MIDD 2 Initiative CD-01: Law Enforcement Assisted Diversion (LEAD) (NEW)

How does the program advance the adopted MIDD policy goals?

This program primarily addresses the adopted MIDD policy goal of "divert individuals with behavioral health needs from costly interventions, such as jail, emergency rooms, and hospitals."

Drug use, mental illness and homelessness often create conditions that fuel repeated involvement with the criminal justice system, impede an individual's recovery and foster community public safety/order concerns. 55

The Law Enforcement Assisted Diversion (LEAD) program diverts individuals who are engaged in low-level drug crime, prostitution, and other collateral crime due to drug involvement, from the justice system, bypassing prosecution and jail time, to directly connect drug-involved individuals to case managers who can provide immediate assessment and crisis response, and long term outreach-based case management to help individuals with behavioral health issues to avoid coming into repeated contact with the criminal justice system.

LEAD is a community policing reform effort, addressing low-level drug crimes with socioeconomic and health impacts, and providing law enforcement with credible alternatives to booking people into jail. At the point of a person with a substance use condition comes into contact with law enforcement, officers can identify individuals for referral to the LEAD program to activate a community-based health and human services response, whenever possible and appropriate. LEAD is based in the principles of harm reduction, ⁵⁶ which focuses on prevention of harms to individuals and communities, using quality of life and utilizing relationship-based approaches. LEAD case managers work in collaboration with law enforcement and prosecutors to identify and address individuals' basic needs and behavioral health treatment needs. They do not requiring sobriety for program access, and coordinate any existing legal involvement with a focus on prevention of future contact with the criminal justice system.

1. Program Description

♦ A. Service Components/Design (Brief)

All LEAD participants receive case management, which includes street outreach, a key factor for ongoing engagement with LEAD for many of the participants. Case management supports include meeting basic needs, assisting and advocating for access to housing and supporting housing stability, assistance with job attainment and/or income stabilization and navigating

King County's Familiar Faces project found that nearly all individuals with four or more bookings into the County's jails in a year have a behavioral health indicator of drug dependency or mental illness, and at least one other acute or chronic medical condition. More than half (likely undercounted) were homeless. Familiar Faces: Current State – Analysis of Population, September 28, 2015

Harm reduction interventions are designed to match interventions to where individuals are, including their motivation to change, in order to tailor strategies to meet their specific needs and to minimize the harms to themselves and their community. "Harm reduction strategies can be effective in reducing harm, increasing the quality of life and decreasing highrisk behaviors." Marlatt, G. Alan; Larimer, Mary E.; Witkiewitz, K., Harm Reduction: Pragmatic Strategies for Managing High-Risk Behaviors.

enrollment in drug and alcohol treatment. Prosecutors assigned to LEAD work closely with LEAD case managers, and provide coordination of all criminal justice involvement to support and not compromise LEAD intervention plans. In general, LEAD pursues the goals of the individual participant, as identified by the case manager and the participant in an Individual Intervention Plan.

Case managers provide street-based outreach and engagement, as well as immediate response to unscheduled needs wherever possible. Case managers use trauma-informed motivational interviewing techniques, and establish a low- or no-barrier atmosphere that ensures participants are not shamed and can readily re-engage when they have struggled or are struggling.

The second component of LEAD is the coordination of all prosecution and contact participants may have with the criminal justice system for other cases that may not be eligible for diversion, including getting outstanding warrants quashed – a large barrier for many LEAD participants to sustaining community tenure. The LEAD prosecutorial role includes the ability to make discretionary decisions about whether to file charges, recommend pre-trial detention or release conditions, reduce charges, and recommend lesser or no jail sentences for post-adjudication cases already underway. LEAD prosecutors support the intervention plan designed for the particular participant, in order to maximize community health and safety.

Another component of the LEAD program is engagement with the community and addressing neighborhoods' concerns with criminal activity and public safety. This takes the form of ongoing education and dialogue with community leaders about the LEAD approach, coordination of information between neighborhood leaders and the operational workgroup regarding LEAD participants and neighborhood hotspots and concerns. It also generates community-based social contact referrals to LEAD that can be validated by law enforcement as appropriate referrals. Through LEAD, community-generated pressure for traditional enforcement can be transformed into participation in alternative health-based responses.

Specific strategies of the LEAD program include:

- Effective training of and engagement with front-line law enforcement officers (officers
 and sergeants) to enlist their active participation in this approach, to familiarize them with
 harm reduction principles, and to tap into their experience, knowledge and relationships
 with street-involved populations.
- Criminal justice system coordination by LEAD prosecutors to coordinate exiting legal cases, remove barriers to community tenure such as outstanding warrants, and make decisions not to file a criminal case on any charges that may be eligible at the point of referral to LEAD or anytime thereafter.
- Ongoing community outreach and engagement.
- Provision of case management in a harm reduction/Housing First framework.

Coordination with public defenders to receive defense-initiated social contact referrals
and ensure defenders integrate LEAD into defense planning for resolution of filed cases as
appropriate.

Potential service recipients would be located in currently funded areas⁵⁷ as well as other communities that have expressed interest in becoming partners in the delivery of LEAD. There is a particular interest among LEAD's policy coordinating group in exploring opportunities to expand LEAD into south and east King County jurisdictions that presently make comparatively high use of jail facilities throughout King County for individuals with frequent bookings,⁵⁸ as part of a countywide strategy to increase access to the program and decrease the unnecessary use of jail.

Of note, the current LEAD case management level of care may need to be enhanced for some individuals who are referred to the program. Through other demonstration efforts, more intensive levels of care will become available to address higher needs.

♦ B. Goals

As described above, the primary objectives of LEAD are to reduce recidivism and criminal justice costs, and to increase positive psychosocial, housing and quality-of-life outcomes for participants.

- ♦ C. Preliminary Performance Measures (based on MIDD 2 Framework)⁵⁹
 - 1. How much? Service Capacity Measures

This initiative is expected to serve 500 unduplicated individuals annually when fully operational.

- 2. How well? Service Quality Measures
 - Increased use of preventive (outpatient) services
 - Improved access to social services safety net (e.g. enrollment in Apple Health, access to housing assessment and coordination)

LEAD launched as a pilot in Seattle's Belltown neighborhood and King County's Skyway neighborhood in 2011, funded entirely by grants from private foundations. In 2014, with support from the City of Seattle, and at the request of other downtown Seattle neighborhoods, the program was expanded to include the rest of downtown Seattle. LEAD received \$800,000 in one-time funding from MIDD 1 in 2016. The City of Seattle plans to expand LEAD to its east precinct (Capitol Hill) in 2016, and, since other Seattle neighborhoods have requested LEAD, the City Council has requested a plan for how to scale up citywide. The Sound Cities Association has also entered discussions regarding expanding LEAD to other King County cities.

This refers to individuals who meet the Familiar Faces threshold of four or more bookings into the County's jails in a year.

Throughout 2017, review and refinement of Results-Based Accountability (RBA) performance measures for MIDD 2 initiatives will be conducted whenever applicable, in consultation with providers. Updates to performance measures that may result from this collaborative process will be reported in the next MIDD Annual Report in August 2018.

3. Is anyone better off? Individual Outcome Measures

- Reduced substance use
- Reduced behavioral health risk factors
- Reduced unnecessary incarceration
- Increased stability in treatment, employment, or other quality of life measures

Specific outcomes and measures for LEAD, especially identification of what will be evaluated as part of MIDD 2, are subject to further definition.

♦ D. Provided by: Contractor

Prosecution services will be provided by the King County Prosecuting Attorney's Office (KCPAO) and municipal attorneys including the Seattle City Attorney's Office as well as those representing any future cities that may participate in future expansions of LEAD to south and/or east King County.

Funding for community engagement, project management including accountability to MIDD and other oversight bodies, and stakeholder coordination would be directed to the Public Defender Association (PDA).

Funding for case management will be contracted to PDA through King County BHRD, which will provide program oversight of and contract monitoring for the MIDD-funded portion of LEAD, including ensuring that other funding sources including Medicaid are maximized. (See 3.A below for the expected long-term approach to case management contracting.)

2. Spending Plan

This spending plan shows estimated amounts and expected categories for MIDD 2's recommended contribution to LEAD.

It is designed to invest in expansion of LEAD to other jurisdictions, and/or other Seattle neighborhoods, as part of a countywide strategy. Each additional jurisdiction will be expected to secure or contribute funding for increased case management, project management, community engagement, client legal services, law enforcement overtime and training costs when LEAD expands into its area, alongside the MIDD 2 investment.

All expenses shown are provisional and may be adjusted depending on the timing of expansion of LEAD into other communities within Seattle and/or throughout the County.

Year	Activity	Amount
2017	Case management, prosecution costs, project management, stakeholder coordination, community engagement, and planning to enhance integration and expand to	\$1,771,718
	suburban cities	
2017 Annual Expenditure		\$1,771,718
2018	Case management, prosecution costs, project management, stakeholder coordination, community engagement, and planning to enhance integration and expand to suburban cities	\$1,817,782
2018 Annual Expenditure		\$1,817,782
Biennial Expenditure		\$3,589,500

3. Implementation Schedule

♦ A. Procurement and Contracting of Services

County funds will be granted to Public Defender Association (PDA) to support its existing role in project management, stakeholder coordination and community engagement for LEAD, including its role in working with the multisystem LEAD Policy Coordinating Group, the consensus-based governing body of LEAD that includes PDA, prosecutors, law enforcement, the King County Executive's Office, the local chapter of the American Civil Liberties Union (ACLU) and municipal funders.

Funding for LEAD case management will be administered by the through a contract between PDA and King County BHRD, which will provide program oversight of and contract monitoring for the MIDD-funded portion of LEAD.

It is the long-term goal for LEAD that King County BHRD will oversee the contract for case management services and oversee the social services aspect of LEAD, including behavioral health, primary care, and housing, and assist with systems coordination to better meet other socials needs of those served in LEAD. This will occur when BHRD-administered "on demand" referral portals are available featuring harm reduction and trauma-informed care approaches.

If new King County cities wish to launch LEAD, an RFP would be developed by BHRD staff in conjunction with the Policy Coordinating Group in order to identify case management providers appropriate to those new cities.

♦ B. Services Start date (s)

As the initiative is already operating, services are expected to continue uninterrupted in the current service areas.

Expansion to other communities throughout King County is expected to occur gradually between 2017 and 2022 when:

- Specific jurisdictions come forward with interest and additional funding.
- Agreements and law enforcement/prosecution training is completed.
- Contracted case management provider(s) are identified for South and/or East King County as applicable.

4. Community Engagement Efforts

With support from the Public Defender Association (they provide a dedicated staff), VOCAL-WA provides a venue for community outreach and advocacy for individuals experiencing homelessness, including those who are graduates of or currently participating in LEAD. PDA also coordinates with neighborhood and neighborhood safety groups (e.g. Downtown Seattle Association, Metropolitan Improvement District, Friends of Waterfront Seattle, Little Saigon/International District), and is establishing a table of community leaders to hold LEAD accountable to the program's mission and goals.