Law Enforcement, Treatment, Research: A Collaborative Approach to Combat the Opioid Epidemic
Presenters

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Opioid Epidemic

- The most fatal drug crisis in U.S. history (National Safety Council, 2018)
- 11 million people misused an opioid pain reliever in the past year (SAMHSA, 2017)
- 2.1 million people have opioid use disorder (SAMHSA, 2017)
- Arizona is among the states with the highest and fastest increasing rates of primary treatment admissions for heroin and opioids per capita (TEDS)
- In Pima County, 102% increase in opioid-related emergency visits and 91% increase in inpatient stays between 2008 and 2016, totaling an estimated $431 million in healthcare costs.
- In 2017, 239 of the 328 (73%) overdose deaths in Pima County included an opiate compound.
Learning Objectives

- Learn about a community, health care provider, law enforcement, and researcher supported response to the opioid epidemic.
- Learn about process of implementing and evaluating a deflection program that connects individuals to needed substance use treatment in lieu of arresting them.
- Gain skills in generating informed strategies to address the challenges to creating collaborative partnerships and facilitating cultural shifts in community and law enforcement response to substance use.
Outline

- Project timeline: Development of the Tucson Police Department Deflection Program and the supportive collaborative partnerships
- Law enforcement day-to-day operations related to the Deflection Program
- Treatment provider day-to-day operations related to getting deflected individuals engaged/re-engaged in appropriate treatment and services
- Researcher role in program implementation, ongoing monitoring & evaluation for program improvement and outcome assessment
Project Timeline

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Goals

- Reduce overdose deaths - Save Lives
- Establish trust with people who misuse substances and the community at large
- Offer an avenue for people suffering from Substance Use Disorder to access treatment
- Reduce crime and improve quality of life in communities
Throughout 2017

Research continues on existing programs in Florida, Seattle, Santa Fe, Albany, Gloucester, and Montgomery County, Maryland.

Late 2016

Chief Hall develops concept for Deflection after PERF Opioid Symposium. Begins with Officers carrying Naloxone

January 2017

All Officers trained and carrying Naloxone.

Throughout 2017

CODAC MAT Center of Excellence was selected as primary service partner.

Late 2017

Chief Hall shared his vision with Phoenix Program Manager for AHCCCS which resulted in collaboration meeting including CODAC.

Late 2017

Development of Deflection Program, policy, procedure and training curriculum

January 2018

CODAC MAT Center of Excellence expands to 24/7

Jan-Jul 2018

TPD/CODAC collaborative training begins of nearly 300 sworn personnel. Program and training adapted based on feedback.

May 2018

Chief Hall and UA-SIROW begin initial discussion of program evaluation.

June-August 2018

Chief Hall shared his vision with Phoenix Program Manager for AHCCCS which resulted in collaboration meeting including CODAC.
TPD-CODAC-SIROW-Pima County Deflection Collaboration

$1.47M SAMHSA Grant awarded and program research/evaluation initiated by UA-SIROW

Grant provides 2 CODAC Peer Responders to work directly out of TPD in Active Outreach Efforts.

July 2018

Deflection program implemented and SAMHSA U-MATTER grant submitted with Pima County as program manager, TPD and CODAC as program partners, and UA-SIROW as program research/evaluation partner

September 2018

Pima County Board of Supervisors accepts grant, quarterly updates to officers with success stories and officer surveys begin, bi-monthly program partner meetings initiated

October 2018

Pima County Program Manager starts

November 2018

UA-SIROW begins periodic reporting on project findings to inform program improvement

February 2019

CODAC Peer Navigators expand to 4 total and supports Pima County Pretrial Services’ Expanded, Enhanced Case Supervision

October 2019
Law Enforcement Operations

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Mental Health Support Team
Deflection Program Activities

- Officer training about the Deflection Program
- Officer training to support identification of substance misuse treatment need and encouragement to engage in treatment
  - Motivational Interviewing & Trauma-informed Care training
- The Deflection Process
- Law enforcement/behavioral health peer support co-responder approach
- Outreach activities
- Mental Health Support Team (MHST) specialized role
Treatment Provider Operations

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CODAC HEALTH, RECOVERY & WELLNESS

- Services provided
- 24/7 MAT
- Psychiatric
- Primary care
- OB care
Collaboration - Role & Activities

- Respond to the needs of a patient with OUD who encounters Law Enforcement for a drug related offense.
- Receive call from TPD or present on site with a deflection.
- Outreach Engagement Specialist (OES) speaks briefly with TPD officer to obtain context of initial contact with patient.
Collaboration-Warm Handoff

- Outreach staff respond to TPD regarding where initial contact was made, removal of paraphernalia/weapons and check with patient to solicit any remaining questions for TPD.

- Patient is then taken to comfort room. OES explains deflection program and answers any questions patient has at this point.

- Vital signs are obtained.

- OES checks in with membership (insurance verification and starts enrollment).

- Patient then begins normal intake process.
Treatment/Service Provision

- Assessment and connection to treatment.
- Full assessment is completed.
- Patient may enroll in MAT services.
- Patient may be transported to detox, crisis response center, or medical/inpatient psychiatric facility.
- Patient may be referred for housing (shelter, halfway housing, sober living, etc.).
Collaboration - Engagement Process

- Engagement focused on keeping patient interested in treatment.
- OES or PSS remain with the patient during process at patient’s comfort level.
- Patient offered snacks/drink.
- Patient allowed to recline to relax or sleep.
- Comfort room offers safe environment.
Collaboration - Re-engagement Process

- OES reach out to patients who leave site via phone, home visits and mail.
  - Success measured in terms of attempting to engage the patient in treatment at whatever stage of change the patient is at.
- Patients may return voluntarily and OES responds for continuity of care and patient preference.
- OES provide feedback to TPD officers to ensure continued collaboration when requested.
Program Evaluation

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Goals:

- Ongoing monitoring and evaluation to inform project improvement
  - Implementation evaluation
- Examination of project impact and effectiveness
  - Examination of project outputs
  - Outcome evaluation
Capacity & Infrastructure:

- Project team established and meeting regularly.
- Developed contracts.
- Procedures for collaborating, communicating, and sharing data established.
- Developed evaluation protocols and procedures.
- Personnel hired.
Program Implementation:

- Officers are identifying subjects who are willing to consider treatment and have been successful at encouraging them to get connected with treatment providers.
  - 45% of subjects offered deflection definitely wanted to get substance misuse treatment.
  - Of the other subjects, officers persuaded 32% to be immediately transported to a provider.
Program Implementation:

- Officers are considering deflection program eligibility criteria as well as subject willingness for tx when deciding whether to offer deflection.
  - 35% of those not deflected reported on their lack of need or willingness for tx.
  - 49% of those not deflected did not meet the eligibility criteria and 6% needed other services (e.g., hospitalization).
Outputs/Outcomes:

- 281 unduplicated individuals deflected since start of evaluation (November 1, 2019).
- 7 individuals utilized the Angel Program.
- 112 people contacted through outreach at targeted community locations; 56 individuals received individualized outreach.
Outputs/Outcomes:

- 71 individuals received a full assessment of physical, mental, and behavioral health problems and needs from CODAC.
- 34 individuals were identified as having opioid use disorder and appropriate for medication-assisted treatment.
- 69 individuals were identified as having a use disorder for a substance(s) other than opioids.
Outputs/Outcomes:

- **40** individuals are currently engaged in longer-term substance misuse treatment at CODAC.
  - **10** individuals are currently engaged in medication-assisted treatment for opioid use disorder.
  - **30** individuals are currently engaged in other type of outpatient substance misuse treatment for opioid or other drug use disorder.
- **33** individuals are currently engaged in substance misuse treatment at another treatment provider.
Questions?

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