**Bureau of Justice Assistance**

**Comprehensive Opioid Abuse Program**

**Law Enforcement/First Responder Diversion**

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**Introduction**

The Bureau of Justice Assistance’s (BJA’s) mission is to protect citizens from crime and violence by giving law enforcement officials and community stakeholders the resources they need to tackle their most pressing challenges. For many communities and states, no challenge looms larger and has proven more destructive than the one represented by opioids. BJA currently provides financial support to more than 40 law enforcement/first responder diversion programs in the United States through its Comprehensive Opioid Abuse Program (COAP). COAP was developed as part of the Comprehensive Addiction and Recovery Act of 2016 to provide financial and technical assistance to states, units of local government, and Indian tribal governments to plan, develop, and implement comprehensive efforts to identify, respond to, treat, and support those impacted by the opioid epidemic.

**What Are Law Enforcement/First Responder Diversion Programs?**

Law enforcement officers and other first responders—such as emergency medical technicians, paramedics, and firefighters—are at the front line of the opioid epidemic, responding to frequent drug overdose calls. As such, these entities are often best positioned to establish pre-arrest or post-arrest law enforcement/first responder diversion programs with a focus on connecting individuals to community-based substance abuse and behavioral health services. Law enforcement/first responder diversion programs often include first responders working in partnership with substance abuse treatment providers and peer recovery coaches to help overdose victims access treatment and recovery support services.

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**COAP Funding for Law Enforcement/First Responder Diversion Programs**

COAP funding is available for communities to establish pre-arrest or post-arrest law enforcement/first responder diversion programs for individuals who commit low-level, nonviolent offenses to community-based substance abuse and behavioral health services. To be considered, communities must use a coordinated multidisciplinary response team that includes law enforcement and other first responders, treatment providers, and/or peer recovery specialists as part of their diversion programs. Other team members may include child welfare providers, public health providers, hospital-based program providers, prosecutors, the courts, and community organizations.

COAP supports activities related to diversion programs that include:

- **Connecting individuals at risk for overdose** and/or survivors of a nonfatal overdose and their families with substance abuse and behavioral health treatment providers or peer recovery support. Peer recovery support services involve an array of supports and services that are responsive to the specific needs of participants.
- **Providing survivors of nonfatal overdoses** with access to recovery support services.
- **Prioritizing access to treatment services** as well as access to medication-assisted treatment (MAT) for persons experiencing addiction.
- **Providing overdose prevention education** and community outreach.
Five Pathways for Prevention of Opioid Overdose and Diversion to Treatment

Five pathways have been most commonly associated with opioid overdose prevention and diversion to treatment. These are:

- **Self-Referral**: An individual voluntarily initiates contact with a first responder (a law enforcement, fire services, or EMS professional) for a treatment referral (without fear of arrest) and receives a warm handoff to treatment.

- **Active Outreach**: A law enforcement officer or other first responder identifies or seeks out individuals in need of substance abuse treatment; a warm handoff is made to a treatment provider, who engages them in treatment.

- **Naloxone Plus**: A law enforcement officer or other first responder engages an individual in treatment as part of an overdose response.

- **Officer Prevention Referral**: A law enforcement officer or other first responder initiates treatment engagement, but no criminal charges are filed.

- **Officer Intervention Referral**: A law enforcement officer or other first responder initiates treatment engagement; charges are filed and held in abeyance or a citation is issued.

Some communities may develop law enforcement/first responder programs tailored to their unique needs and resources that involve hybrid or innovative models. Examples of diversion programs that reflect these different pathways include the Police Assisted Addiction and Recovery Initiative (PAARI); Quick Response Teams (QRTs); Drug Abuse Response Teams (DARTs); Stop, Triage, Engage, Educate and Rehabilitate (STEER); and Law Enforcement Assisted Diversion (LEAD). BJA supports all models of diversion.

- **Deploying a rapid response intervention program** for children who witness a parent or loved one suffer an overdose to help children cope with trauma and build resiliency.

- **Providing specialized training to first responders**, victim service providers, and child protective services professionals to ensure that they have an established process/protocol to follow when encountering a child or youth affected by overdose or in a home where a child is exposed to substance abuse.

**COAP Grantee Spotlight**

**Stop Addiction for Everyone (SAFE) Stations Program, Franklin County, Ohio**

In 2017, Franklin County, Ohio, received a COAP grant to develop a systemwide diversion effort in the community of Whitehall. Per capita, Whitehall has been one of the hardest-hit communities in Franklin County, with an overdose rate five times higher than the Franklin County average.

As part of its grant, the Whitehall Division of Fire created a SAFE Stations Program. The program is a joint effort of the Whitehall Division of Fire, the Whitehall Division of Police, the Heart of Ohio Family Center, and the Maryhaven Addiction Stabilization Center. The SAFE Stations model allows anyone to enter the Whitehall Fire Station, 24/7, and ask to receive help for his or her opioid use disorder. After an initial brief medical stability screening, a community paramedic or other Fire Division member will coordinate a warm handoff with a recovery or treatment specialist.

To date, the Safe Stations Program has served 505 walk-in individuals with substance abuse problems, transporting 489 to care with 190 individuals (39 percent) completing treatment.

**Quick Response Team, City of Huntington, West Virginia**

In 2017, the city of Huntington, West Virginia, received a COAP grant to implement a quick response team (QRT) consisting of law enforcement, medical care providers, and treatment providers to respond to overdoses. The goal of the QRT is to decrease the number of overdoses by at least 20 percent annually and the number of recurrent overdoses by 40 percent annually. The Marshall
University Department of Public Health serves as the research partner for the grant.

In the first two months after the QRT began operations, 234 attempts to contact overdosed individuals and provide them with services with respect to access to treatment where made. The team was able to make 130 successful contacts; of these contacts, 30 individuals have been entered into nonmedical detox, MAT, or a combination of both.

**COAP-Supported Law Enforcement/First Responder Diversion Programs**

**Alaska**
- State of Alaska Tribal Diversion Project

**California**
- LEAD Hollywood Program (City of Hollywood, California)

**Colorado**
- Crisis Outreach Response and Engagement (CORE) Program (Boulder County, Colorado)

**Florida**
- City of Miami Collaborative Early Pre-Arrest Diversion Program (Miami, Florida)

**Georgia**
- City of Savannah CJCC Opioid Abuse Site-based Program (Georgia)

**Illinois**
- A Way Out Program (Lake County, Illinois)

**Indiana**
- Community Opioid Prevention Effort (COPE) (Hamilton County, Indiana)
- Indiana Integrated Response Project (IRP)
- Project POINT (Planned Outreach, Intervention, Naloxone, and Treatment) (Marion County, Indiana)

**Iowa**
- Clinton’s Opioid Partnerships (Clinton, Iowa)

**Kentucky**
- Kenton County Detention Center’s Kentucky Overdose Prevention and Education Project (KOPE) (Kenton County, Kentucky)
- Lexington Overdose Outreach Project (LOOP) (Lexington-Fayette Urban County, Kentucky)
- Louisville Metro Law Enforcement Assisted Diversion (LEAD) Pilot (Louisville Jefferson County, Kentucky)

**Massachusetts**
- Project Heroin Addiction Recovery Team Support (H.A.R.T.S.) (Holyoke, Massachusetts)
- Plymouth County Outreach (PCO) (Plymouth County, Massachusetts)
- Boston’s First Responder Partnership Program (Boston, Massachusetts)
- Project Recovery and Engagement of Addicts and Chronic users of Heroin (REACH) (Holyoke, Massachusetts)

This map represents locations of the COAP-supported law enforcement/first responder diversion programs. States with the highest concentration of projects (including local and tribal sites) are indicated by the darkest shading.
Michigan
- Detroit Opioid Abuse Diversion Program (Detroit, Michigan)
- City of Duluth COAP Project (Duluth, Michigan)

New Jersey
- Comprehensive Opioid Response Project (CORP) (Mahwah, New Jersey)
- HOPE ONE Project (Morris County, New Jersey)
- New Jersey Opioid Response Team Project

New Mexico
- Law Enforcement Assisted Diversion Rio Arriba (Rio Arriba County, New Mexico)
- Santa Fe Opioid Overdose Outreach Project (SFO3) (City of Santa Fe, New Mexico)

New York
- Erie County Opioid Overdose Outreach Enhancement Program (Erie County, New York)

Ohio
- First Responder Partnership (Warren County, Ohio)
- Get Recovery Options Working (GROW) Program (Dayton, Ohio)
- Guernsey County System-Level Diversion Project (Guernsey County, Ohio)
- Hocking County COAP (Hocking, Ohio)
- Rapid Response Emergency Addiction and Crisis Team (RREACT) (Columbus, Ohio)
- The Hamilton County Heroin Coalition (HCHC) (Hamilton County, Ohio)
- The Butler County COAP (Butler County, Ohio)

Oregon
- Marion County LEAD Expansion Project (Marion County, Oregon)

Pennsylvania
- Kensington Transit Corridor Overdose Response Study (Kensington, Pennsylvania)
- Pennsylvania Commission on Crime and Delinquency's Implementing Local Projects to Reduce Overdose Deaths
- Pennsylvania State Police TRIAD Program

Rhode Island
- Rhode Island State Police Heroin-Opioid Prevention Effort (HOPE)

South Carolina
- Lancaster County Opioid Response Network (Lancaster County, South Carolina)

Tennessee
- Hamilton County Police & Community Overdose Response Team (PCORT) (Hamilton County, Tennessee)
- Sullivan County Overdose Response Team (SCORT) (Sullivan County, Tennessee)

Washington
- Healing Together House (Makah Tribal Organization, Washington)
- Mason County Opiate Quick Response System (Mason County, Washington)

West Virginia
- City of Huntington Quick Response Team (City of Huntington, West Virginia)

Wisconsin
- Menominee Indian Tribe COAP (Menominee Indian Tribe, Wisconsin)

For More Information About COAP and Technical Assistance Requests
Visit the COAP Resource Center at www.coapresources.org for more information about the program. BJA also provides free training and technical assistance related to first responder diversion programs to both COAP grantees and nongrantees. To explore technical assistance opportunities, please visit the COAP Resource Center.

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About BJA
BJA helps to make American communities safer by strengthening the nation’s criminal justice system: Its grants, training and technical assistance, and policy development services provide state, local, and tribal governments with the cutting-edge tools and best practices they need to reduce violent and drug-related crime, support law enforcement, and combat victimization. To learn more about BJA, visit www.bja.gov, or follow us on Facebook (www.facebook.com/DOJBJA) and Twitter (@DOJBJA). BJA is part of the U.S. Department of Justice’s Office of Justice Programs.