



MEASURING WHAT MATTERS: ALTERNATIVE RESPONSE PROGRAMS



FAQ for Troubleshooting Common Data Challenges

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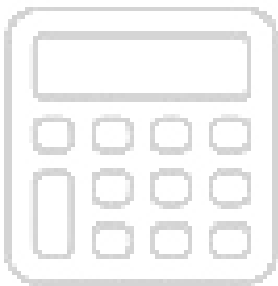
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About this FAQ for Troubleshooting Common Data Challenges

Questions include:

- How can I differentiate between my alternative response team being requested to respond by another responder versus my team requesting support?
- Incident disposition appears in two places: the CAD and the RMS. How can I track this data point across these separate systems?
- What if my team follows emergency medical technician (EMT) protocols for reporting?
- And more...

Depending on your alternative response program's existing data infrastructure, some data fields and metrics may be challenging to adopt. **This document addresses some of these challenges**, along with common data questions we have encountered when working with governments to establish robust data collection processes.



For more information on how data fields are used to calculate Alternative Response metrics, please see our **“Guide for Calculating Essential Metrics.”**

[Download it HERE](#)



For more information on each data source and the data fields required to calculate each metric, please see our **“Data Dictionary.”**

[Download it HERE](#)

Q ■ How do I reliably capture the number of eligible 911 incidents for alternative response?

A ■ Jurisdictions can gain insight into the total number of incidents deemed appropriate for the alternative response team by tracking eligible 911 incidents. This metric can be used to inform strategic discussions on program iteration, sustainability, and growth. When considering how your emergency communications center (ECC), also known as a public safety answering point or 911 center, may track eligible incidents, identify an approach that considers the following factors:

- **Implementation:** What training or guidance will telecommunicators need?
- **Quality assurance:** How can I ensure that telecommunicators are tracking eligible incidents consistently?
- **Infrastructure:** What capacity is needed to extract the data? What system will allow me to track data in real time?

We recommend that programs track alternative response eligibility and ineligibility for all incidents processed by the ECC, (see **[CAD6] Alternative Response Eligibility** in the Data Dictionary) regardless of whether the alternative response team responded. This will allow you to identify the total number of 911 incidents eligible for the alternative response program.

It is common for ECCs to set up their processes to track alternative response eligibility and ineligibility through automated protocols or by telecommunicator determination. In any approach, conducting consistent and regular quality assurance checks is important to ensure alternative response eligibility is being tracked as intended. ECCs in jurisdictions we have worked with have used a few approaches to track eligibility and ineligibility:

Example from the field: Create dedicated eligibility markers in the Computer Aided Dispatch (CAD) system

In Chicago, Illinois, the Crisis Assistance Response and Engagement (CARE) program added individual eligibility questions (e.g., mental health need, presence of weapons/violence) as required fields in CAD. Call takers answer these fields for each incident during triage. CARE can then count all incidents where responses indicate eligibility and identify which questions are driving or limiting eligibility.

Example from the field: Use a dedicated searchable term in the CAD comments

Telecommunicators in Harris County, Texas, screen all 911 incidents for their Holistic Assistance Response Team (HART), then apply a consistent label in the CAD comments:

- Eligible incidents: “(HART) HOLISTIC ASST RESP TEAM”
- Ineligible incidents: “(NOHT) NO HOLIST ASST RESP TEAM”

Example from the field: Track “missed” incidents

Telecommunicators in Madison, Dane County, Wisconsin, assign a dummy unit when a 911 incident is eligible for Community Alternative Response Emergency Services (CARES), but the team is unavailable because the teams are already assigned to an incident or when the units are not operating. Any incident with the “CARESU” assignment is counted as a “missed” eligible incident. This helps estimate the total demand for the program.

Retroactively estimate using proxies

- If you can’t explicitly mark eligibility in CAD today, you can still estimate it using existing data, such as:
 - » Call types and priority levels that your program would accept
 - » Geography (within the program’s service area)
 - » Date and time (within the program’s hours)
- By filtering historical 911 data for these criteria, you can approximate the number of incidents that would have been eligible for your alternative response team.

We also recommend not creating a dedicated call code for the alternative response program. Overriding the original police, fire, or emergency medical services (EMS) call code with a dedicated call code makes it challenging to understand the types of incidents your alternative response team responds to and to create a comparison group to evaluate the impact of your program.

Q ■ How can I differentiate between my alternative response team being requested to respond by another responder versus my team requesting support?

A ■ We recommend two potential approaches to distinguish instances when the alternative response team was requested by other first responders from instances when the alternative response teams requested support:

1. Collect separate and dedicated fields for response type and support requested in the alternative response program records management system (RMS).

- **Response type:** Collect whether an incident was dispatched to the alternative response team alone as primary response, with law enforcement or another first responder as co-response, or upon request of another first responder. Jurisdictions can learn more about how their alternative response teams are operating by tracking response type. See **[RMS5] Response Type** in the Data Dictionary.
- **Support requested:** Collect whether the alternative response team requested support from another agency while responding to a 911 incident and the reason for the request. The alternative response team may request support across any of the response types. This data field helps jurisdictions understand the alternative response team's ability to safely respond to and resolve 911 incidents without additional support. See **[RMS10] Support Requested** in the Data Dictionary.

Using this method, you can count the frequency at which your teams are responding to calls with other responders, either as a co-response or upon the request of another responder separate from times when your teams requested support for themselves.

2. Manually calculate the rates of response types and support requested using existing CAD data. Programs without dedicated fields for response type and support requested in their RMS can use unit dispatch and on-scene arrival times to determine which unit arrived when in relationship with each other. This method is not preferred but it is possible to implement with sufficient staff capacity.

- **Response type**
 - » **Primary response:** The alternative response team was dispatched and arrived to the scene *before* any other units were dispatched.
 - » **Co-response:** All responding units dispatched before any unit arrived at the scene.
 - » **Requested by another agency:** The alternative response team was dispatched *after* one or more other unit(s) arrived at the scene.
- **Support requested:** Additional units dispatched after the alternative response team arrived at the scene.

This approach may result in incidents being dispatched as co-response but appear in the data as primary response with support requested, depending on response times and the timeliness of responder reports of arrivals to scene. One limitation of calculating the support requested metric this way is that it may be difficult to determine which unit requested support if there are multiple units present at the scene. Consider these approaches as a “good enough” estimate of these metrics.

Q: How can I collect the data I need to most accurately share the outcomes of my program, including how we handle 911 incidents and support people in crisis?

A: We recommend collecting two data points — incident disposition and encounter outcome — for each 911 incident to describe the outcome of the response.

1. Incident dispositions are simple and describe the result of the incident (e.g., assignment completed, gone on arrival, incident canceled, or sent back to dispatch). Reporting incident dispositions is an opportunity to describe how the program operates as a first responder in the 911 system. We recommend tracking incident dispositions in the CAD and RMS. See **[CAD12] Incident Disposition** and **[RMS8] RMS Incident Disposition** in the Data Dictionary.
2. Encounter outcomes describe whether the team engaged with the individual in crisis, then elaborate on the needs of and services delivered to the individual in crisis using the other data points collected in the RMS. Encounter outcomes only need to be captured within the RMS. See **[RMS9] Encounter Outcome** in the Data Dictionary.

Q: What do I need to do if the incident dispositions available in my CAD are different from what this tool recommends?

A: Often, alternative response programs must work with existing incident dispositions available in the CAD, which may differ from those presented in this tool. If this is your situation, work with your ECC Director and find the existing incident dispositions that best match the definitions of the proposed incident dispositions in this tool. Ensure the incident dispositions are tracked in both your CAD and RMS. When reporting this data, be transparent about the definition of each incident disposition and translate your incident dispositions to the incident dispositions in this tool to tell the story of your program.

For example:

Existing ECC Incident Dispositions	[CAD12] Incident Dispositions from this Tool
Cleared	Assignment Completed
Gone on Arrival	Gone on Arrival/Unable to Locate
Event Canceled	Incident Canceled
Other dispositions, as reported by other responding first response units	Other disposition, as reported by other responding first response units

Q. Incident disposition appears in two places: the CAD and the RMS. How can I track this data point across these separate systems?

A. The incident disposition options may look different in the CAD system compared to the RMS system because of differences in how the two systems operate. The CAD is an incident-based system, and the dispositions are for the incident. The RMS dispositions are for each of the individual responder units responding to the incident.

Below is a table that shows how the incident dispositions in the CAD and RMS might match.

[CAD12] Incident Disposition	[RMS8] RMS Incident Disposition
Assignment Completed	Assignment Completed
Gone on Arrival/Unable to Locate	Gone on Arrival/Unable to Locate
Incident Canceled	Canceled by ECC + reason
Other disposition, as reported by other responding first response units	
Other disposition, as reported by other responding first response units	Sent back to dispatch + reason

Many alternative response programs report that it can be difficult to capture cancellations or send backs on the CAD side.

In cases where **[RMS8] RMS Incident Disposition** = *Canceled by ECC*, it may be reported in **[CAD12] Incident Disposition** as a disposition different from *Incident Canceled* if another first response unit was assigned to respond instead. In these cases, the **[CAD12] Incident Disposition** will reflect the disposition code reported by the responding unit that was assigned to the incident instead of the alternative response unit.

In cases where the incident does not require any further response, the ECC may close the incident with the **[CAD12] Incident Disposition** = *Incident Canceled*.

Q: My program bills insurance for services. Can I use this tool to help with my reporting requirements for this?

A: No. Alternative response programs are increasingly exploring how to access Medicaid or private insurance funding to cover services.

This tool will likely not cover the unique reporting requirements in your state.

Alternative response programs that are exploring or seeking to access Medicaid funding for their services may start by compiling and understanding Medicaid policies and procedures as set by your state or locality. Medicaid may have specific requirements that impact certification to bill, staffing, operations, service delivery, and reporting. For example, your Medicaid authority may require your program to have staff with specific training, certifications, or licensures, conduct certain assessments, or report on engagements with special populations. Engage your state Medicaid office or local Medicaid administrator to determine how to access Medicaid funds and any reporting requirements.

Q: What if my team follows emergency medical technician (EMT) protocols for reporting?

A: Depending on the alternative response program's scope, some programs may choose to hire certified EMTs or paramedics to serve on their alternative response teams and follow those professional standards. In these cases, we recommend that alternative response program managers work with their designated emergency medical services oversight agency to comply with state and national regulations and reporting requirements, as appropriate. This may include adhering to national or state National Emergency Medical Services Information System (NEMSIS) reporting requirements.¹

In these cases, align the proposed definitions with the NEMSIS elements as closely as possible and guide your program's data analyst to align reporting, when appropriate, with the proposed methodology of this tool. Below are a few examples of adaptations of the guidance from this tool to the national NEMSIS requirements.

Aligning NEMSIS unit disposition definitions (eDisposition.27) with this tool's incident disposition and encounter outcomes:

1. Check your state's specific NEMSIS rules by visiting <https://nemsis.org/>.

From NEMSIS	From this tool	
NEMSIS eDisposition.27 Unit Disposition	[CAD12/RMS8] Incident Disposition	[RMS9] Encounter Outcome
4227001 Patient Contact Made	Assignment completed	Engaged and offered services
4227003 Canceled on Scene		Declined to engage
4227007 No Patient Contact		Declined to engage
4227011 Non-Patient Incident (Not Otherwise Listed)		N/A
4227005 Canceled Prior to Arrival at Scene	Canceled	
4227009 No Patient Found	Gone on arrival/ Unable to locate	

Aligning NEMSIS transportation disposition (eDisposition.30) with the voluntary transportation and support requested fields proposed in this tool:

From NEMSIS	From this tool	
NEMSIS eDisposition.30 Transportation Disposition	[RMS17] Voluntary Transportation	[RMS10] Support Requested
4230001 Transport by This EMS Unit (This Crew Only)	Yes, voluntary transportation provided	No support requested by another agency
4230003 Transport by This EMS Unit, with a Member of Another Crew		
4230011 Non-Patient Transport (Not Otherwise Listed)		
4230005 Transport by Another EMS Unit/Agency	No, voluntary transportation not provided	EMS requested
4230007 Transport by Another EMS Unit/ Agency, with a Member of This Crew		No support requested by another agency
4230009 Patient Refused Transport		
4230013 No Transport		

Q. What if my alternative response team is working with contracted providers? How can I get them to follow these data collection procedures?

- A.** Alternative response programs staffed and operated by a contracted provider must work to ensure shared and aligned definitions of program metrics and data fields, using the guidance provided in this tool. Strategies to ensure alignment include:
- Set clear expectations in the Request for Proposals (RFP) and contract regarding how often and in what format contracted providers should report metrics to the overseeing government agency. Use the GPL's Measuring What Matters toolkit to help guide these expectations.
 - Work with your contracted provider to ensure they have the necessary data infrastructure and staff capacity to report program data as expected.
 - Ensure data can be linked across systems and data sources by tracking CAD incident ID numbers.
 - Work with your contracted provider and their records management system on data access and ownership parameters to facilitate regular access to program data.

Example from the field: Use RFPs to find alignment

In Allegheny County, Pennsylvania, the Department of Human Services released a RFP for their alternative response program. Their RFP clearly outlined data collection and reporting expectations, including performance metrics, reporting frequency, and data reporting format.

Following the execution of the final contract, Allegheny County Department of Human Services staff worked closely with the selected provider's data staff to set up the program's data systems in alignment with the RFP's terms. This included designing the data collection approach in the program's case management system, establishing secure data transfer methods, and designing data dashboards for program reporting.

Q. Can I apply this tool if my program is dispatched from secondary public safety answering points (PSAPs)?

A. Alternative response programs may be dispatched by a secondary public safety answering point (PSAP) or a call center to which a 911 call is transferred from the primary PSAP.² This may include instances in which the caller is transferred to the secondary PSAP to be further triaged, and for unit dispatch, or where the call is triaged by the primary PSAP and the incident information is transferred to the secondary PSAP for unit dispatch.

In either instance, we recommend that PSAPs coordinate and agree upon the information that must be transferred between entities for effective triage, dispatch, and data matching. In addition, PSAPs need to agree on data collection and reporting responsibilities to ensure consistent and reliable reporting of metrics.

2. "911 Master PSAP Registry," Federal Communications Commission, accessed May 14, 2026, <https://www.fcc.gov/general/9-1-1-master-psap-registry>.

Example from the field: Coordinate data for alternative response across PSAPs

In Phoenix, Arizona, the Community Assistance Program's Behavioral Health Unit (BHU) is dispatched from the Phoenix Fire Department PSAP. The Phoenix Police Department is the primary PSAP for the area and is responsible for answering, triaging, and screening calls for BHU. The Phoenix Police Department tracks the total number of eligible calls for BHU, whereas the Phoenix Fire Department PSAP tracks the number of transfers received from the Phoenix Police Department PSAP for BHU and total responses by BHU. Internally, the two PSAPs work together to align data for reporting.

Example from the field: Create a new dispatch center for alternative response

In Los Angeles, California, the Unarmed Model of Crisis Response (UMCR) program receives eligible calls for service through two PSAPs: Los Angeles Police Department (LAPD) and the Los Angeles Fire Department Metropolitan Fire Communications (MFC) center. Both agencies are responsible for answering, triaging, and screening calls to determine whether incidents are appropriate for diversion to UMCR.

Eligible incidents are then routed to a dedicated UMCR dispatch center operated by a contracted provider. Upon receipt, UMCR dispatch personnel access incident information through the LAPD or MFC CAD systems and enter key details into the UMCR records management system to support responder deployment and situational awareness in the field.

The [Government Performance Lab](#), housed at the Taubman Center for State and Local Government at the Harvard Kennedy School, conducts research on how governments can improve the results they achieve for their citizens. An important part of this research model involves providing hands-on technical assistance to state and local governments. Through this involvement, we gain insights into the barriers that governments face and the solutions that can overcome these barriers. By engaging current students and recent graduates in this effort, we are also able to provide experiential learning.

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