



TASC's Center for Health and Justice

A New Tool for the Opioid Epidemic: Specialized Opioid Case Management

June 25, 2020



CENTER FOR
HEALTH & JUSTICE
AT TASC

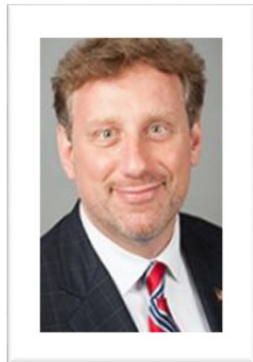
Welcome and Introductions

Bureau of Justice Assistance and TASC's Center for Health and Justice



Center for Health & Justice COSSAP Team

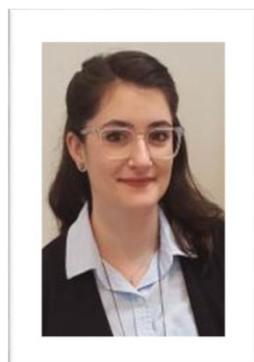
TTA provider for COSSAP FRD grantees since 2017



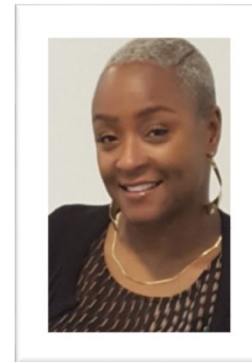
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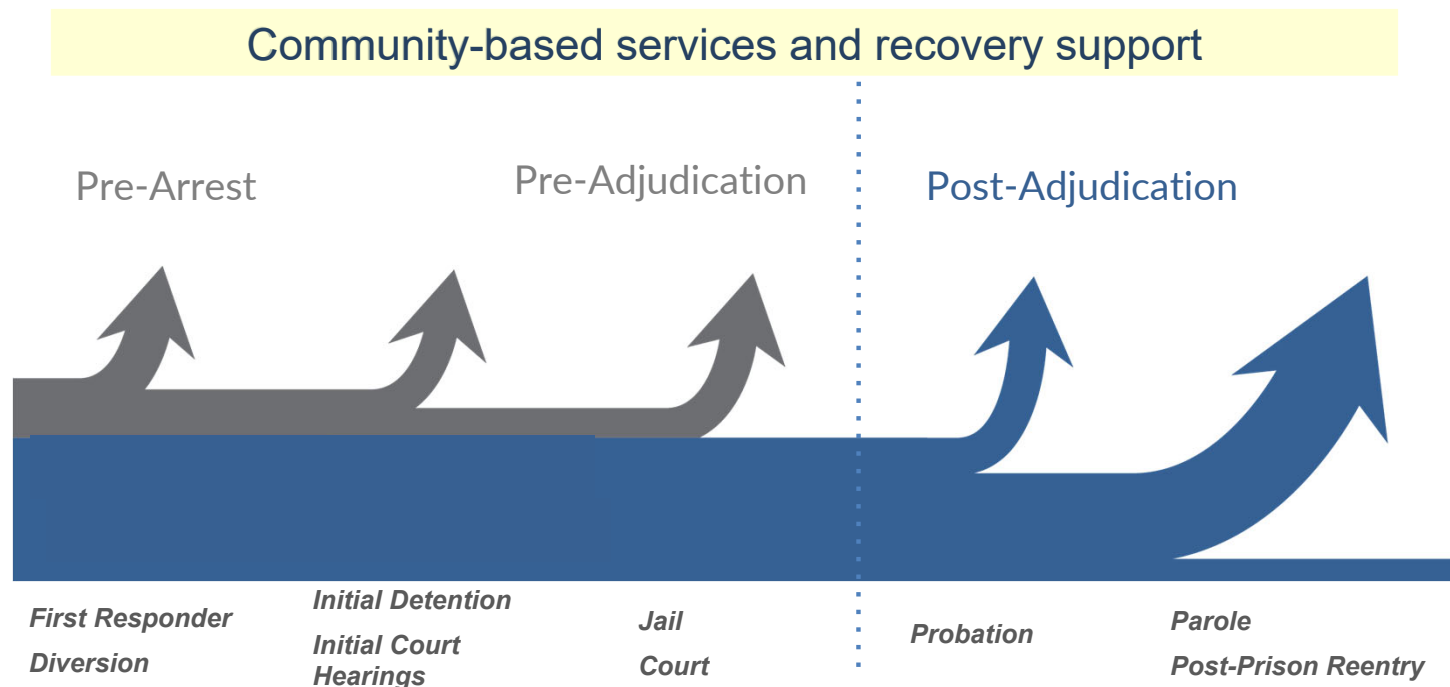
Alyse Altenburg
Policy Advisor
Bureau of Justice Assistance
Office of Justice Programs



Benefits of Case Management in First Responder Diversion Programs

Justice System Points of Intervention

The justice system can divert many people to treatment and services in the community.



Why First Responder Diversion?

Incarceration DOES punish people and can remove dangerous people from communities

BUT:

- **Incarceration often does not address rehabilitation needs of the person, the family, or the community**

SOLUTION:

First Responder Diversion:

- **Increased public safety**
- **Reduced recidivism**
- **Reduced costs**
- **Reduced social service burden on law enforcement**
- **Increase use of community-based treatment and housing services**
- **Keeps families intact**
- **Connecting children with care to address trauma**

**PRE-ARREST DIVERSION: PATHWAYS TO COMMUNITY
POLICE, TREATMENT AND COMMUNITY COLLABORATIVE**



The Five Diversion Pathways to Treatment

- **Self-Referral**: An individual voluntarily initiates contact with a first responder (a law enforcement, fire services, or EMS professional) seeking access to treatment (without fear of arrest) and receives a referral to a treatment provider.
- **Active Outreach**: A law enforcement officer or other first responder identifies or seeks out individuals in need of substance abuse treatment; a referral is made to a treatment provider, who engages them in treatment.
- **Naloxone Plus**: A law enforcement officer or other first responder engages an individual in treatment as part of an overdose response
- **Officer Prevention Referral**: A law enforcement officer or other first responder initiates treatment engagement, but no criminal charges are filed.
- **Officer Intervention Referral**: A law enforcement officer initiates treatment engagement; charges are filed and held in abeyance or a citation is issued.

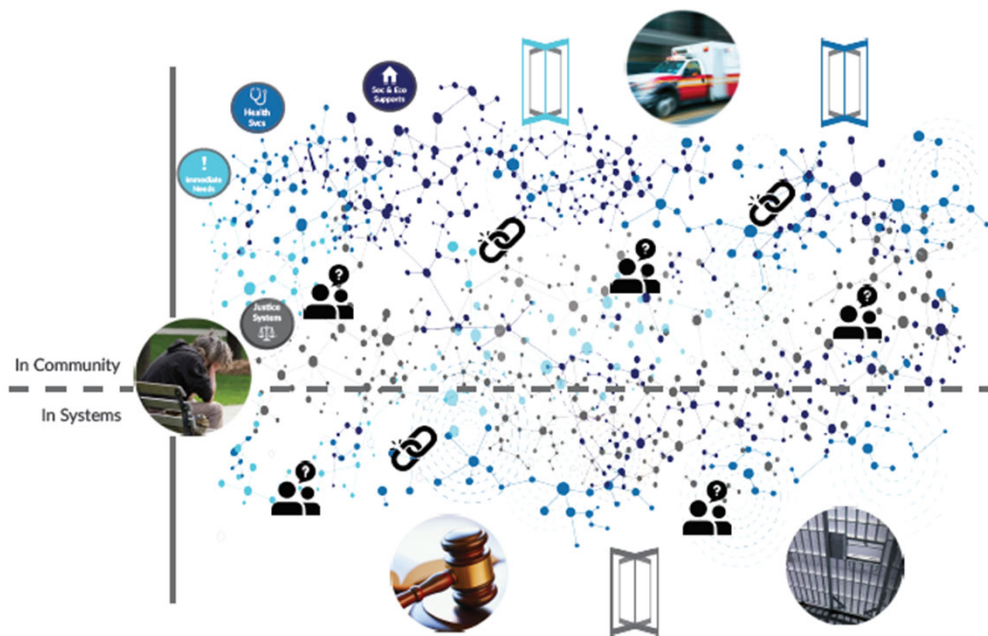
Components of Specialized Case Management

What Is Specialized Case Management

Clinically-focused, multisystem service coordination with treatment placement and recovery management to create a unique client service approach

Without Specialized Case Management:

Disconnected services create chaos for courts, confusion and barriers to recovery for clients



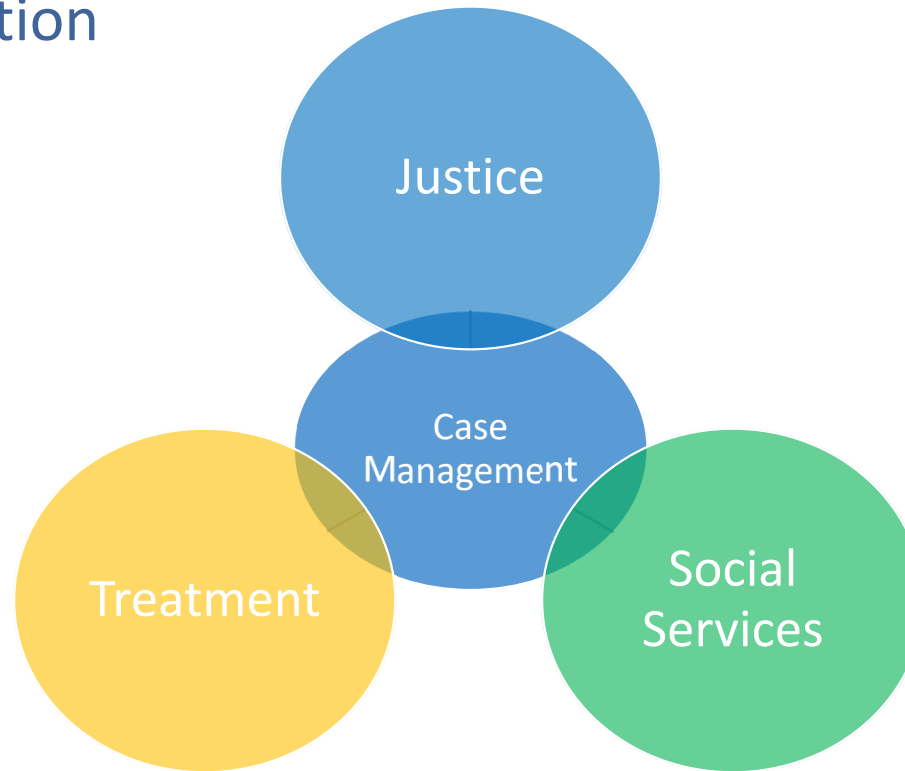
CHALLENGES

- Justice system access to services is chaotic and incomplete
- Disconnected services in community
- Inefficiency & wasted costs
- Barriers to treatment for courts and clients
- Limited access to needed recovery supports
- Confusion for clients and families
- Clients incarcerated more, deprived of rights to treatment
- Clients who reach treatment have poorer outcomes

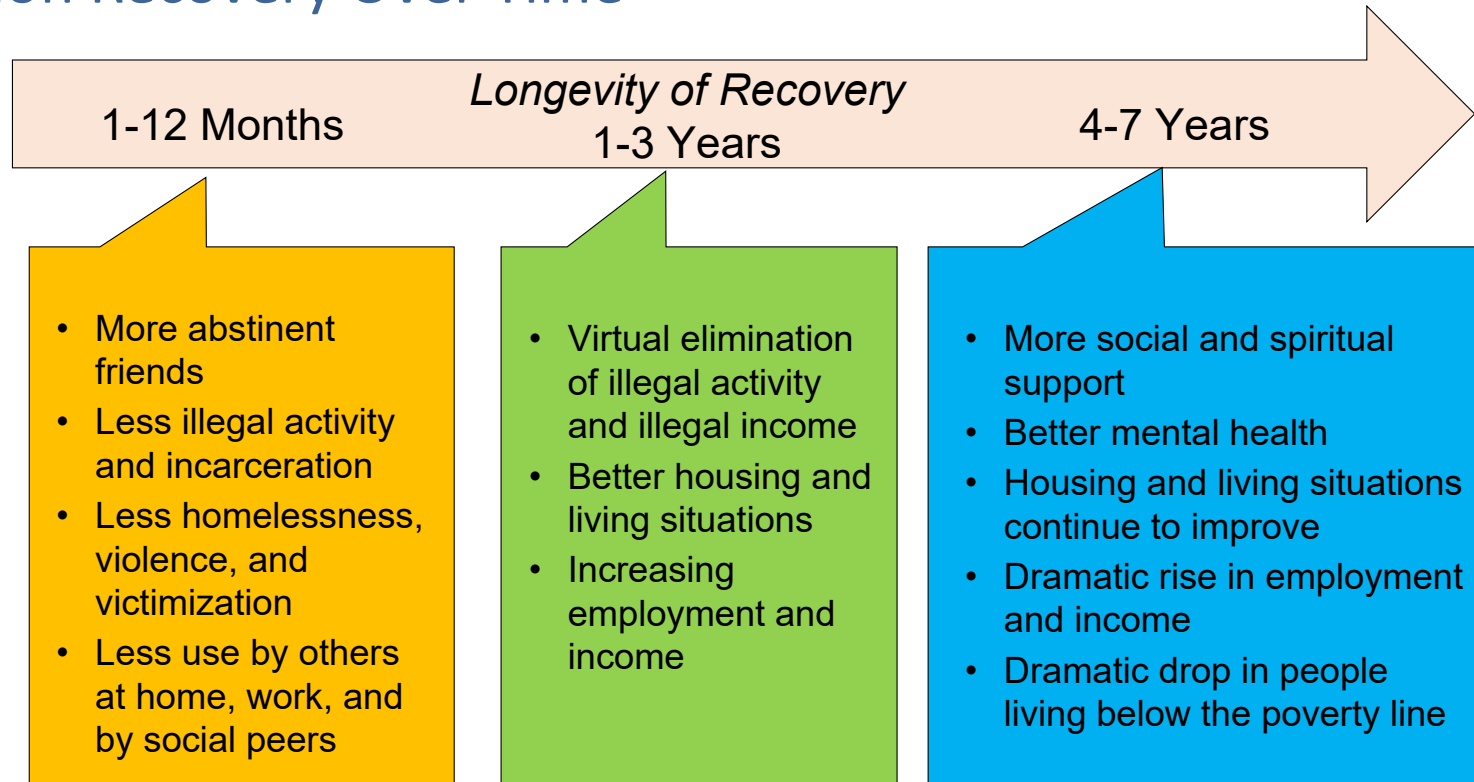
Traditional Case Management Silos

- Justice System:
 - Track completion of court expectations
 - Can include victim restitution, payment of court costs/fines, completion of community services, satisfaction of terms of supervision (drug screens)
- Health System:
 - Placement into appropriate level of care
 - Progress on treatment plan

Specialized Case Management – System Coordination



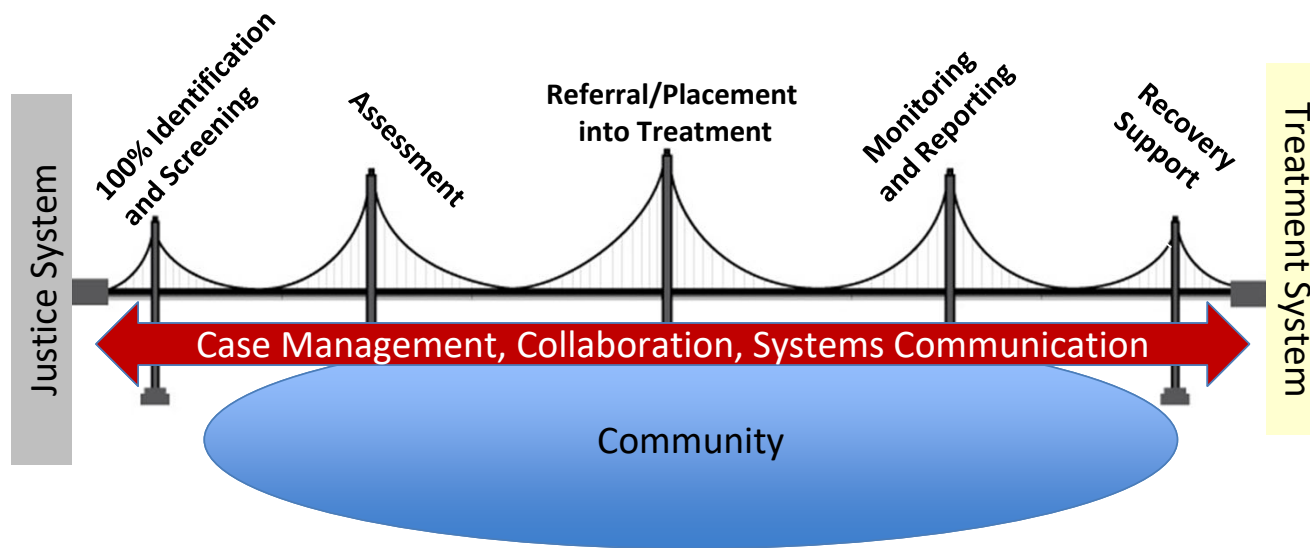
Addiction Recovery Over Time



Source: Dennis, Foos & Scott, 2007  © 2014

The Pathways to Treatment

The TASC Model



A Way of Connecting Different Systems

Specialized Case Management

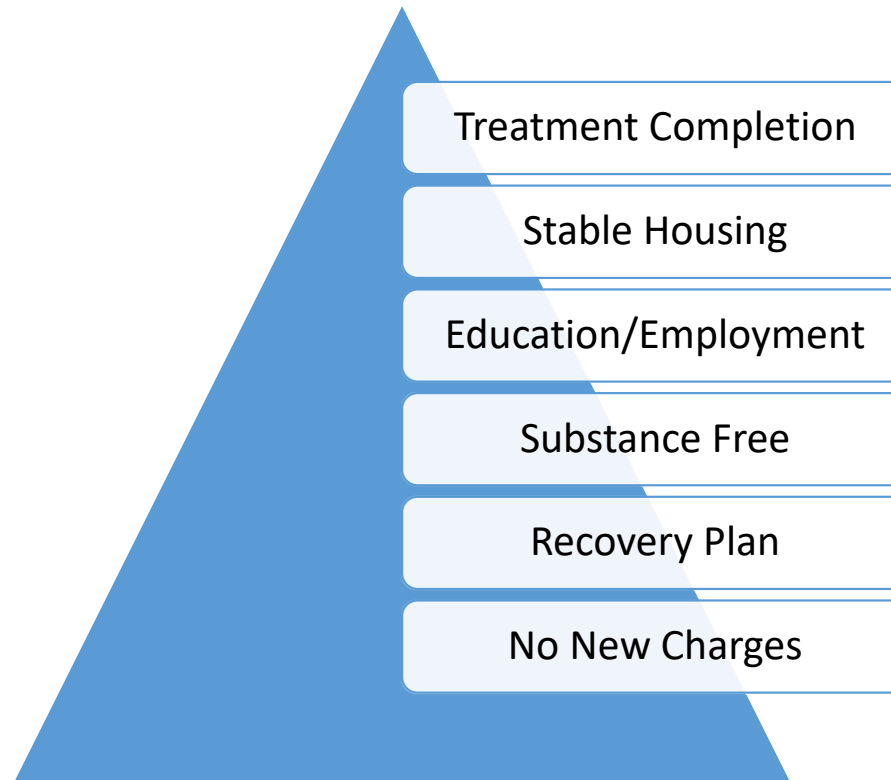
Criminal Justice Support

- Identification of people with drug problems
- Service matching to risk and need
- Service placement and monitoring
- Enhancing community safety

Treatment Support

- Changing individual behavior
- Reducing drug use
- Accountability and leverage to ensure treatment participation

Measures of Individual Success



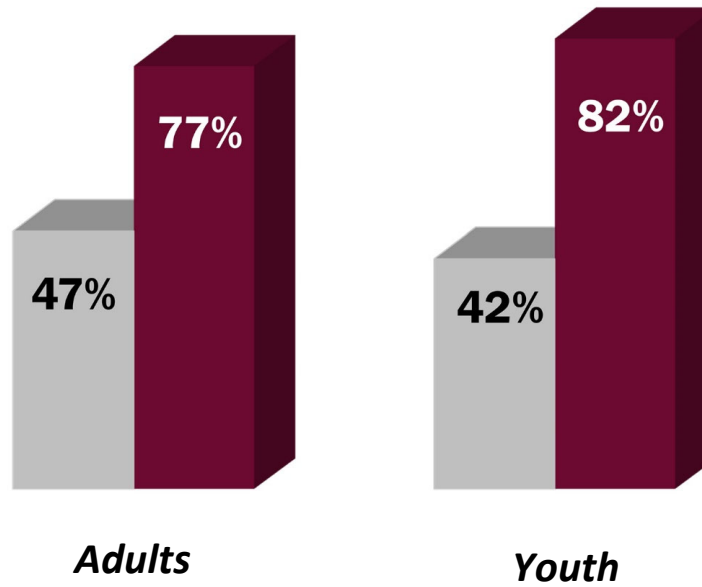
Supporting Recovery: Address Social Determinants of Health

- Housing
- Employment and Education
- Social Supports (e.g., transportation, childcare)
- Physical Health
- Safety/Environment
- Peer-based and Community-based Supports
- Restorative Justice (i.e., reconciliation with victims, community)

Specialized Case Management Significantly Greater Success in Treatment Completion

Substance Use Treatment Completion Rates

CY 2014 data from the IL Treatment
Episode Data Set (TEDS) and TASC



- Individuals referred to treatment by IL criminal or juvenile justice systems
- TASC criminal/juvenile justice clients receiving treatment

First Responder Diversion and Case Management In Practice

Elements of the Naloxone Plus Pathway

- **Naloxone Plus:** Engagement with treatment as part of an overdose response with naloxone, then following up rapidly with tight integration with treatment. Site examples: QRT, DART, STEER
 - **Naloxone** – Law enforcement, fire, emergency medical services, community, businesses, individuals, etc.
 - **Rapid ID** – e.g., 9-1-1
 - **Immediate contact with individual** – as close as possible to point of OD
 - **Rapid engagement** – in person and daily follow-up until engaged in treatment
 - **Rapid access to treatment** – measured in minutes and hours
 - **Screening and clinical assessment** – to have the correct individual approach
 - **Continued tight integration** – police and behavioral health and community
 - **Medication-Assisted Treatment (MAT)** – all appropriate medications made available
 - **Recovery support services** – treatment ends, recovery continues
 - **Naloxone** – for the individual and his/her household

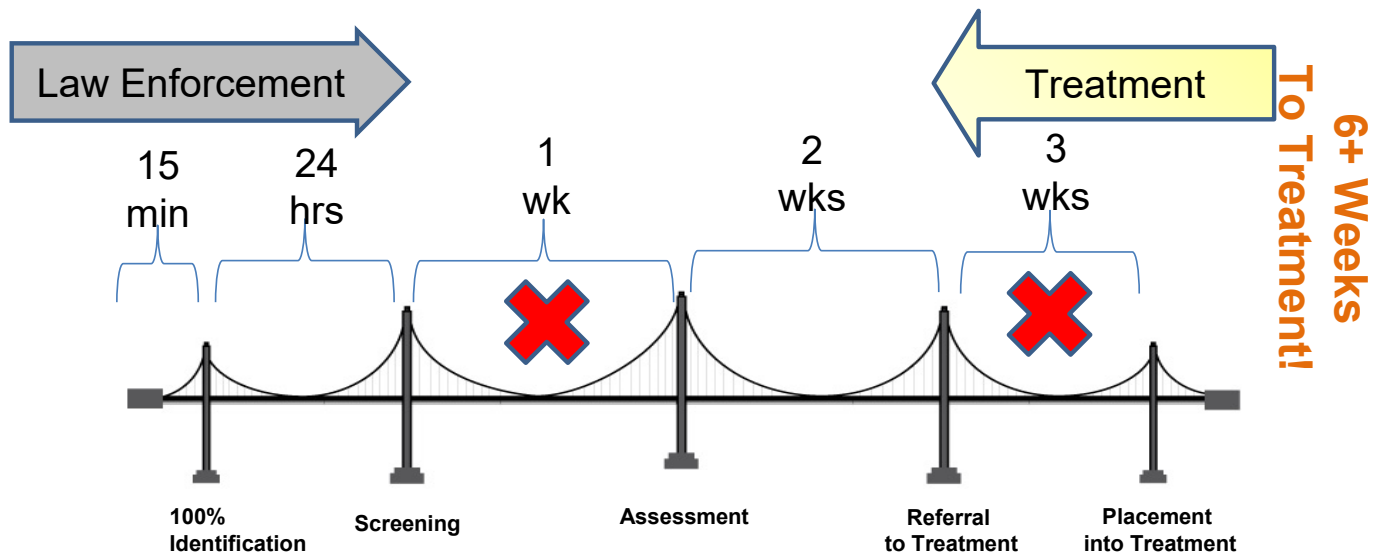
What is a Quick Response Team (QRT)?

- Naloxone Plus overdose response
- Multidisciplinary team (police, fire, treatment, peer support)
- Identify and locate OD victims
- Onsite assessment and recovery plan implementation
- Naloxone distribution
- Follow up and support

Cabell County, WV

- West Virginia led the nation in per capita OD deaths
 - 2015: 480 calls for a suspected OD; 298 Narcan usages
 - 2017: 1,831 calls for a suspected OD; 1,153 Narcan usages
- 2018: EMS reported an 40% decrease in calls for a suspected OD from 2017 (QRT began)
- Total QRT encounters: 500+
- Individuals entered in treatment: 30%

The Value of Partnering with Treatment
THE Critical Time and Place Connection for Diversion



Thank you!

Q & A

Have More Questions?

To **request training and technical assistance** for law enforcement and first responder diversion, or for other requests, contact CHJ:

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(312) 573-8229
nmunoz@tasc.org

or visit the TTA request page on the COSSAP website:
<https://www.cossapresources.org/Program/TTA/Request>