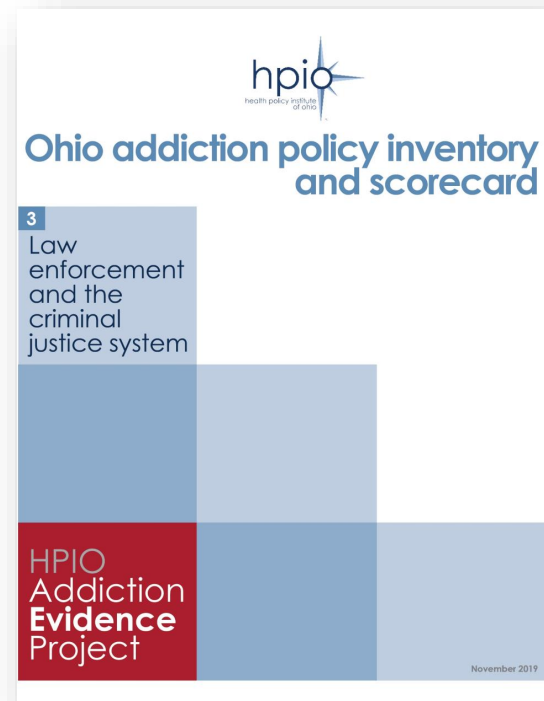


# Share your thoughts on twitter throughout the presentation



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- Follow @AmyStevensHPIO and @HaileyAkahHPIO



Ohio's policy response to addiction:

# Law enforcement and the criminal justice system

Feb. 26, 2020

What is the purpose of  
**law enforcement and  
the criminal justice  
system?**

What is the purpose of  
**the behavioral health  
system?**

What happens when  
**these two worlds  
collide?**

# Behavioral health system

- Prevent addiction and promote mental health
- Treat addiction and mental illness
- Support ongoing recovery

# Law enforcement and the criminal justice system

- Protect public safety and deter crime
- Reduce drug supply
- Reduce recidivism
- Provide justice for victims
- *Punish lawbreakers*
- *Rehabilitate offenders*

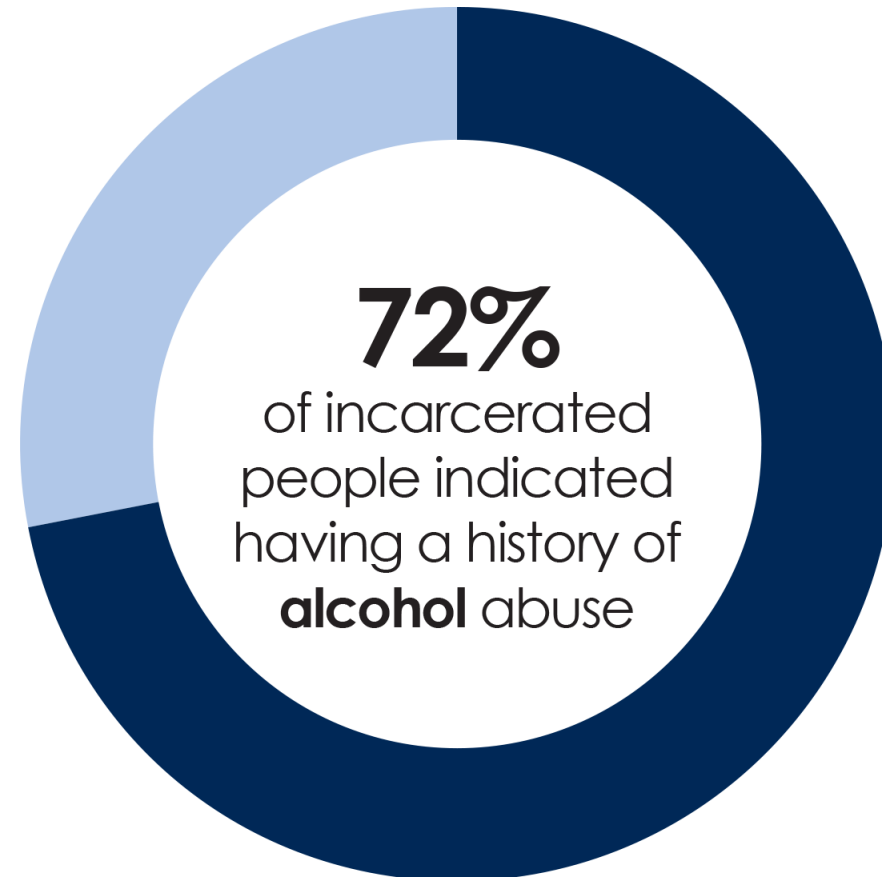
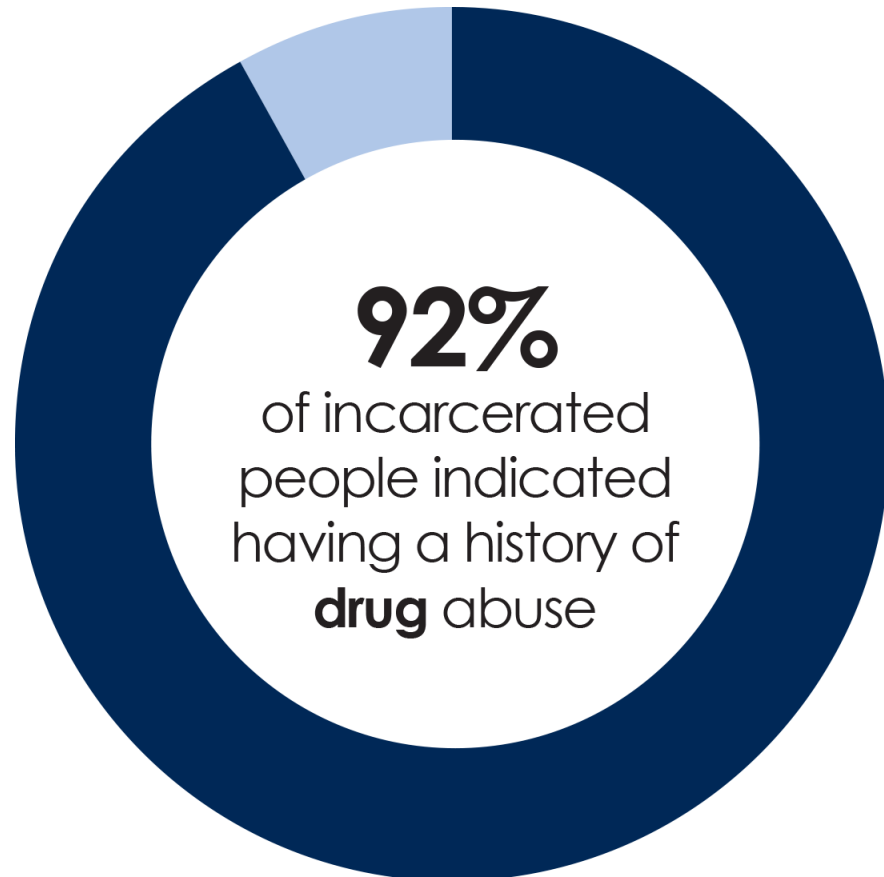
- 
- **Protect public safety and deter crime**
  - **Reduce drug supply**
  - **Reduce recidivism**
  - **Provide justice for victims**
  - ***Punish lawbreakers***
  - ***Rehabilitate offenders***

- **Prevent addiction and promote mental health**
- **Treat addiction and mental illness**
- **Support ongoing recovery**



# Drug and alcohol use among incarcerated people in Ohio

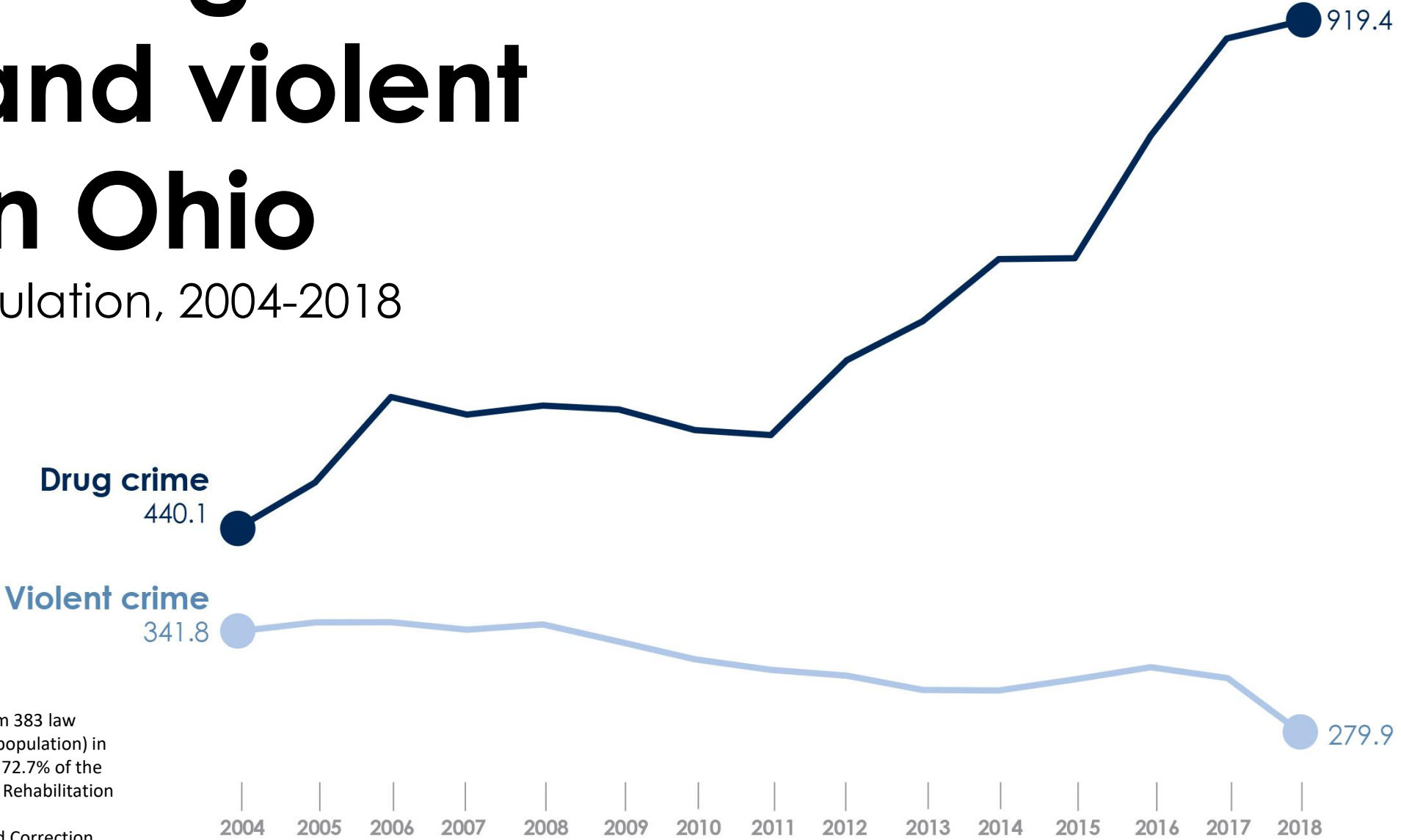
2015



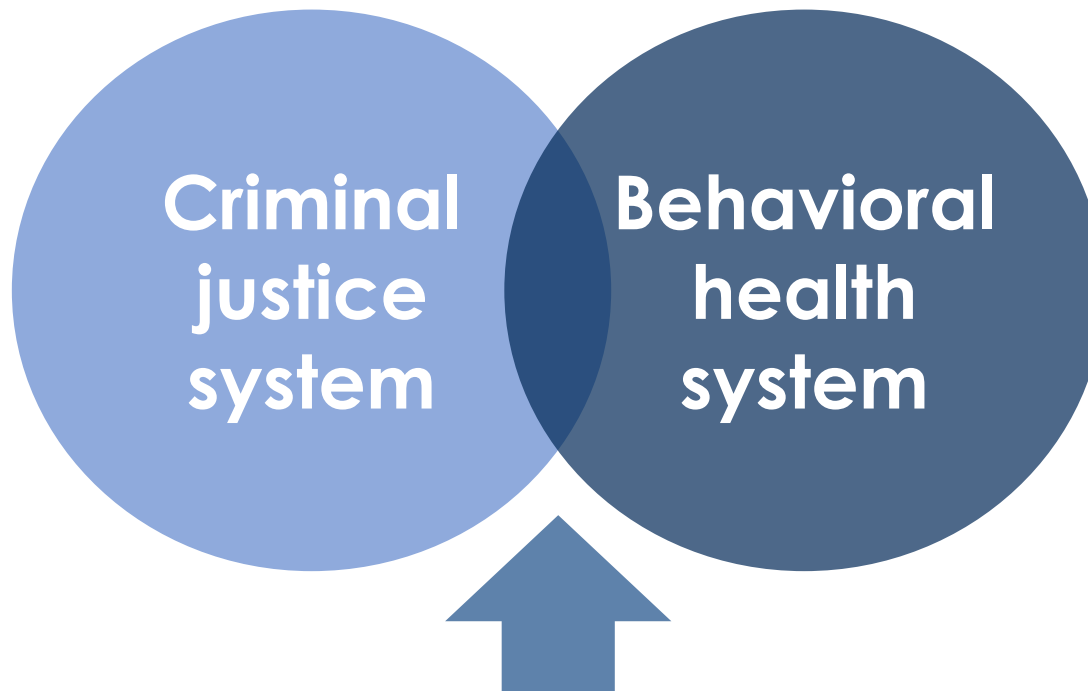
**Source:** 2015 Intake Study, Ohio Department of Rehabilitation and Correction, 2016

# Rate of drug crime and violent crime in Ohio

per 100,000 population, 2004-2018

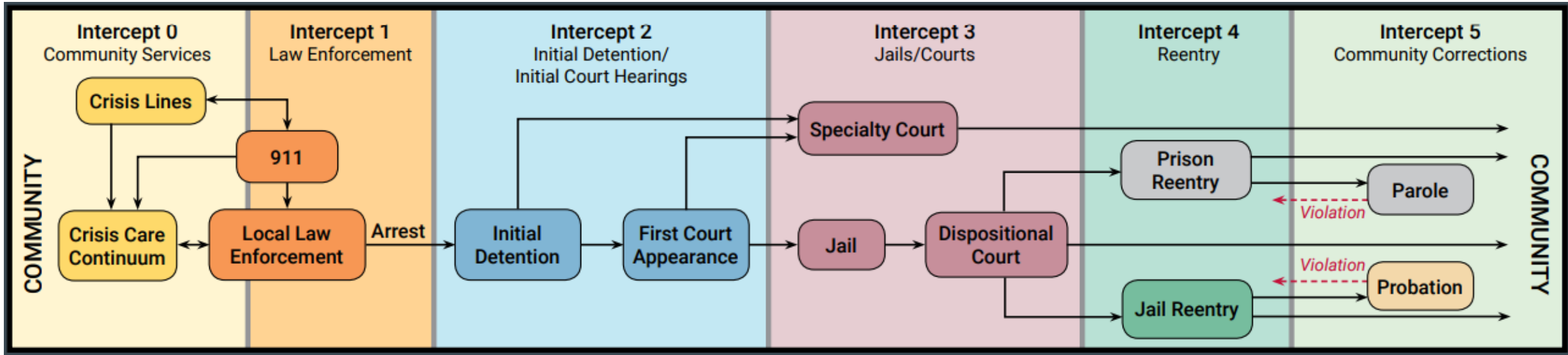


**Note:** Participation in OIBRS has increased from 383 law enforcement agencies (covering 64.7% of the population) in 2004 to 539 agencies (covering approximately 72.7% of the Ohio population) in 2014. Ohio Department of Rehabilitation and Correction, 2016.  
**Source:** Ohio Department of Rehabilitation and Correction, 2019



- Reduce overdose deaths
- De-escalate crises
- Reduce recidivism
- Increase recovery
- Treat substance use disorder in prison, jail and community corrections settings
- *Reduce the number of people with substance use disorder in prison or jail*
- *Punish and deter drug use*

# Sequential Intercept Model



Source: <https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf>

- What is the purpose of law enforcement and the criminal justice system?
- What is the purpose of the behavioral health system?
- What happens when these two worlds collide?

- What is the purpose of law enforcement and the criminal justice system?
- What is the purpose of the behavioral health system?
- What happens when these two worlds collide?
- **How can we improve outcomes related to addiction, public safety, criminal justice and equity?**

# Policy scorecard overview

- Context
- Purpose and process
- Key findings
- What you can do

# Today

- Sentencing and bail reform
- Specialized dockets
- Addiction treatment in jails



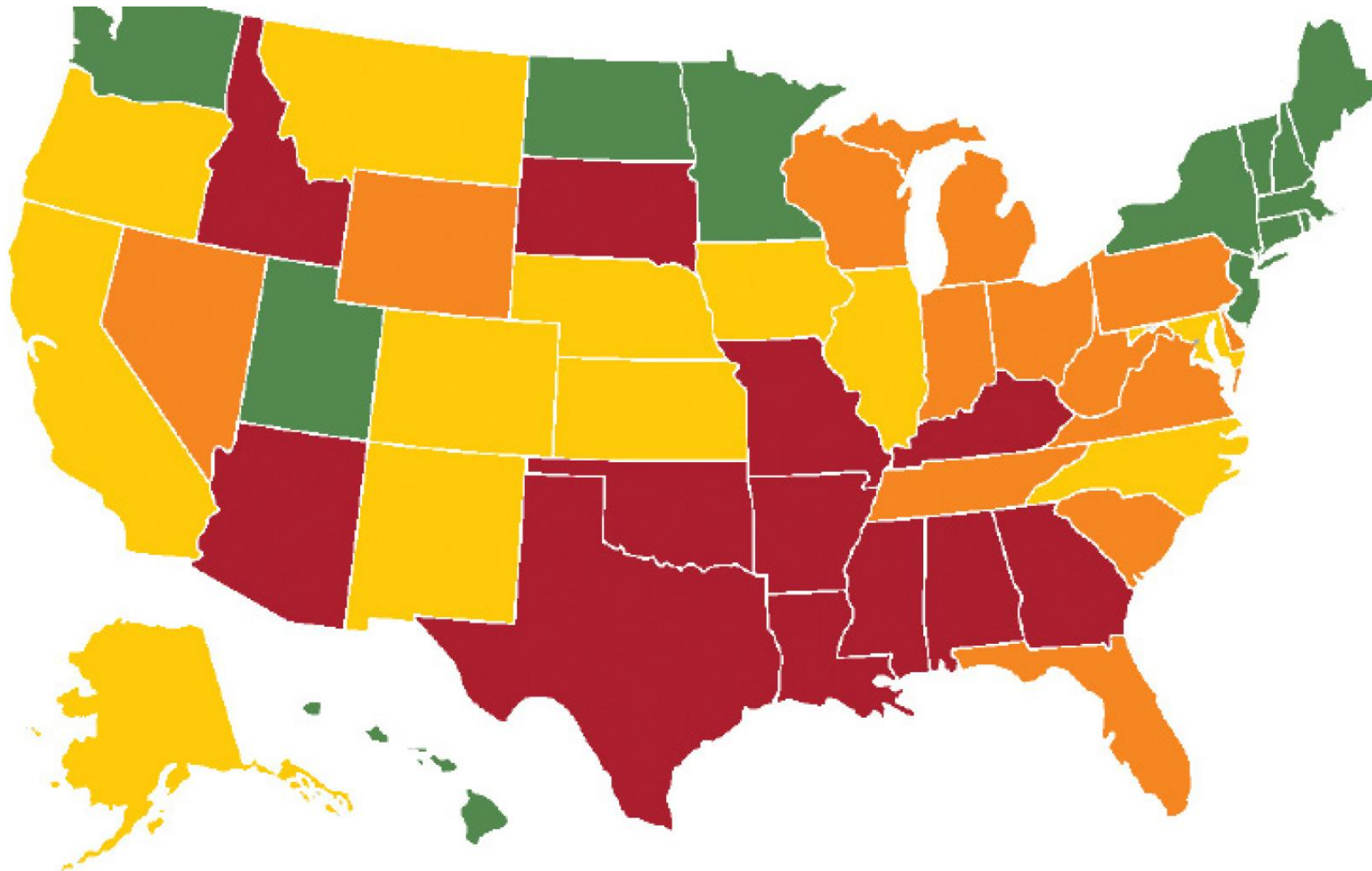
# Context: Ohio policy challenges

# Context: Challenges in Ohio's policy landscape

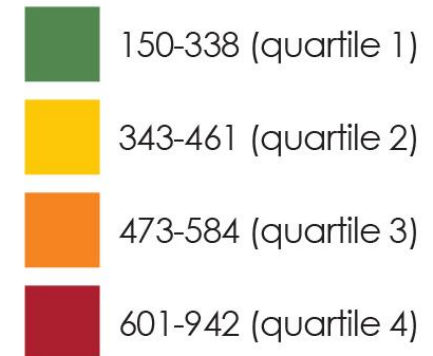
- Incarceration
- Inequity
- Data gaps

# Adult imprisonment rates in state prisons

per 100,000 population, 2017



**Adult imprisonment rate**  
(per 100,000)



**Note:** Incarceration rate includes incarceration in state prisons only. Federal prisons and local jails are not included.

**Source:** National Prisoner Statistics, Bureau of Justice Statistics

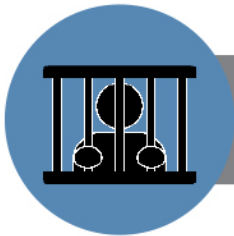
# University and incarceration costs

Ohio, 2019



Average in-state tuition plus room and board at public, four-year Ohio universities

**\$21,118**  
per year



State prison cost for incarceration per inmate (\$75 per day)

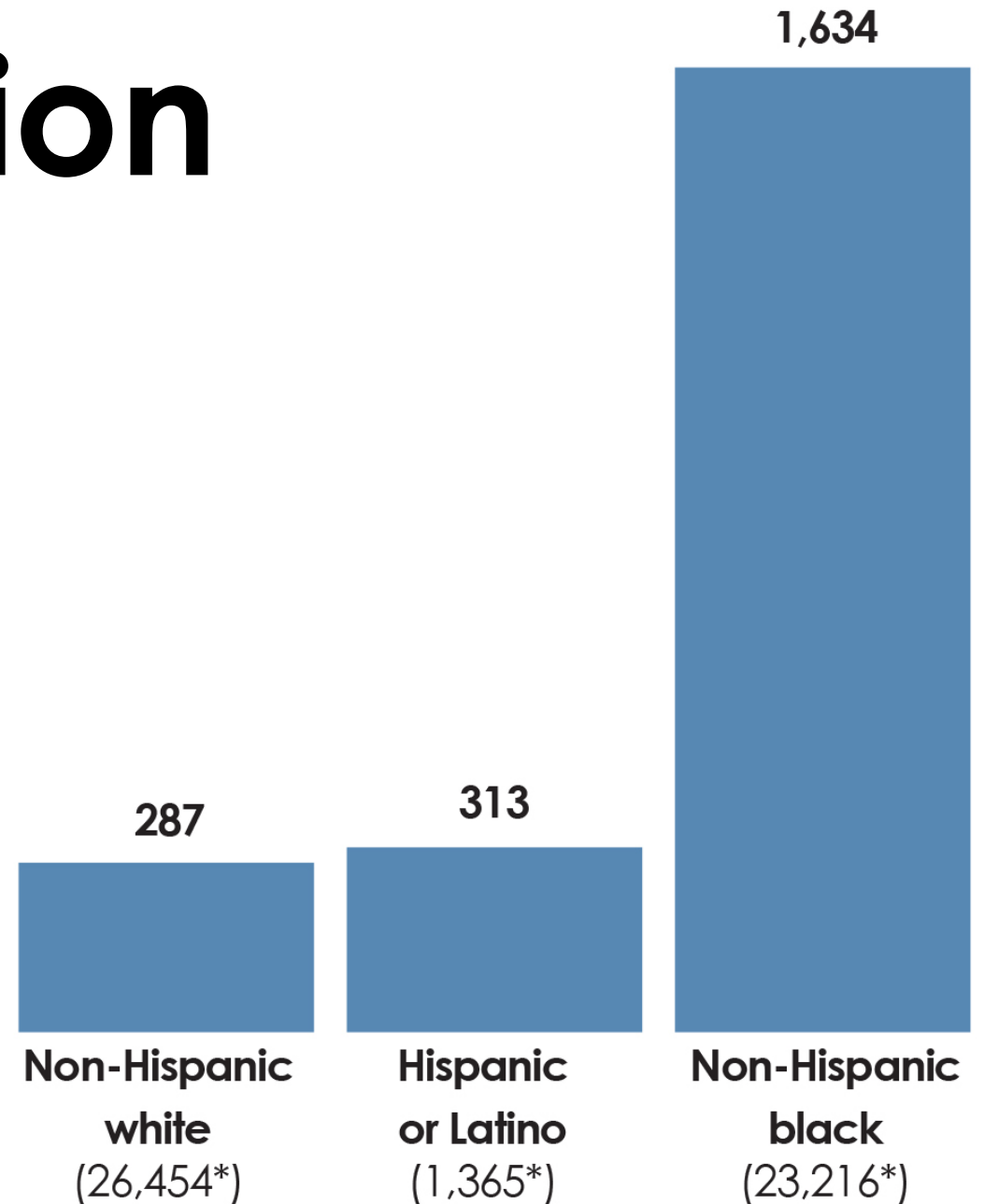
**\$27,375**  
per year

**Incarceration source:** Ohio Department of Rehabilitation and Correction, 2019

**University source:** HPIO analysis of College Tuition Compare, 2019

# Ohio incarceration rate

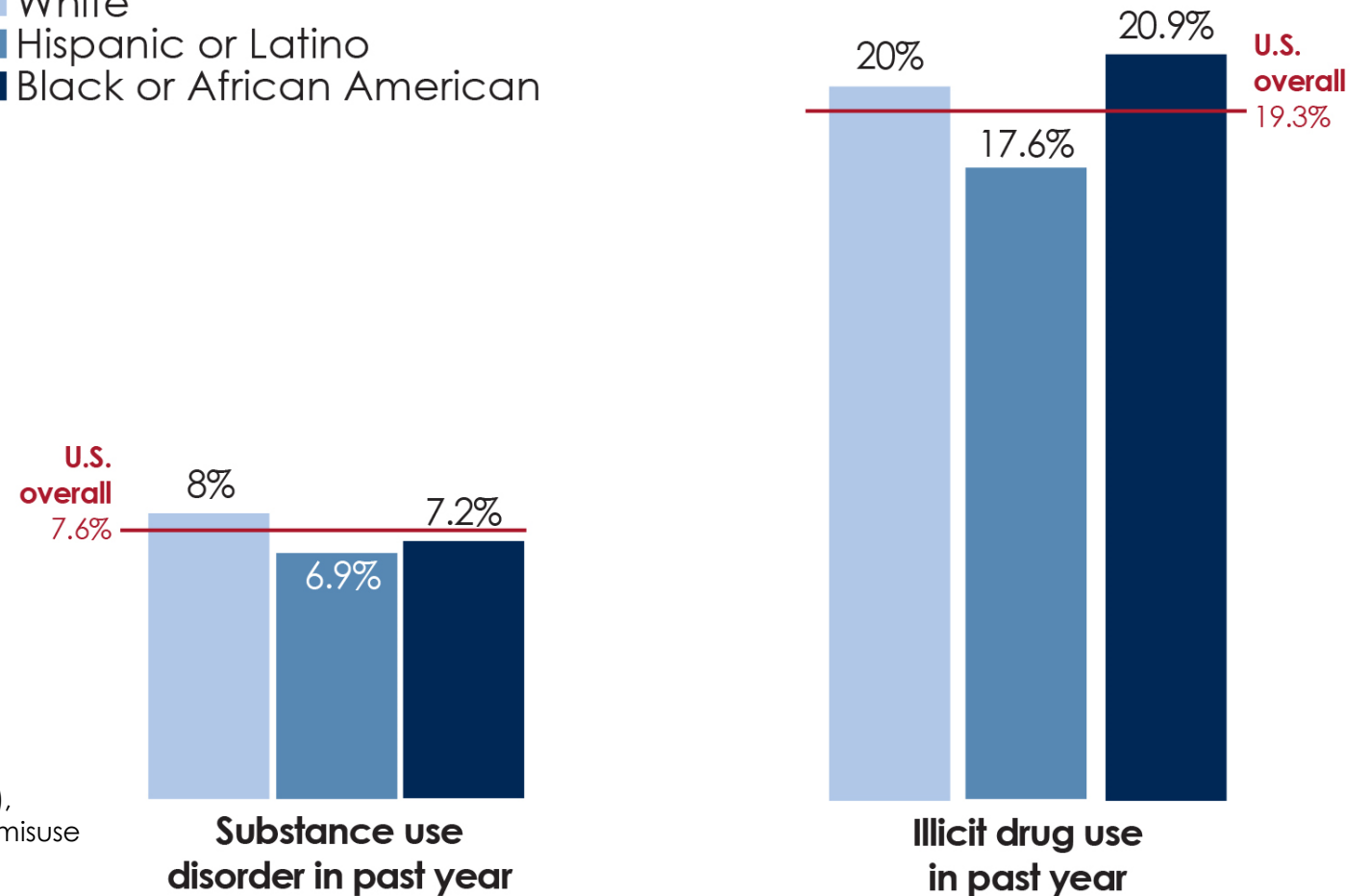
per 100,000 population, by race, 2017



\* Number of people incarcerated  
Source: HPIO analysis of data from the Bureau of Justice Statistics and the U.S. Census Bureau, Population Division

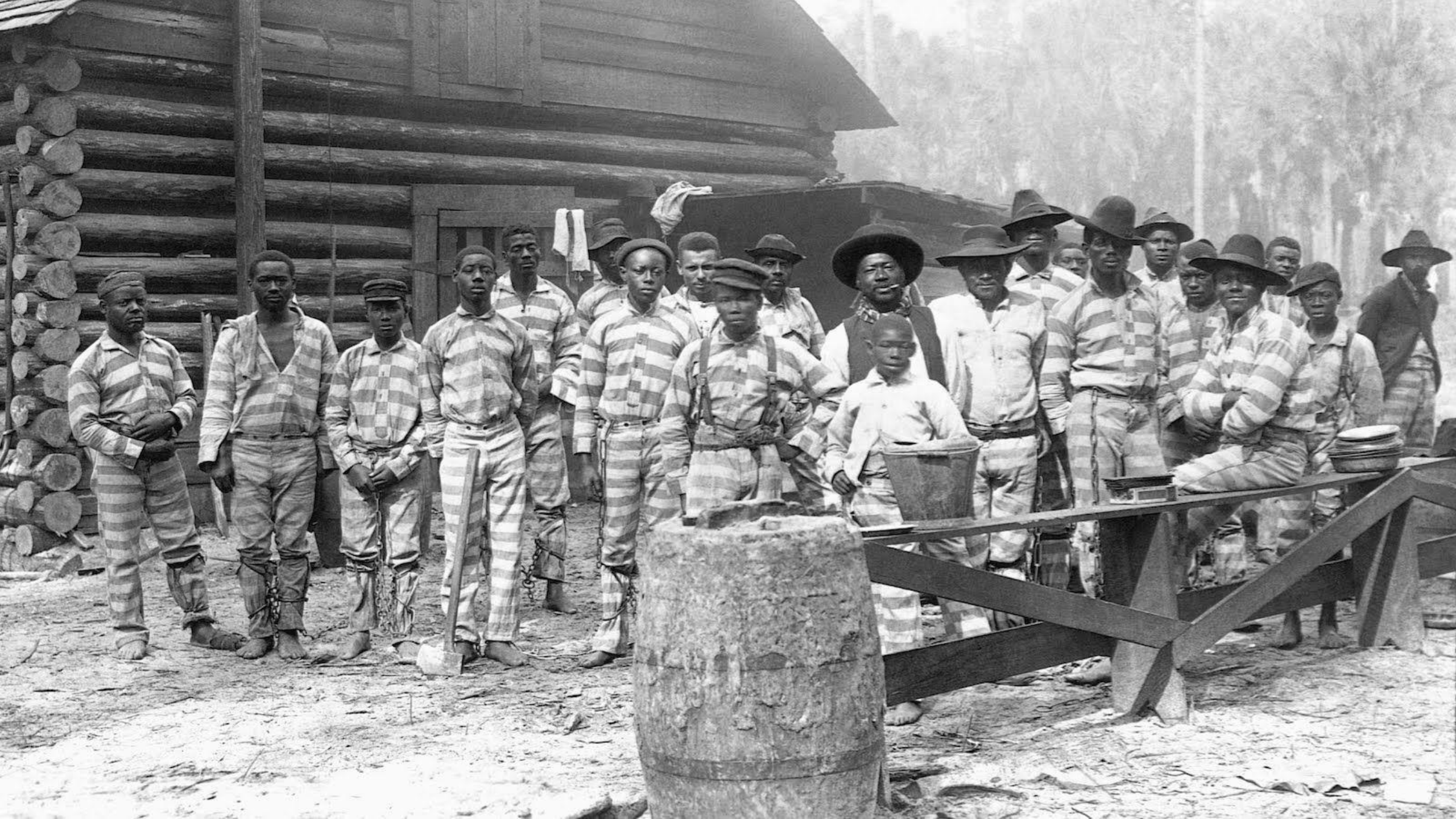
# U.S. substance use disorder and illicit drug use in the past year

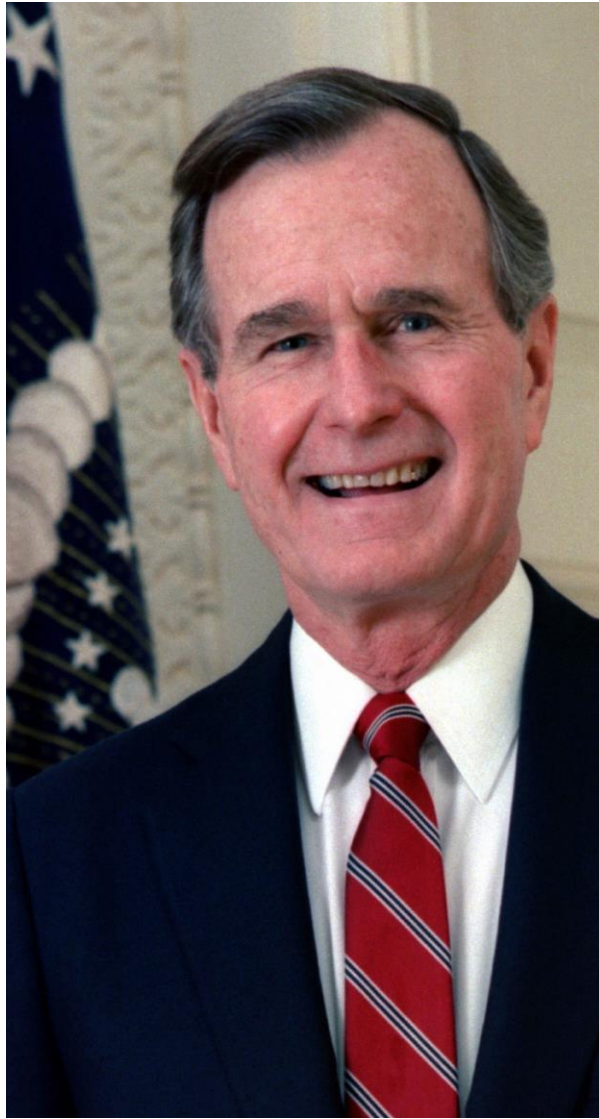
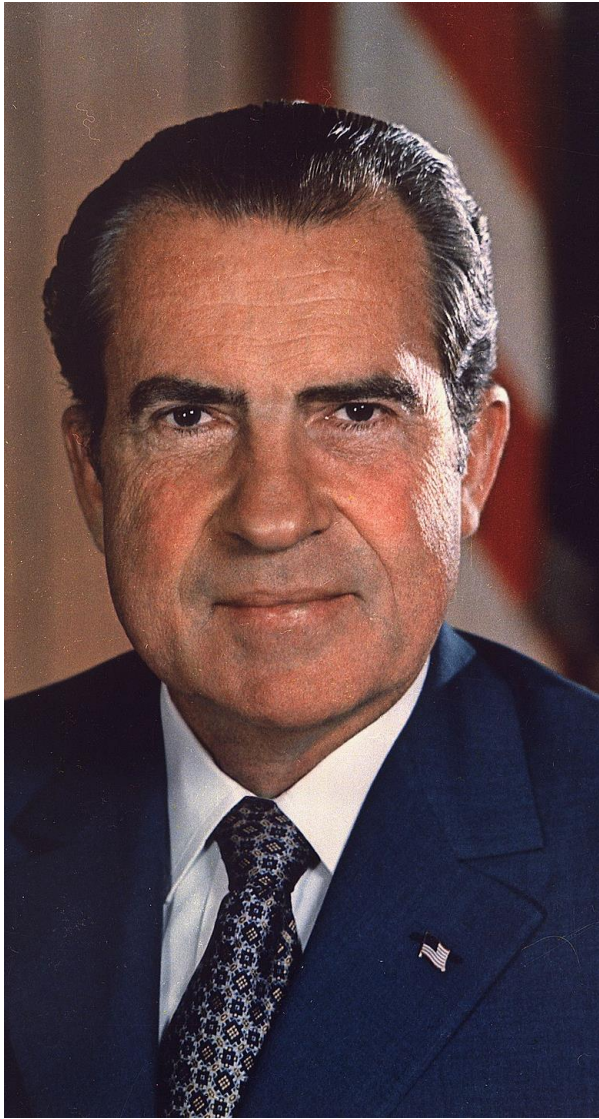
age 18 and older, by race, 2017



**Note:** Illicit drug use includes use of marijuana, cocaine (including crack), heroin, hallucinogens, inhalants, and methamphetamine, as well as the misuse of prescription pain relievers, tranquilizers, stimulants and sedatives

**Source:** National Survey on Drug Use and Health, 2017







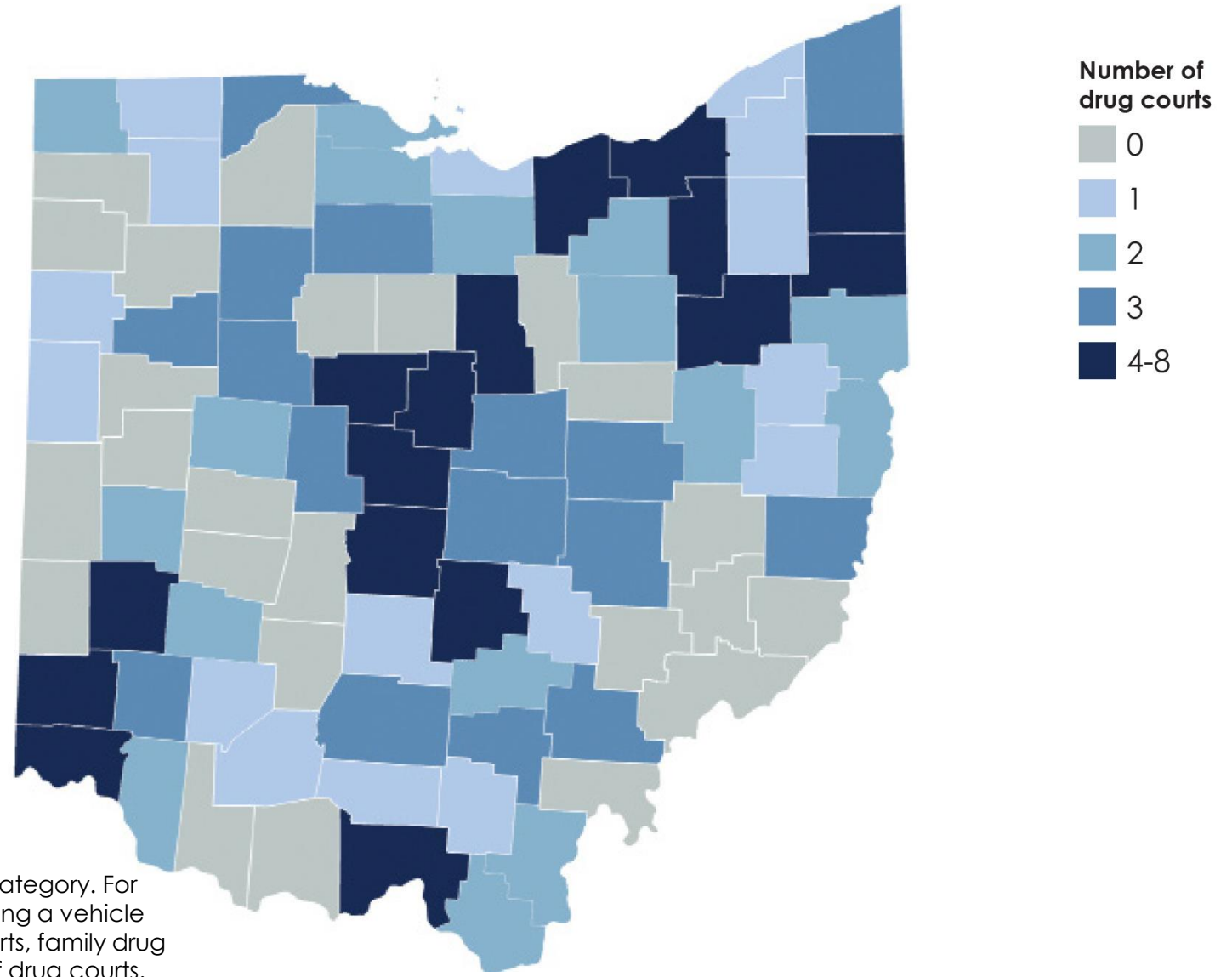
# Data gaps

Lack of:

- Standardized data
- Reporting requirements
- Consistent definitions
- Disaggregated data
- Evaluation or outcome data

# Drug courts<sup>\*</sup> in Ohio

October 2019



\*There are several types of specialized dockets included in the drug court category. For example, adult and juvenile drug courts, human trafficking dockets, operating a vehicle under the influence (OVI) courts, substance abuse mental illness (SAMH) courts, family drug courts, and veteran's treatment courts all fall under the national umbrella of drug courts.

**Source:** Supreme Court of Ohio

# Scorecard purpose and process



# Ohio addiction policy inventory and scorecard

3

Law  
enforcement  
and the  
criminal  
justice system

HPIO  
Addiction  
**Evidence**  
Project

November 2019

# Addiction overview and project description

### Summary

Addiction is a complex problem at the root of many of Ohio's greatest health challenges, including drug overdose deaths. Ohio policymakers have responded to the addiction crisis with many policy changes, primarily focusing on opiate addiction.

HPIO is launching the Addiction Evidence Project to provide policymakers and other stakeholders with information needed to evaluate Ohio's policy response to the opiate crisis, and accelerate and continually improve strategies to address substance use disorders in a comprehensive, effective and efficient way. This policy brief sets the foundation for the project by describing the basics of addiction and a framework for a comprehensive policy response.

HPIO plans to post three types of tools on the HPIO Addiction Evidence Project website:

**Evidence resource pages**  
Hubs for clinical standards and guidelines, expert consensus statements and recommendations, model policies and evidence registries

**Policy inventories**  
Lists of Ohio legislation, regulations, funding allocation amounts, practice guidelines, state agency initiatives and legislative initiatives

**Policy scorecards**  
Analysis of strengths and gaps in Ohio's policy response to addiction

This project will address addiction in a comprehensive way that takes into consideration policy changes in the following areas (see figure 6):

Prevention	Treatment	Recovery
Harm reduction	Overdose reversal	Surveillance and evaluation
Children services	Law enforcement	Criminal justice reform

### Addiction and health

Addiction, also known as substance use disorder, is a chronic, relapsing brain disease characterized by compulsive drug seeking and use, despite harmful consequences. Addiction is influenced by genetic, behavioral and environmental factors, and can negatively affect physical, mental, social and spiritual health and wellbeing.<sup>2</sup>

Addiction often starts with occasional use of substances such as alcohol, tobacco, marijuana or prescription opioids, but then progresses to more problematic and frequent use, including:

- Craving and frequent drug seeking
- Increasing tolerance (higher dose needed to produce same effect)

- Continuing to use, even when it causes problems with relationships, employment, parenting, etc.
- Wanting to cut down or stop using, but having difficulty or not being able to abstain<sup>3</sup>

Addiction is at the root of many of Ohio's greatest health and healthcare spending challenges. The HPIO 2017 Health Value Dashboard found that Ohio ranked in the bottom quartile of states for drug overdose deaths, adult smoking and children exposed to secondhand smoke. Addictions to opiates (including prescription opioids, heroin and fentanyl) and nicotine are direct contributors to these challenges.

# Ohio addiction policy inventory and scorecard



1. Prevention, treatment and recovery

HPIO  
Addiction  
Evidence  
Project

# Ohio addiction policy inventory and scorecard



2. Overdose reversal and other forms of harm reduction

HPIO  
Addiction  
Evidence  
Project

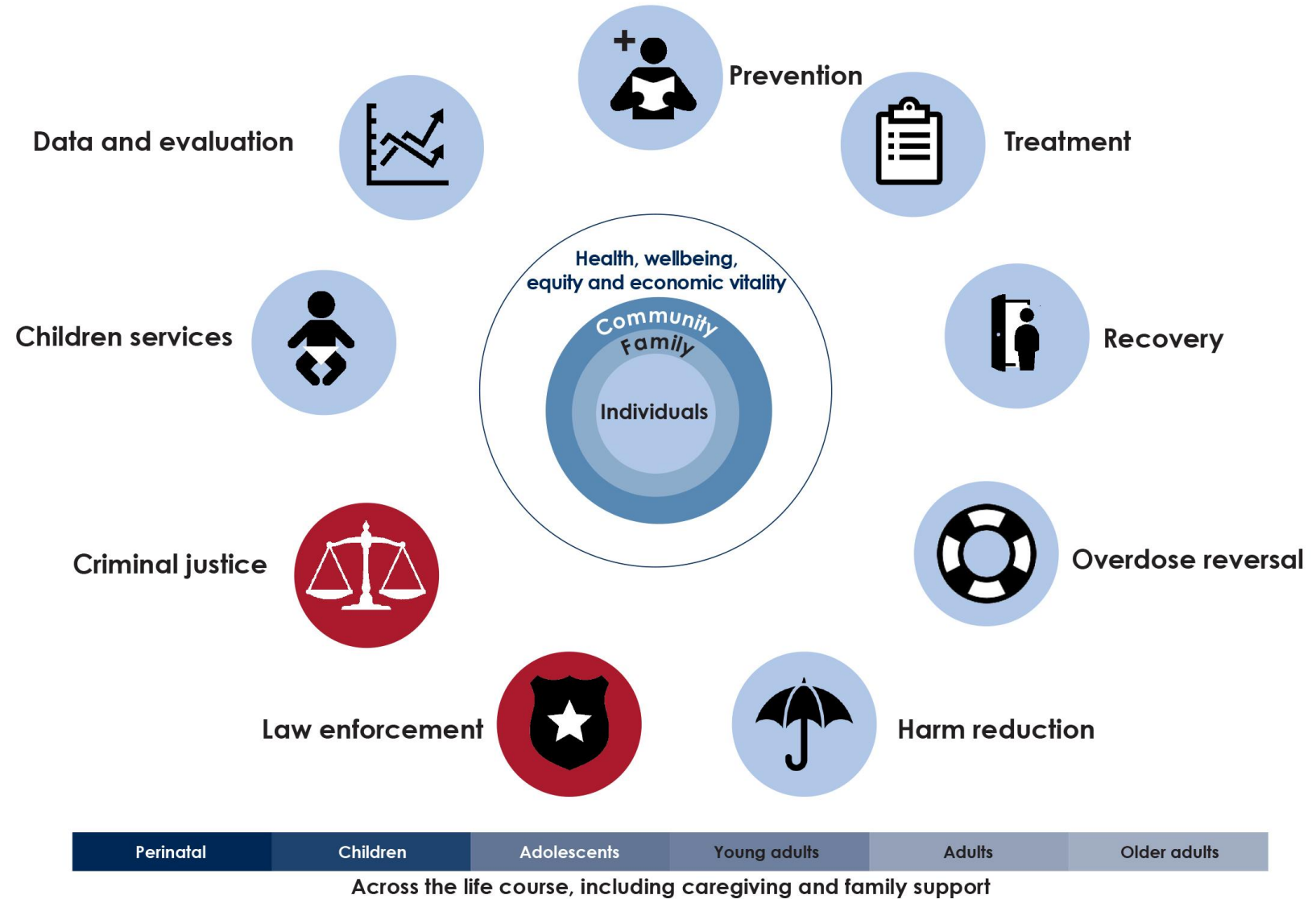
# Ohio addiction policy inventory and scorecard



3. Law enforcement and the criminal justice system

HPIO  
Addiction  
Evidence  
Project

# Key elements of a comprehensive policy response to addiction



**Source:** Health Policy Institute of Ohio adapted from Addiction Policy Forum (2017)

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## Evidence resource pages

Hubs for:

- Clinical standards and guidelines
- Expert consensus statements and recommendations
- Model policies
- Evidence registries

## Policy inventories

Lists of Ohio:

- Legislation
- Rules and regulations
- New or expanded state agency initiatives and programs

## Policy scorecards

Analysis of:

- Strengths
- Gaps
- Opportunities for improvement

# Summary scorecard rating

Extent to which Ohio policies and programs align with research evidence and reach Ohioans in need

Topic	Subtopic (SIM intercept)	Rating
Law enforcement	Community services (intercept 0)	Weak
	Law enforcement crisis de-escalation (intercept 1)	Moderate
Criminal justice system	Initial detention and initial court hearings (intercept 2)	Weak
	Courts (intercept 3)	Moderate
	Prisons (intercept 3)	Moderate
	Jails (intercept 3)	Weak
	Reentry (intercept 4)	Strong
	Community corrections (intercept 5)	Weak

**Note:** Rating based on evidence alignment and implementation reach



# Key findings

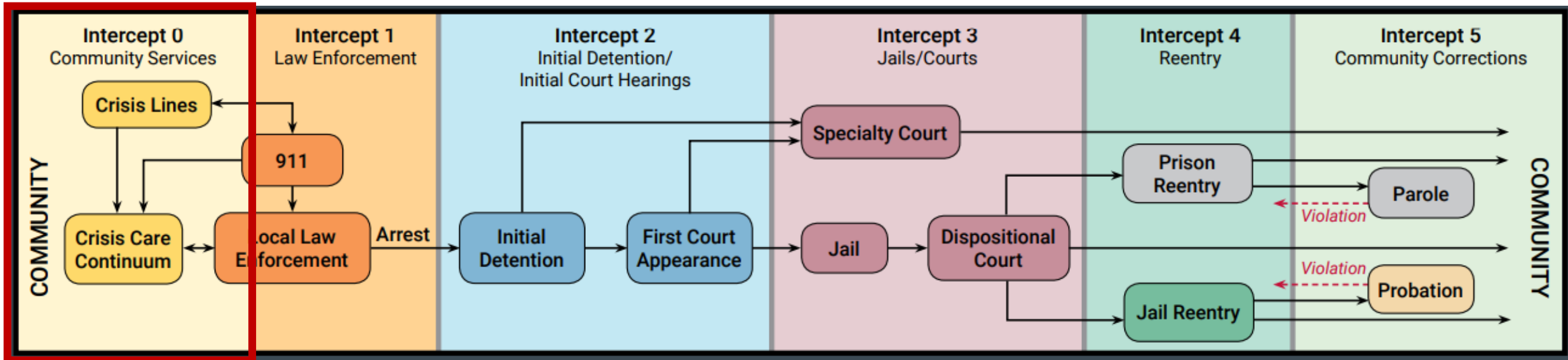
# What can state policymakers do to improve addiction and criminal justice outcomes?

- Expand law enforcement community services that address addiction
- Expand pretrial diversion and reform bail
- Increase evidence-based addiction treatment in prisons and jails



**Expand law  
enforcement  
community  
services for people  
with addiction**

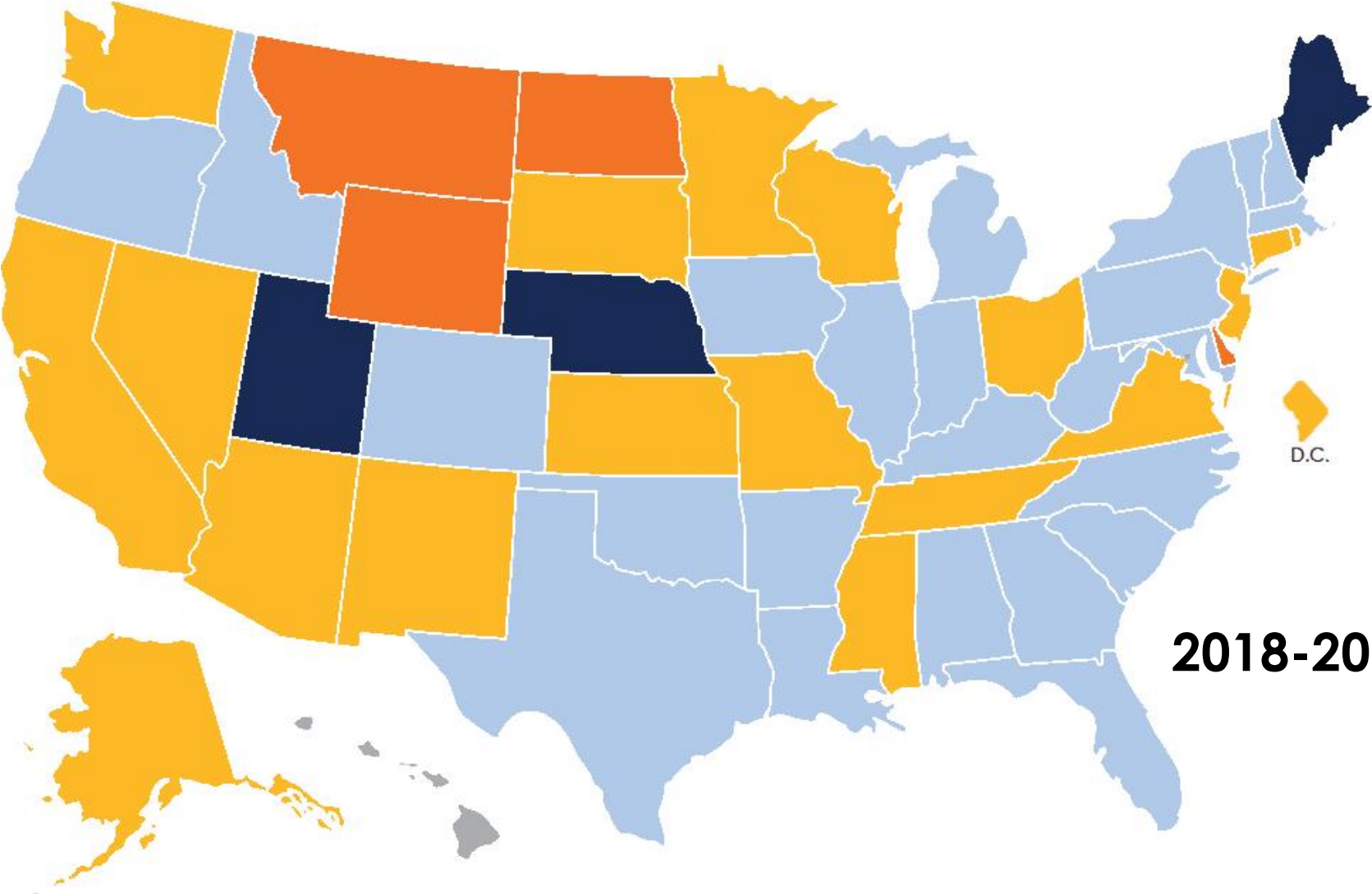
# Sequential Intercept Model



Source: <https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf>

# Percent change in number of drug overdose deaths

12-month period ending in June 2018 to 12-month period ending in June 2019



2018-2019

**Note:** 2018 data is based on provisional counts, which may not include all deaths that occurred during a given time period. Numbers are subject to change.

**Source:** National Center for Health Statistics, Vital Statistics Rapid Release, Provisional Drug Overdose Counts, as of Feb. 19, 2020

# Overdose Detection Mapping Application Program (ODMAP)



# Quick Response Teams (QRTs)/Drug Abuse Response Teams (DARTs)



# Law enforcement community services



## Strengths

- Many counties are using ODMAP to respond to overdose spikes
- Some QRTs/DARTs are established



# Law enforcement community services



## Gaps

- Reach of ODMAP and QRT/DART is unknown
- No required addiction training for officers

# Data gap

# Ohio Incident Based Reporting System



# Opportunities for improvement



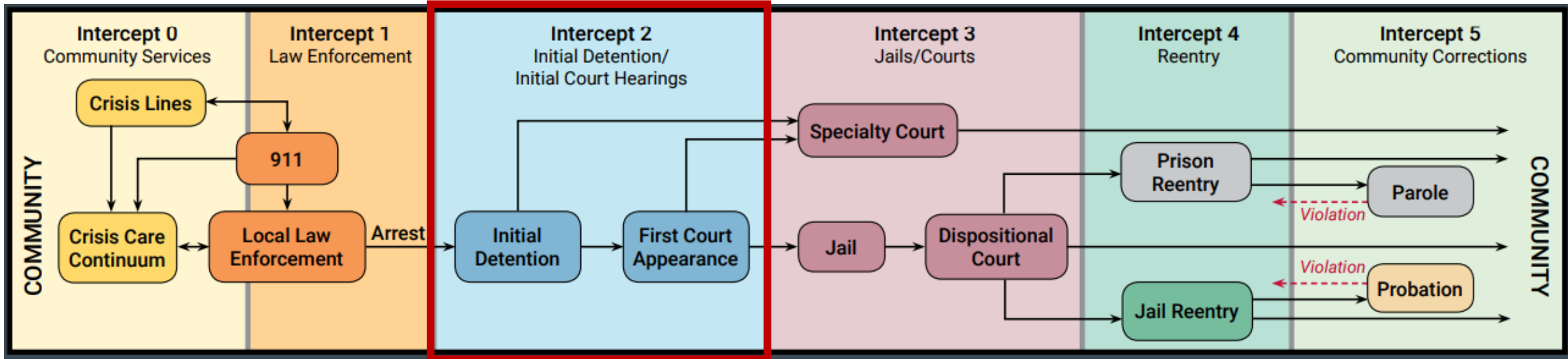
## Law enforcement community services

- 1. Expand ODMAP.** All first responders and public health agencies can utilize ODMAP to mobilize more effective responses to overdose spikes
- 2. Evaluate QRT/DART.** Assess how many teams exist across the state and continually improve the model
- 3. OIBRS reporting.** Require and providing funding for all law enforcement agencies to report crime data to OIBRS.



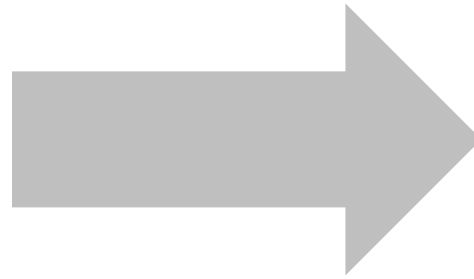
# Expand pretrial diversion and reform the bail system

# Sequential Intercept Model



Source: <https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf>

# Pretrial diversion



Icon made by Freepik from [www.flaticon.com](http://www.flaticon.com)

# Methods of pretrial diversion

- **Pretrial diversion** (administered by prosecutors)
- **Intervention in lieu of conviction** (administered by courts)
- **Targeted Community Alternatives to Prison (T-CAP)** program

Data gap:

# Court data on pretrial diversion





# Ohio's bail system





# Pretrial diversion and bail reform



## Strengths

- Several pretrial diversion methods exist for offenders who commit crimes related to addiction
- Jails are required to screen inmates for “use of alcohol and drugs” upon arrival

# Pretrial diversion and bail reform



## Gaps

- Pretrial diversion is not available to all Ohioans who would benefit from it
- Ohio utilizes a money bail system, which is not an evidence-based tool for pretrial release and detainment decisions

# Opportunities for improvement



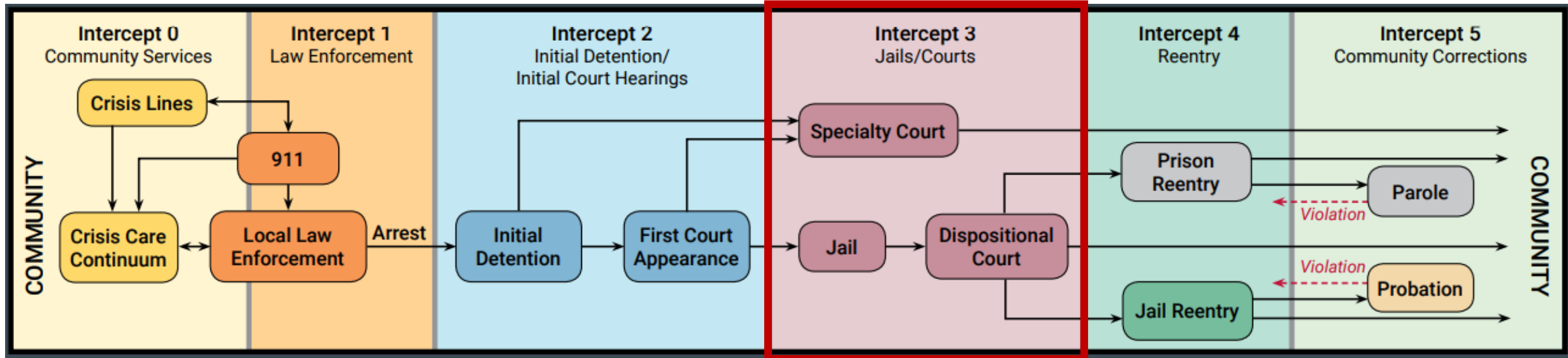
## Law enforcement community services

- 1. Expand T-CAP.** Encourage all counties to participate in the program and reduce the number of conditions that make offenders ineligible
- 2. Collect pretrial diversion data.** Implement a statewide data system that tracks how often pretrial diversion and intervention in lieu of conviction are used
- 3. Reform the money bail system** and implement a culturally competent risk assessment tool for pretrial release and detainment decisions



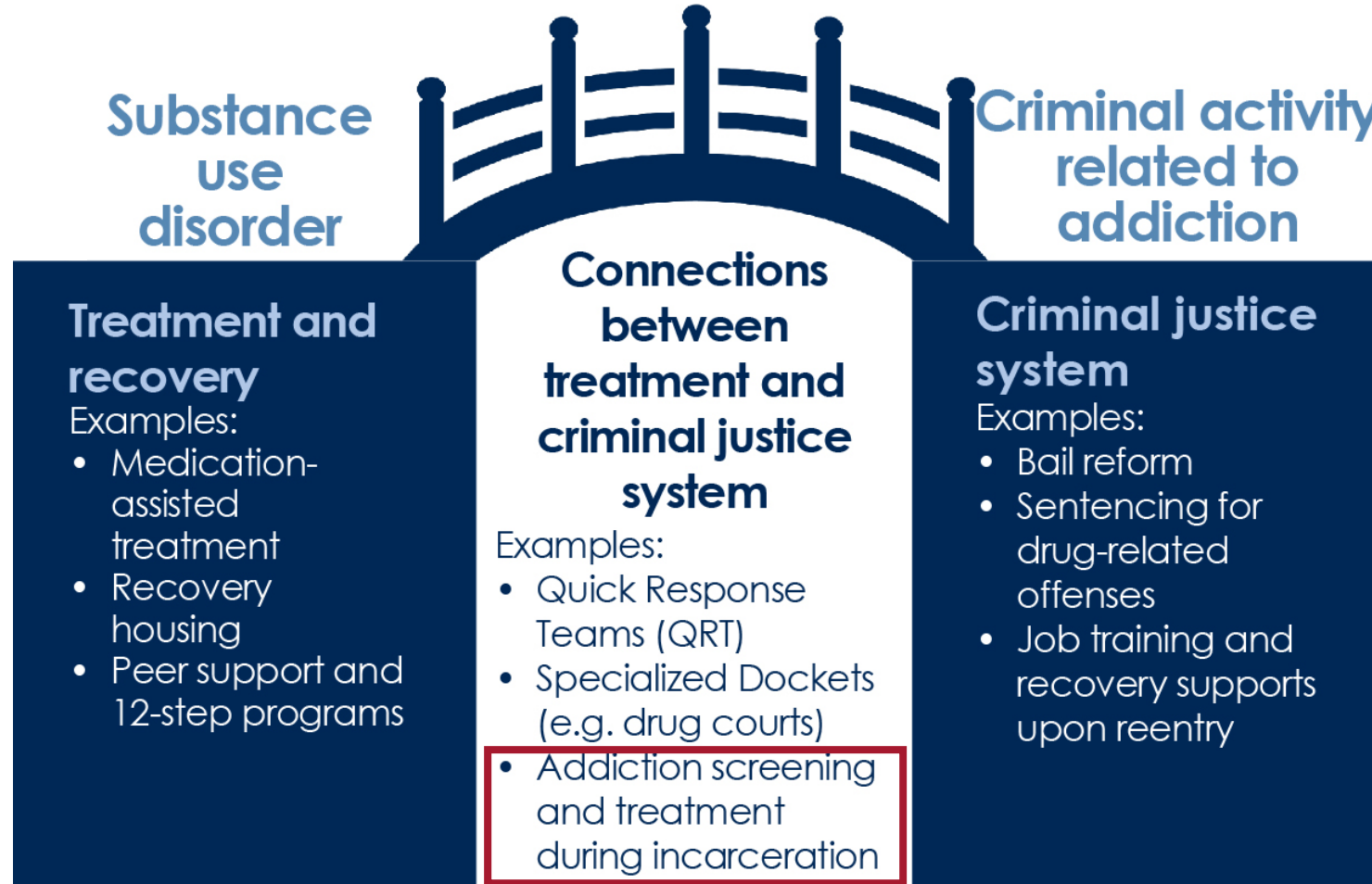
# Improve addiction treatment in prisons and jails

# Sequential Intercept Model



Source: <https://www.prainc.com/wp-content/uploads/2017/08/SIM-Brochure-Redesign0824.pdf>

# Addiction treatment and the criminal justice system





# Ohio state prisons



# Prisons

## Overdose reversal

All employees receive naloxone training



## Screening

Screening is included in addiction treatment regimen



## Treatment

A variety of treatment services are available, including Medication Assisted Treatment



# Local jails in Ohio



# Jails

## Overdose reversal

There is no requirement for jail employees to be trained on naloxone



## Withdrawal

Full-service jails must develop policies to address symptoms of detoxification



## Treatment

Jail standards do not require evidence-based addiction treatment



# Minimum jail standards

All full-service jails must **screen** inmates for physical and mental health conditions upon arrival, including for

**“use of alcohol and drugs”**

Minimum Standards for Jails  
Ohio Administrative Code 5120:1-8-09

Data gap  
**Standardized  
data  
collection  
from local  
jails**



# Addiction treatment in prisons and jails



## Strengths

- Naloxone is available in all Ohio state prisons
- Prisons offer SUD treatment services to inmates

# Addiction treatment in prisons and jails



## Gaps

- No state-level information on addiction screening, treatment and withdrawal management services in jails
- The *Minimum Standards for Jails in Ohio* are insufficient



# Opportunities for improvement



## Law enforcement community services

- 1. Minimum standards for jails.** Update the standards to require evidence-based overdose reversal, addiction screening and treatment
- 2. Jail data collection.** Institute a standard data collection system across Ohio jails
- 3. Addiction training.** Increase training requirements for corrections professionals on addiction, treatment, stigma and implicit bias

# Key takeaways



- 1. Progress toward evidence-informed policies.** Ohio is beginning to move in the right direction.
- 2. Systemic issues in the criminal justice system.** More can be done to reduce the number of people with substance use disorder in the criminal justice system.
- 3. Gaps in data and information.** Policymakers do not have the information they need to comprehensively address addiction and inequities in the criminal justice system.

# Current efforts and potential changes

**Senate Bill 3  
House Bill 1**

**RecoveryOhio and  
state agency  
initiatives**

**Supreme Court of  
Ohio Bail System  
Task Force**

**Senate Bill 270  
Senate Bill 271**

# What can you do?

- **Disseminate.** Share the scorecard report with your contacts
- **Educate.** Select one or two opportunities for improvement from the report and education policymakers about them
- **Partner.** Build bridges between addiction treatment, harm reduction, law enforcement and the criminal justice system

# Questions?

Download all materials from the Addiction Evidence Project at:  
**[www.hprio.net/tools/addiction-evidence-project/](http://www.hprio.net/tools/addiction-evidence-project/)**



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