Portland State University

Overview of Deflection Approaches

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BJA & Center for Health & Justice identified
6 deflection/diversion pathways to immediate treatment

% of 321 agencies surveyed	**Pathway** (in order of prevalence)	Common Implementation	Example Jurisdiction
58%	**1. Naloxone Plus**	3-4 person team initiation, with first responders, social work, and recovery experts	Quick Response Team (QRT, Colerain Township, OH) and Drug Abuse Response Teams (DART)
55%	**2. Officer Prevention**	Officer initiation, no arrest, taken to drop-off center, or field handoff	Provider & Police Joint Connection Pilot Program (Portland, OR) Triage and Behavioral Health Center (West Garfield Park, Chicago, IL)
53%	**3. Self-referral**	"Drop-in" location(s) where people can go to ask for services without fear of arrest	Police Assisted Addiction & Recovery Initiative (PAARI) (Gloucester, MA Angel Program)
51%	**4. Co-responder**	Team of 2 or more initiate, officers respond to calls with peer-support specialists/ recovery coaches	Enhanced Mobile Crisis Teams (West Garfield Park, Chicago, IL)
48%	**5. Active Outreach**	Team of 2 or more initiate talking to and taking people to what they need	PAARI Outreach Program (Arlington, MA)
32%	**6. Officer Intervention**	Officer initiation, referred to service provider if not public risk; only pathway that is pre-arrest diversion	LEAD is most often example in US (Civil Citation, FL) Out of Court Disposals, DIVERT (West Midlands, UK)

Adapted from Charlier & Reichert, 2020; Ross, 2022; Labriola et al., 2023

Considerations

What is needed?

Organize

Key personnel should meet regularly, and oversee the establishment and maintenance of communication / collaboration between service providers and police

Need ***multiple***, established, and reliable service-provider contact points with core capabilities

Ideally at least one contact point in each strategic part of the city/county

Eligibility

Clearly identify who is eligible to receive the deflection / diversion and why

Calls for service can be a great place to identify when co-responder may be necessary

Example: Seattle PD analytics department is developing AI that helps to identify potential calls that would need a different responder service than just police intervention

Structure Discretion

Plan the clear guidelines (including triage tools) for officers to follow that will encompass the overwhelming majority of cases that would be eligible

Juxtapose the new process with common / prior approaches

Examples from corrections include the use of “graduated sanctioning grids” to help structure probation officer discretion

Considerations

Targeted policy equates to targeted results

Identify Goals

Must identify the community needs and problem the program is going to address

Overdose problems, recidivism problems, and crime/public safety problems are *not the same*

Each require different approaches to target causes

Performance

Regardless of the program goals, performance measures are *critical* in identifying strengths, weaknesses, and how to improve

Depending on the goal and approach, this may not require a lot more

If you're not collecting good data on it, then you don't really care about it

Get buy-in

Simply mandating a change in policing (or any position with degrees of discretion) *is not enough*

Targeted, ongoing training is important, but more so is the officer's faith in the process

Obtain and address line officer concerns

Officers should shadow the process and learn about what the service providers do, and how effective they are

Highly Recommended

Leverage existing officer prevention pathway

In **9 days** of work

84% of encounters (122 of 145) interested in connecting to services

63% (77 of 122) were successfully connected

54% (66 of 122) connected in same day

Provider & Police Joint Connection Pilot Project

Community Partners Engaged

ADVOCACY	SYSTEM PARTNER	PEER SUPPORT	DETOX	TREATMENT	SHELTER
HJRA	PPB	MHAAO	Recovery NW	Another Chance	Portland Rescue Mission
	Portland Street Response	BHRC	FORA Health	NARA	Transcending Hope
		Miracles Club	Cedar Hills		DoGood Multnomah
		NW Instituto Latino			Salvation Army Emergency Shelter
		Transcending Hope			Laurelwood
		New Avenues for Youth			Bridges Respite

Key organizers

- Tera Hurst, Health Justice Recovery Alliance
- Dave Baer, PPB, Central Bike Squad
- Janie Gullickson, Mental Health & Addiction Association of Oregon

Highly Recommended

Get involved in the nationwide conversations such as the
Police, Treatment, and Community Collaborative (PTACC)

REGISTRATION NOW OPEN!

PTACC 2024 International Deflection and Pre-Arrest Diversion Summit

Oct 29 - Nov 1, 2024 - Seattle, WA

www.ptaccollaborative.org/Conference

info@ptaccollaborative.org

PTACC "Starter kit" www.ptaccollaborative.org/ptacc-suite/

Performance metrics:
ptaccollaborative.org/wpcontent/uploads/2020/06/PTACC CoreMeasures_10.9.18.pdf

Three action items to advance equity in deflection:
ptaccollaborative.org/wp-content/uploads/2022/07/PTACC_Equity_In_Deflection_1_Pager_July_2022.pdf

COSSUP / BJA provide communities interested in starting or enhancing a deflection program with the opportunity to learn from established or innovative programs:
cossup.org/Learn/PeerToPeer/deflection

COSSUP / BJA Funding can be found here when released: cossup.org/Program/Funding
Current opportunities via BJA: bja.ojp.gov/funding/opportunities/o-bja-2024-171967
bja.ojp.gov/funding/opportunities/o-bja-2024-172044

Justice Community Opioid Innovation Network (JCOIN) Technical Assistance:
jcoinctc.org/tta/

JCOIN Training & Engagement Center (JTEC):
jcoinctc.org/jtec/

Do this first! (1.5 hour, free training)
Note: Does not include Pathway 6 (Community / co-responder)

Out of Court Disposals (Police Diversion) in the UK **and** ***How to use them***
Reports on effectiveness: Crest Advisory Report and National Police Chiefs' Council Report

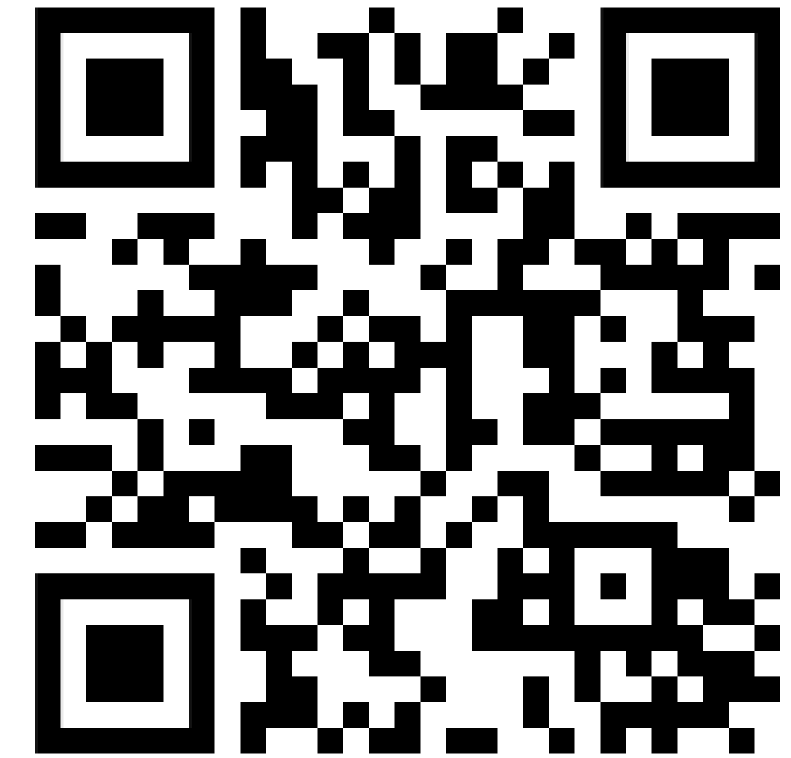
Thank You!

QR Code
Recommendations for 2024 Legislature Short Session

Links to our National Institute of Justice Study of

Oregon Drug Policy Impacts including Justice Reinvestment, Decriminalization, and Ballot Measure 110

Please feel free to contact us with questions



QR Code
Year One Report

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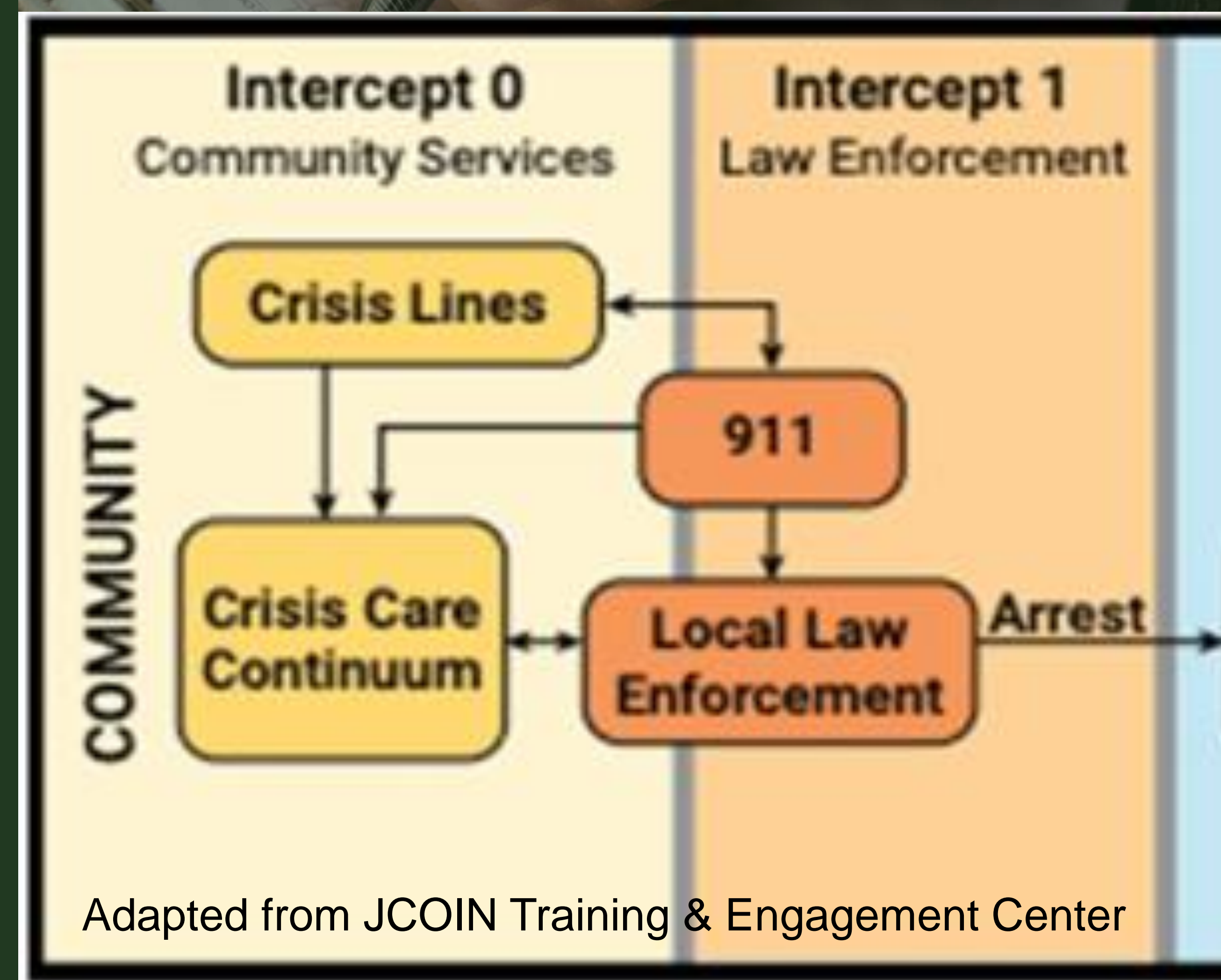
Without invoking the justice system

Since 2011 – response to overdose rise

Connect those in-need to community-based treatment/services...

- “Deflection” – ...instead of taking no action (when arrest not necessary or permitted)
- “Pre-arrest diversion” – ...instead of arrest and charges

Gives options to officers and subjects



Adapted from JCOIN Training & Engagement Center

BJA & Center for Health & Justice identified 6 pathways to treatment

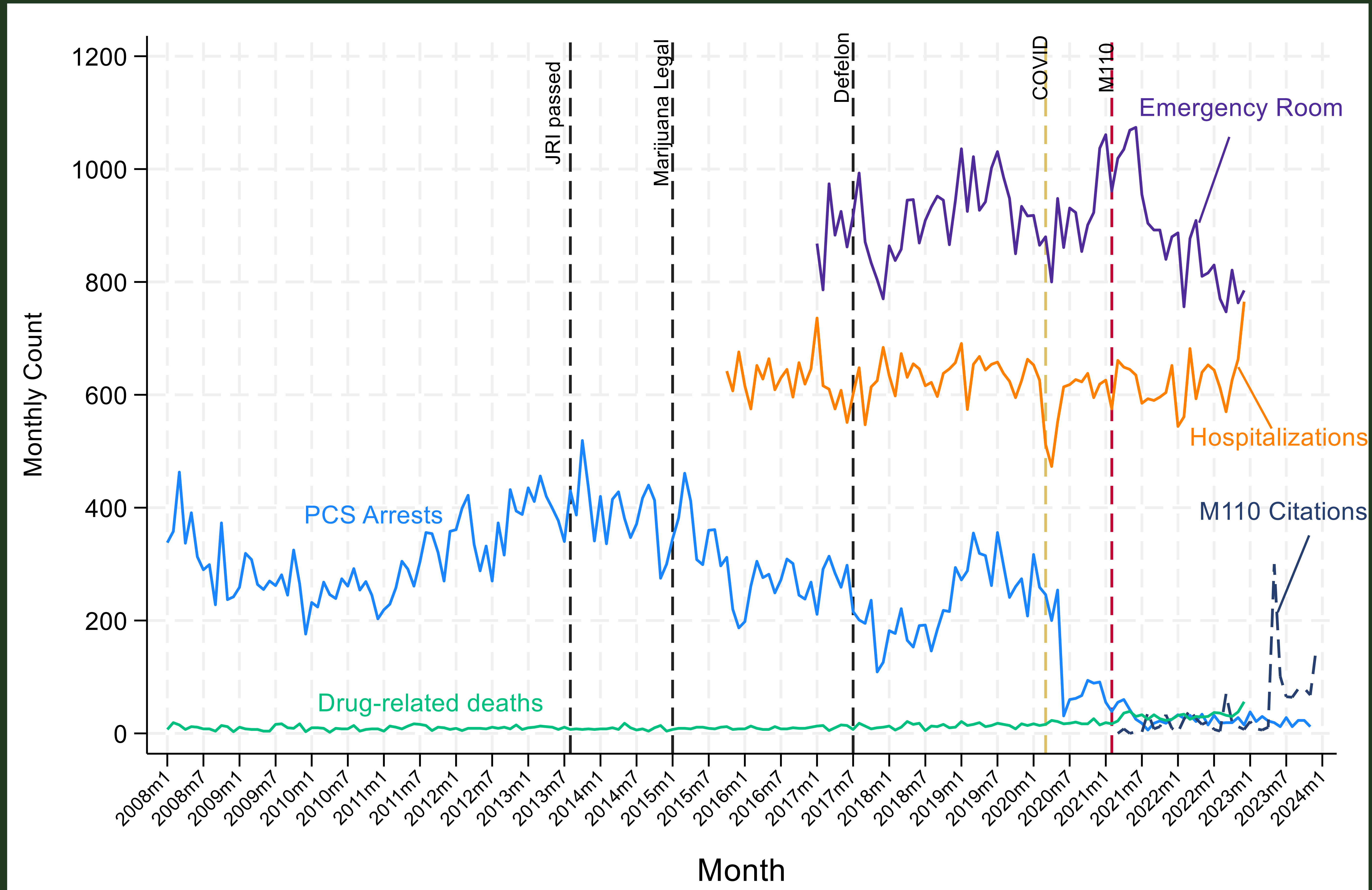
% of 321 agencies surveyed	Pathway (in order of prevalence)	Critical for effort to succeed
58%	1. Naloxone Plus	Requires clear communication between police, EMS, and those doing outreach
55%	2. Officer Prevention	Requires clear steps for officers to connect people-in-need to services
53%	3. Self-referral	
51%	4. Co-responder	Requires coordination, communication, clear steps, trust/rapport between people-in-need and first responders/ outreach team
48%	5. Active Outreach	
32%	6. Officer Intervention	Requires clear steps for officers to connect people-in-need to services

Adapted from Charlier and Reichert, 2020; Ross, 2022; Labriola et al., 2023

How could this look in Multnomah County?

Likely target population in Multnomah County?

This graph was created using data from LEDS, OHA, and OJD. It shows monthly counts of four different metrics that could shed light on the likely population that might need a form of deflection or pre-arrest diversion.

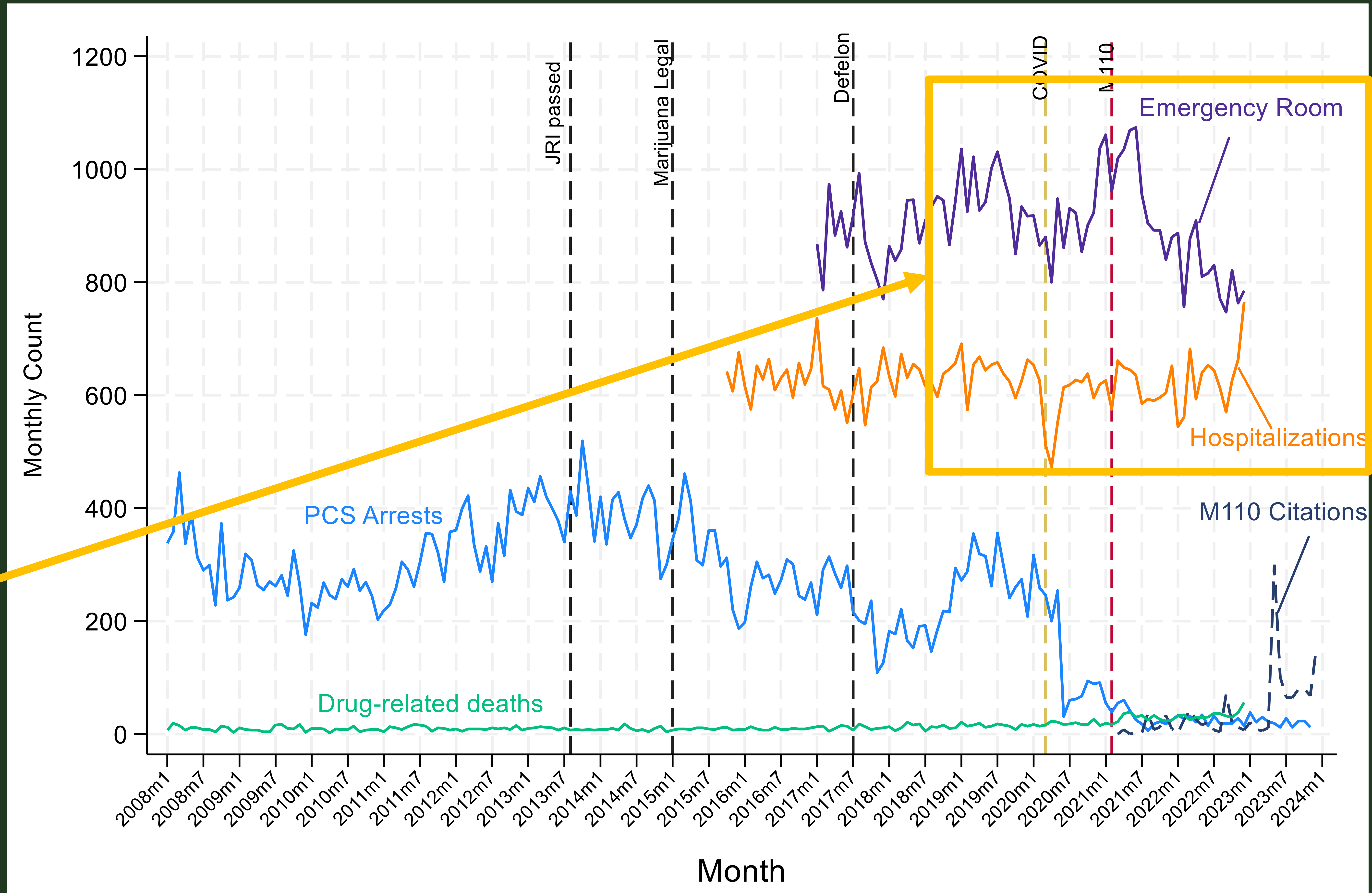


Likely target population in Multnomah County?

OHA data on drug-related emergency room visits and hospitalizations show potential populations who could be receptive to

Self-referral and

Naloxone plus pathways



Likely target population in Multnomah County?

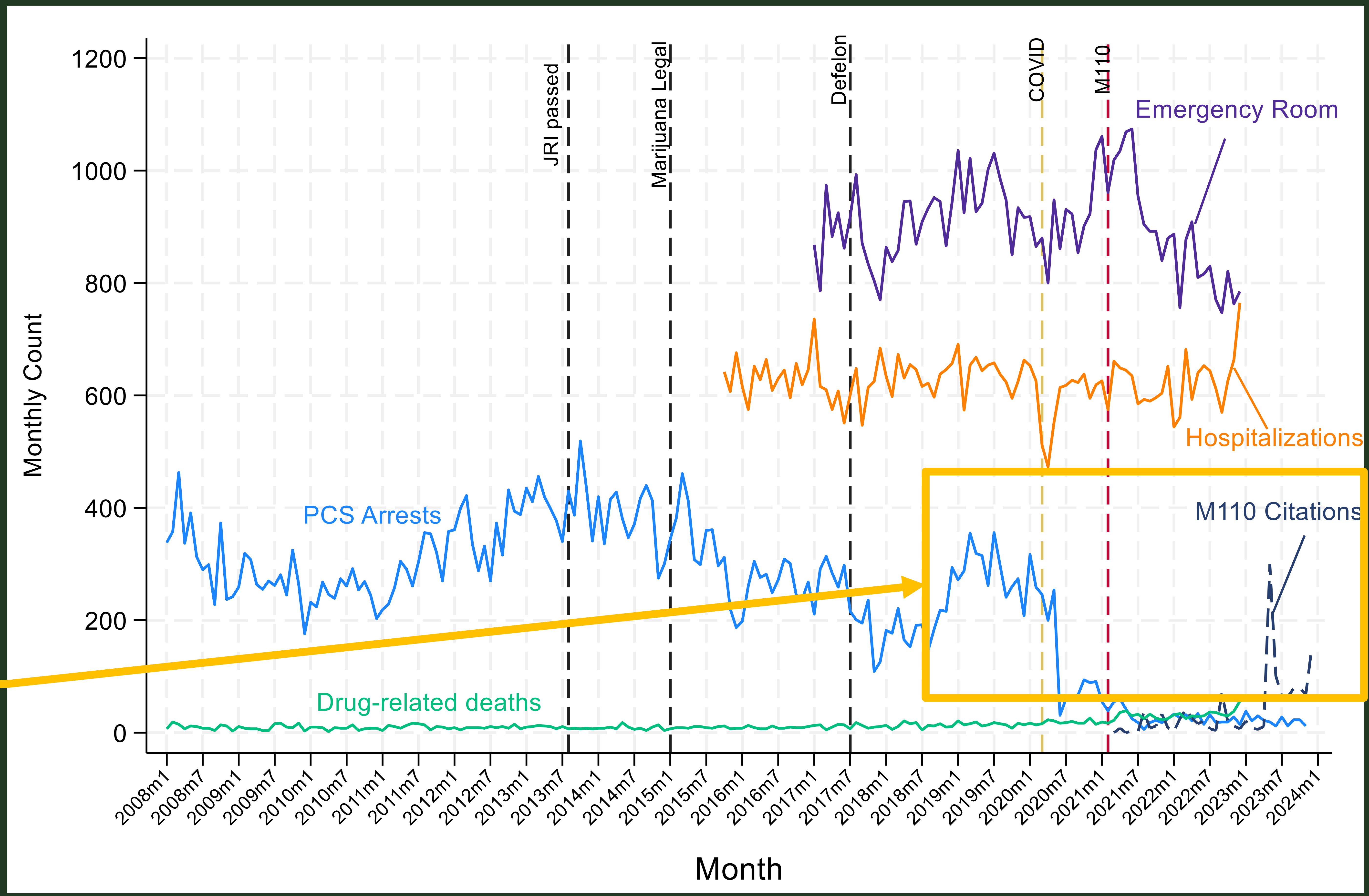
LEDS and OJD data on PCS arrests and M110 citations demonstrate the potential populations most likely engaging with police who could be receptive to

Active outreach,

Officer prevention,

Pre-arrest diversion &

Co-responder Pathways



With HB 4002, what is the likely **deflection pathway**?

Officer Prevention and/or Co-responder

(Deflection – non-crime interaction)

Officer comes across someone while on patrol. The person does not need immediate medical attention, but would like services. The officer then calls a service contact, such as a recovery coach, peer support specialist, or case worker to come and meet the officer and subject.

When the service contact arrives, the officer introduces them, providing the warm handoff, and the service specialists take over to begin the process to care as the officer continues on patrol.

Connecting (warm handoff) people with services is ***offered in lieu of no action***:

- Triage structure for officers to follow that identifies need
  - Direct line or app to service provider / warm handoff
- Service provider or trained peer-support come to/with the officer

With HB 4002, what is the likely deflection pathway?

Officer Intervention (pre-arrest diversion)

Offers services

Charges held

in abeyance on condition the person engages in treatment

Offers jail

In responding to a call for service, or citizen "flag down", a person is found in possession of a controlled substance, and the officer initiates an arrest. Assuming the person is coherent and not in need of medical attention, the officer offers the person a choice: (1) taken to be booked into jail or (2) taken to a designated service drop-off location, where the officer will then provide a warm handoff to a case manager who gives the person an assessment and begins the treatment process.

Two things are particularly critical in this pathway – (1) having a drop-off location where service specialists can work to engage people-in-need, and (2) the agreement and process associated with holding charges in abeyance. The second will involve extra paperwork that details the charges being held, and a determination of how long the charges are held in abeyance – for example, are they held until the person simply completes the assessment, or do they need to actively engages with treatment once, or do they need to complete treatment altogether? What does completion look like?

Connecting people with services is ***an option for eligible charges (e.g., PCS)***:

- Choice of either jail or service connection
- If services are chosen, officer takes person to drop-off for warm handoff
- District attorney's office must be in support of this process – structure discretion

Appendix

Key Outcomes

Available to analyze

Crime Data

Crimes known to reporting agencies
- Example: Data reported for National Incident Based Reporting System – monthly

Variable
- Count of violent or property crimes
- Rate of violent crimes per 100,000
- Rate of property crimes per 100,000

PUBLIC SAFETY

Health Data

Oregon Health Authority (OHA)

Variable
- Drug-related deaths per month
- Drug-related death rate per 100,000

Practice Data

Calls for service, number of referrals, arrests, Jail intakes, and Prosecutions

Variable
- Monthly by crime type (PCS / disorderly conduct)