Minutes – Executive Policy Committee – November 18, 2020

REPORTS

Item No. 1 Responding to 911 Calls for Help – The City of Winnipeg's Participation in the Bloomberg Harvard City Leadership Initiative

EXECUTIVE POLICY COMMITTEE DECISION:

The Executive Policy Committee concurred in the recommendation of the Winnipeg Public Service:

1. That this report be received as information and the work undertaken through the Bloomberg Harvard City Leadership Initiative be endorsed.

2. That the Chief Administrative Officer be directed to continue the work undertaken through the Bloomberg Harvard City Leadership Initiative by transitioning administrative leadership and responsibility to the Chief of the Winnipeg Police Service and the Chief of the Winnipeg Fire Paramedic Service for the initiatives in their respective departments.

3. That the Public Service continue to work collaboratively with United Way Winnipeg, Shared Health, and the Winnipeg Regional Health Authority to improve integration, alignment, and coordination of 211, 311, HealthLinks/InfoSante, and the Downtown Community Safety Partnership as a means of providing disposition options to the 911 Communications Centre as represented in the report, "Public Safety and Public Health: A New 911 Response System" attached as Appendix A and Appendix B.

4. That progress reports on the work be submitted quarterly by the Public Service to the Standing Policy Committee on Protection, Community Services, and Parks.

5. That the Proper Officers of the City do all things necessary to implement the intent of the foregoing.

DECISION MAKING HISTORY:

The Chairperson called Councillor Mayes to the Chair in order to move the following motion:

Moved by His Worship Mayor Bowman,
That the recommendation of the Winnipeg Public Service be concurred in.

Yea:	Bowman, Allard, Browaty, Gillingham, Gilroy, Mayes, Rollins	7
Nay:		0

Carried

His Worship Mayor Bowman resumed the Chair.

COUNCIL DECISION:

On July 23, 2020, Council concurred in the recommendation of the Executive Policy Committee, which included the following recommendation:

5. That the Winnipeg Public Service provide a written report to the Executive Policy Committee within 90 days on the progress of the work undertaken through the City of Winnipeg's participation in the Bloomberg Harvard City Leadership Initiative, where together with community partners it is examining an innovative, made-in-Winnipeg way to better align the type of agency being dispatched with the needs of residents calling 911.

EXECUTIVE POLICY COMMITTEE RECOMMENDATION:

On July 15, 2020, the Executive Policy Committee passed the following motion:

WHEREAS as a result of the Black Lives Matter movement there has been increased public discourse in recent weeks regarding the importance of appropriate resources being allocated to respond to various emergency situations;

AND WHEREAS systemic racism exists in our society;

AND WHEREAS the City of Winnipeg acknowledges the importance of promoting and enhancing the fundamental human rights of all its residents including the Black, Indigenous, People of Colour (BIPoC) community, people with disabilities, and LGBTTQ* individuals;

AND WHEREAS the City of Winnipeg has taken meaningful steps to create the structures and policies to improve the fundamental human rights of its residents through initiatives such as:

DECISION MAKING HISTORY (continued):

EXECUTIVE POLICY COMMITTEE RECOMMENDATION (continued):

- Establishing of the Indigenous Relations Division;
- Creating the Human Rights Committee of Council;
- Adopting the Newcomer Welcome and Inclusion Policy; and
- Creating an Equity, Diversity, and Inclusion Program Coordinator position

AND WHEREAS the City of Winnipeg has and continues to take meaningful steps to make our community a safe place to live, play, and grow for all its residents;

AND WHEREAS the section of the Newcomer Welcome and Inclusion Policy entitled "Strategic Priorities for Policy Implementation '4.2 - A City without Racism'" directs that:

"a) The City intends to address racism and discrimination in Winnipeg and work to eliminate inequities through education, public awareness, and leading by example.

Objectives include:

(i) Demonstrate anti-racism leadership city-wide.
(ii) Train the Public Service on anti-oppression, including anti-racism and cross-cultural competency.
(iii) Build relationships to foster community safety and trust.
(iv) Work to build understanding between Newcomers and Indigenous peoples;"

AND WHEREAS Immigration Partnership Winnipeg (IPW) and other community partners are currently undertaking the "Manitobans: COVID-19 Doesn't Discriminate. Nor Should You!/Manitobain(e)s, La COVID-19 ne discrimine pas. Vous non plus!" campaign with three key objectives as follows:

1. Bring awareness of the racism, discrimination and xenophobia experienced by Asian community members, other racialized groups and newcomers due to COVID-19, while condemning the association of COVID-19 with any ethnic or racial group;

2. Provide information and tools for these community groups and the general public to stay safe and respond to acts of racism, discrimination and xenophobia; and

3. Highlight the key role many of these community members play in Manitoba's response to COVID-19 as essential workers

DECISION MAKING HISTORY (continued):

EXECUTIVE POLICY COMMITTEE RECOMMENDATION (continued):

AND WHEREAS Immigration Partnership Winnipeg will be launching a city-wide "AntiRacism in Sports and Recreation" public awareness campaign in partnership with the Winnipeg Blue Bombers, Valour FC, the Treaty Relations Commission and other partners. This campaign will seek to address and eliminate barriers to social participation in sports and recreation among racialized communities, Indigenous Peoples and religious minorities through education and awareness activities including research, training and public awareness;

AND WHEREAS City of Winnipeg's participation in both of these the Immigration Partnership Winnipeg campaigns would help the City of Winnipeg build relationships that foster community safety and trust, an important objective of the Newcomer Welcome and Inclusion Policy;

AND WHEREAS the City of Winnipeg acknowledges the importance of engaging and working with the community to enhance public safety;

AND WHEREAS the Winnipeg Police Service and its dedicated members continue to play an essential role in maintaining public safety in the City of Winnipeg;

AND WHEREAS the functions and jurisdiction of the Winnipeg Police Service are defined by Federal legislation, Provincial legislation, and Common Law;

AND WHEREAS the City of Winnipeg is currently working with the Harvard Bloomberg Leadership Initiative to study where together with community partners it is examining an innovative, made-in-Winnipeg way to better align the type of agency being dispatched with the needs of residents calling 911;

THEREFORE BE IT RESOLVED:

1. That the Winnipeg Public Service immediately implement section 4.2 a) (ii) of the Newcomer Welcome and Inclusion Policy within existing budgetary allocations, namely:

   "(ii) Train the Public Service on anti-oppression, including anti-racism and cross-cultural competency."

   and report back on the progress of this implementation to the Human Rights Committee of Council within 90 days.

DECISION MAKING HISTORY (continued):

EXECUTIVE POLICY COMMITTEE RECOMMENDATION (continued):

2. That the City of Winnipeg participate in the current Immigration Partnership Winnipeg "Manitobans: COVID-19 Doesn't Discriminate. Nor Should You!/Manitobain(e)s, La COVID-19 ne discrimine pas. Vous non plus!"campaign and their upcoming "AntiRacism in Sport and Recreation" public awareness campaigns. City support for the "AntiRacism in Sport and Recreation" campaign will include:

A. Participation on the campaign Steering Committee;

B. In-kind space at City of Winnipeg facilities for events, presentations and workshops;

C. In-kind campaign media support, including promotion of campaign messages via the City's social media channels and advertising space;

D. Assistance with the delivery of training presentations and workshops alongside IPW's Anti-Racism Coordinator, as needed.

3. That the Winnipeg Public Service be directed to collaborate with Immigration Partnership Winnipeg in the development and implementation of an Anti-Racism Week, to coincide with the International Day for the Elimination of Racial Discrimination on March 20, 2021

4. That the Winnipeg Police Board be requested to report back to the Standing Policy Committee on Protection, Community Services and Parks within 90 days with a report that outlines the partnerships and programs that the Winnipeg Police Service has undertaken and will continue to undertake, and that align with the adopted Newcomer Welcome and Inclusion Policy, related to the following goals:

    A. training its officers to better understand and respond to issues affecting racialized, minority, and LGBTTQ* communities;
    B. working with community members and organizations to better respond to calls for service that are related to mental health and addictions, and support crisis prevention and non-violent crisis intervention;
    C. building relationships that foster newcomer community safety and trust by developing open lines of communication and partnerships with ethno-cultural and religious groups;
    D. building a Winnipeg Police Service that better represents the demographics of the community.

DECISION MAKING HISTORY (continued):

EXECUTIVE POLICY COMMITTEE RECOMMENDATION (continued):

5. That the Winnipeg Public Service provide a written report to the Executive Policy Committee within 90 days on the progress of the work undertaken through the City of Winnipeg's participation in the Bloomberg Harvard City Leadership Initiative, where together with community partners it is examining an innovative, made-in-Winnipeg way to better align the type of agency being dispatched with the needs of residents calling 911.

6. That the Proper Officers of the City be authorized to do all things necessary to implement the intent of the foregoing.

and submitted the matter to Council.

ADMINISTRATIVE REPORT

Title: Responding to 911 Calls for Help – The City of Winnipeg's Participation in the Bloomberg Harvard City Leadership Initiative

Critical Path: Executive Policy Committee

AUTHORIZATION

Author	Department Head	CFO	CAO
J. Hildebrand	M. Ruta	N/A	M. Ruta, Interim CAO

EXECUTIVE SUMMARY

The City of Winnipeg was chosen to participate in the Bloomberg Harvard City Leadership Initiative in the summer/fall of 2019.

Over the course of the year, the City of Winnipeg's participation in the initiative has successfully brought together different levels of government, agencies, and organizations to think creatively, innovatively, and with open minds to find ways to reduce dispatch demand on City of Winnipeg police, fire, and ambulance services.

Last year (2019), there were 336,631 calls for help to the City of Winnipeg's 911 Communication Centre.

Generally, about half (47%) of these calls were coded as "non-urgent", meaning they did not represent an imminent threat to life, limb, property, or personal security. However, the only agencies and personnel available 24 hours a day, seven days a week to dispatch in response to these calls are emergency responders – police, fire, and ambulance.

A small, collaborative team has been examining ways to better align how existing agencies, resources, and personnel are dispatched in response to residents calling 911 who need help, but not necessarily the type of help available from a police officer, firefighter, or paramedic.

Emerging from this work is an assessment currently underway by the Winnipeg Police Service to establish a Police and Crisis Team (PACT). PACTs are a dispatch model that pairs crisis or similarly trained workers with police officers. PACTs and similarly structured models are used in jurisdictions across Canada and the United States, and are described in more detail in Appendix B.

While PACTs certainly represent both a progressive and paradigmatic shift in how police and community health resources are mobilized and dispatched in response to 911 calls, it is important this model is regarded as a starting point from which greater alignment, collaboration, and coordination can continue.

Also emerging from the initiative is an effort to improve alignment and coordination of the 911 Communication Centre with the newly established 211 phone service, the City of Winnipeg's existing 311, HealthLinks/InfoSante, and the future operationalization of the Downtown Community Safety Partnership. This work is geared toward identifying and providing non-dispatchable disposition options to the 911 Communications Centre.

Underscoring many of the non-urgent 911 calls from residents are very complex socioeconomic, sociological, and health challenges. These challenges and their complexity transcend the traditional agency silos currently available for dispatch through the 911 response system. As well, traditional approaches used to respond to these calls for help are increasingly being questioned against a backdrop of growing awareness, understanding, and appreciation of the complex societal issues relating to racism, health inequity, colonial oppression, brutality, police service operations and procedures, and overall system accountability.

In the medium term, by developing a greater degree of shared understanding of this issue's complexity, it is possible to optimize the allocation and dispatch of emergency response resources. Over the longer term, it also has the potential to better identify and respond to residents experiencing inequitable social determinants of health, improve health outcomes for Winnipeg residents, as well as foster greater harm reduction efforts across the city's population.

RECOMMENDATIONS

1. That Executive Policy Committee receive this report as information and endorse the work undertaken through the Bloomberg Harvard City Leadership Initiative.

2. That Executive Policy Committee direct the Chief Administrative Officer to continue the work undertaken through the Bloomberg Harvard City Leadership Initiative by transitioning administrative leadership and responsibility to the Chief of the Winnipeg Police Service and the Chief of the Winnipeg Fire Paramedic Service for the initiatives in their respective departments.

3. That the Public Service continue to work collaboratively with United Way Winnipeg, Shared Health, and the Winnipeg Regional Health Authority to improve integration, alignment, and coordination of 211, 311, HealthLinks/InfoSante, and the Downtown Community Safety Partnership as a means of providing disposition options to the 911 Communications Centre as represented in the report, "Public Safety and Public Health: A New 911 Response System" attached as Appendix A and Appendix B.

4. That progress reports on the work be submitted quarterly by the Public Service to the Standing Policy Committee on Protection, Community Services, and Parks.

5. That the proper officers of the City do all things necessary to implement the intent of the foregoing.

REASON FOR THE REPORT

On July 23, 2020 Council directed the Winnipeg Public Service to provide a written report to the Executive Policy Committee within 90 days on the progress of the work undertaken through the City of Winnipeg's participation in the Bloomberg Harvard City Leadership Initiative.

IMPLICATIONS OF THE RECOMMENDATIONS

The work, research, and collaborative effort undertaken through the City of Winnipeg's participation in the Bloomberg Harvard City Leadership Initiative will be received and supported by Executive Policy Committee.

Moving forward, administrative leadership and responsibility for the work will transition to the Chief of the Winnipeg Police Service and the Chief of the Winnipeg Fire Paramedic Service.

The Public Service will continue to work collaboratively to better integrate and coordinate its 311 service with the 911 Communications Centre as well as other community-based call services.

Quarterly progress updates will be submitted by the Public Service to the Standing Policy Committee on Protection, Community Services, and Parks.

HISTORY/DISCUSSION

The Bloomberg Harvard City Leadership Initiative

Last summer (2019), the City of Winnipeg was chosen to participate in the Bloomberg Harvard City Leadership Initiative.

This is an initiative run collaboratively by the Harvard Kennedy School, Harvard Business School, and Bloomberg Philanthropies.

Its goal is to strengthen city leaders and equip cities across the world with the tools necessary to better innovate, change, and grow.

It is designed to develop key problem-solving skills and capacities within the public service that can be incorporated into and supplement existing continuous improvement

programs. As well, the increased problem-solving capacity and skills accrued through the program can be exported and shared across the city administration.

The program is entering its fourth year this year (2020-21).

Annually, about 40 cities from across the world are invited to participate. In 2019-20, Winnipeg was one of the ~40 cities selected.

Cities participating with Winnipeg were primarily from the United States, but also included cities in Ghana, Australia, and Slovakia.

Winnipeg, together with Mississauga, were the only two Canadian cities participating in the 2019-20 year. In previous years, other Canadian cities included Saskatoon and Calgary.

Other than a commitment of time, the program is offered at no cost to participating cities.

The program has provided Winnipeg with access to Harvard faculty, students, staff, and other resources to help it improve in one of three practice areas: cross-boundary collaboration, data & evidence, or innovation.

The practice area Winnipeg participated in is called ***cross-boundary collaboration***.

The aim of this practice area is to improve the city's ability to collaborate across agencies, jurisdictions, and sectors to 'solve' a single challenge of the city's choosing.

While there are certainly no shortage of challenges facing Winnipeg and similar cities across the world, Winnipeg was limited to identifying one as part of the program.

Winnipeg used the opportunity to examine ways it could better align how city agencies and personnel are dispatched in response to 911 calls.

Defining Winnipeg's challenge/problem

When residents call 911, one or a combination of just three agencies are available to respond – police, fire, or emergency medical.

When an emergency situation exists – an imminent threat to life, limb, property, or personal security – dispatching one or a combination of these three agencies works well.

Many of the calls to 911, however, don't meet an emergency threshold. That is, many of the calls to 911 do not represent an imminent threat to life, limb, property, or personal security.

In 2019, there were 336,631 calls to the City of Winnipeg's 911 Communication Centre. Generally, about half (47%) of these calls end up being coded as non-urgent.

Existing 911 emergency response agencies (police, fire, and medical responders) are dispatched to these non-urgent calls because they are the only agencies available for dispatch 24 hours a day, every single day of the year.

As such, they end up being dispatched in response to non-urgent calls that they are sometimes not ideally suited to manage.

Even though a 911 call might not meet the threshold of being an emergency, it is still a call for help. It still represents a resident in need, and many times still requires a response. It's just that many of them do not necessarily require the type and level of assistance available from a firefighter, a paramedic, or a peace officer.

It is within this context that a made-in-Winnipeg-way to better align the agency, the skills matrix, and type of personnel being dispatched with the needs of the resident calling was being examined.

Kick-off Meeting

In November 2019, the City of Winnipeg launched its participation in the Bloomberg Harvard City Leadership Initiative by issuing a news release (attached as Appendix F) and hosting an initial kickoff meeting.

This meeting was a facilitated session led by staff from the Bloomberg Harvard City Leadership Initiative.

This session brought together approximately 30 people from a broad spectrum of internal City of Winnipeg departments and external agencies representing about 16 different organizations. A list of organizations is attached as Appendix C.

This large group undertook an initial examination and deconstruction of the problem/challenge identified by the City of Winnipeg.

It was also an opportunity to build awareness and support within the community for the work undertaken by the City through the Bloomberg Harvard City Leadership Initiative.

Team of Eight

The Bloomberg Harvard City Leadership program required the City to identify a smaller team of individuals who, over the course of ten months, would undertake much more intensive work examining the problem/challenge with resources and support made available from the program.

While the program initially required this group to be limited to eight participants, its membership grew to 11.

Membership of this team includes:

- **Krista Allen**, Chief Nursing Officer & Chief Health Operations Officer, Winnipeg Regional Health Authority
- **Jodene Baker**, Director, Impact Innovation & Evaluation, United Way Winnipeg
- **Cam Baldwin**, Inspector, Winnipeg Police Service
- **Oriol Sole Borras**, MD, Summer Fellow, Master Public Health Candidate, Harvard T.H. Chan School of Public Health
- **Helen Clark**, Chief Operating Officer, Emergency Response Services, Shared Health
- **James Favel**, Bear Clan Patrol
- **Kate Fenske**, Chief Executive Officer, Downtown Winnipeg BIZ
- **Dr. Rob Grierson**, Medical Director, Winnipeg Fire Paramedic Service
- **Jonathan Hildebrand**, Manager, Strategic Planning, City of Winnipeg
- **Morgan Vespa**, Manager, Public Engagement, City of Winnipeg
- **Felicia Wiltshire**, Director, Customer Service & Communications, City of Winnipeg

Problem Deconstruction

This smaller team spent a significant amount of time deconstructing and dissecting the challenge using various process improvement tools available through the Bloomberg Harvard program.

This included an intensive week of work undertaken in New York in January 2020 where the City of Winnipeg joined nine other cities from across the United States to learn about each other's challenges and assist each other with addressing these challenges.

It became evident very early on that Winnipeg's challenge/problem, as originally contemplated, was too narrowly defined.

Team members felt it too narrowly limited the challenge/problem to police who are just one of three, 24/7 emergency response agencies available for dispatch.

While team members generally agreed that police, as one of three emergency response agencies available to be dispatched in response to 911 calls, are being dispatched to calls for which they are not best suited, this was also true of the other two emergency response agencies – emergency medical and fire response.

There was also evidence suggesting these two agencies, in addition to police, are being dispatched to calls for service that do not require a response at a level that necessitates the dispatch of a paramedic or a firefighter.

All three of these response agencies have a long history of integration and interdependence, and the team felt it would be challenging to successfully optimize dispatch of just one agency without somehow, possibly negatively, affecting the dispatch and demand on the other agencies.

Consequently, the team recast the original problem statement:

Original problem statement: *Reducing the extent to which police officers are dispatched in response to calls for service that are not criminal in nature*.

Revised problem statement: *Winnipeg's existing 911 emergency response agencies are being dispatched to non-urgent calls that they are not best suited to manage.*

The team relied on process improvement tools such as the '5-why technique' and fishbone diagrams to deconstruct the problem. A fishbone representation of the problem's deconstruction is attached as Appendix D.

When the team examined and deconstructed the problem statement six causal factors began to emerge that contributed to police, fire, and emergency medical resources being dispatched in response to 911 calls that they were not best suited to manage.

These causal factors included:

1. Risk aversion
2. Lack of integration & coordination
3. No 'fourth option' available to dispatch
4. Legislative & regulatory barriers
5. Public awareness & understanding
6. Data sharing & measurement

1. Risk aversion

The current 911 response system reflects an incredibly low risk threshold. It also reflects the incredibly dynamic and unpredictable environment in which first responders must operate. The nature of emergency dispatch requires assessments and dispatch decisions to be made very quickly, often relying on imperfect information that is subject to high variability and validity. The impact of dispatching the wrong resource in response to a 911 call could contribute to increased harm to callers. The reality of a system designed to minimize risk is that it will prioritize risk reduction over resource optimization, an acceptable trade-off considering 911 dispatch decisions can be life-or-death decisions.

2. Lack of integration & coordination

Several barriers were identified relating to a lack of coordination, integration, communication, and referral pathways among, and between, the myriad of existing

social service and community health agencies. As well, existing referral pathways between police, fire, and ambulance agencies were also identified as requiring improved integration and coordination.

3. **No 'fourth option' available for dispatch**

   A very clear causal factor contributing to the dispatch of emergency service agencies to non-urgent calls is that there is no other agency available 24 hours a day, seven days a week to dispatch. Without a "fourth option" available, dispatch options remain limited to police, fire, or ambulance agencies.

4. **Legislative & regulatory barriers**

   A host of regulatory and legislative barriers were identified as part of the problem deconstruction process. These included *The Personal Health Information Act*, *The Intoxicated Persons Detention Act*, *The Mental Health Act*, *The Freedom of Information and Protection of Privacy Act*, and *The Emergency 911 Public Safety Answering Point Act*.

5. **Public awareness & understanding**

   A lack of public awareness, familiarity, and availability of existing health and social service agencies within the community was identified as contributing to calls to 911 that are not emergencies and non-urgent. It was noted, however, that while these calls are deemed non-urgent by measure of the extent to which they represent an immediate threat to life, limb, property, or personal security, the resident calling often feels otherwise.

6. **Data sharing & measurement**

   Data sharing and measurement were also identified as barriers. A barrier consistently identified as contributing to internal data sharing and measurement was the variance in adherence to national dispatch protocols/standards between the Winnipeg Fire Paramedic Service and the Winnipeg Police Service. The Winnipeg Fire Paramedic Service has adopted and uses the Medical Priority Dispatch System as well as the Fire Priority Dispatch System. These are internationally accepted dispatch protocols that allow for consistent and valid measurement and data sharing across services and jurisdictions. For a host of reasons, the police equivalent to these dispatch protocols – the Police Priority Dispatch System – is not used by the Winnipeg Police Service.

As part of deconstructing the problem and stakeholder engagement, the team spent several hours listening to and experiencing active 911 calls, as well as getting feedback from those who take and process calls in the 911 Communications Centre.

The team also identified a host of qualitative factors that underscore an urgency to think creatively and innovatively in order to address the defined challenge.

These factors included:

- Winnipeg is experiencing rising crime rates, and it's inefficient to send police to things they don't need to go to;
- Historically, solutions have been to add resources to the existing system and structures, but thinking about doing things differently is needed;
- Many 911 callers with non-urgent needs are not getting their needs met;
- When people are calling 911 for non-urgent matters, they're sometimes waiting a very long time for someone to respond;
- Public funding envelopes are limited, and there's a need to ensure public services are working as efficiently as possible within existing/limited budgets;
- Overall demand on police and other emergency response agencies often exceeds response capacity;
- Police need to be increasingly more available for proactively protecting the community rather than responding to non-emergent calls;
- The 911 system has created a system of dependency, and that dependency needs to be real; and
- The system should be concerned about ensuring the right service responds to the right call for help at the right time.

Team members felt the problem, when solved, could manifest itself as:

- police, fire, and emergency medical agencies being dispatched to fewer calls not necessitating an emergency response;
- fewer people calling/relying on 911 over time; and
- more effective use of public resources to meet community needs.

COVID-19 Global Pandemic

In early March 2020, the World Health Organization assessed and declared COVID-19 as a pandemic.

As the world adjusted to the reality of the pandemic, so too did the Bloomberg Harvard City Leadership Initiative and the work of Winnipeg's team.

The team's ability to maintain momentum was limited by the fact many team members were either community leaders, frontline healthcare providers, healthcare managers, police members, or were required to manage key components of the City of Winnipeg's pandemic response.

While some momentum was lost, the team's work continued throughout the pandemic.

Global Movements in Response to Racism and Inequity

The death of George Floyd in May 2020 in Minneapolis, Minnesota triggered a series of global protests that raised significant awareness of complex societal issues relating to racism, inequity, colonial oppression, brutality, police operations and procedures, and system accountability.

While representing and highlighting a host of very complex and pressing societal issues, much of the public discourse galvanized around the idea of “defunding” police.

Locally, thousands of people gathered in Winnipeg in June 2020 for a rally, a moment of silence, and a peaceful march from the Legislative Buildings to the Canadian Museum for Human Rights.

Several parallels can be drawn between the issues raised as part of this public discourse and the work undertaken through the Bloomberg Harvard City Leadership Initiative.

Both recognize there are times when existing agencies (police, fire, and emergency medical) available for dispatch in response to 911 calls are not always best aligned with a caller’s needs. As noted earlier, about 50% of the 911 calls in 2019 were deemed non-emergencies and yet the majority of them are responded to by an emergency agency.

At the same time, there are key differences.

The work undertaken through the Bloomberg Harvard City Leadership Initiative never contemplated nor was it driven by a need to cut, reduce, or “defund” any one agency or program. More specifically, as a collaborative involving the police department, the collaboration would have been setup to fail had it been originally conceived, or shifted toward, finding ways to reduce police funding.

A true collaboration resists any one partner to the collaboration from being singled out as having something to lose. As well, an underlying sentiment among some members of the team is that existing health and social resources available in the community, and within the jurisdictional authority of the City of Winnipeg, can be better aligned, focused, and understood in order to address the challenge/problem.

The Bloomberg Harvard City Leadership Initiative relied on research and working papers developed by the Centre for International Development at Harvard University. The concept of “Problem Driven Work” and “Problem Driven Iterative Adaptation” were at the core of these working papers.

These approaches to solving problems recognize that most deconstructed problems take the form of many different problems with many different dimensions. While

exposing complexity, it also identifies the availability of more entry points for change, and grows the ‘change space’ and ‘readiness for change’ within the system.

As well, if viewed within the context of the Beckhard/Gleicher change equation (D x V x F > R) where:

D = dissatisfaction with the status quo
V = vision of a positive future
F = first steps in the direction of the vision
R = resistance to change

The movements and protests that occurred across the world earlier this spring/summer grew the “change space” locally and internationally, demonstrated significant dissatisfaction with the status quo, and outlined a positive future vision.

First steps in the direction of that vision have been demonstrated by local city governments across Canada and the United States by rethinking how best to respond and support residents who are seeking help through the 911 system. The assessment currently underway by the Winnipeg Police Service examining the feasibility of establishing a PACT reflects and underscores a willingness to rethink how the City responds to 911 calls.

A collection of media reports and actions from governments are collected for reference as Appendix E.

Bloomberg Harvard Summer Fellowship

The City of Winnipeg was fortunate to have been one of the few participating cities to be granted access to a summer fellowship research student.

The summer fellowship program provided the City of Winnipeg with 10 weeks of research support at no cost to the City.

Normally, the summer fellow would spend the duration of the fellowship living in the city and working directly with the public service. The COVID-19 pandemic and its associated restrictions on international travel required the fellowship to be undertaken remotely.

Oriol Sole Borras, a medical doctor and Master of Public Health Candidate at the Harvard T.H. Chan School of Public Health, joined the Winnipeg team over the summer as part of the remote/virtual fellowship.

He undertook a current state analysis of Winnipeg’s existing 911 response system. This included a review of existing emergency response agencies, models used in other jurisdictions in Canada and the United States, and examined different approaches to implementing a “fourth dispatchable option”.

His complete report is attached as Appendix A. A review of models used in other Canadian and United States jurisdictions is attached as Appendix B. This report makes an important distinction between “dispatchable” options and “non-dispatchable” options to respond to 911 calls that are identified as non-emergencies.

Not every non-urgent call to 911 necessitates the dispatch of a response agency. However, while not emergent, these are still calls from residents seeking assistance who could benefit from being connected with existing health and social services within the community by strengthening the referral system between existing and future call centres within the City (311, 211, HealthLinks/InfoSante).

The United Way Winnipeg joined the Bloomberg Harvard collaborative team earlier this fall, and work is underway to better integrate the 911 Communication Centre with the City of Winnipeg’s 311 service, the recently established 211 call service administered by the United Way Winnipeg, as well as HealthLinks/InfoSante by establishing referral pathways between these agencies. This report recommends that this work continue in order to provide “non-dispatchable” options to the 911 Communications Centre.

The report also identifies opportunities to recast and reimagine the integration and operation of existing services within the Winnipeg Police Service and the Winnipeg Fire Paramedic Service: the Vulnerable Persons Unit (VPU) and the Emergency Paramedic in the Community (EPIC) program. These two services do represent paradigmatic shifts in the dispatch of emergency services, and could be a basis on which to establish a fourth “dispatchable” option.

FINANCIAL IMPACT

Financial Impact Statement

Date: October 28, 2020

Project Name:
Responding to 911 Calls for Help – The City of Winnipeg's Participation in the Bloomberg Harvard City Leadership Initiative

COMMENTS:

There is no financial impact associated with the report recommendations.

original signed by

Tanis Yanchishyn, CPA, CA
Manager of Finance (Campus)
Corporate Finance Department

CONSULTATION

Extensive internal consultation has occurred across City of Winnipeg departments including the Winnipeg Police Service, Community Services Department, Communications & Customer Service Department, and the Winnipeg Fire Paramedic Service.

When reviewed in their totality, internal stakeholders *represented well over a hundred years of combined experience in emergency care/response, dispatch, and administration, many of whom are all subject matter experts with extensive knowledge and excellent track records for making evidence-informed and meaningful system improvements.*

As a collaborative team with representation from external organizations, a significant amount of external consultation has also been undertaken. The COVID-19 pandemic did limit the breadth of the team's capacity to consult. Notwithstanding this challenge, the team was able to connect with many individuals representing many different organizations.

OURWINNIPEG POLICY ALIGNMENT

OurWinnipeg Policy Alignment

The City of Winnipeg's work undertaken through the Bloomberg Harvard City Leadership Initiative aligns with the following policies of *OurWinnipeg*:

4.1. **Health Equity** – Provide municipal services through a health equity lens, to fully leverage desired health and safety outcomes through proactive community development opportunities.
4.2. **Evidence-Informed Health Action** – Leverage strategic partnerships on community health and development activities that promote resource pooling, data collection, information sharing, and joint action.
4.3. **Proactive Health Intervention** – Utilize social determinants of health to understand and achieve poverty reduction, crime prevention and harm reduction. Practice early intervention and engage in community partnerships that fully leverage wrap-around supports, recreation and resources, and enable opportunities for all, and especially for those who are systemically disadvantaged.
4.6. **Community Safety** – Facilitate a culture of safety and crime prevention across the City and community, by building trusting relationships to enable collaborative action.
5.1. **Equitable Service Access** – Provide municipal services through a lens that promotes equitable access for all, with a focus on the youngest, oldest, and systemically disadvantaged members of the community.

The City of Winnipeg's participation in the Bloomberg Harvard City Leadership Initiative also parallels the work undertaken operationally within the Winnipeg Police Service through the department's calls-for-service management strategy.

It also aligns with both the current and previous Winnipeg Police Board strategic plans.

In the 2015-2019 strategic plan, as well as the recently adopted 2020-2025 strategic plan, the Winnipeg Police Board identified "efficient and effective service" and "community partnerships" as goals with strategic direction to "collaborate to reduce the demand for police response", "explore innovative technologies", and "instill a culture of continuous improvement".

WINNIPEG CLIMATE ACTION PLAN ALIGNMENT

N/A

SUBMITTED BY

Department: Office of the Chief Administrative Officer
Division: N/A
Prepared by: Jonathan Hildebrand
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Attachments:

Appendix A – Summer Fellow Report – A New 911 Response System

Appendix B – Summer Fellow Report – 911 Response Models In Other Cities

Appendix C – Kick Off Meeting List

Appendix D – Team Fishbone

Appendix E – Media Articles – Public Statements – Government Actions

Appendix F – Media Release – Winnipeg Partners with Bloomberg Harvard City Leadership Initiative