**Comprehensive Law Enforcement Response to Drugs**

**Proposal Narrative**

*Category 1: Deflection Programs*

**Background**

Behavioral health issues are a major public health and criminal justice concern. In 2018, an estimated 19.7 million adult Americans had substance use disorders and 46.6 million had some form of mental disorder (Substance Abuse and Mental Health Services Administration, 2018). However, individuals face a range of obstacles preventing them from entering or gaining access to behavioral health treatment, including lack of knowledge regarding access to services, shame and stigma, denial of substance use disorder or substance misuse, cost and lack of insurance/Medicaid, lack of transportation, and prior negative experiences (Natarajan, 2006). Some police agencies have implemented deflection programs that attempt to reduce obstacles to accessing treatment. One deflection model conducted by police officers involves self-referral to a police station for direct connection (or a warm handoff) to behavioral health treatment and/or other services. These programs are relatively new, and research is limited; however, a police self-referral deflection program in Illinois has received positive feedback from stakeholders, police officers, treatment providers, and participants (Reichert, Gleicher, Mock, Adams, & Lopez, 2017).

**Narrative Questions**

Draft your narrative by completing the following. Please do not delete the items. Before initiating your application, gather data to support your problem statement and performance measures. Truly analyze the problem in your jurisdiction and determine how your grant activities will impact your program goals and objectives.

**Program Summary**

1. Programs should focus on the deflection model that allows individuals to present at police stations for a referral to substance use disorder treatment. Please provide a clear and concise summary (one paragraph) of the proposed program, including the problems or needs to be addressed and the outcomes to be obtained.

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**Problem Statement**

1. The problem statement should include a description of the problem, the service area that will be the focus of the program, and needs related to the problem that are currently unmet. Stating, *“We have seen an increase in opioid overdoses of 10 cases in the target area,”* does not quantify a problem. A more specific statement, such as, *“Our jurisdiction has seen an increase in the number of opioid overdoses by 10 cases over the same period last year,”* helps clarify the extent of the problem being described. Problem statements should include data to demonstrate the magnitude, frequency, and type of the problem you want to address.

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Description of Service Area

1. Please list the geographic area of all jurisdictions to be served. While applications may only be submitted by one agency per program, multiple jurisdictions can work cooperatively on the proposed program.

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1. Provide the population and the urban/suburban/rural characteristics of the area to be served, as well as any other descriptive information (i.e., socio-economic, employment, poverty indicators, etc.) relevant to the statement of need.

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Unmet needs

1. Describe unmet needs related to the problem in the area to be served.

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1. Describe strategies already being implemented to address the stated need and why the jurisdiction currently lacks adequate resources to implement the program.

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Current Status

1. Please complete the following data table using the ICJIA website: <https://icjia.illinois.gov/researchhub/> and the Illinois Department of Public Health website: <https://idph.illinois.gov/OpioidDataDashboard/>. These data include drug arrests, prison admissions, opioid overdose deaths, and prescriptions. Include other data, such as hospital and treatment admission data, other drug overdose data, or any data that demonstrates the adverse effects of substance use disorders in your area. Information may be available through local county health departments or law enforcement and should be added to the table below to further demonstrate the problem and need.

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| **Data Element** | **2016** | **2017** | **2018** |
| Drug Arrest Rate per 100,000 Population (in target area county) |  |  |  |
| Prison Admission Rate for Drug Offenses |  |  |  |
| Opioid Overdose Deaths |  |  |  |
| Overdose Deaths – Any Drug |  |  |  |
| Opioid Prescription Rate and Rank |  |  |  |
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1. What do these data indicate? For instance, does this information indicate a definite need for the project, growth in a particular area, or change in the situation over time?

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1. Discuss other local data or factors that demonstrate the scope of substance misuse and substance use disorders and how they justify the need for programming.

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**Program Design**

Programs should adhere to a deflection model that allows individuals with substance use disorder to seek treatment opportunities via a police or sheriff’s department. Components for this model should include:

1. **A full-time service coordinator.** The coordinator will provide screening, intake, assessment of insurance coverage, case management, and serve as a liaison with treatment providers to secure placements. The coordinator will also facilitate a “warm- handoff” when clients arrive at their treatment placement. A warm-handoff features a professional (coordinator, officer or trained volunteer) offering a face-to-face introduction of the client to the treatment provider to which he or she is being referred. Describe how your program will include a full-time coordinator and how these functions will be addressed.

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1. **Police training and development of intake protocol**. Describe how your program will train officers on substance use disorders and the development of a protocol that will be followed when potential participants present at the police department. Description of training should include training topic areas, frequency of training, and duration of training.

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1. **Self-referral model with outreach**. Describe how your program coordinator and police department will identify potential participants through community outreach, including speaking engagements to community organizations, churches and health care providers, and establishing a presence in the community by reaching out in areas where potential participants or their families may be and offering information.

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1. **Follow-up and aftercare**. Describe how your program will follow-up with participants after treatment to determine if further services or case management are needed.

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1. **Alternative options for potential participants when treatment spots are not available**. Ideally, the service coordinator will be able to place participants in treatment with providers with whom they have established relationships. If need exceeds the number of available placements, please describe how your program will stay engaged with participants, encourage harm reduction strategies, or refer to a health care provider to maintain contact with the client and manage their needs until a placement becomes available.

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1. Describe the program to be funded, discussing the necessary steps to build and operate the program in the upcoming budget year.

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1. If applicable, describe any other component that your program will include.

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Project Implementation

1. Demonstrate that the target area will generate a sufficient volume of participants or participants necessary to justify the program. Grantee should demonstrate that they have the tools in place to engage potential participants, resulting in individuals seeking out participation in the program. Collaborations and partnerships with other police departments are encouraged, if this is needed, to generate a wider pool of participants. Options may include:

* Sheriff’s departments that provide service to an entire county.
* Single police departments that have sufficient volume within their own jurisdiction.
* A collaboration between multiple police departments, where one agency serves as the lead and memorandums of understanding exist to show that one department will provide treatment coordination services to other jurisdictions. In turn, the partner agencies will refer participants to the lead and benefit from having the program as an option for their communities.

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1. Please complete the Implementation Schedule. Refer to the Process Objectives below and create reasonable steps for project development and operation and include the agencies and staff positions responsible for each step. Use job titles, such as police officer, program coordinator, and social worker. Do not use names.

Implementation Schedule

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| **Task** | **Staff Position Responsible** | **Date Due** |
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| Submit quarterly Fiscal Report to the Authority. |  | January 15, 2021  April 15, 2021  July 15, 2021  October 15, 2021 |
| Submit quarterly Data Report to the Authority. |  | January 15, 2021  April 15, 2021  July 15, 2021  October 15, 2021 |
| Complete BJA PMT reports through <https://bjapmt.ojp.gov>. |  | January 15, 2021  April 15, 2021  July 15, 2021  October 15, 2021 |
| Submit all FINAL Fiscal and Program Closeout reports to the Authority. |  | October 30, 2021 |

**Goals, Objectives and Performance Indicators**

1. Projects funded through ICJIA set goals and objectives that serve as performance benchmarks. These objectives are used to develop the data reports submitted to ICJIA each quarter to determine project performance.

Complete chart below for the deflection program proposed for funding by filling in the information marked with X. Additional objectives may be added as deemed appropriate for the program, however, they must be measurable and within the scope and goals of the program. More information on goals, objectives, and performance measures is available on the ICJIA website at: <http://www.icjia.state.il.us/assets/pdf/FSGU/Goals_Objectives_and_Performance_Measures_2012.pdf>

Additional objectives may be added as deemed appropriate, however, they must be measurable and within the scope and goal of the program.

**Deflection Program**

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| **Goal:** Increase public safety and improve the behavioral health of community residents. | |
| **Process Objectives** | **Performance Measures** |
| Hire Deflection Program Coordinator by the first month of the program. | * Month Deflection Coordinator is hired. |
| Develop and adopt protocol for deflection of low level drug offenders by second month of the program. | * Month deflection protocol is adopted. |
| Develop and execute referral and treatment placement MOUs with X substance use disorder treatment providers by second month of the program. | * Month referral and treatment placement MOU is executed. * Number of treatment providers with MOUs |
| Train 100% of officers on the deflection program and protocol by third month of the program. | * Number of officers * Percentage of officers trained on deflection program and protocol by the third month of the program. * Description of training (frequency, content, duration) |
| Implement outreach initiative by the third month of the program. | * Month outreach initiative is implemented. * Numbers of inquiries received and logged about the program. * Provide detail on outreach initiatives (frequency, type of outreach). *Objectives related to specific outreach efforts, if applicable, should be detailed below (i.e., contacts and speaking engagements)*. |
| Please provide additional Process Objectives as needed. | * Provide additional measurable Performance Measures as needed. |
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| **Outcome Objectives** | **Performance Measures** |
| Deflect X individuals to treatment by placing 100% in treatment within X days. | * Number of participants requesting deflection program participation. * Number screened at intake and accepted. * Number of treatment placements identified and available for participants within x days of treatment request and acceptance in the program. * Number of participants transported to treatment with a warm-handoff. * Number and percent of participants placed in treatment. |
| Screen 100% of participants for available public insurance coverage.  Enroll 100% of eligible participants in public insurance programs. | * Number of participants and percent screened for insurance eligibility. * Number and percent of participants enrolled in public insurance programs. |
| Maintain engagement with 100% of participants that were not able to be placed within X days. | * Number of participants not placed within X days. * Number and percent of participants with engagement maintained during the waiting period. * Number of these participants ultimately placed in treatment. |
| Attempt follow-up with 100% of participants placed in treatment, with their consent, within X days to offer further case management needs. | * Number and percent that were attempted a follow-up contact within X days. * Number reached. * Number of participants referred to additional services (e.g., outpatient treatment, recovery support services, housing). |
| Please provide additional Outcome Objectives as needed. | * Provide additional measurable Performance Measures as needed. |
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1. Please describe how each objective will be accomplished.

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**Project Management**

1. Please describe how project success will be measured, detailing how and when data will be collected and reported.

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1. Please describe your plan for coordination and supervision of the project activities.

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1. Please describe any potential barriers and how they will be addressed.

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1. Discuss a plan to sustain the program when federal funding ends.

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References

Natarajan, M. (2006). Understanding the structure of a large heroin distribution network: A

quantitative analysis of qualitative data. *Journal of Quantitative Criminology*, *22*(2), 171-192.

Reichert, J., Gleicher, L., Mock, L., Adams, S., & Lopez, K. (2017). *Police-led referrals to*

*treatment for substance use disorders in rural Illinois: An examination of the Safe Passage Initiative*. Chicago, IL: Illinois Criminal Justice Information Authority, Center for Justice Research and Evaluation

Substance Abuse and Mental Health Services Administration. (2018*). Key substance use and*

*mental health indicators in the United States: Results from the 2017 National Survey on Drug Use and Health (HHS Publication No. SMA 18-5068, NSDUH Series H-53)*. Rockville, MD: Center for Behavioral Health Statistics and Quality, Substance Abuse and Mental Health Services Administration. Retrieved from https://www. samhsa.gov/data/