Ohio’s policy response to addiction: Law enforcement and the criminal justice system

HPIO Webinar

April 14, 2020

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Vision

To influence the improvement of health and well-being for all Ohioans.

Mission

To provide the independent and nonpartisan analysis needed to create evidence-informed state health policy.
HPIO core funders

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Please type questions in the question box.
Poll question
Today

• Context, purpose and process
• Key findings
• Impact of COVID-19
• Guest speaker: Senator John Eklund
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

92% of incarcerated people indicated having a history of drug abuse

72% of incarcerated people indicated having a history of alcohol abuse

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

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• 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

• 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
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

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
*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 (SAMI) 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
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

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

**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

Percent change in number of drug overdose deaths

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

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

Pretrial diversion
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


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Addiction treatment and the criminal justice system

**Treatment and recovery**
- Medication-assisted treatment
- Recovery housing
- Peer support and 12-step programs

**Connections between treatment and criminal justice system**
- Quick Response Teams (QRT)
- Specialized Dockets (e.g., drug courts)
- Addiction screening and treatment during incarceration

**Criminal activity related to addiction**
- Bail reform
- Sentencing for drug-related offenses
- Job training and recovery supports upon reentry
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

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Local jails in Ohio
### Jails

<table>
<thead>
<tr>
<th>Overdose reversal</th>
<th>Withdrawal</th>
<th>Treatment</th>
</tr>
</thead>
<tbody>
<tr>
<td>There is no requirement for jail employees to be trained on naloxone</td>
<td>Full-service jails must develop policies to address symptoms of detoxification</td>
<td>Jail standards do not require evidence-based addiction treatment</td>
</tr>
</tbody>
</table>
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
- Supreme Court of Ohio Bail System Task Force
- RecoveryOhio and state agency initiatives
- Senate Bill 270
- Senate Bill 271
Questions?
Impact of COVID-19 on prisons and jails
COVID-19 comorbidities

- Hypertension
- Cardiovascular disease
- Diabetes
- Asthma
- Cancer
Approaches to preventing COVID-19 in prisons/jails

1. Reduce number of people entering prisons/jails
2. Inmate and corrections worker health
3. Release people from prisons/jails
Interim Guidance on Management of Coronavirus Disease 2019 (COVID-19) in Correctional and Detention Facilities

This interim guidance is based on what is currently known about the transmission and severity of coronavirus disease 2019 (COVID-19) as of the date of posting, March 23, 2020.
COVID-19 (Coronavirus): What You Need to Know in Corrections

From February 28, 2020 in Health Care, Public Health

Updated: March 23, 2020

NCCHC is available to serve you during this challenging time. Our experts are here to assist with your COVID-19 questions and concerns.

Please visit the new COVID Resources section of the NCCHC site for more information.
COVID-19 in prisons and jails: Current status and Ohio’s response
Approaches to preventing COVID-19 in prisons/jails

1. Reduce number of people entering prisons/jails
2. Inmate and corrections worker health
3. Release people from prisons/jails
### COVID-19 Inmate Testing | UPDATED: 4/13/2020

<table>
<thead>
<tr>
<th>Tested</th>
<th>Pending</th>
<th>Positive</th>
<th>Negative</th>
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<tbody>
<tr>
<td>435</td>
<td>213</td>
<td>146</td>
<td>76</td>
</tr>
</tbody>
</table>

**Prisons where people are being tested**

- Belmont Correctional Institution (BECI) – 1
- Corrections Reception Center (CRC) - 48
- Dayton Correctional Institution (DCI) – 1
- Franklin Medical Center (FMC) - 47
- London Correctional Institution (LOCI) – 1
- Madison Correctional Institution (MACI) – 1
- Mansfield Correctional Institution (MANCI) – 1
- Marion Correctional Institution (MCI) – 59
- Noble Correctional Institution (NCI) – 1
- Pickaway Correctional Institution (PCI) – 53

**COVID-19 Inmate Quarantine and Isolation**

<table>
<thead>
<tr>
<th>Institution</th>
<th># of Staff who have Reported Positive Tests</th>
<th># of COVID-19 Related Staff Deaths</th>
<th>Units in Quarantine</th>
<th># of Inmates in Quarantine</th>
<th>Housing Type (cell, open bay, combo)</th>
<th># of Inmates in Isolation</th>
<th># of Inmates who Tested Positive</th>
<th># of COVID-19 Related Inmate Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allen Oakwood Correctional Institution</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Combo</td>
<td>0</td>
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<td>0</td>
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<tr>
<td>Belmont Correctional Institution</td>
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<td>0</td>
<td>0</td>
<td>0</td>
<td>Combo</td>
<td>0</td>
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<tr>
<td>Chillicothe Correctional Institution</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>0</td>
<td>Combo</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>Correctional Reception Center</td>
<td>3</td>
<td>0</td>
<td>Full Institution</td>
<td>1536</td>
<td>Combo</td>
<td>16</td>
<td>16</td>
<td>0</td>
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<tr>
<td>Dayton Correctional Institution</td>
<td>1</td>
<td>0</td>
<td>Full Institution</td>
<td>832</td>
<td>Cells</td>
<td>1</td>
<td>0</td>
<td>0</td>
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<tr>
<td>Franklin Medical Center</td>
<td>12</td>
<td>0</td>
<td>Full Institution</td>
<td>485</td>
<td>Combo</td>
<td>12</td>
<td>7</td>
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<tr>
<td>Grafton Correctional Institution</td>
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<td>0</td>
<td>0</td>
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<tr>
<td>Lake Erie Correctional Institution</td>
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<td>0</td>
<td>0</td>
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<td>0</td>
<td>0</td>
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<tr>
<td>Lebanon Correctional Institution</td>
<td>2</td>
<td>0</td>
<td>Full Institution</td>
<td>1965</td>
<td>Cells</td>
<td>0</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>
"We're not looking to release every inmate scheduled to be released in the next 90 days, rather we're talking about specific cases that fit very specific criteria ... We will not be sending murderers, sex offenders, and the like, home early."

-- Gov. Mike DeWine
April 7, 2020
County jails

Total number of Ohio jail inmates who have tested positive for COVID-19: ???

Inmate reductions in response to pandemic, examples based on media reports*:

- **Cuyahoga**: From 2,000 to 1,021
- **Hamilton**: From 1,600 to 1,000
- **Franklin**: From 1,900 to 1,600
- **Erie**: From 130 to 70

*Approximate numbers of reductions in March-early April, 2020. Sources: 10TV.com, News 5 Cleveland, Sandusky Register
DIRECTOR'S ORDER

In Re: Order to Limit Access to Ohio's Jails and Detention Facilities

I, Amy Acton, MD, MPH, Director of the Ohio Department of Health (ODH), pursuant to the authority granted to me in R.C. §§ 3760.13, to prevent the spread of contagious or infectious diseases, hereby order all jails, community-based correctional facilities, halfway houses and detention facilities excluding facilities under the direction or control of the Directors of the Ohio Department of Rehabilitation and Correction, the Ohio Department of Youth Services and the Ohio Department of Mental Health and Addiction Services:

1. Restrict access to only those personnel who are absolutely necessary for the operation of the facilities. People who are "absolutely necessary for the operation of the facilities" include, but may not be limited to, staff, contracted and emergency healthcare providers, law enforcement, attorneys, clergy, contractors conducting critical on-site maintenance, and governmental representatives and regulators and their contractors. No visitors of any detainees shall be admitted to facility.

2. Those persons who are permitted must be screened for COVID-19 each time they enter the facility. Screening guidance is available from the U.S. Centers for Disease Control and Prevention and the Ohio Department of Health. These guidelines may be updated and should be regularly consulted. Screening should include questions about exposure to COVID-19 and assessing visitors and personnel for cough, shortness of breath, and body temperatures of 100.4 degrees and higher. This order does not apply in exigent circumstances, to emergency medical services, first responders, law enforcement, and similarly situated individuals.

3. Restrict access to only those persons who produce legal federal- or state-issued identification, satisfactory identification, or are a known person, and provide the facility with business telephone numbers and addresses. It is the responsibility of the facilities to log such information, maintaining it for at least six (6) months.

4. Comply with infection control precautions, programs and procedures located in Ohio Administrative Code 5126:1-4-09 (C) and (F); 5126:1-18-09 (C) and (N); and 5126:1-13-09 (B) and (I).

5. This Order sets the minimum requirements and any facility may adopt more stringent requirements as particular situations require. The Director of Health hereby delegates to local health departments the authority to answer questions in writing and consistent with this Order.

GUIDANCE TO LOCAL COURTS
COVID-19 Public Health Emergency

The COVID-19 pandemic has created unprecedented times for the judiciary and the bar of Ohio. Now, more than ever, it is imperative that the judiciary, the bar, and all justice system partners work together to ensure access to the courts while also minimizing COVID-19 transmission to the public, litigants, bar, and court staff. While there is no one solution that will be appropriate for every court, there are a number of options that should be considered under existing authority.

EFFORTS TO MINIMIZE PHYSICAL APPEARANCES AT COURT

- Screen prospective continuances for non-essential court appearances (an essential proceeding may be defined as one in which relief is necessary to protect a person's health, safety, or home; or to prevent some other imminent, serious harm that cannot be remedied if allowed to occur; or, in the alternative, rescheduling of non-essential court appearances as phone or video conferences).
- Temporarily continue eviction filings, pending eviction proceedings, scheduled moves-out, and the execution of foreclosure judgments (except in the instances where allegations of domestic violence are involved).
- Temporarily stay the filing and enforcement of any garnishment actions or orders.
- Leverage technology, such as video conferencing, web-based meeting platforms, and teleconference platform, to conduct arraignments, hearings, pre-trials, treatment team meetings, probation meetings, mediations, and to provide interpreter services, etc.
- Waive appearances for pretrial hearings.
- Extend deadlines for court-ordered classes, community service, and community control conditions that require in-person attendance.
- Cancel or postpone probation/community control violation hearings if the alleged violation is not a new criminal offense.

ACCESS TO THE COURTS

- Encourage courts to avoid assessing fees pursuant to Code Sect. 5126.08, when an action is filed in an improper venue.
- Clerks of courts should continue to allow in-person filing of emergency or time-sensitive cases, particularly if filing is not available.

BAIL, BONDS, AND WARRANTS

- At bail hearings, issue recognizance bonds, unless there is clear and convincing evidence that recognizance release would present a substantial risk of harm.
- Temporarily refrain from issuing a capias warrant for failure to appear for traffic violations, minor misdemeanor, and non-violent misdemeanor offenses.
- Generally, refrain from issuing capias arrest (bench) warrants and instead reschedule court appearances.
- Impose sentences with a presumption the sentence will be non-custodial, unless there is clear and convincing evidence that release would present a substantial risk of harm.
Implications for addiction?

Reduce number of people entering prisons/jails

Inmate and corrections worker health

Release people from prisons/jails
Guest presenter

Senator John Eklund
Ohio Senate District 18
Questions?

Download all materials from the Addiction Evidence Project at:
www.hpio.net/tools/addiction-evidence-project/
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.
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
Poll question
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