Breakout session

System-Spanning Solutions: The Power of Integrated Deflection Partnerships to Improve Health and Community Safety

Speakers

Kelly Firesheets, PsyD, VP of Strategy and Partnerships, Cordata Healthcare Innovations
Dawn Schwartz, Community Overdose Action Project Manager, Dayton and Montgomery County Public Health

System-spanning solutions: The power of integrated deflection partnerships to improve health and community safety

Dawn Schwartz, Public Health – Dayton & Montgomery County

&

Kelly Firesheets PsyD, Cordata Healthcare Innovations

Public Health - Dayton & Montgomery Recovery Outreach Team

in partnership with **Ascend Innovations** & **Cordata Healthcare Innovations**

Deflection in Ohio: A Brief History

What is Deflection?

Deflection interventions occur before an arrest or during law enforcement contact. Deflection programs generally provide a path to treatment for individuals with mental health or substance related needs with the goal of averting the need for an emergent response from law enforcement *or* health services. Programs typically involve collaboration between law enforcement, peer support specialists, recovery coaches, clinical staff, case managers and/or social workers.

National Conference of State Legislatures Report: https://documents.ncsl.org/wwwncsl/Criminal-Justice/Deflection-Diversion-f02.pdf

Have you heard of . . .

Quick Response Teams (**QRT**)

Rapid Response Emergency and Addiction Crisis Team (**RREACT**)

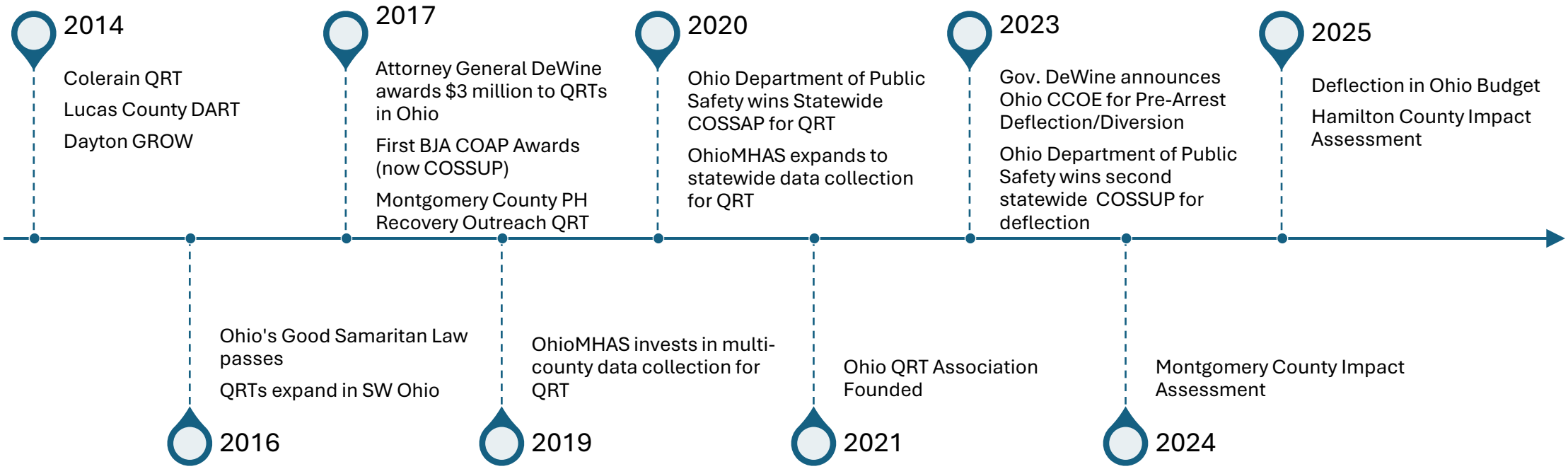
Drug Abuse Response Teams (**DART**)

Safety, Acceptance, Focus, Engagement, Resilience program (**SAFER** Station)

Post-Overdose Response Team (**PORT**)

Get Recovery Options Working (**GROW**)

Deflection in Ohio: A Timeline



Ohio: A National Leader in Deflection

- The Quick Response Team model is the most widely replicated model of deflection in the U.S.*
- Deflection in 80 of Ohio's 88 Counties
- 32 Counties actively using the statewide platform
- Annually, QRTs document more than 30,000 interactions.
- Most teams have expanded beyond overdose response
- Many teams are co-implementing and integrating other crisis response models (CIT, Handle With Care) or criminal justice initiatives (reentry, drug courts)

*Ross, J., & Taylor, B. (2022). Designed to Do Good: Key Findings on the Development and Operation of First Responder Deflection Programs. *Journal of public health management and practice : JPHMP*, *28*(Suppl 6), S295–S301. https://doi.org/10.1097/PHH.0000000000001578

The Montgomery County QRT

History & Operations

History of COAT & Recovery Services Outreach Team

- **The Community Overdose Action Team (COAT)** and **Montgomery County, Ohio's QRT Outreach Team** was formed in 2016 and 2017 respectively, as a result of Public Health's recognition of the need for early intervention and education in response to the opioid epidemic
  - COAT – What it is and what we do
  - Public Health's Recovery Outreach Team – The Stuff Legends Are Made Of!

Goals of the Outreach Team

- To reduce opioid overdose deaths and address substance use disorder of ALL types
- Help those with SUD to find their own path of recovery and educate to increase public knowledge and reduce stigma
- Increase engagement in treatment and other needed services and reduce the over-usage and impact on other community systems, such as criminal justice and healthcare

Services Provided by Outreach

- Coordination of services throughout Montgomery County, Ohio (and beyond) for individuals in need of SUD treatment by embedding in local courts and area hospital ED's and working with local jails
- Silo-busting – interacting with other organizations in the community to form pertinent and effective partnerships to further treatment and recovery for community members
- Providing education, harm reduction and de-stigmatization at every opportunity

Enhancing Data Collection

Cordata and Ascend

QRT’s Innovative Partnerships

- QRT uses the Cordata platform to engage people to provide peer support and treatment referrals when those individuals are referred to them following Substance Use Disorder (SUD) incidents
- Ascend Innovations, the QRT team's data and technology partner, has access to numerous healthcare and law enforcement community datasets, providing the opportunity to connect data across the system of care

Benefit of Community Datasets

Hospital Crisis Notifications

- Access to real-time healthcare datasets has allowed for automated crisis notifications to the QRT via Cordata when there is an SUD related emergency at a local hospital
  - Ascend integrates hospital encounter data with Cordata platform
  - QRT provides outreach to individuals in crisis and documents outcomes in Cordata platform

Benefit of Community Datasets

Retrospective Study to Measure Impact of QRT

- Access to community datasets and outreach data allowed Ascend to conduct a comprehensive statistical analysis of the effects of QRT intervention on system interactions across the continuum of care

QRT’s Impact

Montgomery County QRT Data

- Cordata and Supplementary Data Collection
- 3,000 referrals to Montgomery County QRT between July 2018 & March 2022

Referred, no contact	50%	1,500 people
Contacted	50%	1,550 people
1 contact		1,000
2 contacts		300
3 + contacts		250

The Headline
DEFLECTION MAKES A DIFFERENCE!

- Reduced Overdose Deaths
- Reduced overall system involvement
- Reduced overdose encounters with police
- Reduced hospital encounters
- Reduced Emergency Department visits
- Reduced non-drug related arrests
- Reduced new charges for violent crime

Dose Effect

More Contact with QRT = Better Outcomes

One contact with the QRT makes a difference

BUT

People who interacted with the QRT 3+ times had more improvement than those who only had one interaction.

Healthcare Cost Savings: Why Does It Matter?

- Criminal Justice cost savings are hard to realize. When we keep someone out of jail or prison, we still pay for jails/prisons.
- But healthcare is a fee-for-service business, so keeping someone out of the hospital has real cost savings.
- Most QRT clients are insured through public funds:
  - Medicaid: 60%
  - Medicare: 15%
- **Demonstrating cost savings makes this a public investment**

Cost Savings

Reduced Emergency Department Billing

QRT Engagement	Avg. Reduction in ER Billing
1 Contact with QRT	- $9,000
2 Contacts with QRT	-$21,600
3+ Contacts with QRT	-$22,000

1000 people = $9 million reduced billing

300 people = $6.5 million reduced billing

250 people = $5.5 million reduced billing

In this sample, the QRT reduced Emergency Room billing by $21 million

Cost Savings:
Reduced Hospital Billing

QRT Engagement	Avg. Reduction in Hospital Billin
Comparison (Referred, but no contact)	- $2,000
1 Contact with QRT	- $17,000
2 Contacts with QRT	- $31,000
3 + Contacts with QRT	- $42,000

1500 people = $3 million reduced billing

1000 people = $17 million reduced billing

300 people = $9.3 million reduced billing

250 people = $10.5 million reduced billing

Doing nothing reduced billing by $3 million
QRT engagement reduced billing by $36.8 million

What's Next?

- Montgomery County SafteyNet Portal/Familiar Faces
- Integrating Mobile Crisis Response and Overdose Response
- Replicating Impact Assessment

Health Policy Institute of Ohio

OHIO HEALTH POLICY SUMMIT 2025

We value your opinion

Please fill out our evaluation form to share your thoughts on this breakout session

hpio
health policy institute of ohio