



The Path Forward:
Implementing Opportunities for Change through Co-Responder Deflection in the
Louisville Metro Police Department
A proposal to the Louisville City Council – July 2020

The Police, Treatment, and Community Collaborative (PTACC), the national voice for and knowledge leader in the field of deflection and pre-arrest diversion, proposes the following Scope of Work (SOW) to reframe the relationship between the Louisville Metro Police Department (LMPD) and community.

1. **Readiness assessment of Prior Deflection Initiatives:** Conduct a rapid readiness assessment of Louisville’s current and prior attempts at deflection. The current program is the Law Enforcement Assisted Diversion (LEAD) pilot program initiated in October of 2018 to divert individuals with opioid use disorder (OUD) away from the criminal justice system into comprehensive harm reduction-focused intensive case management, treatment and wrap-around services. Previous deflection attempts included the Living Room Model for individuals with mental health. Other previous efforts will be examined. The readiness assessment will collect information from a wide range of people who have firsthand knowledge about the various deflection initiatives, operationally as well as insights on the nature of any challenges faced and the lessons learned. The rapid assessment will include interviews with Louisville MPD, treatment and health partners, civic leaders, community participants impacted by deflection initiatives, evaluators from those programs, and other key informants. Specifically, the assessment will look at stakeholder buy-in, the challenges the initiatives faced, limits and barriers to their adoption, equity, and where changes should be made to improve future impact in connecting people to treatment.
 - a. Estimated Timeframe to Complete: 260 hours
 - b. Details of this Deliverable –
 - Collect and review available data and reports to determine the selection of information needed from key informational interviews.
 - Formulate rapid assessment questions.
 - Prepare interview protocols.
 - Select people to be interviewed from identified respondent groups (e.g., Louisville MPD, treatment and health partners, civic leaders, community participants impacted by deflection initiatives, project evaluators, and others specific to this program).

- Select and assign PTACC interviewers with requisite skills and backgrounds to conduct the interviews.
- Conduct respondent interviews.
- Compile interview information to ensure efficiency, quality, and consistency across interviews.
- Analyze interview data.
- Compile a brief summary report with recommendations.
- Unless otherwise allowed by health officials, due to COVID-19, interviews will be done virtually.

2. **Menu of co-responder deflection approaches:** Law enforcement agencies across the country are increasingly adopting promising deflection co-responder approaches to improve how they engage with people experiencing behavioral health crises. Such approaches provide communities with appropriate alternatives to arrest, as well as additional options to respond to calls best handled by behavioral health response units instead of law enforcement responses. These deflection approaches are designed to improve the wellbeing outcomes for people experiencing behavioral health challenges (not limited to just crisis and mental health encounters, but also inclusive of non-crisis, substance-use disorder, and housing encounters) who have contact with police.

Co-responder deflection approaches also provide an alternative to taking no action, in cases where a person would, voluntarily, based on their own decision and without coercion or fear of arrest, accept case management connections to treatment, housing, and services. A major imperative in co-responder deflection approaches is to ensure equal application of who is offered and has access to these types of initiatives. Communities and local leaders can use these types of deflection approaches, that are constructed with Fire, EMS, and behavioral health agencies, to develop a continuum of responses to crisis and non-crisis situations that results in the reduction of harm, arrests, and use of jails and emergency departments and that promote the development of and access to quality mental and substance use disorder treatment and services.

Variations among co-responder deflection approaches include use of Fire, EMS, and behavioral health in lieu of law enforcement, differences in primary goals (e.g., reduced incarceration, reduced use of emergency services, reduced calls from frequent utilizers, etc.), population of focus (e.g., youth and young adults, persons who are homeless, etc.) dispatch process, settings, hours of operation, cost, supervision, staffing and more. PTACC will apply its knowledge of the various national co-responder deflection approaches to create options that could be implemented in Louisville while ensuring the effort promotes equity and avoids racial disparities.

- a. Estimated Timeframe to Complete: 95 hours
 - b. Details of this Deliverable –
 - Meet with key stakeholders to clarify and finalize the primary goals, priorities, and population(s) of focus for Louisville’s co-responder deflection approach.
 - Review relevant available Louisville data and reports to further inform selection of Louisville’s co-responder deflection approach.
 - Review co-responder deflection approaches applying PTACC’s knowledge of the advantages and disadvantages to identify relevant options aligned with Louisville’s primary goals, priorities, population(s) of focus, and financing parameters.
 - Provide written recommendations to stakeholders.
3. **Examine 9-1-1 for co-responder deflection feasibility, conduct a deflection services resource scan, and create a funding plan for co-responder services:** Police spend a substantial amount of time responding to 9-1-1 calls that are ultimately social service in nature, thereby utilizing police resources on non-public safety issues and exposing people to avoidable criminal justice system contacts. Many, often a majority of calls are for issues of substance use, homelessness, or mental health (both crisis and non-crisis situations) that would be better resolved through deflection approaches, inclusive of co-responder and behavioral health responder units, relying on community-based treatment or other resources. PTACC will rapidly examine Louisville’s 9-1-1 system for fit with deflection initiatives, and will make recommendations on the inclusion of co-responder approaches into the call-handling and dispatching process.

No single source will likely be sufficient to fund co-responder services and operational needs year after year. PTACC will work to identify deflection co-responder program financing and sustainability options that provide case management, care coordination, behavioral health treatment, emergency housing, recovery, and social supports for eligible participants paying special attention to equitable access these services across race, income, and geography. Examples of funding options to be explored include: Medicaid; adapted Medicaid models, such as Health Homes and waivers; other federal funding opportunities; State and local funding; health institutions, including hospitals; and private and philanthropic funding. A long-term funding plan will be created that leverages these and other multiple funding mechanisms and that avoids racial disparities in its application. A resource scan of organizations and capacity to handle additional clients from co-responder models as well as being able to engage in co-responder approaches will be completed. This scan will also examine geographical locations of resources and how resources are able to be accessed by various communities, especially those of color and low income.

- a. Estimated Timeframe to Complete: 4 months (480 hours)
- b. Details of this Deliverable –

- Review available call for service data from Louisville’s 9-1-1 call centers.
- Develop a health, behavioral health, and other human services needs scan of the populations of focus that initiate 9-1-1 calls.
- Identify what information is needed to move to a deflection co-responder call-handling and dispatching process.
- Initiate deflection services resource scan to evaluate the local landscape for existing resources and gaps.
- Explore opportunities to thread together multiple funding mechanisms to create a long-term funding plan.
- Explore available options to pay for deflection services components, from health insurance and health care institutions to housing programs and government and philanthropic grants.
- Create a funding plan for deflection co-responder services that includes Medicaid; adapted Medicaid models, such as Health Homes and waivers; other federal funding opportunities; State and local funding; health institutions, including hospitals; and private and philanthropic funding.

4. **Accelerated implementation of selected deflection co-responder options:** PTACC will perform accelerated implementation of the co-responder options chosen from the selected items above. PTACC will perform direct, hands-on virtual, and if permitted, on-site technical assistance. Implementation will be conducted with an inclusive PTACC team guiding the implementation while working with local stakeholders that represent Louisville’s racial, ethnic, and income diversity, as well as the public safety and health systems (public and private) that will be part of the deflection co-responder initiatives.

- a. Estimated Timeframe to Complete: 5 months (160 hours) **Ideally, this time begins after the completion of #3 but the preparatory work can begin, to some degree, concurrently with #3 and hence reduce the time left to implementation)

- b. Details of this Deliverable –

- Work with stakeholders to finalize their vision for reframing the relationship between Louisville MPD and community through co-responder deflection.
- Work with stakeholders to communicate with and engage community groups and affected populations to build support for the new vision.
- Identify key champions and collaborative partners to be part of leading the change effort.
- Create an implementation plan that employs conscious consideration of racial equity during all facets of system change operationalization.

- Identify metrics for deflection evaluation, inclusive of racial equity, for operational evaluation, decision-making, and program improvements.
- Provide required Technical Assistance (TA) and Subject Matter Experts (SMEs) appropriate for this deliverable.
- Lead the implementation of the selected deflection initiatives.

All work will be completed in a six to nine-month period from the start date including implementation (subject to limitations and restrictions due to COVID-19 that can change the timetable).

For more information about this proposal, contact Jac Charlier, PTACC Executive Director, at jcharlier@tasc.org, (312) 573-8302.

More information about PTACC is available at our Deflection and Pre-Arrest Diversion National Resource Center: www.ptaccollaborative.org