



Behavioral Health & Law Enforcement: Early Diversion Initiatives

Overview

Over the past two decades, law enforcement agencies have sought specialized interventions to improve their responses to people experiencing behavioral health crises and increase public safety. From 2013-2016, SAMHSA supported the “Law Enforcement & Behavioral Health Partnerships for Early Diversion” initiative, where behavioral health practitioners worked with police officers to resolve crisis encounters and transition an individual into behavioral health services. Early diversion occurs when a behavioral health practitioner responds to a law enforcement encounter with an individual in crisis and resolves the situation through engagement with treatment.

Essential Elements of an Early Diversion Initiative

1. COLLABORATION & CROSS-TRAINING

A successful early diversion initiative requires a strong partnership between behavioral health providers and local law enforcement.

2. WARM HAND-OFF

During an encounter, the law enforcement officer transfers responsibility for the situation to a behavioral health practitioner.

3. TREATMENT ENGAGEMENT

Behavioral health treatment providers offer strategies to keep people engaged in services to reduce negative outcomes.

4. PEER SUPPORT

Peer support specialists follow-up with people in the community to support their recovery.

5. CRISIS CARE CONTINUUM

Early diversion initiatives require access to services within the crisis care continuum, such as stabilization services.

6. TREATMENT & SERVICES

Practitioners who work with the individual in crisis provide direct connections to treatment and services.

7. WRAPAROUND SUPPORTS & HOUSING

Depending on the individual’s needs, access to housing, benefits, employment, and other supports may be a priority.

8. PERFORMANCE MEASUREMENT

The initiative maintains performance measures relating to encounters as well as treatment and service quality.

Early Diversion Initiative Examples

BOULDER COUNTY, CO PROJECT EARLY DIVERSION GET ENGAGED

Process: Individuals with behavioral health issues are engaged in treatment at the point of contact with law enforcement through mobile EDGE teams. Peer support specialists encourage engagement in behavioral health treatment services following the encounter.

Goals: Establish alternatives to arrest through on-scene crisis deescalation techniques and linkage to services and build a robust infrastructure focused on treatment engagement.

Learn more: <http://bit.ly/2jWctD5>

CT SPECIALIZED CRISIS INTERVENTION TEAMS FOR YOUNG ADULTS

Process: Young adults who have experienced first-episode psychosis and have been encountered by Crisis Intervention Teams are provided with clinical care, case management, and peer support services in order to reduce the likelihood of future contact with the criminal justice system.

Goals: Create an infrastructure to improve resources available to divert young adults from arrest and employ developmentally appropriate responses and referrals.

Learn more: <http://bit.ly/2k1WZlc>

KNOXVILLE, TN EARLY DIVERSION PROGRAM

Process: Police officers divert individuals with behavioral health issues away from arrest into treatment through diversion liaisons. Diversion liaisons participate in ride-alongs or arrive within 30 minutes of a request and provide screening and access to treatment.

Goals: Divert individuals with alcohol or drug-related issues or co-occurring disorders from pre-arrest and decrease the chances of future encounters with the legal system.

Learn more: <http://bit.ly/2jWeK1p>