TASC’s Center for Health and Justice

Arlington County Public Safety Response to the Opioid Crisis

December 17, 2020
Comprehensive Opioid, Stimulant, and Substance Abuse Program

IAFC partnered with the Bureau of Justice Assistance
TASC’s Center for Health and Justice

COSSAP TTA Provider for
First Responder Led Diversion Initiatives

Website: http://www.centerforhealthandjustice.org/
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Arlington County

Initiatives Towards the Opioid Epidemic
• The smallest county in the United States: 26 square miles

• Density: 11th in the United States

• Population: 237,700, and another 217,000 commute in daily
Advanced practice officers (APOs)
  • Able to divert 67 OD calls to alternate resources
  • CIT trained
  • Knowledge of available resources

Intoxicated persons protocol
  • Allows release to responsible party
  • 1,214 calls
    • 7 for OD call type
• 375 sworn officers
• Narcan distributed in fall 2019
  • 9 administrations since then, 8 resuscitated
• Organized Crime Section
  • Tracks and investigates overdoses
  • Provides information to DHS for treatment
<table>
<thead>
<tr>
<th>YEAR</th>
<th>OVERDOSES</th>
<th>FATALITIES</th>
<th>PERCENTAGE FATALITIES</th>
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</thead>
<tbody>
<tr>
<td>2015</td>
<td>10</td>
<td>4</td>
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</tr>
<tr>
<td>2016</td>
<td>45</td>
<td>12</td>
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<tr>
<td>2017</td>
<td>74</td>
<td>19</td>
<td>26%</td>
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<tr>
<td>2018</td>
<td>53</td>
<td>11</td>
<td>21%</td>
</tr>
<tr>
<td>2019</td>
<td>42</td>
<td>6</td>
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</tr>
<tr>
<td>2020 (YTD)</td>
<td>64</td>
<td>17</td>
<td>27%</td>
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In June 2018, Arlington County installed four drug takeback boxes.

To date, over 5,000 lb. of prescription drugs/paraphernalia have been collected and destroyed.
Background: Founded in January 2017 following a discussion between the police and the Department of Human Services concerning a spike in opioid overdoses and incidents. A group of stakeholders representing the community came together to discuss ways to tackle the epidemic. Since then, the stakeholders’ group has met monthly. AARI participants include the fire department, the police department, treatment programs, the health department, the Commonwealth attorney’s office, public defenders, the sheriff, the local hospital, community members, and individuals in recovery.

Mission Statement: To improve the community understanding of the dangers of substance use utilizing an integrated system of community members and professionals to provide support, resources, and education, in an effort to reduce the incidents of substance use, dependency, and overdose.

Accomplishments: Reduction of barriers to accessing treatment, diversion from criminal justice system into treatment, communitywide prevention campaigns (including PSAs and bus advertisements), distribution of Narcan nasal spray, training on substance use disorders for community groups, and peer overdose outreach following any overdose.

Contact us: aari@arlingtonva.us www.onearlington.com www.facebook.com/onearlington
DHS: Behavioral Healthcare Division

- Same-Day Access
  - Intakes available Monday through Friday from 8:30 a.m. to 3:00 p.m.

- Outpatient Services
  - Groups and individual therapy

- Office-Based Opioid Treatment
  - Combines medication and therapy

- Contracted Methadone Treatment
  - Contract with Alexandria

- Intensive Outpatient Program
  - Minimum of 9 hours a week

- Clinically Managed Low-Intensity Residential Services
  - Sober living

- Contracted Clinically Managed High-Intensity Residential

- Adding medical withdrawal management
Booking/Processing
- Upon entry into the ACDF, all inmates are asked questions pertaining to their drug and/or alcohol use
  - Intake Screening Questionnaire
  - Initial Housing Assessment Questionnaire
  - Medical intake screening

Drug/Alcohol Withdrawal Protocol
- If an inmate has been identified as having gone through or potentially going through withdrawals from drugs and/or alcohol
  - Housed in the Medical Unit and a log is maintained
  - Inmates can be removed from this protocol only after clearance from Corizon Medical staff
  - Notifications are made to shift commanders and the Assistant Director of Corrections
Programming

- While in the ACDF, inmates have programs available to them
  - NA/AA
  - ACT Unit
  - OAR addiction awareness
  - MRT
- Works closely with Jail DHS to prepare for programming/treatment after release

Narcan

- Inmates in the ACT Unit receive quarterly training on Narcan and are given the option to receive it upon release
- If an inmate appears on an ACPD-generated report from initial contact, the information is shared among members of the Opioid Response Team
  - Jail DHS speaks with the inmate, and Narcan is offered. The inmate will be trained on how to use it and provided with one box of Narcan prior to release
Vivitrol Pre-Release Program

- To prevent overdoses by opioid-dependent clients and increase/improve linkage to substance abuse treatment at the time of release
  - **Short-term**: Receive treatment and medication-assisted treatment to abstain from opioid use prior to release from ACDF, thus greatly reducing the risk of overdose for people returning to the community
  - **Medium-term**: Reduce number of opioid-related probation violations and decrease opioid-abuse relapse
  - **Long-term**: Reduce recidivism rates of program participants and increase stability in the community

- **Participants**
  - Referrals come from the AC Re-entry Committee, Jail DHS, and ACT program; Corizon and Inmate Services counselors primarily. Inmates may self-refer for screening
  - Inmate meets opioid dependence diagnosis
  - Must agree to continue treatment upon release
  - Jail DHS works in conjunction with Medical Unit to conduct the necessary tests/screenings
  - Receives upon release and every month thereafter
Circuit Court–Drug Treatment Court

• Established April 2013

• Legal Eligibility
  • Drug Treatment Court Act – VA Code § 18.2-254.1
    • Excludes those convicted within 10 years of violent crimes as defined in §§ 17.1-805 and 19.2-297.1
  • Current charge must be a felony conviction or a felony probation violation
  • No jailable pending charges
  • Must reside in Arlington County
  • Participant does not pose a danger to other participants
    • Drug dealing
    • Gang activity

• Clinical Eligibility
  • High risk/high needs as identified by the RANT (Risk and Needs Triage) module (a validated risk-and-needs assessment tool per NADCP manual)
The Program

Five Phases (each lasting a minimum of 90 days)

1: Stabilization
   • Court appearances once a week; drug testing at least 3x/week; home or field contacts at least 3x/week; at least 30 consecutive days of abstinence

2: Intensive Treatment
   • Court appearances every other week; drug testing at least 2x/week; home or field contacts at least 1x/week; at least 45 consecutive days of abstinence

3: Relapse Prevention and Personal Planning
   • Court appearances every 3 weeks; drug testing at least 2x/week; home or field contacts at least 1x/week; at least 60 consecutive days of abstinence

4: After-Care Planning
   • Court appearances every 4 weeks; drug testing at least 2x/week; home or field contacts at least twice per month; at least 90 consecutive days of abstinence

5: Transition
   • Court appearances every 5 weeks; drug testing at least 2x/week; home or field contacts at least once per month
Our Successes

- Percentage of participants who successfully completed the program:
  - FY17 – 58 percent
  - FY18 – 50 percent
  - FY19 – 67 percent
- 31 graduates since inception
- In FY19, 92 percent of participants who completed the program in the previous two years remained free of new charges
- In FY19, the costs savings of DTC versus incarceration were $910,777. Incarceration is generally said to be $179/day, while DTC is $50/day
  - In FY18, the cost savings were $891,844
- In FY20, it is estimated that the county will save about $900,000 by using DTC in lieu of incarceration
- In FY20, it is estimated that the percentage of participants successfully completing DTC will be at least 70 percent (NDCI reports average graduation rate of 59 percent)
- In FY20, it is estimated that 85 percent of participants who completed DTC in the previous 2 years will remain free of new charges (report on VA drug courts: 19 percent of graduates re-arrested within 2 years, compared with 29 percent of those who participated but did not graduate)
Our Goals

- Reach current capacity of 25 active participants
  - Currently have 15 active participants
  - 3 of the 15 started in 2020

- Enlist graduates as peer mentors

- Partner with more local drug courts to facilitate transfers between jurisdictions. We currently have partnerships with Fairfax and Alexandria, our closest neighboring counties
Thank You!

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https://cossapresources.org/Program/TTA