



Community Outreach Efforts: Dealing with the “*Spillover Effects*” of the Opioid CRISIS



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General Overview of the Community-Based Outreach Efforts: “*Boots on the Ground*”

- Two (2) Community **Navigators**
 - Connect individuals to needed services (NSMH)
- Recovery **Support Services** Team
 - Support individuals with basic needs (CAPIC)
- Continuum of Care Case Managers (CAPIC)
 - Follow individuals through their recovery process
- **Harm Reduction** Efforts (Healthy Streets)
 - Provide Narcan, Clean Needles, Condoms
- Chelsea “**HUB**” (Canadian Model)
- **Downtown Task Force** (Community-based model)



DOWNTOWN

TASKFORCE

OUR MISSION IS COMMUNITY POLICING

Coordinate the community-based resources of ALL Downtown stakeholders to remove persistent public safety and health concerns including addressing the opioid epidemic in the city of Chelsea.

Partnering with all segments of the community to increase safety and improve the quality of life in our Bellingham Square downtown area which is the Hub and focal point of our city.

With The Help Of the Big Seven (7)

- Businesses – Chamber of Commerce
- Property Owners – Multi-Units
- Residents
- Community Based Organizations – Roca, TND, Collaborative
- City Staff – CM's Office, Legal, DPW, ISD
- Court Personnel – DA's Office and Probation
- Chelsea Police – DTF Officers, OIC, Drug Unit, Gang Unit

Downtown Area

Four (4) CPD Patrol Officers Assigned/Dedicated to a Specific High Crime Area

Conduct a Meeting Once-a-Week With:

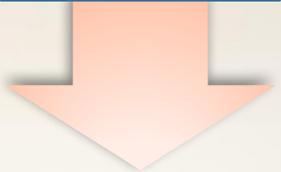
- Businesses
- Property Owners
- Residents
- Community Organizations
- City Staff
- Court Personnel
- Police



Innovative Problem Solving is Key
Based on the “**SARA**” Methodology



Examples



Working With Businesses

Known Area For Criminal Activity
Shooting Heroin



Business Built A Secure Fence
And Installed Motion Sensor Lighting



Working With Property Owners

Unsanitary Conditions

Haven for "**Broken Windows**" which breeds more crime

Property Owner Cleaned On Same Day

Wall was also cleaned and new fence installed



Working With Organizations

Assist Homeless Individuals Connected to Needed Services:

- Transportation
- Shelters
- Clothing
- Food
- Warming Center In the Winter Months



Currently She is Living In Her Own Apartment
Thanks to the assistance of [**CAPIC Services**](#)

Working With Community-Based Organizations

Local Community Organization [[ROCA](#)] Helped To Remove Graffiti From Local Businesses



Working With City Staff

Dark Parking Lot Known For Criminal Activity
and Drug Distribution and Usage

DPW Installed New Lighting In Parking Lot



A Simple Solution > Using “SARA”

Scanning: Large Trash Cans Provided An Area To Gather acting as table and a place to lean against

Response: Simply Moved Trash Cans Around The Corner from the main street





Operation "*Buy-Bye*"

The Downtown Task Force Assisted The CPD Drug Unit, With A Very Successful Covert Operation this Summer.

(15) Problem Individuals From The Downtown Area have been Implicated in the open-air street sales of Heroin.

Majority Of Individuals Involved Have Been Placed Into Custody via Arrest Warrants by CPD

Successfully Obtained Stay Away Orders For All Involved

Police Enforcement on "Street Dealers"



Working With District Court

Obtaining **Stay Away Orders**
For Repeat Offenders.

Obtaining **Section 35's** For
Individuals Who Consistently
Refuse Help

- Lost the power of self-control
- Alcohol / Substance Abuse
- Petition Court: Police, blood-relative, Physician
- Warrant of Apprehension (5 days)
- Treated < 90 days



Working With Residents

Scooters Blocking Side Walk
Which could lead to more obstructions



Residents "Gladly" Moved Their Scooters to
an open area across the street



Sometimes All You Need To Do Is Ask in a Respectful Manner

Working With The Community

Interacting With The Community
On an on-going basis

CPD is Represented at all Community
Events – **Copsicle 1** is a Huge Hit



Goal: of Improving The *Quality Of Life* In The Downtown Area



Chelsea Hub? :

The Hub is a team that meets weekly and identifies individuals or families that are at “acutely” elevated levels of risk.

Risk Factors		
Alcohol	Drugs	Gambling
Mental Health	Cognitive Impairment	Physical Health
Suicide	Self-Harm	Criminal Involvement
Crime Victimization	Physical Violence	Emotional Violence
Sexual Violence	Elderly Abuse	Supervision
Basic Needs	Missing School	Parenting
Housing	Poverty	Negative Peers
Antisocial/ Negative Behavior	Unemployment	Missing Runaway
Threat to Public Health and Safety	Gangs	Social Environment

Chelsea Hub – Canadian Model

- Everyone is at the Table
- Teams are mobilized to mitigate/reduce risk
- Updates are provided the following week which increases accountability
- Case management happens with participating agencies and NOT at the Hub table itself
- Approaching 300 individuals connected to needed services since August of 2015
- This is an absolute “***Game Changer***”

What the HUB table looks like...



Additional Programs & Resources

- Day Resource Center
 - Assumption Church – MGH Determination of Need Grant
- Community Outreach Response Team (OD)
 - CPD, CFD, NSMH
- Homeless Outreach Team (CAPIC)
- Needle disposal – Healthy Streets, CPD
- Recovery Support Groups

Interestingly Property Crime has gone down by 39% since 2012

Property Crime Totals

<39% in 5 Years

2016	934
2015	939
2014	1060
2013	1209
2012	1527

Behind the Numbers 2015-2017

TOTALS YTD	2017 YTD	2016 COMP	2015 COMP	
REPORTED/KNOWN	149	170	184	
LOW MONTH	6 IN March	6 IN JANUARY	8 IN FEB & DEC	
HIGH MONTH	27 IN AUGUST	25 IN AUGUST	26 IN SEPTEMBER	
KNOWN FATALS	14	18 KNOWN	16 KNOWN	
RESIDENTS	61	84	85	
NONRESIDENT/HOMELESS	88	86	93	
MARCAN	117	88	64	
REPEAT VICTIMS	11 PEOPLE 2X OR MORE	13	17	
REPEAT LOCATION	6	6	9	
OPIATE DERWATIVE	129	127	58	
LOW AGE	18 (HEROIN)	17	16	
HIGH AGE	66 (HEROIN)	73	72	
MEDIAN AGE	35	35	35	
MALE	91	116	109	
FEMALE	58	54	75	