

BJA's Comprehensive

Opioid Abuse

Program

United We Stand

Responding to America's Opioid Crisis

BJA

Bureau of Justice Assistance
U.S. Department of Justice

Community-Based Treatment, Support Services, and Peer Recover

2020 COAP National Forum

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The Need For Training

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TASC's Center for Health and Justice

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Learning Objectives

After this session, participants will be able to:

- Identify new responsibilities being placed on first responders who participate in first responder diversion programs
- Describe How to Utilize First Responders as a “first point of contact” in the Opioid Crisis
- Illustrate the importance of first responder diversion training
- Propose training areas that could be included in a comprehensive training curriculum

The Need for Training

- SUD present in 62% of men and 72% of women involved with the justice system
- Opioid epidemic has led to law enforcement and first responders (FR) taking on the role to link individuals to treatment
- Most FR agencies do not have specific training or protocols related to substance use and addiction/substance use disorder (SUD)



The Need for Training

- Crisis Intervention Team (CIT) training
- Naloxone administration
- Medication Assisted Treatment (MAT)
- Science of addiction and recovery
- Understanding stigma
- Substance use as a criminogenic risk factor
- Evidence-based Treatment
- Recognizing addiction in families and children
- Motivational interviewing
- Screening
- Brief intervention
- Building public health partnerships



Considerations

- Cross-training between first responders and behavioral health staff
- Interventions should be assessment based, individualized, communication between first responders and behavioral health
- Start training on hire and reinforce through continuing education

- Source: American University and TASC's Center for Health and Justice's 2019 brief: "Assessing Substance Use Disorder and Related Treatment for Law Enforcement"



Tucson Police Department Pre-Arrest Deflection



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Snapshot of Tucson

- 2nd largest city in Arizona
- 33rd largest city in the United States
- 550,000 population
- 252 square miles
- Tucson PD number of officers – 875 authorized
- Tucson PD total staff – 1180
- \$168 million dollar budget (92% personnel costs)

Considerations

- Determining what will work best for your jurisdiction
- Political climate – know your elected officials and inform
- Internal culture and climate
 - - What is the tolerance for change?
- Incremental implementation or all in? What's the risk?
- What's your message; internally and externally?
- Write policy! Write Policy! Write Policy! Cops want structure

Goals of the Program

- Reduce overdose deaths-Save Lives
 - Fatal Accidental Overdoses
 - Over 200 per year
- Establish trust with substance users
- Help Provide an avenue for substance users to access treatment
- Reduce crime and improve quality of life in communities

First Steps We Take

- Intentional First Step – Naloxone
- 2nd Arizona City to carry (Jan. 2017)
- Largest Arizona city to date to carry
- Over 400 patrol officers trained and carrying
- Over 50 reversals to date
- <https://youtu.be/DQ103Q5ZCU0?t=38s>



Deflection Program

- Creation of Deflection Protocol (Policy)
- Creation of Deflection Squad
 - Sergeant and 5 Officers
 - 3 Community Member Peer Support from Codac
- Training for Officers

What Does “Deflection” Mean?

- Deflection is the process of moving a person away from the criminal justice system, so they do not enter in the first place
- Even though there is probable cause to arrest for a criminal offense, the person is directed into treatment in lieu of an arrest, charges are documented

Deflection Training

- Define and Understand Substance Use Disorders and the Science Behind Them
 - Adverse Childhood Experiences (ACE's)
 - Structural and Chemical changes to the addicted brain
- Learn How to Engage the Unmotivated with Effective Communication
 - Motivational Interviewing Techniques
 - Trauma-Informed Care Practices
- Gain an Understanding of Medication Assisted Treatment (MAT) and How To Refer to the Designated Treatment Provider
 - Methadone / Buprenorphine (Suboxone) / Naltrexone (Vivitrol)
- Understand the Workflow of Pre-Arrest Deflection and How to Implement using your training!

Law Enforcement Specifics

- Police Culture will be your biggest barrier!
- Training – provide quality training, involve clinical staff
- Include the neuroscience of addiction, ACE's, testimonials (other cops are great), and explanations of MAT
- Be patient and candidly answer all questions!
- Have solid policies and protocol in place prior training
- Mandated policy or do officers have a choice?

Law Enforcement Specifics

1. **Be Patient**
2. Change represents loss, allow time to digest, contemplate
3. Emphasize the power of individual officer discretion
4. I would suggest that you do not make deflection mandatory
5. Incentivize deflection (we use training, commendations, etc...)
6. De-emphasize arrest as a measure of productivity
7. Ask for on-going process improvement suggestions
8. Executive Leadership Team must show united support for program
9. Members of Executive Leadership should be present for as many trainings as possible to lend importance and credibility to program
10. Isolate & influence informal leaders (sergeants, FTO's, tenured officers)
11. Highlight success stories, no matter how small

SUD/OD Treatment evidence-based treatment and services

- Strategies
 - IOP staff training
 - Provide 24/7 assessments and treatment for opioid use disorder (OUD)
 - Offer integrated care for physical, mental and OUD in one location
 - Provide referrals to appropriate community resources
 - Provide outreach services in the community
- Services
 - Assessment and evaluation
 - Intensive Outpatient Programs (IOP)
 - Standard outpatient programming
 - Individual and family therapy
 - Employment support services
 - Peer-run services
 - Housing assistance
 - Psychiatric services
 - Primary medical care
 - Acupuncture for pain management
 - OB-GYN



Data from the Researchers

- A total of 1071 individuals encouraged by officers to get treatment (2/12/20)
 - 36 referrals
 - 1035 deflections
- 61% of the people offered deflection, agreed to be deflected
- Most deflections target new individuals, with only 7.4% of deflections involving someone who had previously been deflected

Future Steps

- Motivational Interviewing
- Integrating trauma-informed practices into day to day policing
- Integrating Harm Reduction practices into everyday policing
- Address compassion fatigue
- Fix disparities in deflection process
- Expand team for active outreach and ER response
- Institutionalize trauma-informed, harm reduction policing

Making a Difference!

officer,

My name is [REDACTED] and you had found my boyfriend and I on 11/18/18 at Motel 6 on park and Benson highway sleeping on the stairwell. I was about 36 weeks pregnant at the time. Instead of arresting me you had brought me to Codac to get help. I just wanted to say Thank

You and because of you I was able to get off the streets and go home to my parents. It is 12/28/18 right now and I have been clean and now have a relationship with my son again and am participating in the U of A research study for the deflection program. I have been coming to Codac everyday. Thank you again, you changed my life tremendously.
[REDACTED]

Questions and Answers

Contact Information

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First Responder Role in the Opioid Crisis

Huntington, WV QRT (Quick Response Team)
First Responder Diversion Program
Cabell County Emergency Medical Service

Connie Priddy MA, RN, MCCN
Huntington QRT Program Coordinator
Cabell County EMS
Huntington, WV
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LEARNING OBJECTIVES

- ▶ Describe How to Utilize First Responders as a “first point of contact” in the Opioid Crisis
- ▶ Recognize and Provide Appropriate Intervention for Individuals experiencing an Overdose Event (Referral)
- ▶ Identify Cross-Training Opportunities for First Responders

Community In Crisis



- *City population: 50,000
- *County population: 100,000
- *Cabell County EMS runs 35,000 calls annually
(county-based EMS agency that serves all of Cabell County. This is all-inclusive of overdose calls in the City of Huntington).



Community In Crisis

CABELL COUNTY EMERGENCY MEDICAL SERVICES "SUSPECTED OVERDOSE" CALLS

2015

"Suspected Overdose" Calls - 480

Narcan Usage - 298

2016

"Suspected Overdose" Calls - 1217

Narcan Usage - 768

2017

"Suspected Overdose" Calls - 1831

Narcan Usage - 1153



INNOVATIVE APPROACHES

Huntington Police Department

Faith-Based Leaders July 2018



Cabell County EMS



*QRT MODEL
(First Responder
Diversion
Program)*



Prestera Center
Recovery Point

FIRST RESPONDER ROLE

- Train First Responders in science of Substance Use Disorder
- Acknowledge First Responders are the “first point of contact” during an overdose event ... sometimes the only contact
- Educate First Responders on resources available (First Responder Diversion Programs) QRT
- Cross-Train EMS Crews/Law Enforcement to function on (First Responder Diversion Programs) QRT
- Recognize need for motivational interviewing techniques
- Recognize need for self-care (Compassion Fatigue)



OCCUP Supervisors Dave McClure and Derrick Ray
with Morgan Radford of NBC News

FIRST RESPONDER ROLE

▶ Cabell County EMS “suspected overdose” calls:

▶ Ambulance Calls

▶ 2017 - 1831

▶ 2018 - 1089

▶ 2019 - 878

QRT Statistics:

2017 (Dec) - 2019

- QRT Eligible - 1869
- Contacts Made - 803
- Entered Treatment - 239

Approximately 30% enter formalized treatment

▶ Total reduction from 2017-2019

▶ 52% reduction in ambulance calls

FIRST RESPONDER CHALLENGES

- ▶ Ensuring the “scene is safe”
- ▶ Recognizing the scene can become confrontational
- ▶ Be aware of exposure at the scene (Fentanyl, “needle sticks,” multiple hazardous materials)
- ▶ Compassion Fatigue



LESSONS LEARNED

- ▶ Buy-in is essential for First Responders
- ▶ First Responders are a vital part of the solution
- ▶ Collaboration works to benefit entire community
- ▶ Recognize stress related behaviors
- ▶ Be willing to recognize trends ... listen to those in the field
- ▶ Addressing the opioid crisis prepares everyone for the next crisis...



Questions and Answers

connie.priddy@ccems.org

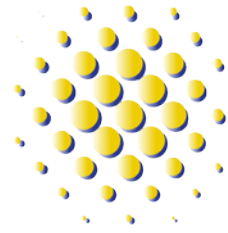
<https://www.coapresources.org/Learning/PeerToPeer/Diversion>

THANK YOU



C. Vaughn

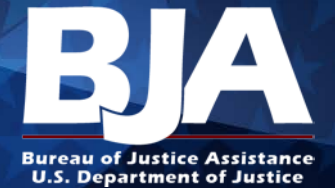
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