WISCONSIN DEFLECTION INITIATIVE

Essential Elements

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1. Introduction and Background:

The Wisconsin Deflection Initiative (WDI) is a proactive community approach to address public health and safety challenges faced in many Wisconsin communities. By incorporating one or more of the six pathways of Deflection, communities can now identify and deflect at-risk populations to treatment and behavioral health services before a crisis, overdose, or new criminal activity. Deflection programs aim to connect individuals to systems of care at the earliest point possible while attempting to provide the necessary resources and skills to improve outcomes and reduce criminal activity.

Purpose and Goals:

The primary purpose of the WDI is to use a multi-faceted approach to identify and engage at-risk populations to create awareness and connections to services before a crisis, overdose, or new crime is committed.

1. Reducing Recidivism and Promoting Public Safety: By addressing the underlying factors contributing to substance use and criminal behavior, the WDI strives to reduce recidivism rates and enhance public safety. By providing individuals with the necessary resources, support, and skills to overcome their challenges, the initiative aims to break the cycle of addiction and criminal involvement, fostering safer communities for all residents.

2. Advancing Health Equity and Social Justice: The WDI is committed to addressing health disparities and promoting equitable access to care. The initiative recognizes that historically marginalized and underserved populations may face additional barriers to treatment and recovery. By prioritizing equity and social justice, the WDI seeks to ensure that all individuals, regardless of their background, receive fair and equitable access to services and support.

3. Engaging Communities and Stakeholders: The WDI emphasizes the active involvement and collaboration of community stakeholders, including law enforcement agencies, healthcare providers, treatment organizations, community-based service providers, individuals with lived experience, and other key stakeholders. By fostering partnerships and engaging diverse perspectives, the initiative aims to create tailored, community-driven solutions that effectively address local needs and priorities.

4. Promoting System-Level Change: The WDI seeks to drive broader system-level changes in policies, practices, and resource allocation to sustain and expand Deflection programs. By advocating for evidence-based approaches and fostering collaboration between criminal justice, healthcare, and social service systems, the initiative aims to create a supportive ecosystem that maximizes the potential for positive outcomes.

Rationale and Expected Outcomes:

The implementation of Deflection programs within the Wisconsin criminal justice system is based on a robust rationale and extensive evidence base. Research has consistently shown that traditional punitive approaches often fail to address the underlying issues that contribute to substance use disorders and criminal behavior. Deflection programs offer a promising alternative by diverting individuals to stabilization services, recovery services, and

treatment programs that address the root causes of their involvement in the criminal justice system.

The expected outcomes of the WDI include:

1. Increased Access to Treatment and Recovery Supports: By diverting individuals from the criminal justice system, the WDI aims to connect them with timely and appropriate treatment services. This will reduce barriers to accessing care, promote engagement in evidence-based treatment modalities, and provide the necessary support for sustained recovery.

2. Improved Individual and Community Health: The WDI seeks to improve individual health outcomes by addressing substance use disorders and mental health challenges comprehensively. By providing individuals with the necessary resources and support, the initiative aims to enhance physical and mental well-being, reduce substance-related harm, and improve overall quality of life. This, in turn, contributes to healthier and more resilient communities throughout Wisconsin.

3. Reduction in Recidivism Rates: Through early intervention, targeted diversion, and the provision of effective treatment and support, the WDI aspires to reduce recidivism rates and prevent individuals from reentering the criminal justice system. By addressing the root causes of criminal behavior and promoting personal growth and recovery, the initiative aims to break the cycle of substance use and criminal involvement.

4. Cost Savings and Efficient Resource Allocation: By diverting individuals to treatment services rather than pursuing costly criminal justice processes, the WDI aims to generate cost savings for the state. These savings can be reinvested in expanding and enhancing treatment options, community-based supports, and other resources necessary for the sustainability of the initiative.

5. Strengthened Collaborations and Community Engagement: The WDI seeks to foster collaborations among criminal justice entities, healthcare systems, social service agencies, community-based organizations, and individuals with lived experience. By working together, sharing resources, and leveraging collective expertise, the initiative aims to build a robust and interconnected system of care that effectively supports individuals in need and contributes to safer and healthier communities.

This essential element manual serves as a comprehensive guide to support the effective implementation of Deflection programs across the state. It provides essential standards, guidance, and resources necessary to ensure consistency, effectiveness, and the achievement of desired outcomes for the Wisconsin Deflection Initiative (WDI). By adhering to the principles and recommendations outlined in this manual, stakeholders can work collaboratively to transform the response to substance use and mental health issues, improve individual outcomes, and build a more just and compassionate criminal justice system for all residents of Wisconsin.

2. Program Eligibility

The Wisconsin Deflection Initiative (WDI) has established specific eligibility criteria to determine which individuals are eligible for Deflection programs. These criteria are designed to identify individuals who would benefit from treatment and recovery services while minimizing their involvement in the traditional criminal justice system. Each Deflection program could develop criteria for program eligibility that best suits their community. This should be a collaborative effort involving law enforcement, prosecutors, health services providers, public health and human services, individuals with lived experience, and members of the public if possible. The eligibility criteria may include the following considerations:

1) Offense Types: Specify the types of offenses that are eligible for Deflection, focusing on low-level offenses or offenses related to substance use disorders and mental health issues. These offenses may include drug possession, minor property offenses, or other offenses deemed appropriate for diversion under the WDI.

2) Risk and Needs Assessment: Describe the process of conducting risk and needs assessments to evaluate an individual's level of risk and identify their specific treatment needs. This assessment may include factors such as substance use severity, mental health needs, criminogenic risk factors, and other relevant considerations to determine the most appropriate intervention and level of care.

3) Age Restrictions: Specify any age restrictions that apply to the eligibility criteria. This may include considerations for diversion programs specific to juveniles or adults, or age ranges for different program components.

4) Collaboration with Law Enforcement and Referral Sources: Emphasize the importance of collaboration with law enforcement agencies and other referral sources in identifying eligible individuals. Provide guidance on establishing effective referral processes and communication protocols to ensure the seamless flow of information and referrals between law enforcement, diversion programs, and treatment providers.

5) Deflection Pathways: The Wisconsin Deflection Initiative offers multiple diversion pathways to address the specific needs of eligible individuals. These pathways are designed to connect individuals with appropriate treatment and recovery services while reducing their involvement in the traditional criminal justice system.

6) Program Exclusions: Each program should work with other community stakeholders to develop and specify any circumstances or criteria that may exclude individuals from participating in Deflection programs. This may include factors such as violent offenses, offenses involving firearms, or individuals with extensive criminal histories. The reasons for exclusions should be documented and based on community factors. Guidance on alternative pathways or interventions that may be more appropriate for these individuals should then be explored.

By establishing clear and well-defined eligibility criteria, diversion pathways, and program exclusions, the Wisconsin Deflection Initiative ensures that eligible individuals receive timely access to treatment and recovery services while minimizing their involvement in the traditional criminal justice system. These criteria and pathways support the overarching goals of the WDI in promoting recovery, reducing recidivism, and enhancing public safety in communities across the state.

3. Deflection Program Types and Pathways

Program Types

Deflection pathways are organized into two program types, Targeted Outreach and Participant Recovery and Engagement Programs (PREP).

1. Targeted Outreach

Programs are designed to identify at-risk populations and attempt to motivate them to engage in behavioral health services. Behavior health services are person-centered and individualized and should assist the individual with achieving their self-selected goals. Services offered include counseling, medication management, crisis intervention, peer support, residential services, vocational support, and case management. Targeted outreach attempts to improve desired outcomes while building trust and relationships with law enforcement, emergency medical services, and recovery and treatment services. Once the individual decides to engage with Deflection specialists, they would transition to the PREP program type.

2. Participant Recovery and Engagement Program (PREP)

Programs are designed to support the individuals who voluntarily engage with Deflection program staff. Deflection Program staff assist in creating SMART (Specific, Measurable, Attainable, Reasonable, and Time-Bound) goals that are person-centered and individualized while assisting the individual with achieving their self-selected goals. The focus of the goals should be to assist the individual in stabilizing in the community while attempting to address the underlying areas of need that have caused the individual to become at risk of overdose, crisis, or criminal justice involved. This program should continue to support the services offered during Targeted Outreach. The emphasis of this program type is to continue to support the individual with a focus on engagement and retention without judgment or bias.

Deflection Pathways

Self-referral, Officer Intervention, and First Responder and Officer Referral pathways fall under the PREP program type, and Naloxone Plus, First Responder and Officer Referral, and Active Outreach fall under the Targeted Outreach program type. The six pathways and targeted populations are described below.

1. Self-Referral

An Individual voluntarily initiates contact with a first responder agency or Deflection program for a referral to services. If the contact is initiated with a law enforcement agency, the individual engages without fear of arrest. The Self-Referral pathway targets individuals with a substance use disorder.

2. Officer Intervention (only applicable to law enforcement)

During routine activities such as patrol or response to a service call during which charges otherwise would be filed, law enforcement provides a referral to treatment, services, or a case manager, or issues a non-criminal citation to report to a program. Charges are held in abeyance until treatment and/or a social service plan is completed. The Officer Intervention pathway targets individuals in crisis or with non-crisis MHE and/ or SUD, or in situations involving homelessness, theft, or prostitution.

3. **First Responder and Officer Referral**

   As a preventative approach, during routine activities such as patrol or response to a service call, a first responder engages individuals and provides a referral to treatment, services, or a case manager. (Note: if law enforcement is the first responder, no charges are filed or arrest made) The target population is individuals in crisis or with non-crisis Mental Health Disorder (MHD) and/or substance use disorder (SUD), or in situations involving homelessness, theft, or prostitution.

4. **Active Outreach**

   A first responder intentionally identifies or seeks out individuals with SUD to refer them to a social service program or treatment and services; outreach is often done by a team consisting of a behavioral health professional and/or peer with lived experience. The target population is individuals in crisis or with non-crisis MHD and/or SUD or who are homeless.

5. **Naloxone Plus**

   A first responder and program partner (often a behavioral health professional or peer with lived experience) conduct outreach specifically to individuals who have recently experienced an opioid overdose to assist with engaging them in treatment and provide linkages to treatment and social services. The target population of this pathway is individuals with opioid use disorder (OUD) or someone subject to an accidental non-fatal overdose.

6. **Community Response**

   In response to a call for service, a team comprising of community-based behavioral health professionals (e.g., crisis workers, clinicians, peer specialists, etc.), and/or other credible messengers-individuals with lived experience-sometimes in partnerships with medical professionals, engages individuals to help do-escalate crises, mediate low-level conflicts, or address quality of life issues by providing a referral to treatment, services, or to a case manager. The target population of this pathway is individuals in crisis or with non-crisis MHD and/or SUD, or in situations involving homelessness or low-level conflicts.

4. Referral Process

The referral process is a crucial component of the Wisconsin Deflection Initiative (WDI) that enables the identification and diversion of eligible individuals from the traditional criminal justice system to appropriate treatment and recovery services. The referral process involves collaboration among various stakeholders, including law enforcement agencies, courts, community-based organizations, and service providers. This section provides guidance on establishing an effective and streamlined referral process.

1) Identification and Screening: Describe the methods for identifying eligible individuals who may benefit from Deflection programs. This may involve proactive screening by law enforcement officers during encounters, identification through court proceedings, or referrals from community-based organizations. Emphasize the importance of screening tools and protocols that identify individuals with substance use or mental health needs and align with the eligibility criteria established by the WDI.

2) Law Enforcement Engagement: Outline the role of law enforcement agencies in the referral process. Provide guidance on establishing partnerships and communication channels between law enforcement and treatment providers to facilitate referrals. Describe the training and support necessary for law enforcement officers to effectively identify eligible individuals and make appropriate referrals.

3) Diversion Assessments: Explain the process of conducting diversion assessments to evaluate the suitability of individuals for Deflection programs. These assessments may include risk and need assessments, substance use disorder assessments, mental health screenings, and other relevant evaluations. Outline the tools and protocols used for these assessments and emphasize the importance of considering individualized treatment plans based on assessment results.

4) Collaborative Case Planning: Highlight the significance of collaborative case planning involving multiple stakeholders. This includes the involvement of treatment providers, law enforcement officers, court personnel, and community-based organizations in developing comprehensive and individualized case plans for diverted individuals. Describe the process of case conferencing, coordinating services, and establishing clear roles and responsibilities for each stakeholder.

5) Treatment Referrals and Engagement: Detail the steps for referring diverted individuals to appropriate treatment and recovery services. Provide guidance on facilitating timely access to treatment, coordinating the referral process with treatment providers, and ensuring a seamless transition for individuals entering treatment programs. Emphasize the importance of engagement strategies to promote treatment adherence and retention.

5. Program Components

Deflection program components should be person-centered, individualized and assist individuals with achieving their self-selected goals. Deflection specialists should utilize a motivational interviewing approach to help the individual express a preference for change. Recognizing, responding to, and eliciting change is a crucial factor in supporting individuals during their journey to positive behavior change. Services offered could be counseling, medication management, crisis intervention, mental health services, substance abuse treatment, peer support/recovery support, residential services, vocational support, harm reduction, and case management. Exploring effective ways to provide services via telehealth or using technology should also be explored. Specifically in areas where services offered are limited.

1. Counseling and Therapeutic Services: Emphasize the importance of counseling services within Deflection programs. Specify the standards and requirements for counseling services, including the use of evidence-based counseling modalities such as cognitive-behavioral therapy (CBT), motivational interviewing, or dialectical behavior therapy (DBT). Highlight the need for individual and group counseling sessions, as well as the provision of specialized counseling for co-occurring disorders, trauma, or other specific needs.

2. Medication Management: When appropriate, participants with an Opioid Use Disorder should be provided with education regarding medication that is FDA-approved and evidence-based to assist with their recovery. When possible, connection to services should be provided for all three FDA-approved medications.

3. Substance Abuse Treatment: Describe the essential elements and requirements for substance abuse treatment within Deflection programs. Outline the standards for evidence-based treatment interventions, such as medication-assisted treatment (MAT) for opioid use disorders or comprehensive outpatient or residential treatment programs. Emphasize the importance of individualized treatment plans, regular monitoring of progress, and ongoing support for sustained recovery.

4. Mental Health Services: Address the provision of mental health services within Deflection programs. Specify the standards and requirements for accessing mental health services, including individual therapy, psychiatric assessment, medication management, or specialized treatments for mental health disorders. Highlight the need for coordinated care between substance use treatment providers and mental health professionals to address co-occurring disorders effectively.

5. Education and Vocational Training: Discuss the inclusion of education and vocational training components within Deflection programs. Specify the standards and requirements for educational services, such as GED programs, literacy training, or vocational skills development. Emphasize the importance of helping participants acquire the necessary skills and knowledge to enhance their employment prospects and contribute to their long-term recovery.

6. Housing Assistance: Highlight the provision of housing assistance as a critical component of Deflection programs. Outline the standards and requirements for housing support, including transitional housing, supportive housing, or rental assistance programs. Address the need for safe and stable housing to support

participants' recovery journey and reduce the risk of homelessness or housing instability.

7. Peer Support Services: Discuss the inclusion of peer support services within Deflection programs. Specify the standards and requirements for peer support programs, including the role of peer recovery coaches or mentors. Emphasize the importance of peer-led support groups, recovery community centers, or other peer-based interventions that foster connection, support, and empowerment among program participants.

8. Family and Community Engagement: Highlight the significance of family and community engagement within Deflection programs. Describe the standards and requirements for involving families, significant others, or supportive community members in the treatment and recovery process. Address the need for family therapy, educational programs, or community-based initiatives that promote understanding, communication, and support for participants and their loved ones.

9. Case Management and Coordinated Care: Discuss the role of case management and coordinated care in Deflection programs. Specify the standards and requirements for case management services, including the development and implementation of individualized case plans, coordination of services, and regular monitoring of progress. Emphasize the importance of collaborative partnerships among treatment providers, community organizations, and support services to ensure a seamless and coordinated approach to care.

6. Monitoring, Evaluation, Data Management

Data collection, performance measurement, and evaluation are important components of the Wisconsin Deflection Initiative (WDI) to assess adherence to the WDI standards and specific Deflection program objectives. Deflection programs within the WDI are strongly encouraged to engage in ongoing data collection, monitoring and performance measurement, and evaluations to better understand their daily program operations and identify program effects over time.

Monitoring: The Building Blocks of Evaluation

Program monitoring is the ongoing, consistent collection of information about program activities. It is a crucial component of strategic program decision-making, allowing programs to track their routine program operations and make improvements where needed.

The Wisconsin Statewide Deflection Performance Measures Guide was designed to enhance Wisconsin deflection monitoring and evaluation efforts. The guide includes a set of suggested outcome and performance measures tailored for Wisconsin deflection programs, making it useful for monitoring programs with varied designs. The development of the guide was a collaborative effort among program practitioners, researchers, and evaluators in Wisconsin, ensuring that the measures align with key program objectives identified by stakeholders.

Programs within the Wisconsin Deflection Initiative (WDI) will be able to use the Performance Measures Guide as a roadmap for developing data collection and measuring key program activities and outcomes. Monitoring and evaluation are essential to continuous program improvement, and this guide is an important resource for continually monitoring a deflection program's progress toward its objectives, identifying areas for improvement, and refining operations and services.

The monitoring measures in the guide provide insight into the target Deflection population (e.g., demographics, primary substance used), referral and admission factors (e.g., referral sources, eligibility requirements), and linkage to and engagement in services. Deflection programs within the WDI can use this information to make timely, informed decisions to improve or refine their programs. Additionally, these measures lay the groundwork for more complex individual and multi-program outcome analyses in the future.

The WDI monitoring and evaluation measures assess Deflection programs based on two program designs and their associated performance categories:

Targeted Outreach Design
Performance Categories: 1. Outcomes   2. Processing & Outreach   3. Outreach Visit Details
Participant, Recovery, and Engagement Program
Performance Categories: 1. Outcomes

2. Processing & Admission

3. Dosage & Program Services

4. Social Measures

Please visit the Wisconsin Deflection Initiative CJCC webpage here to view and download a copy of the Wisconsin Statewide Deflection Performance Measures Guide: https://cjcc.doj.wi.gov/initiative/wisconsin-deflection-initiative-wdi-0. The measures included in this guide may not be exhaustive of all Deflection programs. Deflection programs should expand on the measures and adapt them to their programs if they have the resources and staff to do so.

Evaluation

Evaluation is crucial to inform evidence-based decision-making and assess program implementation and effectiveness. The WDI monitoring and evaluation measures are foundational for evaluating whether Deflection programs impact the incidence of fatal or nonfatal overdose, improve criminal justice outcomes (e.g., reduce recidivism, jail populations, or court caseloads), or advance the overall health and well-being of participants. The findings of program evaluations also contribute to support for continued funding and program expansion. Both program successes like low recidivism rates and program struggles like average treatment wait times can bolster program's and state leader's applications for additional funding.

Recommendations for evaluations:

- Identify an evaluator early in the program implementation process.

- Work with your evaluator during program implementation to identify data sources and specific elements to track for evaluation and monitoring.

- If it's not possible to work with an evaluator right away, use the Wisconsin Statewide Deflection Performance Measures Guide to identify key data sources and begin tracking them from the start of the program.

Data Collection:

Systematic data collection is the foundation of any evaluation. It is recommended that sites track their activities in a data collection tool designed by the evaluator or transfer the necessary data to the evaluator. Deflection programs funded by the Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) FY19 grant currently enter program data in REDCap, a web-based system for collecting data and designing surveys. Data should be recorded as close as possible to recordable events.

Data about Deflection programs and program participant data can come from a variety of sources, depending on the proposed use of the data and/or data sharing agreements (see the section on data sharing legal requirements and agreements for more information). Wisconsin sources may include:

- Participant self-report.

- Deflection programs.

- Law enforcement including call for service records and police reports.

- Emergency Medical Services.

- Fire Department Services.

- County medical examiner.

- Treatment or other community-based service providers.

- [Health claims](#).

- Prescription Drug Monitoring Program (PDMP).

- [Consolidated Court Automation Programs (CCAP)](#).

- [Wisconsin Administrative Data Core (WADC)](#): FoodShare (SNAP/Food Stamps), BadgerCare (Medicaid/SCHIP), Medicaid Claims & Encounters, Department of Corrections, Homelessness Management Information System.

For more information about which source is used to calculate particular deflection performance measures, please see the [Wisconsin Statewide Deflection Performance Measures Guide](#).

Data Sharing Legal Requirements

Deflection programs often include collaboration from a wide range of agencies which can include law enforcement, emergency medical services (EMS), fire departments, district attorney's office, community services, treatment providers, and recovery support agencies. As Deflection is a collaborative effort, it requires some level of operational data sharing. Operational data is collected to help manage and coordinate Deflection program activities. Common examples of operational data collection in Deflection programs include collecting law enforcement, EMS, or Fire Department calls for service data about nonfatal overdoses or recording participant attendance at community-based services. Much of this information is also essential to share with evaluators for performance measurement and outcome analysis.

Any type of data sharing, whether interagency or with evaluators, can be subject to different information-sharing legal requirements. The Health Insurance Portability and Accountability Act (HIPAA), CFR 42 Part 2, and Criminal Justice Information Services (CJIS) requirements may restrict what information can be shared or require certain authorizations to share information. Referral to the Deflection program, outreach visits with prospective participants, and treatment progress updates are the most common scenarios where information sharing is subject to legal requirements. Agencies implementing a Deflection program should consult their respective legal counsel at the beginning of the implementation process to determine when they are subject to different information-sharing legal requirements.

Resources regarding information sharing in compliance with HIPAA and CFR 42 Part 2:
- HIPAA and CFR 42 Part 2 Regulations

    o [Summary of the HIPAA Privacy Rule](#)

    o [HIPAA 45 CFR Part 160](#)

    o [HIPAA 45 CFR Part 164](#)

    o [42 CFR Part 2](#)

- HIPAA and CFR 42 Part 2 Information Sheets and FAQs

- SAMHSA. Disclosure of Substance Use Disorder Patient Records: Does Part 2 Apply to Me?
    - SAMHSA. Disclosure of Substance Use Disorder Patient Records: How Do I Exchange Part 2 Data?
    - SAMHSA. Substance Abuse Confidentiality Regulations.
    - (2022). ODMAP and protected health information under HIPAA: Guidance Document. *Legislative Analysis and Public Policy Association.*
    - Data Collection, Sharing, and Privacy: Legal Considerations and Examples from the Field (video). COSSUP Resource Library.
    - Frequently Asked Questions: Data-Driven Justice and the Health Insurance Portability and Accountability Act (HIPAA). COSSUP Resource Library.
- Releases of Information
    - COSSUP Resource Library: Data & Information Sharing.
- Deflection and Legal Information Sharing Requirements
    - Worobiec, M. & Firesheets, K.C. (2022). Compliance is doable! A framework for navigating privacy regulations in public health and public safety partnerships. *Journal of Public Health Management and Practice 28*(6), 367-371. https://doi.org/10.1097/PHH.0000000000001572.
    - Worobiec, M., Firesheets, K.C., Reichert, J., & MPhil, J.T. (2023). Balancing data privacy with access to health services and research: Facilitating confidential information sharing in U.S. multisystem collaborations. *Value in Health 26*(9), 1325-1328. https://doi.org/10.1016/j.jval.2023.05.008.

Memorandums of Understanding

Agency collaborations in any Deflection program can be complex. Therefore, it is recommended to develop an interagency agreement, specifically a Memorandum of Understanding, to formalize interagency relationships. A Memorandum of Understanding (MOU) is an agreement between two or more parties that outlines the expectations and responsibilities of each party. An information-sharing partnership may also outline the information to be exchanged by each party and the responsibilities of each party to protect the information.

Developing an MOU is an important part of establishing interagency collaborations and evaluator partnerships. However, the process can be lengthy. Start early in the Deflection program implementation process. Begin holding meetings and developing the Memorandum of Understanding document with agencies as soon as you have developed a partnership. Always ensure the MOU or interagency agreement is reviewed by each agency's legal counsel.

Resources about interagency agreements:

- Wisconsin Criminal Justice Coordination Council. Memorandum of Understanding (MOU) Template.
- ODMAP Data Sharing Agreement Sample Template. COSSUP Resource Library.
- Sample: Interagency Data Sharing Agreement. COSSUP Resource Library.

- [Sample Data Sharing Agreements. COSSUP Resource Library.](#)
- [Using and Sharing Data Resources. National Association of Counties.](#)

7. Training and Capacity Building

It is important to provide comprehensive training programs to ensure that staff involved in implementing a Deflection initiative have the necessary knowledge, skills, and guidance. Proper education and training are essential for effective implementation, adherence to Deflection principles, procedural guidelines, cultural competency, and building meaningful engagement with program participants. A list of possible trainings is included in the appendices.

1. Training Needs Assessment: It is important to understand the process of conducting a training needs assessment to identify the specific training requirements for staff involved in the Deflection initiative. The assessment may include surveys, interviews, or focus groups to gather insights on existing knowledge gaps, skill deficiencies, and areas that require additional support. It is important to involve staff, supervisors, and key stakeholders in the assessment process.

2. Deflection Principles and Procedural Guidelines: Develop training programs that provide a comprehensive understanding of Deflection principles and procedural guidelines. Cover topics such as the purpose of Deflection, eligibility criteria, diversion pathways, referral processes, participant engagement strategies, and program components. Explain the importance of adhering to established guidelines to ensure consistency, fairness, and effective program implementation.

3. Cultural Competency and Equity: Incorporate training on cultural competency and equity to ensure staff members are sensitive to and respectful of the diverse backgrounds and needs of program participants. Provide education on understanding cultural differences, addressing biases, and delivering services in a culturally appropriate manner. Stress the importance of providing equitable access to services and creating an inclusive environment for all individuals.

4. Trauma-Informed Care: Include training on trauma-informed care principles to equip staff with the knowledge and skills to support individuals who have experienced trauma. Educate staff on the impact of trauma, trauma-sensitive communication, creating safe environments, and implementing trauma-informed practices. Emphasize the importance of trauma-informed care in promoting participant well-being, engagement, and positive outcomes.

5. Effective Engagement with Program Participants: Develop training programs that focus on effective engagement strategies with program participants. Cover topics such as building rapport, active listening, motivational interviewing, strengths-based approaches, and fostering a collaborative and supportive relationship. Guide effectively communicating program expectations, setting goals, and empowering participants throughout their recovery journey.

6. Professional Development and Skill Enhancement: Highlight the importance of ongoing professional development and skill enhancement for staff members involved in the Deflection initiative. Encourage continuous learning through workshops, conferences, webinars, and relevant training opportunities. Promote the importance of staying up to date with emerging research, best practices, and advancements in the field of Deflection and substance use treatment.

7. Collaboration with External Training Providers: Explore collaboration with external training providers, subject matter experts, or academic institutions to deliver

specialized training programs. Utilize their expertise to enhance staff knowledge and skills in specific areas such as evidence-based practices, trauma-informed care, cultural competency, or other relevant topics. Foster ongoing partnerships with these providers to ensure access to quality training resources.

8. Evaluation of Training Programs: Implement evaluation mechanisms to assess the effectiveness of training programs. Utilize feedback surveys, post-training assessments, or focus groups to gather insights on the impact of training, identify areas for improvement, and make necessary adjustments to enhance the training curriculum. Continuously assess the effectiveness of training programs to ensure they meet the evolving needs of staff members and the Deflection initiative.

8. Program Sustainability and Expansion

Strategies for Program Sustainability may include:

1. Diversifying Funding Sources: Explore additional funding sources beyond initial grants or allocations. Identify potential funding opportunities from federal, state, and local government agencies, private foundations, philanthropic organizations, or corporate sponsorships. Develop a comprehensive funding plan that includes multiple revenue streams to support program sustainability.

2. Collaboration and Resource Sharing: Promote collaboration and resource sharing among Deflection programs, community organizations, and service providers. Encourage partnerships to pool resources, share costs, and leverage expertise. Explore opportunities for joint funding applications, shared staffing models, or shared infrastructure to maximize efficiency and sustainability.

3. Program Evaluation and Performance Metrics: Emphasize the importance of program evaluation and the use of performance metrics to demonstrate the effectiveness and impact of Deflection programs. Regularly assess program outcomes, participant success rates, and cost-effectiveness. Use evaluation findings to showcase program success and attract ongoing funding support.

4. Community Engagement and Support: Highlight the significance of community engagement and support for program sustainability. Foster relationships with community stakeholders, including local businesses, advocacy groups, and civic organizations. Seek community input, involve community members in program planning and implementation, and cultivate community support for continued funding and resources.

Funding Mechanisms: Outline potential funding mechanisms that can support the sustainability of Deflection programs:

1. Grants and Contracts: Encourage Deflection programs to pursue grant opportunities and secure contracts with government entities or service agencies. Guide grant writing, grant management, and contract negotiation to maximize funding possibilities.

2. Fee-for-Service Models: Explore fee-for-service models where Deflection programs can generate revenue through billable services, such as counseling, assessments, or training. Establish appropriate fee structures and reimbursement mechanisms in collaboration with payers or insurance providers.

3. Medicaid Reimbursement: Investigate opportunities to secure Medicaid reimbursement for eligible services provided within Deflection programs. Work closely with state agencies or managed care organizations to navigate Medicaid billing requirements and maximize reimbursement.

4. Impact Investment and Social Finance: Explore impact investment and social finance models to attract private investments or impact investors who are interested in supporting innovative social programs. Develop partnerships with impact investment firms or explore the possibility of social impact bonds to fund Deflection initiatives.

Scaling Successful Program Models: Identify successful program models within the Wisconsin Deflection Initiative and explore avenues for scaling them up. Share best practices,

lessons learned, and program outcomes to support replication in new locations or expansion within existing jurisdictions.

1. Geographic Expansion: Consider geographic expansion of the Deflection initiative to reach more communities across Wisconsin. Identify regions with high needs and limited access to services. Collaborate with local stakeholders, government entities, and community organizations to assess the feasibility and develop plans for expanding Deflection programs to these areas.

2. Partnerships and Collaboration: Foster partnerships and collaboration with other jurisdictions, counties, or states to share resources, expertise, and program models. Explore opportunities for cross-jurisdictional initiatives, knowledge exchange, and joint funding applications to expand the reach and impact of the Deflection initiative.

3. Policy Advocacy and Legislative Support: Engage in policy advocacy and work with legislators to advocate for supportive policies, funding streams, or legislative changes that facilitate the sustainability and expansion of Deflection programs. Collaborate with advocacy groups, professional associations, and stakeholders to build political support and drive policy reforms.

9. Quality Assurance and Compliance

1. Set Standards for Quality Assurance: Establish clear standards for quality assurance to ensure that Deflection programs adhere to established requirements and program guidelines. These standards should encompass all aspects of program implementation, including participant eligibility, referral processes, treatment components, case management, and overall program operations. Specify the expectations and benchmarks that programs must meet to ensure consistent and high-quality service delivery.

2. Compliance with Program Requirements: Define protocols for compliance with program requirements to ensure consistent adherence to established standards. Specify the essential program components, eligibility criteria, and procedural guidelines that must be followed. Emphasize the importance of program fidelity, integrity, and accountability in delivering effective Deflection services. Provide detailed instructions and checklists to guide program staff in meeting compliance requirements.

3. Internal Audits: Develop procedures for internal audits to be conducted by program staff or designated personnel. These audits should evaluate program operations, documentation practices, and adherence to program requirements. Assess the accuracy and completeness of participant records, referral processes, and service delivery to ensure consistency and compliance.

4. Site Visits: Outline protocols for site visits to assess program implementation and compliance. Site visits may involve a physical visit to program locations, interviews with staff members and participants, and observations of program activities. Evaluate the program's physical environment, participant engagement, and the overall quality of services provided.

5. Data Integrity and Reporting: Emphasize the importance of data integrity and accurate reporting to ensure compliance with reporting requirements and program evaluation. Guide data collection, management, and reporting procedures to ensure consistency and reliability. Establish protocols for regular reporting of program outcomes, participant progress, and compliance with data reporting standards

6. Continuous Quality Improvement: Promote a culture of continuous quality improvement within Deflection programs. Encourage program staff to actively participate in quality improvement initiatives, share feedback, and contribute to program enhancements. Implement mechanisms to gather input from staff, participants, and stakeholders to identify opportunities for program improvement and ensure ongoing compliance with established standards.

7. Training and Technical Assistance: Offer training and technical assistance to support program staff in meeting quality assurance and compliance requirements. Provide regular training sessions on program standards, compliance protocols, data reporting, and quality improvement strategies. Offer ongoing technical assistance to address staff questions, and challenges, and provide guidance on achieving and maintaining compliance.

8. Collaboration with Oversight Agencies: Establish collaborative relationships with oversight agencies or entities responsible for monitoring and regulating Deflection programs. Maintain open lines of communication, share program updates, and

collaborate on quality assurance efforts. Seek guidance and feedback from oversight agencies to ensure alignment with best practices and compliance with regulatory requirements.

10. Legal and Policy Framework:

Describe the relevant state laws, regulations, and policies that form the basis for the Deflection initiative in Wisconsin. Ensure compliance with existing statutes and any specific requirements unique to the jurisdiction. Currently, Deflection laws, regulations, and broad-based policies are non-existent in Wisconsin. There are examples of Deflection laws, regulations, and broad-based policies implemented in a limited number of other states. Model laws, regulations, and broad-based policies have been established and are included in the appendices.
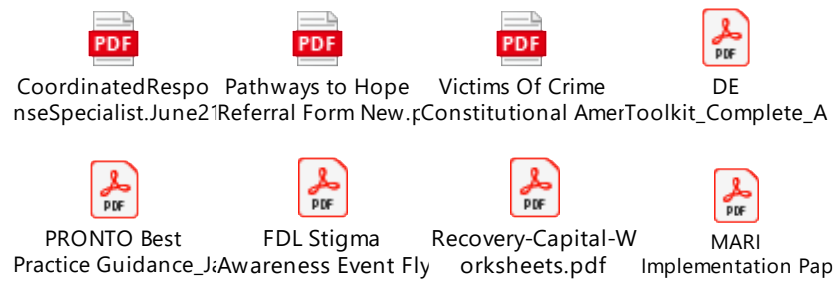
11. Appendices: Resources, Templates and References

Resources

1. PAARI – The Police Assisted Addiction and Recovery Initiative (paariusa.org)
2. PTACC | police treatment community collaborative (ptaccollaborative.org)
    a. PTACC-6-Pathways-of-Deflection-Onepager.pdf
    b. PTACC_GuidingPrinciples_10.9.18.pdf
3. Home | LAPPA (legislativeanalysis.org)
    a. Deflection-Fact-Sheet-FINAL LAPPA.pdf
    b. Model Law Enforcement and Other First Responder Deflection Act | LAPPA (legislativeanalysis.org)
4. GAINS Center for Behavioral Health and Justice Transformation | SAMHSA
    a. Deflection and Pre-arrest Diversion to Prevent Opioid Overdose - National Council for Mental Wellbeing (thenationalcouncil.org)
    b. Connecting Communities to Substance Use Services Practical Approaches for First Responders.pdf
5. Perspectives from law enforcement officers who respond to overdose calls for service.pdf
6. Home - COSSUP Resource Center Site-based Grants Jail Resource Center COSSUP Demonstration Projects Training and Technical Assistance - COSSUP Resource Center
    a. Illicitly Manufactured Fentanyl in the U.S. — Trends and Truths - COSSUP Resource Center
    b. Critical Elements for Implementing First Responder and Officer Referral Deflection Programs - COSSUP Resource Center
    c. Critical Elements for Implementing Active Outreach Deflection Programs - COSSUP Resource Center
    d. Critical Elements for Implementing the Officer Intervention Pathway of Pre-Arrest Diversion - COSSUP Resource Center
    e. First Responder-Led Diversion and Outreach: An Overview of the Field and a Primer for Implementation - COSSUP Resource Center
    f. Considerations for First Responder Deflection in Rural Communities - COSSUP Resource Center
7. BJA_CHJ-First_Responder_Deflection_Infographic 2021.pdf
8. IIR_Model_Deflection_Law_April_2022.pdf
9. NADCP-Journal for Advancing Justice, Vol III - LE Deflection.pdf
10. Pre-Arrest Diversion and Deflection Framework.pdf
11. Justice Community Opioid Innovation Network (jcoinctc.org)

a. [First Responder Deflection: A Warm Handoff to Services in the Community - Justice Community Opioid Innovation Network Coordination and Translation Center (jcoinctc.org)](#)

   b. [Deflection-eCourse-resources.pdf (jcoinctc.org)](#)

12. [Navigating Confidentiality in First Responder Deflection | Focus: PHI (coephi.org)](#)

Templates

CoordinatedResponseSpecialist.June21

Pathways to Hope Referral Form New.p

Victims Of Crime Constitutional Amer

DE Toolkit_Complete_A

PRONTO Best Practice Guidance_Ja

FDL Stigma Awareness Event Fly

Recovery-Capital-Worksheets.pdf

MARI Implementation Pap

References

1. [White House Announces State Model Law to Expand Programs that Deflect People with Addiction to Care | ONDCP | The White House](#)

2. Arizona PBS Deflection Initiative

   a. [AZ360: COVID-19 preparedness, TPD Deflection Program, Census undercount (youtube.com)](#)

3. [Police drug busts can cost lives, researchers say: NPR](#)

4. [Spatiotemporal Analysis Exploring the Effect of Law Enforcement Drug Market Disruptions on Overdose, Indianapolis, Indiana, 2020–2021 | AJPH | Vol. 113 Issue 7 (aphapublications.org)](#)

5. https://vimeo.com/869837056?utm_campaign=400129_%40the%20Center%20October%204%202023&utm_medium=email&utm_source=dotdigital

6. [The Call - This American Life](#)

7. https://www.kob.com/new-mexico/state-officials-release-results-of-wastewater-testing-on-metro-schools/

8. https://www.sciencedirect.com/science/article/pii/S0376871623012784?dgcid=raven_sd_aip_email

9. [Reduced drug use is a meaningful treatment outcome for people with stimulant use disorders | National Institutes of Health (NIH)](#)

10. [Superior Police Department swears in new Police Chief (northernnewsnow.com)](#)

11. [Deflection and Pre-arrest Diversion to Prevent Opioid Overdose - National Council for Mental Wellbeing (thenationalcouncil.org)](#)

12. [Charting the fourth wave: Geographic, temporal, race/ethnicity and demographic trends in polysubstance fentanyl overdose deaths in the United States, 2010–2021 - Friedman - 2023 - Addiction - Wiley Online Library](#)

13. [Eastern District of Pennsylvania | United States Files Statement of Interest to Prevent Discrimination and Ensure Access to Treatment for Opioid Use Disorder in Pennsylvania Jails | United States Department of Justice](#)

14. [Factors Affecting Comfort in Disclosing Alcohol and Other Drug Histories (addictionpolicy.org)](#)

15. [Media Gallery | LAPPA (legislativeanalysis.org)](#)