would manage communications between the office and the city. The Clerical staff would maintain a social media presence for the Department and manage referrals to the Office of Restorative Practices, as well as other clerical and managerial duties.

The Assistant Department Leader (ADL) would be a practitioner of Transformative Justice and would lead this work for the City on issues that call for this kind of response. The ADL would provide direct supervision to the Practitioners. The ADL would coordinate and implements training for the Practitioners and community outreach initiatives. The ADL would oversee the processing of referrals, and follow up on Transformative and Restorative processes taking place in the community.

The 10 Practitioners would have experience in conflict mediation, Transformative Justice practices, as well as Restorative Circle Practice. They would have specialties in the areas most needed by the office: (2) mental health support, (2) housing services, (2) employment, (2) education, and (2) healthy food access & nutrition education, as a way to foster lasting physical safety and generate community wellbeing. The Practitioners would offer training in conflict management, community building, intervention and workshops to residents. They would recruit and train volunteers to support Community Building Circles in all of the neighborhoods.

The staff would be diverse. Residency in the City of Cambridge would be essential.

- **Located in City Hall** (office of the City Manager or the Mayor, not the police, but not recreation either)
- **Staff:** 1 full time Department Leader, 1 full time assistant Department Leader, 1 clerical support staff, 10 full time Restorative Practitioners, unlimited citizen volunteers
- **The Office of Restorative Justice** would work collaboratively with residents, city offices, and private industry located in the city of Cambridge

HOMELESSNESS

The subgroup focusing upon issues of how the City should respond to emergency calls and situations pertaining to homelessness recommended the following items be taken up for further consideration:

1. Create a **non-police crisis response team** as an alternative response when police are truly not needed (i.e. non-life threatening and non-violent/criminal activities)
2. Establish a **three digit non-911 number** (i.e. the federal government's forthcoming 988 mental health crisis number) and train existing Emergency Communications Center staffers on triaging calls
3. Substantially **increase city grants and contracts to existing homelessness providers** (i.e. FirstStep, Bay Cove, Eliot PATH Program)
4. Encourage the **formation of a 1+ year working group on public safety reform** with an emphasis on proactive citywide community engagement, including engaging those on the frontlines of public health, public safety, and community organizing
5. Establish a **citywide respite center and strongly advocate for alternative and innovative policies** at the state/federal levels, such as a safe injection facility

OTHER COMMUNITY SAFETY OPTIONS

The Task Force on the Future of Public Safety working group assigned to explore “other community safety options” that did not fit neatly into the other Task force working groups’ purviews has met and prepared the following recommendations for the full Task Force’s consideration. Our recommendations are broken into two sections, recommended categories of service that the new Department of Community Safety should provide and have primary jurisdiction over in the city and key principles that the city should follow when designing the new department, all based on examples and best practices we have had the opportunity to study from across the country.

I. Recommended Services to be Provided by the new Cambridge Department of Community Safety:

We recommend that the new Cambridge Department of Community Safety have primary responsibility over city services and all 911 calls related to the following:

- Non-emergency medical services
- Substance abuse incidents
- Public nuisance complaints
- Crisis counseling
- Grief and loss counseling
- Resource connections and community referrals
- Transportation services to community resources
- Death notices

All of the above categories represent services currently provided by CAHOOTS in Salem, OR, and the city should conduct further study into how the CAHOOTS staffs and operates those programs when designing a pilot program for Cambridge.

II. Key Operating Principles to Incorporate into a new Department of Community Safety [DCS]:

Based on our research into other non-police community response programs across North America, the Task Force recommends that the following best practices and lessons learned be incorporated into the design of the new Department of Community Safety:

- The new Cambridge Department of Community Safety should be a City department organized outside of and entirely independent from the Cambridge Police Department, though the two departments should have a close working relationship similar to the relationship that CPD shares with the Cambridge Fire Department.
- DCS should be fully integrated into Cambridge’s emergency response plans and be considered a peer first-responder agency to CPD and CFD.
- When fully operational, the new Department of Community Safety should have primary jurisdiction over all categories of response calls that are currently handled by CPD which do not involve violence or serious criminality.
- While the new DCS should have primary jurisdiction over calls and services that have long defaulted to CPD, the city should continue to invest in CPD training and resources that have helped the department better work with the city’s vulnerable populations over the years. CPD should maintain its co-response model, innovative training modalities, and Family and Social Justice Section. There will always be a need for increased social justice training and diversion opportunities within CPD.

- The new DCS should offer a 24/7 response for all categories of response calls. DCS should be fully integrated into Cambridge's 911 system alongside CPD, CFP, and EMS, and 911 operators should be able to route calls to DCS for immediate response at all hours. DCS may offer additional non-emergency response community Safety services during business hours.
- DCS responders should be equipped to contact CPD or other city emergency services for Safety on calls using existing emergency service communications networks.
- The City Manager should commission a comprehensive community engagement process to solicit community feedback on this Task Force's proposal for a new DCS. This process should prioritize voices from communities most impacted by inequities in the United States' criminal justice system and who will be most impacted by the creation of a new DCS. The City Manager should use feedback from this process to refine this proposal and to prioritize which services the new DCS should offer to the public first.
- In addition to community feedback, the City Manager should use the current volume of emergency response requests and the current risk of poor outcomes as criteria when prioritizing which categories of services to shift from CDP to the new DCS.
- When possible, the new DCS should partner with local community organizations currently providing services that could conceivably be of a type provided by DCS, support their work via grants, and refer clients to them as appropriate in order to leverage and amplify work and expertise that already exists in the community.
- When possible, on calls where DCS might appropriately dispatch a trained responder who is also a mandatory reporter to an incident in the community, the caller requesting the service should be made aware that the responder will be a mandatory reporter and be offered an alternative responder who is not a mandatory reporter. The new DCS should have the ability to dispatch those other than mandatory reporters or to make referrals to community organizations who fall outside mandatory reporting requirements but who have training to respond appropriately to the callers' needs.
- The new DCS should be a uniformed service but those uniforms should be impossible to confuse with police uniforms.
- We recognize that police-based traffic enforcement in America has been historically unjust towards marginalized communities and represents a danger to the public. We recommend that Cambridge set a goal to move away from police-based traffic enforcement towards a non-police model as soon as practicable, and that Cambridge consider the new DCS as a potential candidate to conduct some or all traffic enforcement activities in the future. We recommend that the City Manager watch closely efforts to build non-police traffic enforcement in Berkeley, CA and other communities undertaking similar efforts for lessons that can be deployed in Cambridge, but that the city prioritize shifting the service responsibilities outlined in this memo to DCS while solutions to the traffic problem become clearer.

COMMUNITY OUTREACH

The subgroup focused upon developing recommendations for establishing a more effective, more robust means of Community Outreach and Engagement brought forward the following governing principles that must form the basis of any outreach efforts going forward - with the understanding that there will need to be further discussions as to how to ensure that these principles will be implemented going forward.

- **Internally defining what is meant by “engagement”**

The City/CPD must be clear, internally, with how it intends to connect with the community: who is the target audience, what type of engagement is most likely to resonate with/reach that *particular* audience, and how do we ensure that this is a sustained effort and *not* a “one and done” event?

- **Identify and Cultivate Community Ambassadors**

The City needs to find trusted people within the different neighborhoods/communities it wishes to reach and utilize them as ambassadors into the community. These ambassadors should ideally be given a stipend for their work, and a full briefing of what the City is trying to achieve in their outreach so that they will have a full understanding and feel invested in the outcome. These ambassadors can be members of the Interfaith community, longtime neighborhood residents, those who have extensive relationships throughout the community – it is a matter of finding the people already there and then establishing a working relationship with them to distribute information into their spheres of influence. These ambassadors will also be asked to continually ask their friends and neighbors: “Who else can we bring into this process, who else should be here?”

- **Enticements to Attend Meetings**

We need to recognize the barriers that prevent people from attending meetings and then work to ease those. Enticements can come in the form of holding raffles for those who attend, or providing tickets for fresh, free produce for attendees, or providing other tangible benefits to attendees. The hope and expectation is that many may initially come to meetings for these incentives, but they will eventually build relationships with their neighbors and City representatives and buy into the process.

- **Relationship Building/Showing the Community They Are Valued**

Community members attending meetings can pick up on the social cues when the City is just going through the motions to check off that a meeting has been held, or if a process is being rushed along due to a deadline. The City must take pains to show attendees that their presence in community meetings is valued, their feedback is valued, and that we are intent on building a sustained relationship with them. If the City only reaches out when it wants information from people and then the City is not heard from again, that will make it much harder to build any kind of long and trusting relationship between the City and the community members.

- **Build in “Progressive Stacking” To Your Meetings**

In community meetings, pains should be taken to call on the historically marginalized voices first, to elevate them and demonstrate that their concerns are valued and being heard – only once they have spoken should we then give the floor over to those that we more typically hear from.

- **Closing the Digital Divide**

Especially in the age of Covid-19, we must be mindful of the digital divide that can make it more difficult for those with older technology, poor Wifi, or tech literacy issues to fully join in. In some cases, this may mean working with families to provide them with Wifi hotspots, in other cases it may mean helping to pay for the Internet services, or helping them obtain loaned out laptops for meetings.

- **Emphasize Cultural Competency and Transparency**

It is critical that any community engagement be conducted with cultural awareness and sensitivity. We must be mindful of whom we send in as the messenger to the various neighborhoods, and

that we work to be as direct and transparent in what the purpose of our engagement is. The more honest, direct, and transparent, the less resistance there is likely to be.

This process is now ready to be taken to the next step: soliciting feedback from the community, followed by the formal presentation of the Task Force's recommendations to the City Manager. Once received, it will be up to the City Manager and the Police Commissioner, along with other appropriate City staff, to determine how to actualize and operationalize these recommendations, how to budget for them, and how to translate these ideas into reality.

ENDNOTES

- 1 https://en.wikipedia.org/wiki/Murder_of_George_Floyd
- 2 https://en.wikipedia.org/wiki/Shooting_of_Jacob_Blake
- 3 https://en.wikipedia.org/wiki/Killing_of_Breonna_Taylor
- 4 <https://www.cambridgema.gov/cpd/policeunits/supportservicesdivision/identificationunit>
- 5 <https://www.cambridgema.gov/cpd/policeunits/operationsdivision/Patrol>
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- 14 <https://centralsq.org/blog/introducing-bid-outreach-team>
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- 25 <https://barcc.org/join/about>
- 26 <http://transitionhouse.org>
- 27 <https://www.ontherise.org>
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- 29 https://cambridgema.iqm2.com/Citizens/Detail_LegiFile.aspx?ID=12095