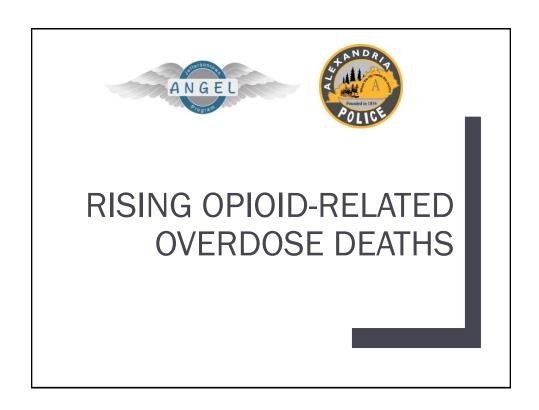
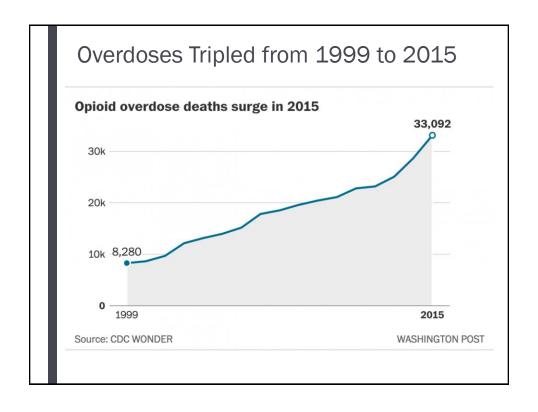
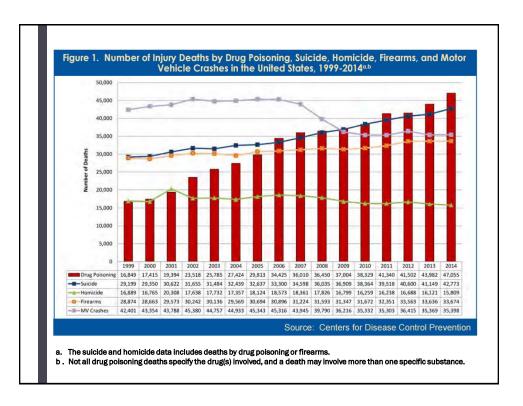


### The Problem

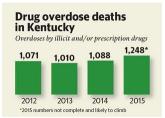
- Dramatic increases in opioid-related overdose deaths since the 2010s.
- Rising costs to criminal justice and public health care systems.
- Enforcement-only efforts have increased amount of addicted persons in jail/prison, but have not reduced overdoses and drug addiction rates.
- Barriers to treatment and stigma of addiction.







### 2015 Jefferson County and KY Statistics



The number of drugrelated overdose deaths in Jefferson County **increased 40%** during the 2013-2015 timeframe.



- In 2015, Kentucky tied with Ohio for the 3<sup>rd</sup> most overdoses in the U.S.
- From 2014 to 2015, the death rate from synthetic opioids, such as fentanyl, increased by **72.2%**, and heroin death rates increased by **20.6%**.

### 2016 Overdose Statistics

- Kentucky overdose fatalities increased in 2016 to 1,404 as compared to 1,248 overdose deaths counted in the 2015 report.
- People ages 35 to 44 were the largest demographic in overdose deaths. Followed by 45 to 54.
- Jefferson County had the most overdose deaths and the largest increase of any county with 364, up from 268 in the 2015 report.
- Autopsied and toxicology reports from coroners show the following:
  - Heroin = 34% of OD deaths (up from 28% in 2015)
  - Fentanyl combined with heroin or alone = 47% of OD deaths (up from 34% in 2015)
  - Morphine = 45% of OD deaths
    - Heroin metabolizes as morphine in toxicology results.
- Jefferson County agencies used more than 5000 doses of naloxone.







## RISING COSTS TO CRIMINAL JUSTICE AND PUBLIC HEALTH CARE SYSTEMS

#### Rising Costs of KY Public Health Care Systems

- The total charges for emergency department (ED) visits for Kentucky resident drug overdoses in 2014 were \$32.8 million dollars, a 30% increase from the \$25.2 million dollar total in 2013.
  - \$6.4 million billed to Medicare
  - \$14.3 million Medicaid (more than double the \$6.4 million from 2013)
  - \$3.6 million self-pay or charity
  - \$6.6 million to commercial insurance
- Hospitals with the highest number of ED visits for drug overdoses in 2014
  - University of Louisville
  - St. Elizabeth Medical Center North
  - University of Kentucky Hospital
  - St. Elizabeth Ft. Thomas
  - Baptist Hospital East
  - St. Elizabeth Florence
- The highest rates of overdose ED visits involving prescription drugs:
  - Counties in Appalachian region
- The highest rates of overdose ED visits involving heroin:
  - Counties in Northern Kentucky, Jefferson, and Fayette counties

# Rising Costs of Criminal Justice and Public Health Care Systems (con't)

- It is estimated that the yearly economic impact of substance misuse is \$249 billion for alcohol and \$193 billion for illicit drugs. This includes costs related to crime, work productivity and healthcare.
- Prescription opioid overdose, abuse, and dependence carries high costs for American society, with an estimated total economic burden of \$78.5 billion.

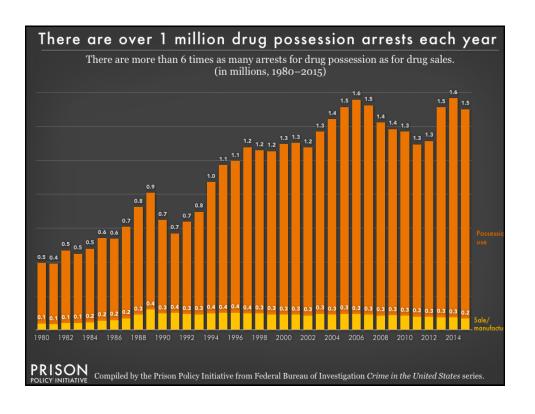


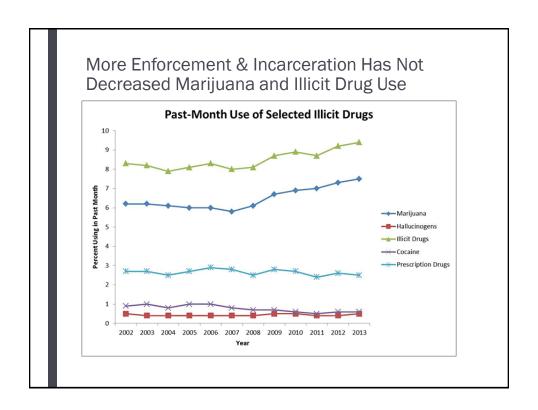


## INCREASED NUMBERS OF ADDICTED PERSONS IN JAIL/PRISON AND INCREASED DRUG USE

## Prison Statistics (2016-17)

- Inmate populations are higher than ever.
- Nearly 46.4% of federal prisoners are serving time for drug offenses as of December 2016. Approximately 20% of state prisoners are serving time for drug offenses.
- Inmate costs per day
  - KY state inmate: \$50.27
  - Louisville Metro Corrections inmate: \$76-83
  - Federal inmate: more than \$80
- The per diem cost for Recovery Kentucky long-term drug rehab is around \$32/day.

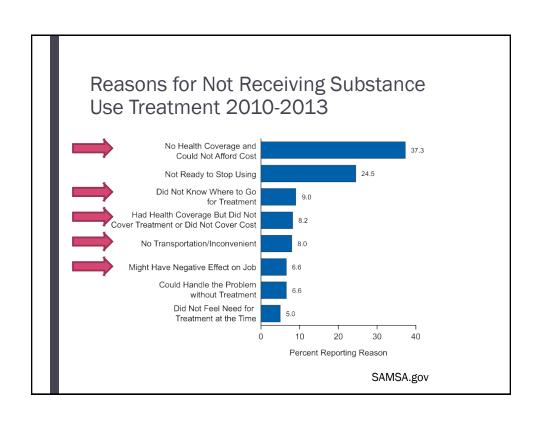






# Barriers to Treatment and Stigma of Addiction

- Stigma of addiction
- Lack of education and/or miseducation about addiction and drugs
- Financial barriers, lack of insurance, or inadequate insurance
- Lack of available services to include long-term residential options
- Transportation









# WHAT CAN WE DO DIFFERENT?

### THE BEGINNING



After a series of overdose deaths, in June 2015 the Gloucester Police Department launched the Angel Initiative, which promised that any individual walking into the police station to request help getting into treatment and recovery from opioid addiction would be immediately helped, not arrested. Individuals are also encouraged to turn over their drugs and equipment without fear of arrest.

### GLOUCESTER POLICE ANGEL INITIATIVE



During the first year and half of the program, 515 individuals with substance use disorders presented to the Gloucester Police Department for assistance, both residents of Gloucester and individuals who traveled to Gloucester to take advantage of this innovative new program. Those with opioid use disorders are treated with respect and receive immediate access to treatment with our without insurance.

## THE IMPACT

Access to Treatment
Distribution of Life-Saving Naloxone
Stigma Reduction
Crime Reduction
Cost Savings
Increase in Community Trust
Influencing public conversation and local and
national policy through relationships with
political leaders and nationwide media attention



- Adopted from the original Gloucester Police Angel Initiative.
- Jeffersontown Angel Program began in August 2016.
- Referred 51 people in some level of treatment in the first year of the program.
- In the beginning, we collaborated with a few local facilities. We are now partners with more than 40 treatment centers, local hospitals, and harm reduction organizations.
- Relationship with the Police Assisted Addiction Recovery Initiative (PAARI).



### Police Assisted Addiction Recovery Initiative (PAARI)

- PAARI is a non-profit organization whose Mission and Goals are:
  - To provide training, grants, and other resources to police departments and law enforcement agencies to establish and run police-based pre-arrest entry points to treatment.
  - To foster a dialogue around the unique position of law enforcement interventions to prevent overdose deaths, increase access to treatment, reduce crime, save money, and lead to an increase in trust from communities.
  - To educate lawmakers and influence state and national policy around opioid addiction.
  - To assist persons suffering with substance use disorders through our police network.



- PAARI raises funds to provide critical support for police based programs, like:
  - Resources, training, staffing support, and grants to police departments to Angel-type programs.
  - Connections to treatment centers that provide scholarships to those without insurance.
  - Case management and follow up support for program participants.
  - Outreach and community events to educate individuals with opioid use disorders and their families about community resources and treatment options.
  - Costs associated with studying the effectiveness of the initiatives.
- Members
  - 286 police partners in 31 states
  - 313 treatment centers in 25 states



### How does the Jeffersontown Angel Program work?

- Persons seeking help with drug addiction come to the Jeffersontown Police Department or request assistance from an officer.
- Officers and/or volunteers complete a brief assessment and call facilities for availability.
- Participants can turn in drugs and drug equipment without fear of arrest.
- Officers transport to local facilities or we use Yellow Cab. We also have arrangements for further distances.



### How does it work? (con't)

- Assist when families, friends, or addicts simply want information about the program, Casey's Law, or other services.
- Ineligibility criteria:
  - Extraditable warrants (local warrants may be redocketed based on criteria).
  - 3 or more drug-related offenses (per statute)
  - Registered sex offenders/felony sex offenders.
  - Extensive violent history.
  - Officer or volunteer fears harm from participant.
  - Adolescents (referral packet and guidance).
  - Probation/parole notification before placement.

## Alexandria ACTS Angel Program



- Addiction
- Community
- Training
- Support
- Monthly meetings:
  - Guest speakers
  - Support
  - Identify strategies for people struggling with addiction and their loved ones.

- Angel Program
- Trained Volunteers that assist the participant and/or family members with locating resources, finding treatment, offer support, etc.

# How does the Alexandria Angel Program work?



- Any person who enters the Alexandria Police Department or approaches an officer on the street and requests help with their addiction will immediately be screened by our Police Social Worker (PSW), Police Officer, or Angel volunteer.
- After life squads and/or officers are called to an overdose, the PSW and/or Angel go back to the address as quickly as possible to help the person who overdosed find treatment.
- In some cases, the person who we are looking for isn't home. When that happens, we don't give up. We go back multiple times; leave a card, leave a note, and/or leave resources.
- Once making contact with person; PSW, officer and/or Angel will call treatment facilities for availability.

### How does the Alexandria Angel Program work? (con't)



- We assist with transportation to local facilities.
- Assist families and friends with filing Casey's Law, obtaining assessments, support, attend court, and assist with finding treatment options.
- Provide families, friends, or addicts with information about treatment options, support groups, etc.
- Provide resources for family support.
- On-site training on the proper use of Naloxone.
- Dispensing of Naloxone to addicts and those who care about them.

# Police Social Worker (PSW)

- Hired in July 2016
- Over 60% of calls for service have nothing to do with law enforcement
- More of social problems
- Police-based social-service programs originated in 1970
- Officers are trained to respond and handle crisis situations, their solutions often are temporary

### **PSW**

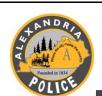
- Acts as liaisons between the police department, the community and social-service agencies
- PSW programs can:
  - Minimize the amount of time officers spend on noncriminal calls
  - Allow for a multidisciplinary approach to difficult or complicated cases
  - Provides resources
  - Provides assistance with victim cooperation, investigations and reducing recidivism rates in juvenile and domestic cases

# Common Issues Addressed by PSW

- Violent crimes domestic violence, child and elder abuse, sexual assault
- Juvenile problems runaways, delinquencies
- Traumatic incidents and deaths homicide suicide, death notification
- Family conflicts
- Alcohol and other drug-related problems
- Psychiatric illness and mental health
- Financial needs
- Homelessness
- Geriatric concerns
- Neighbor disputes







# HOW DO I START A POLICE ASSISTED RECOVERY INITIATIVE?

## Begin your own Police Assisted Recovery Initiative

- Find a champion in your agency to head the project.
- Partner with PAARI for access to materials, information, and press releases.
- Learn the landscape of addiction in your area and the barriers to treatment.
  - Collaborate with local treatment facilities, hospitals, and advocacy groups for support and guidance.
  - Develop community partners for donations, transportation help, and other barriers to treatment.
  - Develop partnerships with local judges and prosecutors for drug turn-in portion of program and warrant issues.

### Importance of Cultural Change

- Create a culture change in your police departments and city governments to reduce stigma and increase community trust.
- Special training for police employees and volunteers.

### **Get Started!**

- Reach out to other departments with similar programs for template policies and procedures.
- Design the program or combination of programs to fit community needs:
  - Departments can tailor resources, eligibility criteria, policies, and procedures.
  - Logistics and transportation based upon funding and resources.
- Privacy concerns and HIPAA.

### New legislation for Angel Programs

KRS 15.525 Referral program for substance abuse treatment.

- (1) A law enforcement agency may create a program to refer persons to treatment for substance use who voluntarily seek assistance from the law enforcement agency.
- (2) A person voluntarily seeking assistance through a program created pursuant to this section:
  - (a) Shall not be placed under arrest;
  - (b) Shall not be prosecuted for the possession of any controlled substance, paraphernalia, or other item surrendered to the law enforcement agency. Items surrendered pursuant to this paragraph shall be recorded by the law enforcement agency at the time of surrender and shall be destroyed;
  - (c) Shall be paired immediately with a volunteer mentor to assist his or her recovery; and
  - (d) Shall be immediately referred to a community mental health center, medical provider, or other entity for substance use treatment.
- (3) A person is ineligible for placement through a program established pursuant to this section if the person:
  - (a) Has an outstanding arrest warrant;
  - (b) Has been convicted of three (3) or more drug-related offenses; or
  - (c) is under the age of eighteen (18) and does not have the consent of a parent or guardian.
- (4) Programs created pursuant to this section may be called an Angel Initiative Program.

# Other Police Assisted Recovery Initiatives

- Arlington Police Outreach Program
- Colerain Ohio Township Police WeTHRIVE! Overdose Outreach
- East Bridgewater, Massachusetts EB HOPE program
- Seattle Lead Enforcement Assisted Diversion (LEAD)

### No Need to Reinvent the Wheel



- Police departments can do a lot with a little to offer an effective first response to the epidemic.
- There are many programs working to reduce drug-related crime, overdoses, and stigma.
- We must collectively provide a quick, compassionate, and effective response to this crisis.
- Law enforcement agencies must combine these initiatives with enforcement, education, and prevention strategies.



#### **Sergeant Brittney Garrett**

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