Behavioral Health and Law Enforcement: Finding Common Ground in the Tucson Police Department’s Deflection Program

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Faculty Disclosures

- Josephine Korchmaros, PhD, has no financial relationships to disclose relating to the subject matter of this presentation.
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Disclosures

• The faculty have been informed of their responsibility to disclose to the audience if they will be discussing off-label or investigational use(s) of drugs, products, and/or devices (any use not approved by the US Food and Drug Administration).

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• This activity has been independently reviewed for balance.
Learning Objectives

• Discuss lessons learned in evaluating police-led, alternative responses to illicit substance use including data capture, research design, program validity, and assessing program impact

• Identify steps to overcome cultural and mission differences of perception between behavioral health and law enforcement

• Describe strategies for generating potential solutions to common community challenges and barriers to achieving effective community-based collaborations
Acknowledgement & Disclaimer

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Center of Excellence

- Enough space to address all elements of wellness
- More space for more services, co-location, and collaboration
- Optimizing workflow
- Named a Center of Excellence
- Open for all intakes (for any drug or alcohol misuse) 24/7 starting 1/1/2018
Access to Care Issues

• Continued stigma
• Insurance and prior authorizations
• Safety
• Where do I go?
Goals of Collaboration

**Save Lives**
Reduce overdose deaths

**Establish Trust**
with people with SUD, law enforcement and the community at large

**Offer an avenue**
for individuals experiencing SUD to access treatment

**Reduce crime and improve quality of life**
in communities.

**Address social determinants:**
houselessness, unemployment & criminal justice involvement.

SUD = substance use disorder.
The Department-wide Deflection Program Overview

Goal 1:
Enhance and expand access to substance misuse treatment and related services

TPD Deflection Program:
Deflection “Angel” Program

Goal 2:
Improve well-being, decrease opioid and other drug misuse and related risk behavior

MAT Treatment and Recovery Support Services (CODAC & other providers)

↓ Well-being
↓ Opioid misuse & recidivism
↓ Related Risk Behaviors

Project Monitoring and Evaluation

COMPLETED POLICE AGENCY

COLLEGE OF SOCIAL & BEHAVIORAL SCIENCES
Southwest Institute for Research on Women
Substance Use Disorder Treatment Focus

01 Restoring
individuals to healthy, happy, and productive lives (recovery).

02 Minimizing
the consequences, a death, of drug-dependent individuals with SUD.

03 Minimizing
the consequences of drug dependence on the communities they live in.
Law Enforcement Focus

01
Protect
public safety.

02
Protect
property.

03
Activities
designed to contain, isolate, and arrest.
Begins at the point of first contact by law enforcement officers and outreach staff in the field.

A patient’s experience with the Deflection Team out in the field sets up how they progress through their engagement in services.

When they are engaged in outpatient services, they have access to whole-person care.
Developing an integrated, patient-centered program
Social Determinants of Health

• The Deflection Program addresses the economic stability, health care, educational, neighborhood environment, and social community context of individuals with SUD.

• Addiction impacts communities.

• But addiction also brings together a whole community to help solve the issue.
Adjustments from Program Feedback

- Changing from Stages of Change to Adverse Childhood Experiences
- Establishing the Quiet Room, dedicated Tucson Police Department parking and Quick Entry.
- Naloxone administration adjustments.
TPD Training on Clinical Topics

- Integrating two cultures of SUD treatment and law enforcement
- Biological basis of addictions
- Stigma of addictions
- Harm reduction in opioid use disorder (OUD)
- OUD in pregnancy
- Trauma in addiction
- Psychiatric symptoms in addiction
- Behaviors in addiction
- Sequelae of non-fatal overdose
- Current treatment for OUD
- Personality Disorders in SUD.
- Motivational interviewing in SUD
Power of Observation and Experience

A great deal is learned from working with individuals with a history of addiction(s).

Learning about our own biases and beliefs, the biological basis of addiction, the pathways toward recovery or continued use, and possible outcomes become part of our learning experience.

Peer supports improve outcomes, too.
Going from Protector to Helper

• We use different approaches to help an individual or protect the community each time there is an interaction. addiction(s).
Individual Barriers to Treatment

- Still has drug available
- Hopelessness about help
- Has a partner who is still using
- Homeless or unsheltered
- Transportation Issues
- Has pets and no caretaker
Keys to Program Success
Reconciling Focus & Goals

Any discussion concerning the effectiveness of SUD treatment for individuals involved with law enforcement needs to address the similarities and differences between the legal and public health systems.

Understanding and accepting these similarities and differences influence the nature and quality of services a patient receives.
Building Interdependence

Awareness of the focus of each discipline.

Focus on outcome goals
- Saving lives
- Diverting from ED and criminal justice systems

Respect for each discipline.
Ongoing Program-Level Coordination

• Meeting
• Assessment
• Feedback
• Revisions
• Continued emphasis on integration
TPD Skills Learned

- Focus on medication-assisted treatment (MAT)
- Connection with patients out in the field
- Staying with patients until they are engaged with clinical staff (warm hand off)
- Follow-up with patients and reengagement
Reflections

- SUD treatment can be implemented at the point of first contact.

- More programs would benefit more communities affected by SUD.

- Fire departments and emergency departments may be good places to implement similar type programs.

- Commend Tucson Police Department for their excellence in the TPD Deflection Program.
Overview of Research Study

Feasibility and Acceptability:

• Patrol officers surveyed about deflection and substance-related offense incidents.

• Deflections reported in TPD’s incident tracking system supplemented with data collected in the officer survey as well as CODAC’s member tracking system.

Costs, Cost Savings, and Effectiveness:

• Deflected, arrested, and self-referred individuals invited to participate in a longitudinal study with survey data collected via researcher-led interviews at time of deflection, arrest, or self-referral incident and 3 and 6 months post incident.

• Policing cost data were collected through interviews with TPD staff, using TPD financial records, and using midpoint hourly wages inclusive of salary and employer-related expenses (ERE) for TPD officers by rank. The cost analysis is framed from TPD’s perspective, and all cost estimates are reported in 2021 dollars.
Feasibility & Acceptability: Expanding Access to Treatment & Services

TPD Deflection Program – 1st 3 years (Nov 1 2018 - Oct 31, 2021)

<table>
<thead>
<tr>
<th></th>
<th>Interactions involving encouragement to engage in treatment</th>
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<tbody>
<tr>
<td>Deflections</td>
<td>2,129</td>
</tr>
<tr>
<td>&quot;Angel&quot; Program</td>
<td>63</td>
</tr>
<tr>
<td>Total</td>
<td>2,192</td>
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45% Individual transported immediately to treatment provider.

21% Individuals agreed to seek treatment on their own.

2% Deflection accepted, but individual arrested for pre-existing warrant.

1% Deflection accepted; result unknown.

<1% Individual already in treatment.

29% Individual did not agree to deflection to treatment.
Duration of Deflection Incidents Relative to Arrest

- Encouraging individuals to consider substance misuse treatment and deflecting them to a treatment provider does not present a time burden for patrol officers.

- Therefore, deflection is an alternative to arrest that can address calls for service and community safety issues while providing an individualized response that saves officer time.
Deflected Individual Treatment & Service Engagement

Of the 922 unique individuals connected to a treatment provider as a result of TPD’s Deflection Program, 789 (86%) were connected with the primary partnering treatment provider – CODAC. Of these 789 individuals:

- **558 (71%)** received at least one type of healthcare service from CODAC.
- **527 (67%)** completed the clinical intake assessment at CODAC.
- **352 (45%)** engaged in some kind of substance misuse treatment, including MAT, at CODAC.
- **147 (19%)** received MAT from CODAC.
Deflection Program Implementation Costs

Annual training costs: $22,195 to $22,850

This cost is minimal and represents opportunity costs because training activities are standard to TPD operations and occur regardless of the Deflection Program.

On average, deflection incidents took 48.5 minutes, whereas arrest incidents took 73.9 minutes.

The time difference translates to an average cost savings of $13.40 per incident related to officer time, a total saving of $28,529 across all 2,129 deflection incidents.
Deflection Program Potential Cost Savings

Potential cost savings of $48,564 in jail housing expenses.

If 20% (426) of the 2,129 deflection incidents would have resulted in one night in jail if not for the Deflection Program, then the Deflection Program would have saved the local justice system $48,564.

Potential cost savings of $601,512 in justice system expenses.

If 10% (213) of the 2,129 deflections would have resulted in conviction of charges if not for the Deflection Program, then the Deflection Program would have saved the local justice system $601,512.
Change Over Time in Key Outcomes

Factors associated with key outcomes when individuals were residing in the community

(not in a controlled environment such as jail)
Deflection was associated with a greater reduction in frequency of use of illegal drugs. As shown, at 6 months post incident, individuals who were deflected engaged in 6.6 fewer days of illegal drug use than those who had been arrested.
Change Over Time in Illegal Drug Use (cont’d)

• As **mental health** worsened, individuals used illegal drugs more frequently.

• Individuals who were **consistently employed** engaged in fewer days of illegal drug use 6 months after their deflection or arrest incident compared to individuals who were less consistently employed.

• Housing was associated with a greater reduction in frequency of use of illegal drugs. As shown, at 6 months post incident, individuals who were **consistently housed** engaged in 10.5 fewer days of illegal drug use than those consistently unhoused.
• Among individuals who had maximum (Max) treatment readiness (TR), those with 0 days of AOD abstinence at time of incident (compared with those with 15 days) had the greatest reduction in illegal drug use through 6 months after their deflection or arrest incident.

• Individuals who had minimum (Min) TR at time of incident increased illegal drug use over time.
Change Over Time in Criminal Activity

- At 6 months post-incident, individuals who had been **consistently housed** committed 9.0 fewer crimes than those consistently unhoused.

Individuals who had maximum (Max) treatment readiness (TR) and 0 days of Alcohol or Other Drug abstinence at time of incident had the greatest reduction in number of crimes committed through 6 months after time of incident. Individuals who had minimum (Min) TR and 0 days of AOD abstinence at time of incident increased the number of crimes they committed.
Change Over Time in Serious Anxiety Not Due to Use of Drugs or Alcohol

- Individuals who were arrested and had minimum (Min vs Maximum [Max]) treatment readiness (TR) at time of incident experienced a substantial increase in days experiencing serious anxiety through 6 months post-incident. The other groups were similar to each other and experienced a decrease in serious anxiety post incident.
Conclusion

• Study findings suggest that pre-arrest deflection programs, like TPD’s Deflection Program, are feasible and acceptable by police officers and people with substance use issues as well as treatment providers.

• Study findings suggest that pre-arrest deflection programs, like TPD’s Deflection Program, are cost efficient and effective.

• Moreover, pre-arrest deflection programs have other meaningful benefits, including more efficient use of police officer time in responding to calls for service, decreased justice involvement for individuals who have substance use issues, and, consequently, substantial potential cost savings to the justice system.
Discussion

Facilitators of the Deflection Program:

• Active committed collaboration between law enforcement, behavioral health providers, and researchers

• Ongoing process and outcome evaluations that inform program improvement paired with partner responsiveness to identified barriers to implementing the brief intervention as well as to treatment engagement

• Support of city and county leadership

• Community support

• Training related to affirming and respectful approaching to engaging with people who have substance use issues, such as motivational interviewing and trauma-informed practices, tailored to law enforcement
Q&A

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