



Tamaya Dennard
Councilmember

201900523

March 19, 2019

MOTION

WHEREAS, the City Council of Cincinnati supports and expresses its appreciation for creative solutions to pervasive criminal justice challenges, particularly programs that increase collaboration between social service organizations and law enforcement institutions to prioritize positive mental health interventions, treatment, and rehabilitation; and

WHEREAS, the Hamilton County Board of County Commissioners 2017-2018 Work Plan and Policy Agenda included “developing new tools for law enforcement to reduce the incidence of recurring overdoses, including implementation of a pre-arrest diversion program” as a policy priority; and

WHEREAS, in response, the Hamilton County Heroin Coalition conducted research, and discussed implementation of Law Enforcement Assisted Diversion (LEAD); and

WHEREAS, LEAD is a program which allows law enforcement officers to make referrals directly to case managers who work with offenders to address issues such as homelessness, addiction, or mental illness, and therefore reduces crime and recidivism by addressing the underlying conditions that tend to precede criminal activity;

WHEREAS, the Hamilton County Heroin Coalition partnered with Interact for Health to collect and analyze stakeholder data, in which surveyed participants represented law enforcement, local government, behavioral health, judicial, and other entities. Specific findings can be found in the attached memo, which includes the following:

- 90% of respondents felt the time is right to concretely plan for a diversion program launch;
- A robust tracking system is necessary for success, as well as clearly defined roles and protocols;
- One administrative authority to oversee the program; a dedicated department within the Hamilton County administrative structure was most favored; and

WHEREAS, at the 2018 National Police Treatment and Community Convention, the delegation from Hamilton County won a competitive grant to provide technical assistance and training for the implementation of LEAD in Hamilton County. The key elements of this grant proposal can be found in the attached memo to this Motion, and include the following:

City of Cincinnati



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Cincinnati, Ohio 45202

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Tamaya Dennard
Councilmember

- Leveraging existing Heroin Coalition partnerships to Implement LEAD;
- Taking steps to ensure equity in program administration and affected populations;
- Making program data open and quickly available to the public; and

WHEREAS, Heroin Coalition Partners received an invitation to participate in the formulation of a policy recommendation for LEAD implementation, and as a result, the recommendations that can be found in the attached documents contain information regarding the feedback from treatment providers, law enforcement officials, prosecutors and defense attorneys, and other Hamilton County Heroin Coalition partners; and

WHEREAS, The Hamilton County Office of Reentry possesses the resources and experience to successfully implement the case management necessary for LEAD implementation in Hamilton County, and the Office of Reentry meets the criteria designated by critical stakeholders as outlined in the attached because it is a government agency with a history of successful partnerships with law enforcement agencies and the court system; and

WHEREAS, Hamilton County applied for a United States Department of Justice Grant to fund a LEAD pilot program, and was awarded \$500,000; and

WHEREAS, the grant application was submitted with letters of support from U.S. Senator Sherrod Brown, U.S. Senator Rob Portman, The Hamilton County Coroner, The Mental Health and Recovery Services Board, The Health Collaborative, Hamilton County Job and Family Services, Interact for Health, Mercy Health, Talbert House, The Village of Newtown, The Hamilton County Association of Police Chiefs, and Cincinnati Mayor John Cranley; and

WHEREAS, The Heroin Coalition has engaged the City Administration, City Council, and Cincinnati Police Department regarding the proposed launch and implementation of a LEAD pilot program in the City of Cincinnati; and

WHEREAS, if the pilot program is a success, it could expand into a shared service offered by Hamilton County to all cities, villages, and townships within its jurisdiction;

WE MOVE that the Police Department take all steps necessary and proper to implement a LEAD pilot program, utilizing the above referenced grant funds and, in accordance with the guidance included in the attachments, utilizing the Hamilton County Office of Reentry as an administrative and operational partner; and

City of Cincinnati



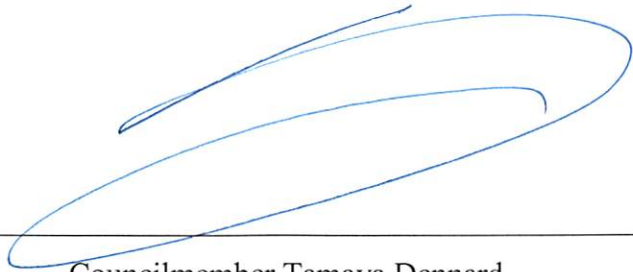
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WE FURTHER MOVE that the below-named city officials will appoint the appropriate individuals as representatives from Hamilton County and the City of Cincinnati to a Policy Control Group as described in an attachment to oversee a LEAD pilot program, which will consist of the following appointees:

- A Representative of Cincinnati City Council, appointed by Cincinnati City Council
- A Representative of the Office of the Mayor of Cincinnati, appointed by the Mayor of Cincinnati
- Office of the City Prosecutor, as assigned by the Cincinnati City Manager
- Office of the Cincinnati Chief of Police, as assigned by the Chief of Police
- The Chair of the Hamilton County Heroin Coalition, as established by the Hamilton County Board of County Commissioners
- The Program Coordinator of the Hamilton County Heroin Coalition, appointed by the County Administrator
- Hamilton County Office of Reentry, appointed by the County Administrator
- A Representative of the Office of the Public Defender, appointed by the County Administrator
- A Representative of the Ohio Justice and Policy Center (OJPC), recommended by OJPC and appointed by the County Administrator



Councilmember Tamaya Dennard



Tamaya Dennard
Councilmember

STATEMENT

The truth is that we can't arrest away crime. Attempting to do so does create overcrowded jails and prisons. We must create alternatives to arresting and prosecuting low-level offenses. People make mistakes. Minor and nonviolent mistakes shouldn't follow you for the rest of your life. Having an arrest record jeopardizes current and future employment, compromises student loans and blocks access to housing.

Law Enforcement Assisted Diversion, a pre-arrest diversion program, considers immediate and long-term needs for health services, social and economic support to help keep people needlessly out of the criminal justice system. Instead, we can help to direct people to the continuum of assistance and services they need including, but not limited to, emergency housing, access to food, health services, employment and education.

On motion of Ms. Driehaus, seconded by Ms. Summerow Dumas the following resolution was adopted...

**RESOLUTION DIRECTING THE COUNTY ADMINISTRATOR TO IMPLEMENT A
PILOT LAW ENFORCEMENT ASSISTED DIVERSION (LEAD) PROGRAM IN
PARTNERSHIP WITH THE CITY OF CINCINNATI**



BY THE BOARD:

WHEREAS, the Hamilton County Board of County Commissioner's 2017-2018 Work Plan and Policy Agenda included "developing new tools for law enforcement to reduce the incidence of re-occurring overdoses including implementation of pre-arrest diversion program" as a policy priority; and

WHEREAS, in response, the Hamilton County Heroin Coalition conducted research, and discussed implementation of Law Enforcement Assisted Diversion (Hereinafter "LEAD"); and

WHEREAS, LEAD is a program which allows law enforcement officers to make referrals directly to case managers who work with offenders to address issues such as homelessness, addiction, or mental illness, and therefore reduces crime and recidivism by addressing the underlying conditions that tend to precede criminal activity;

WHEREAS, the Hamilton County Heroin Coalition partnered with Interact for Health to collect and analyze stakeholder data. The surveyed participants represented law enforcement, local government, behavioral health, judicial, and other entities. Specific findings on this study can be found in the memo attached to this Resolution as 'Exhibit A,' and include the following:

- 90% of respondents felt the time is right to concretely plan for a diversion program launch;
- A robust tracking system is necessary for success, as well as clearly defined roles, and clear protocols for everyone involved;
- One administrative authority to oversee the program. A dedicated department within the Hamilton County administrative structure was most favored; and

WHEREAS, at the 2018 National Police Treatment and Community Convention, the delegation from Hamilton County won a competitive grant to provide technical assistance and training for the implementation of LEAD in Hamilton County. The key elements of this grant proposal can be found in the memo attached to this Resolution as 'Exhibit B,' and include the following:

1. Leveraging existing Heroin Coalition partnerships to Implement LEAD;
2. Taking steps to ensure equity in program administration and affected populations;
3. Making program data open and quickly available to the public; and

WHEREAS, Heroin Coalition Partners received an invitation to participate in the formulation of a policy recommendation for LEAD implementation, and as a result, the recommendations that can be found in the attached Exhibit B contain information regarding the feedback from treatment providers, law enforcement officials, prosecutors and defense attorneys, and other



Heroin Coalition partners; and

WHEREAS, The Hamilton County Office of Reentry possesses the resources and experience to successfully implement the case management necessary for LEAD implementation in Hamilton County, and the Office of Reentry meets the criteria designated by critical stakeholders as outlined in Exhibit A because it is a government agency with a history of successful partnerships with law enforcement agencies and the court system; and

WHEREAS, Hamilton County applied for a Federal Department of Justice Grant to fund a pilot program of LEAD, which application was supported by Senator' and was awarded \$500,000; and

WHEREAS, the grant application was submitted with letters of support from U.S. Senator Sherrod Brown, U.S. Senator Rob Portman, The Hamilton County Coroner, The Mental Health and Recovery Services Board, The Health Collaborative, Hamilton County Job and Family Services, Interact for Health, Mercy Health, Talbert House, The Village of Newtown, The Hamilton County Association of Police Chiefs, and Cincinnati Mayor John Cranley; and

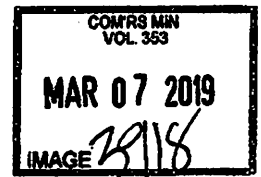
WHEREAS, The Heroin Coalition Has engaged the City of Cincinnati and Cincinnati Police Department regarding a LEAD pilot program, and the Cincinnati City Council is considering that request; and

WHEREAS, if the program is a success, it could expand into a shared service offered by Hamilton County to all cities, villages, and townships within its jurisdiction; and

NOW, THEREFORE, BE IT RESOLVED by the Board of Commissioners of Hamilton County, Ohio, that the County Administrator is hereby directed to implement a LEAD Pilot, program utilizing the above referenced grant funds and in accordance with the guidance included in the attached Exhibits A and B, utilizing the Hamilton County Office of Reentry in partnership with the City of Cincinnati.

BE IT FURTHER RESOLVED that the Administrator will appoint the appropriate individuals as representatives from Hamilton County to a Policy Control Group as described in Exhibit B to oversee the LEAD pilot program, which will consist of the following:

- A Representative of the Cincinnati City Council appointed by the city council
- A Representative of the Office of the Mayor of Cincinnati, appointed by the Mayor
- Office the City Prosecutor, as assigned by the City of Cincinnati
- Office of the Cincinnati Chief of Police, as assigned by the Chief of police
- The Chair of the Hamilton County Heroin Coalition, as established by the Hamilton County Board of County Commissioners
- The Program Coordinator of the Hamilton County Heroin Coalition appointed the County Administrator
- Hamilton County Office of Re-entry appointed by the County Administrator:
- A Representative of the Office of the Public Defender appointed by the County Administrator



- A Representative of the Ohio Justice and Policy Center, recommended by said organization and appointed by the County Administrator

ADOPTED at a regularly adjourned meeting of the Board of County Commissioners of Hamilton County, Ohio, this 7th day of March, 2019.

Driehaus YES

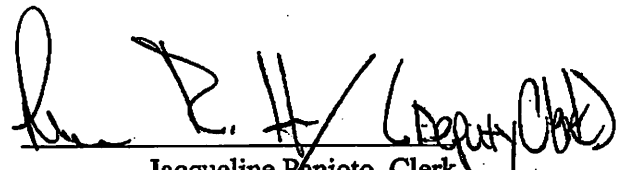
Summerow Dumas YES

Portune YES

CERTIFICATE OF CLERK

IT IS HEREBY CERTIFIED that the foregoing is true and correct transcript of a resolution adopted by the Board of County Commissioners in session this 7th day of March, 2019.

IN WITNESS WHEREOF, I have hereunto set my hand and affixed the Official Seal of the Office of the Board of County Commissioners of Hamilton County, Ohio, this 7th day of March, 2019.



Jacqueline Panioto, Clerk
Board of County Commissioners
Hamilton County, Ohio

Summary of Pre-arrest Diversion Stakeholder Interviews

Process

This project was initiated by the Hamilton County Heroin Coalition to consider the issues and concerns involved in implementing a pre-arrest diversion program. The Coalition made diversion a priority as part of its July 2017 strategic plan. The lead project partners were Denise Driehaus and Alex Linser (Hamilton County Board of Commissioners), Tom Fallon (Hamilton County Heroin Coalition Task Force), Kelly Firesheets (Interact for Health) and Emily Manning (Hamilton County administration). The planning group, with the knowledge of the larger Coalition Steering Committee, decided to hire a facilitator to collect stakeholder data. Interact for Health funded the project; Hamilton County funds were not used.

This following definition of pre-arrest diversion was adopted for the interviews:

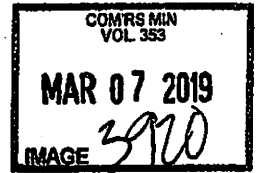
A partnership between law enforcement, service providers, and the court system that allows police officers to divert people into treatment instead of arresting them, when the criminal activity is likely related to untreated mental illness, addiction, and/or extreme poverty.

One preliminary stakeholder interview was conducted on December 6, 2017; forty interviews were conducted between April 30 and May 18, 2018. The forty-one participants represented local government, law enforcement, behavioral health, judicial and other entities. Interviewees were promised anonymity, though a few gave permission to share specific personally-identifiable comments. Most were asked all of the same questions, but some did not feel they had the knowledge to respond to all items. Several submitted additional comments via email. Each person seemed genuinely eager to help, and most commented favorably on the quality of the questions and thorough process.

Composite View

Respondents unanimously and enthusiastically supported the goal of treatment for those with addictions. And, approximately 90% felt the time is right to concretely plan for a diversion program launch. Themes and widespread agreement centered around:

- The need for a robust tracking system, clearly defined roles, and clear protocols for everyone involved.
- One administrative authority to oversee the program. A dedicated department within the Hamilton County administrative structure was most favored.
- Several existing Ohio laws present a barrier to implementation. Participants recommended a two-pronged approach – immediately addressing a legislative remedy while identifying “work arounds” in the interim.



State of Readiness

Almost all interview participants stated that Hamilton County is in a state of readiness to begin serious planning for pre-arrest diversion. Several mentioned that it is, "if anything, long overdue" because we are in crisis state that requires immediate action.

"We need to throw everything we have at the epidemic."

"It's the right time for society and the right time for Hamilton County."

The reasons given were remarkably similar, especially considering the different perspectives represented. The lack of jail space was mentioned repeatedly, and some questioned the quality of the programs for those in jail. Concerns about the high level of judicial caseloads were mentioned frequently. And, most talked about the inevitability of "even more lives ruined" as well as additional deaths. A handful of people questioned the wisdom of putting additional burdens on existing treatment programs that would result in increased waiting lists and less follow up.

"Our systems are not working."

"It's time to have a serious conversation about why the treatment system in the jail is not effective."

When asked about the consequences of not implementing pre-arrest diversion, most people quickly said, "**More deaths.**"

In the absence of diversion, several interviewees suggested a process in which an offender would be arrested and immediately evaluated by a mental health professional. Then, on the recommendation of that evaluator and the prosecutor, charges would be dismissed. Others mentioned an expansion of Drug Court. In general, those interviewed said they struggled to answer this key question because most were focused on the need for a diversion effort.

Challenges

Even respondents who support pre-arrest diversion were forthcoming about the challenges of design and implementation of a program. The "addict's actual addiction" was mentioned as an obvious barrier that is often overlooked. So many of the interviewees referred to our "punitive community culture" and the pervasive feeling that offenders represent "moral failure" and have a choice about using drugs. Interestingly this assessment included medical and behavioral health staff members, some of whom are thought to approach their work with a negative, judgmental attitude.

A significant number of participants, including some officers, mentioned the problematic nature of diversion for some in law enforcement. There is some belief that judicial, not law enforcement, decisions should determine whether a person is referred for treatment without being charged with a crime.

Other challenges included concerns about Hamilton County's "trying to do too much with too few resources," the lack of a good data tracking system, and the perceived confusion resulting from several Ohio laws.



Eligibility for Diversion

There was agreement that the offender eligibility profile should be clearly defined before starting any diversion actions. Some suggested the profile might be narrow initially, then expanded over time once evaluation data was available. Several people suggested reviewing offender profiles from communities that have already established effective diversion programs. It seemed important to include individual situations and exceptions because of the difficulty in defining “by type” offenses. In general, however, recommendations were made to consider including “low level offenses” such as misdemeanors and public nuisances, disorderly conduct, trespassing, simple battery, minor drug possession, shoplifting and other non-violent and victimless crimes. The general agreement was to not include drug sellers, although a few said, “The difference between a seller and a user is not always clear.”

Several other eligibility models exist within Hamilton County departments. Interviewees suggested a review of Mental Health Court, Drug Court and post-conviction treatment-based programs as an initial step. “Drug possession-type charges might be a good place to start.”

Some concern was expressed about losing the focus on public safety. And, first time offenders may find the threat of jail time to be too minimal to consent to participation in a diversion program, reducing the ability for early intervention.

“Diversion can’t just be a referral...it must be a mechanism for the person to enter a treatment program immediately.”

“Police can divert now for psychological episodes — do not make this for the convenience of the cops.”

Law Enforcement Considerations

Most participants expressed the belief that many officers would welcome a pre-arrest diversion effort. Law enforcement representatives see drug-related damage every day and would like to have new options for helping people. At the same time, education would be critical for those who are less enthusiastic about diversion, and that education must come from other officers. Across all interviews, there was remarkable agreement about the needs of front-line officers if pre-arrest diversion is implemented. Officers would need:

- Clear protocols, including eligibility criteria
- A single source of contact for referrals
- One place to transport offenders, open 24 hours a day
- Training and regular reinforcement to ensure proper implementation

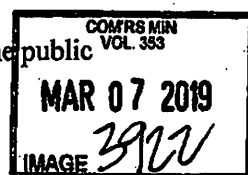
It is significant that nobody suggested only one or two of these -- all four were considered essential. This question generated a great deal of discussion — and empathy for the “cop on the street who cannot make multiple phone calls.” Also, people felt the diversion process would have to allow for quick movement, so the officer would “feel confident that something is happening.” Instructions to the offender should include the potential length of the diversion program to ensure the support of law enforcement.

When asked how long the officer's involvement should be, more people felt it should end at the point of referral and "hand off." So many interviewees talked about ongoing officer involvement as an ideal state but felt Hamilton County simply does not have the resources to attempt this. A few people did suggest that the offender might well choose to continue the relationship with the apprehending officer, but this would require good boundaries on the part of the officer. And, one person asked if continuing communication was for treatment or for community/police relations.

Many of the participants offered the opinion that law enforcement is "open to sentencing alternatives rather than using jails as holding places for addiction and mental health issues." These types of comments were heard repeatedly but were usually followed by references to the officer's duty to enforce the law and keep the peace.

"It would be worrisome for police officers to take on the decision role and be held responsible for those decisions."

"New responsibilities and programs that change this role should be voted on by the public and acted upon with legislation."



Legal Considerations

Representatives of the legal community strongly supported the goal of diversion. They talked about the potential for saving lives, improving the quality of lives and reducing the burdens on various administrative units. Most expressed a desire to do as much as possible now even while working to overcome structural challenges.

Even those who strongly supported diversion agreed that Ohio laws governing the potential implementation of a strong pre-arrest diversion program appear to be barriers, a situation that limits decision making. As one said, "We are trying to treat a medical problem in a legal system that is not set up for it."

About one-third of those interviewed stated Ohio laws would have to be changed before pre-arrest diversion would work. According to section 2935.03(A)(1) of the Ohio Revised Code, it is mandatory for a police officer to "arrest and detain until a warrant can be obtained, a person found violating... a law of this state." And, section 2921.44(A)(2) of the Code addresses the issue of dereliction of duty if an officer fails to apprehend an offender or prevent the occurrence of an offense.

A recent Ohio Supreme Court case (*Argabrite v. Neer*, 149 Ohio St.3d 349, 2016-Ohio-8374) addressed the issue of officer negligence. The ruling suggested that an officer who fails to adhere to a mandatory duty may face potential liability associated with the decision.

Multiple interviewees felt an officer would be negligent if she or he moved the offender toward diversion under current law.

"A law enforcement officer's duty is to enforce the law and keep the peace. Current law does not allow for the front-line officers to make decisions about diversion."

Depending on the eligibility guidelines for diversion, the above legal concerns may be further complicated by Marsy's Law (Ohio Constitution, Article I, section 10a). This language outlines the victim's constitutional rights that "shall be protected in a manner no less vigorous than the rights afforded to the accused." Under this, a victim of crime may choose to be heard regarding

any plea. There was some concern that Marsy's Law could deter a referral or slow the diversion process.

In late 2016, Ohio passed a Good Samaritan Law (Ohio HB 110) specifically related to drug overdoses. This law provides immunity to individuals for minor drug possession offenses when they seek emergency assistance during a drug overdose. A few interviewees wondered if this law might also add confusion. Lacking a solid data tracking capacity, an officer might find it difficult to know if an offender was eligible for diversion. Participants raised a few other legal questions:

- Could legal challenges be brought if offending individuals are treated differently under similar situations?
- Would the individual be considered of sound mind to make the decision to voluntarily enter a diversion program while still under the influence of a drug?
- Would large companies be reluctant to support diversion if they were required to communicate with a diversion office every time someone shoplifted or committed a relatively minor crime? Some store owners may choose to prosecute an offender to deter future criminal activity.

Multiple interviewees mentioned judicial training and attitudes about punishment as a complication in implementing diversion. There were also many comments about judges not wanting to be labeled "soft on crime." Several stated that judges are primarily "focused on getting re-elected" and do not want to release an offender who may commit a more serious crime. And, some mentioned the weariness of long-time judges who "don't believe a new approach would matter one way or the other." The majority of those interviewed suggested any education about diversion should come from others in the judicial community to increase credibility.

Participants who attended the group session related to legal issues expressed strong support for diversion. They also reviewed the realities of working within a framework that limits law enforcement and judicial choices. In addition to this group's insightful comments about immediately addressing the apparent limitations in Ohio laws, they spoke passionately about the need to start planning efforts and work as creatively as possible within the current statutory constraints.

"Officers and victims need to feel there has been accountability."

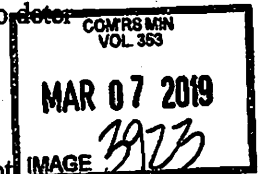
"The reality is we are not prosecuting drug offenses now, but this is not understood by the public."

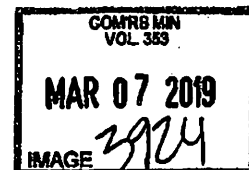
"Victims would always need to be consulted and agree to proceed with diversion in lieu of arrest and prosecution."

"We need new legislation!"

Data

To consider a diversion system, almost everyone said a robust tracking system would be required to collect and share data. Currently, an officer does not have the ability to access the necessary background information to make a diversion determination. "It can be difficult to know if it's a first offense," was heard often. Officers need the person's prior history, including an evaluation of any post-arrest interventions. And, it is difficult to work with other jurisdictions in the absence of this capability.





“We need to accurately track all of this and be able to share information across county lines.”

Several suggestions were made about how to measure diversion efforts. Some suggested starting small to develop systems, then broadening efforts slowly when successful practices were solidly in place. Early and regular review was promoted so mistakes could be addressed along the way. Quarterly review sessions for two years were recommended. Suggestions were also made about the need for informal, qualitative evaluations. A few people mentioned the importance of regular discussions about what is working well and where the diversion gaps are. As one said, “If we don’t do this now, we will mess up ongoing and future collaborations.”

In terms of a pilot project group, a few suggested drug use and overdose offenders because they are already entitled to receive treatment in lieu of arrest. Others thought the Cincinnati Police Department might select a police district or two for piloting the initial diversion programs.

Discussion about funding specifically for data collection was limited, but this appears to be a probable opportunity for grants or donations from the business community. Universities and law enforcement agencies were also suggested as resources for developing data collection systems.

Funding

Questions about funding and sustainability were difficult to answer, mostly addressed in “big picture” terms. A majority of participants felt strongly that funding must be primarily local if it is to be sustained, and that grants are typically helpful for starting programs but not maintaining them. Funding suggestions included a review of what other communities have done, as well as taxes, private gifts, Medicaid and criminal justice funding as potential options. One person mentioned the foreclosure fund in the Prosecuting Attorney’s Office and another suggested any potential settlement from the law suit against drug manufacturers as future funding sources.

Several people mentioned the importance of involving the business community in planning for diversion. Companies, especially those with hiring challenges due to the drug epidemic, might want to invest in diversion planning for business reasons as well as humane ones. Tax breaks and social impact bonds were also mentioned.

When asked what organizations might save money if diversion were implemented, the jails and prisons were cited most by stakeholders. Hospitals, insurance companies, and Jobs and Family Services were mentioned several times. Most also talked about savings in the framework of intangibles such as time and energy.

“Start with a grant, then roll it over to general county funding or a levy.”

“Be clear that the sustainability issue is for the benefit of the drug users, not the nonprofits themselves.”

“If we can define success with this group through diversion and treatment, it will help us get funding for expansion and for other addiction services.”

Communication Plan

The need for clear, frequent communication was mentioned consistently during the interviews. Nearly everyone talked about community education as a requirement for a diversion launch that could be supported by all stakeholders. It would be particularly important to counter the public

perception that someone was offending and “getting off free” and to allay concerns that any one group was treated less favorably than others. The public also needs to know in advance if the role of law enforcement has changed to include referrals to diversion programs. Without this communication, old expectations may lead to confusion and criticism. As one officer said,

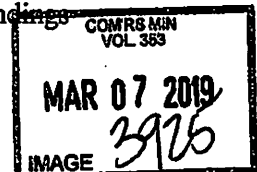
“Our responsibilities are to support what the voters want and approve through legislation... the public should be educated about the roles of all parties involved.”

So many participants urged sensitivity toward the African-American community, given the perception that they were ignored during the crack cocaine epidemic. This widespread belief has created resentment in the African-American community that would have to be confronted.

A large number of participants referred to the need for success stories and a good communication plan. Many mentioned how important it is for each public sector to be educated by its own sector. Interviewees suggested that skeptical police and judges would be more likely to embrace the idea of diversion if they “saw success” and witnessed the benefits first hand. Police particularly experience so many negative moments with offenders, they “would have more buy in and morale would improve” if they also experienced positive ones.

Throughout these discussions, the need for empirical evidence to support the effectiveness of diversion was clear. While it would be difficult to do extensive research before the desired data tracking system was put in place, stakeholders felt it was critical to include research findings from other cities as part of this area’s education efforts.

“Coming late to do the right thing is better than not coming at all.”



Administrative Authority

Throughout the interviews, people shared thoughts about where a diversion program might reside. A specific question related to ownership and authority was also asked, with interviewees frequently changing their minds as they brainstormed out loud. When all of the comments were combined, one entity emerged as the favored choice: Hamilton County.

The largest number of participants believed a new department within Hamilton County could take advantage of the existing infrastructure and move quickly. Participants felt law enforcement would be more likely to support this decision because “the county has authority over them already.” And, the county’s existing relationship with the various courts was considered essential. Some respondents suggested the selection of a different entity would erode judicial trust, especially at a time when some attitudes already create a barrier for diversion.

The Hamilton County Pre-Trial Services department was mentioned by a few stakeholders. They wondered if a unit under this administrative umbrella could serve as an effective home. Since this office has the necessary infrastructure and already does some diversion, it seemed a logical selection to some. A few mentioned that this would have the support of police and the courts. “In the event people fail in diversion, they are already in the criminal justice system.”

There was some discussion about rolling the Hamilton County Heroin Coalition into a separate organization with its own 501(c)(3) status. Some felt the Coalition could provide more objectivity if it were separate from the county, but others commented, “it is too enmeshed” with a few nonprofits and probably could not operate independently.

A small number of interviewees felt the Hamilton County Mental Health and Recovery Services Board would be the best administrative unit for diversion. Two people supported the idea of a new collaborative, driven by local hospitals. And, a couple of people mentioned the establishment of a new coordinating body, one that would be "elevated to a high level that represents all." An equal number spoke against creating such a new organization. A few felt any efforts should expand beyond Hamilton County and include Indiana and Kentucky.

Only one person suggested housing a diversion effort in an existing nonprofit, although no particular one was mentioned; most interviewees were opposed to this idea. "It has to be a government entity to drive this." And, one person thought Interact for Health would be ideal.

Summary

Forty-one stakeholders generously donated their time to discuss diversion issues. They were thoughtful, strategic and passionate, even while recognizing the challenges in starting such a program for Hamilton County citizens. As several said, "This needs to be about addictions — some new drug will replace heroin in our discussions."

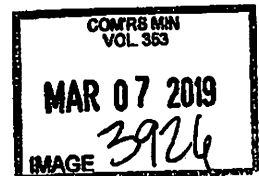
Almost everyone supported an immediate jump-start to diversion planning, a concurrent, aggressive pursuit of legislative change, and informal agreements about "work around" approaches in the meantime. The belief that Ohio law prevents pre-arrest diversion efforts is problematic in the context of such overwhelming support for a potential new path to recovery.

"We have an opportunity to make an improvement in how the public views drug offenses. It may be an opportunity lost."

"Although I appreciate a cautious approach about most things, I would err on the side of moving quickly and broadly to get treatment to as many people as possible, with the assumption that we can accurately track success or failure of the people in the program."

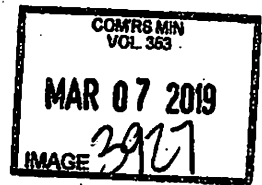
"We should not worry so much about mistakes-- those can be fixed. We should focus on the side of trying to save lives."

-- July 2018



Phone Interview Participants

Jeff Aluotto (Hamilton County Administrator)
Sara Bolton (The Health Collaborative)
Jocelyn Chess (Hamilton County Prosecutor's Office)
Pat Dressing (Hamilton County Pretrial Services)
Denise Driehaus (Hamilton County Commissioner)
Nan Franks (Addiction Services Council)
Linda Gallagher (Hamilton County Mental Health & Recovery Services Board)
Andy Gillen (Hamilton County Pretrial Services)
Tim Ingram (Hamilton County Health Commissioner)
Trina Jackson (Hamilton County Office of Reentry)



Anthony Johnson (City of Cincinnati Police Dept.)
Jeff Kirschner (Greater Cincinnati Behavioral Health Services)
Sandra Kuehn (Center for Addiction Treatment)
Shana Merrick (Addiction Services Council)
Paul Neudigate (City of Cincinnati Police Dept.)
Christine Patel (Hamilton County Public Defender)
Mark Piepmeier (Hamilton County Prosecuting Attorney)
Colleen Reynolds (P.G. Sittenfeld's staff/Cincinnati City Council)
Cedric Robinson (EMS, Cincinnati Fire Department)
Thomas Rolfes (Hamilton County Public Defender)
Shawn Ryan (BrightView Health)
Margo Spence (First Step Home)
Peter Stackpole (City of Cincinnati Law Dept.)
Tom Synan (Newtown Chief of Police)
Neil Tilow (Talbert House)
Pat Tribbe (Hamilton County Mental Health & Recovery Services Board)
Lisa Webb (Hamilton County Budget & Strategic Initiatives)
Jeff Weckbach (Hamilton County Budget & Strategic Initiatives)
Moira Weir (Hamilton County Jobs & Family Services)
John Young (Hamilton County Mental Health & Recovery Services Board)
In-person Group Interview Participants

Hamilton County Sheriff's Office

Tom Corbett
Steve Lawson
Kevin Dinkelacker
Pakkiri Rajagopal

Legal Representatives

Jocelyn Chess (Hamilton County Prosecutor's Office)
William Gallagher (Private practice attorney)
Natalia Harris (City of Cincinnati Prosecutor's Office)
Dorianne Mason (Ohio Justice and Policy Center)
Heather Russell (Judge, City of Cincinnati Municipal Court)
Pam Sears (Hamilton County Prosecuting Attorney's Office)
Peter Stackpole (City of Cincinnati Law Department)



Exhibit B



DATE: November 9, 2018
TO: Community Partners
FROM: The Office of Hamilton County Commissioner Denise Driehaus
RE: *A Proposal for Law Enforcement Assisted Diversion in Cincinnati and Hamilton County*

This memo outlines a recommendation for implementing an intervention-based Pre-Arrest Diversion program in Cincinnati and Hamilton County. Broadly speaking, Pre-Arrest Diversion is a program for reorienting police-community relations away from a punitive model and towards community-based harm reduction strategies which ultimately prevent recidivism, improve public safety, reduce incarceration, and save government resources. The memo below provides a framework for implementing "Law Enforcement Assisted Diversion" or "LEAD," a Pre-Arrest Diversion Program developed in Seattle Washington, and adopted by several other cities across the U.S.

Background

In the Hamilton County Board of County Commissioner's 2017-2018 Work Plan and Policy Agenda, the board listed as one of its policy priorities "developing new tools for law enforcement to reduce the incidence of re-occurring overdoses including implementation of a pre-arrest diversion program." In response, the Hamilton County Heroin Coalition included "Intervention-based Pre-Arrest Diversion through implementation of LEAD in policing agencies" as a tenet of its 2017-2018 strategic plan.

From 2017 to present, the Heroin Coalition has conducted research, interviewed stakeholders, and discussed implementation of LEAD at its regular meetings. A delegation from Hamilton County including Heroin Task Force Commander Tom Fallon, Hamilton County Heroin Coalition Program Coordinator Emily Manning, and representatives of County Commissioner Denise Driehaus and Cincinnati Councilmember Tamaya Dennard attended the National Pre-Arrest Diversion Convention in early 2018. At the conference, that delegation won a competitive grant to provide technical assistance and training for implementing LEAD in Hamilton County. The key elements of the delegations grant proposal include the following:

1. Leveraging existing Heroin Coalition partnerships to Implement LEAD;
2. Taking steps to ensure equity in program administration and affected populations; and
3. Making program data open and quickly available to the public.

Heroin Coalition Partners were invited to participate in the formulation of a policy recommendation for LEAD implementation, and as a result the recommendations below have been developed with feedback from treatment providers, law enforcement officials, prosecutors and defense attorneys, and many other Heroin Coalition partners. Interact for Health commissioned a survey of key stakeholders to assist in developing a program. Key conclusions from that report include the following:



HAMILTON COUNTY
HEROIN COALITION



1. 90% of respondents believe the time is right for pre-arrest diversion in Hamilton County;
2. Stakeholders prefer that case management within a Pre-Arrest Diversion program be housed within an agency of the county government, because of the need to work closely with the criminal justice system; and
3. There is a need for a robust tracking system, clearly defined roles, and clear protocols for everyone involved.

The Heroin Coalition applied for a Department of Justice Grant to fund a pilot program of Pre-Arrest Diversion and was awarded \$500,000. That grant application was submitted with letters of support from The Hamilton County Coroner, The Mental Health and Recovery Services Board, The Health Collaborative, Senator Rob Portman, Senator Sherrod Brown, Hamilton County Job and Family Services, Interact for Health, Mercy Health, Talbert House, The Village of Newtown, The Hamilton County Association of Police Chiefs, and Cincinnati Mayor John Cranley.

With grant funding secured for planning and implementation of a pilot program, the memorandum below sets forth a recommendation from the Hamilton County Heroin Coalition for implementation of LEAD as a pilot program in the City of Cincinnati. If the program is successful, it could expand into a shared service offered by Hamilton County to all cities, villages, and townships within its jurisdiction.

The key elements of the pilot program include:

1. Participation by the Cincinnati Police Department District 1 in pre-arrest referrals to case management;
2. Case management provided through the Hamilton County Department of Reentry; and
3. Data collection and publication to monitor program performance and inclusion.

The attached memo provides background information on the LEAD program.



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DATE: July 20, 2018
TO: Community Leaders
FROM: The Office of Hamilton County Commissioner Denise Driehaus
RE: *Analysis and Study on the Law Enforcement Assisted Diversion Programs*

This memo is meant to act as a survey and analysis of Law Enforcement Assisted Diversion (LEAD), a pre-booking diversion program initiated by King County, Washington to serve the areas of Belltown and Skyway.

King County officials developed LEAD in response to concerns over the way drug offenses were being handled and growing dissatisfaction with the principles and policies of the War on Drugs. A new approach was developed that focused on harm-prevention and positive community support to aid in recovery and integration rather than criminal penalties designed to deter drug use. Various cities and counties cite differing reasons for adopting LEAD programs, but the general consensus is that increasing evidence demonstrates that the current system of criminal justice has not adequately reduced drug use or decreased recidivism.

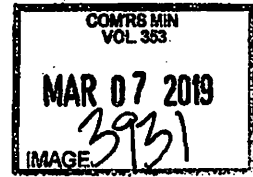
LEAD is run under a large number of core principles which are considered crucial to effective implementation by the LEAD National Support Bureau¹³. The main four are:

- **Harm Reduction Philosophy** – Participants will be engaged where they are in their lives and recovery; they will not be penalized or denied services if they do not achieve abstinence.
- **Non-Displacement Principle** – Where existing treatment programs have unused capacity, and when individuals' treatment needs match program services, LEAD staff will match patients with available resources.
- **Community Transparency and Accountability** – Community stakeholders and public safety leaders shall participate in regular staff meetings and have access to program performance reports and program staff.
- **Participant Confidentiality** – The confidentiality of LEAD Participants and a respect for their privacy are crucial components to their success and to ethical service delivery. LEAD stakeholders and operational partners recognize that participant data security is always a priority and participant safety and reputation depend on a commitment to confidentiality and privacy.

How does LEAD Work?

LEAD operates under the assumption that the current system of criminal justice fails to adequately answer the issue of recidivism in regards to low-level drug and prostitution crimes. LEAD proposes an approach, where officers exercise discretion at point of contact to decide if an individual qualifies for LEAD. Instead of arrest and incarceration, the individual is referred to a trauma-informed intensive case-management program.

The criteria are fairly broad for who could qualify for LEAD, but there are exceptions which vary from program



to program. In the case of the Seattle and Santa Fe Police Departments, an individual is ineligible under the following circumstances:

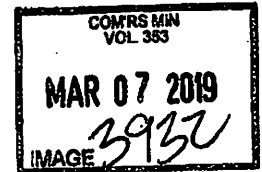
- The amount of drugs involved exceeded 3 grams, except where an individual was arrested for delivery of or possession with intent to deliver marijuana or possession, delivery or possession with intent to deliver prescription controlled substances (pills).
- The individual did not appear amenable to diversion.
- The suspected drug activity involved delivery or possession with intent to deliver (PWI), and there was reason to believe the suspect was dealing for profit above a subsistence income.
- The individual appeared to exploit minors or others in a drug dealing enterprise.
- The individual was suspected of promoting prostitution.
- The individual had a disqualifying criminal history as follows:
 - Without time limitation: Any conviction for murder 1 or 2, arson 1 or 2, robbery 1, assault 1, kidnapping, Violation of the Uniform Firearms Act (VUFA) 1, any sex offense, or attempt of any of these crimes.
 - Within the past 10 years: Any conviction for a domestic violence offense, robbery 2, assault 2 or 3, burglary 1 or 2, or VUFA 2.

Also listed are the criteria for the Baltimore program:¹⁰

Adults suspected of minor violations related to controlled dangerous substance (CDS) or prostitution-related offenses may be referred to the LEAD program by a LEAD-trained BPD officer via Stop Referral, except when:

- Suspected CDS activity involves Distribution or Possession with Intent to Distribute, and there is reason to believe the primary motivation for distribution is to derive income
- Individual's behavior does not appear amenable to diversion (e.g. combative behavior)
- Individual appears to be a threat to himself/herself or to public safety
- Individual appears to exploit minors or others in a drug dealing enterprise
- Individual is suspected of promoting prostitution
- Individual has a peace or protective order prohibiting contact with a LEAD Participant or staff
- Individual has an open or pending case in any jurisdiction
- Individual has one of the following disqualifying convictions that occurred within 10 years before the date of the current offense, or if any sentence for one of the following disqualifying offenses was completed within the last 5 years:
 - First Degree or Second Degree Murder
 - Manslaughter or Vehicular Manslaughter
 - Rape
 - First, Second, or Third Degree Sex Offenses
 - Abduction or Kidnapping
 - First Degree Assault
 - Child Abuse (physical or sexual) or Child Neglect
 - Armed Robbery or any offense involving a firearm
 - Arson
- Individual has an open arrest warrant
- Individual is currently under supervision in any jurisdiction (e.g. parole, probation, pretrial release)

The program instead sends the individual to supportive services, the specific facility is chosen based on partnership with the LEAD program and familiarity with the neighborhood of the individual. The local nature of



these facilities helps with costs but also results in the wide variety of services offered by a particular area's LEAD program. Huntington LEAD, for example, has workers from their service (Prester) accompanying officers in high risk areas.¹¹

In a standard case (based on the Seattle model, which most programs emulate), an officer will make an arrest and at-point, if the individual meets criteria for LEAD candidacy and they appear amenable to diversion, they will be diverted to the LEAD program (there is also a social contact method, where officers reach out to an individual they know in the community whom they believe would be benefitted by LEAD). They then are referred to a LEAD case manager who would survey the individual's quality of life, drug habits, mental health, etc., and then would meet with the individual to connect them with resources (counseling, legal aid, housing assistance, drug rehabilitation). The case officer is equipped with funds to support the individual's basic needs, such as a hotel room or a meal. From there, the two build a timeline and schedule regular meetings to check in on growth and milestones. Other elements of involvement include police officer training.

All LEAD programs emphasize the prime importance of the support and assistance of police officers in assessing and diverting potential LEAD candidates. The City of Albany, for example, requires all sworn officers to be educated in the LEAD program and its principles.

LEAD is often a coalition of a wide variety of government and private enterprises. Continuing with Albany, the LEAD program is run by a board of partners that include following:

- City of Albany, Office of the Mayor
- Albany Police
- Albany County Executive's Office
- Albany County District Attorney's Office
- Albany County Sheriff's Department
- Central District Management Association
- Center for Law and Justice
- Katal Center for Health, Equity, and Justice

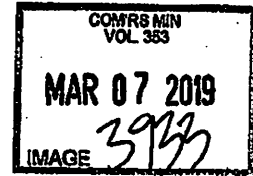
The following includes a proposal for the coalition to implement lead in Hamilton County.

The Policy Coordination Group: Proposed Governance Structure for LEAD in Hamilton County

In order for LEAD to work, each partner must understand their role and how they can best bring value to the initiative. LEAD is governed by the Policy Coordination Group (PCG) which acts as a Board of Directors to direct policy level decisions and ensure that valuable resources are dedicated for the success of the initiative.

The PCG is charged with:

- Developing and executing a Memorandum of Understanding outlining stakeholder roles and responsibilities;
- Reviewing and approving protocols;
- Reviewing and approving request for proposals for case management services, direct services, and evaluations;
- Reviewing criminal justice and human services data to ensure core principles and goals are being met;
- Making criminal justice and health services data available for research purposes community stakeholders, and the public for transparency
- Providing oversight and direction to the LEAD Program



- Overseeing fiscal management of the project, and identifying sustainable funding sources to continue and expand the program after initial grant fund are exhausted.

The following stakeholders will comprise the PCG:

- City Council representation
- Office of the Mayor
- City Prosecutor's Office
- Office of the Chief of Police
- Chair of the Hamilton County Heroin Coalition
- Program Coordinator of the Hamilton County Heroin Coalition
- Hamilton County Office of Re-entry
- Office of the Sheriff (when expansion to all of Hamilton County occurs)
- Hamilton County Prosecuting Attorney (when expansion occurs)

The following agencies may also play a role on the PCG:

- Office of the Public Defender
- A local civil rights organization (The Ohio Justice and Policy Center)
- Office of the City Manager
- Subject matter experts (mental health, substance-use, harm reduction and housing providers)

Data and Core Principles

The important features of this program are an emphasis on providing drug treatment, housing, and the valuable role of positive support. Advocates of the program maintain that by providing stability and treatment without the onus of criminal charges, an individual is more likely to recover. Another critical part of the approach is the removal of the requirement of sobriety for program membership. Instead, recognizing relapse as a part of recovery, individuals are screened based on their legitimate desire for reform. This program though is not to be interpreted as providing some limitless immunity to the criminal justice system, and both new and open arrest warrants serve as disqualifications for LEAD. The severity and criteria for disqualification regarding low level property/drug crimes belongs to the judgement of the participating county/city, making LEAD not incompatible with a tough stance on crime. Beyond the humanitarian benefits, LEAD promises to remove costly and unhelpful strain from the criminal justice system. Included on the next page are a number of charts referring to the data collected from the King County LEAD program in Seattle by the University of Washington:

Figure 1. Ethnic/racial backgrounds of participants

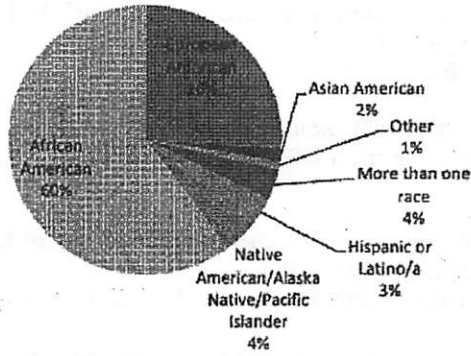


Figure 2. LEAD costs by expense type

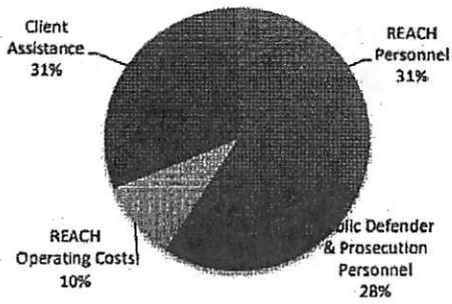


Figure 6. Prison Incarceration

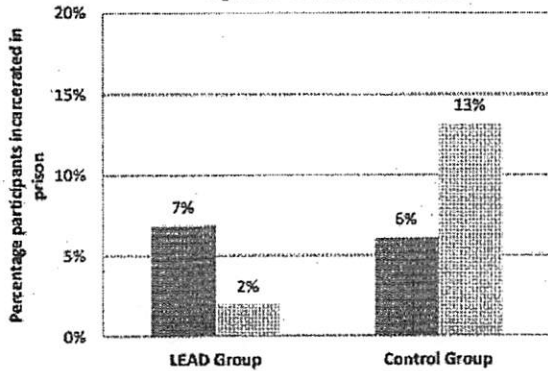


Figure 4. Jail bookings

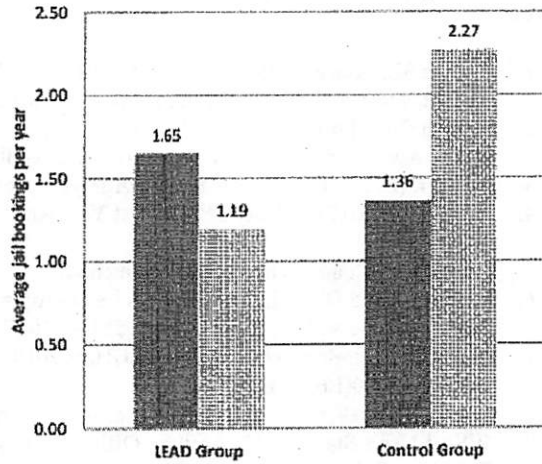


Figure 5. Jail days

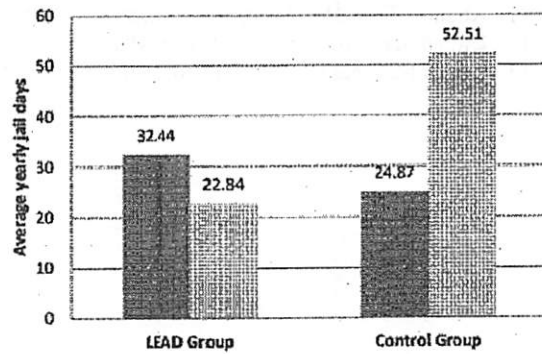
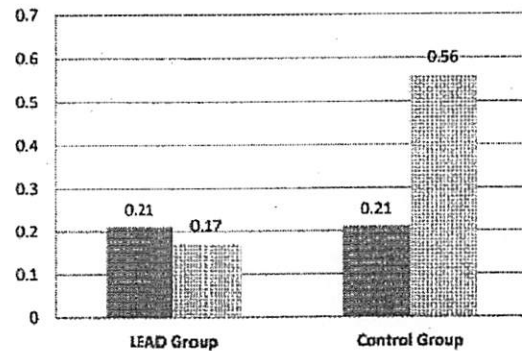
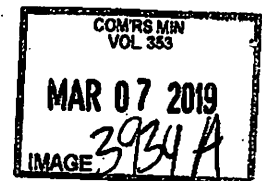


Figure 7. Felony cases



Key:

- Pre-evaluation entry
- ▨ Post-evaluation entry



¹ Collins SE, Lonczak HS, Clifasefi SL. 2015. LEAD program evaluation: recidivism report. March 27, Harm Reduct. Treat. Lab, Univ. Wash., Harborview Med. Cent., Seattle 2.

Notes

1. Collins SE, Lonczak HS, Clifasefi SL. 2015. *LEAD program evaluation: recidivism report*. March 27, Harm Reduct. Treat. Lab, Univ. Wash., Harborview Med. Cent., Seattle 2.
2. System Cost, Program Cost and Funding Support. (n.d.). Retrieved from <https://www.lead-santafe.org/about/cost-and-funding>
3. Rand, J. (2013). LEAD Cost Benefit Analysis (Rep.). Santa Fe, NM: Santa Fe Community Foundation.
4. Brown, K. (2017). Albany LEAD First Year Report (Rep.). Albany, NY: Katal Center for Health, Equity, and Justice.
5. Seattle City Council Green Sheet (attached)
6. Discretion and Diversion in Albany's Lead Program, Robert E. Worden and Sarah J. McLean Criminal Justice Policy Review Vol 29, Issue 6-7, pp. 584 – 610 First Published May 10, 2018
7. [https://www.nmlegis.gov/handouts/LHHS%20101915%20Item%206%20Law%20Enforcement%20Assisted%20Diversion%20\(LEAD\).pdf](https://www.nmlegis.gov/handouts/LHHS%20101915%20Item%206%20Law%20Enforcement%20Assisted%20Diversion%20(LEAD).pdf)
8. Rubin, L. (2017, October 25). LEAD program proving successful three years after implementation. WCHS8.
9. WSAZ News Staff. (2018, April 5). Officials: Drug overdoses and violent crime down in Cabell County. WSAZ3.
10. Baltimore Police Department. (2017, February 8). LAW ENFORCEMENT ASSISTED DIVERSION (LEAD) PROGRAM. Baltimore.
11. Atzmon, D. (2017, April). Baltimore's LEAD Program Off to Promising Start. OSI Baltimore.
12. United States of America, City of Albany, Mayor's Office. (n.d.). City of Albany 2018 Adopted Budget.
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NATIONAL SUPPORT BUREAU

As the United States addresses the urgent crisis of mass criminalization and incarceration, there is a clear need to find viable, effective alternatives, particularly at the front end by preventing people from entering the criminal justice system unnecessarily. This task requires assessing government's current response to safety, disorder, and health-related problems; critically re-examining the role that police officers are asked to play in our communities; and developing alternative-system responses independent of the justice system, while finding ways to improve relationships between the police and those they serve. Law Enforcement Assisted Diversion (LEAD) is a response to these gaps. LEAD uses police diversion and community-based, trauma-informed care systems, with the goals of improving public safety and public order, and reducing law violations by people who participate in the program.

BACKGROUND

In 2011, in an attempt to move away from the War on Drugs paradigm and to reduce gross racial disparities in police enforcement, LEAD -- a new harm-reduction oriented process for responding to low-level offenses such as drug possession, sales, and prostitution -- was developed and launched in Seattle, WA. LEAD was the result of an unprecedented collaboration between police, prosecutors, civil rights advocates, public defenders, political leaders, mental health and drug treatment providers, housing providers and other service agencies, and business and neighborhood leaders -- working together to find new ways to solve problems for individuals who frequently cycle in and out of the criminal justice system under the familiar approach that relies on arrest, prosecution, and incarceration.

WHAT IS LEAD?

In a LEAD program, police officers exercise discretionary authority at point of contact to divert individuals to a community-based, harm-reduction intervention for law violations driven by unmet behavioral health needs. In lieu of the normal criminal justice system cycle -- booking, detention, prosecution, conviction, incarceration -- individuals are instead referred to a trauma-informed intensive case-management program where the individual receives a wide range of support services, often including transitional and permanent housing and/or drug treatment. Prosecutors and police officers work closely with case managers to ensure that all contacts with LEAD participants going forward, including new criminal prosecutions for other offenses, are coordinated with the service plan for the participant to maximize the opportunity to achieve behavioral change.

LEAD holds considerable promise as a way for law enforcement and prosecutors to help communities respond to public order issues stemming from unaddressed public health and human services needs -- addiction, untreated mental illness, homelessness, and extreme poverty -- through a public health framework that reduces reliance on the formal criminal justice system.

EVALUATION RESULTS

After three years of operation in Seattle, a 2015 independent, non-randomized controlled outcome study found that LEAD participants were 58% less likely to be arrested after enrollment in the program, compared to a control group that went through "system as usual" criminal justice processing. With significant reductions in recidivism, LEAD functions as a public safety program that has the potential to decrease the number of those arrested, incarcerated, and are otherwise caught up in the criminal justice system. Additionally, preliminary program data collected by case managers also indicate that LEAD improves the health and well-being of people struggling at the intersection of poverty and drug and mental health problems. And the multi-sector collaboration between stakeholders who are often otherwise at odds with one another demonstrates an invaluable process-oriented outcome that is increasingly an objective of broader criminal justice and drug policy reform efforts.

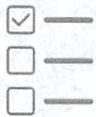
GOALS AND CORE PRINCIPLES OF LEAD

LEAD advances six primary goals:



1. REORIENT

government's response to safety, disorder, and health-related problems



2. IMPROVE

public safety and public health through research based, health-oriented and harm reduction interventions



3. REDUCE

the number of people entering the criminal justice system for low level offenses related to drug use, mental health, sex work, and extreme poverty



4. UNDO

racial disparities at the front end of the criminal justice system



5. SUSTAIN

funding for alternative interventions by capturing and reinvesting justice systems savings



6. STRENGTHEN

the relationship between law enforcement and the community

Many components of LEAD can be adapted to fit local needs and circumstances. However, there are certain core principles that are essential in order to achieve the transformative outcomes seen in Seattle. These include LEAD's harm reduction/Housing First framework,

which requires a focus on individual and community wellness, rather than an exclusive focus on sobriety; and the need for rank and file police officers and sergeants to be meaningful partners in program design and operations.

LEAD'S POTENTIAL FOR RECONCILIATION & HEALING

An unplanned, but welcome, effect of LEAD has been the reconciliation and healing it has brought to police-community relations. While tensions rise between law enforcement and community members and civil rights advocates, LEAD has led to strong alliances among traditional opponents in policy debates surrounding policing, and built a strong positive relationship between police officers and people on the street who are often a focus of police attention. Community public safety leaders rallied early and have remained staunch in their support for this less punitive, more effective, public-health-based approach to public order issues. LEAD begins to answer the pressing question of what the community wants from the police with regard to public order problems by introducing an alternative evidence-based model.

REPLICATING THE LEAD MODEL NATIONALLY

Jurisdictions across the country are interested in replicating this transformative model. In 2014, Santa Fe, NM became the second jurisdiction to launch. In 2015 and 2016, Huntington, WV, Albany, NY and Fayetteville, NC followed. Dozens of jurisdictions are exploring LEAD programs, and those on pace to launch in 2017 include Baltimore, MD; Portland, OR; Thurston Co, WA, Madison, WI, San Francisco, Stockton and Los Angeles, CA; and several cities in North Carolina. LEAD-aligned programs are planned in Atlanta, GA and New Orleans, LA.

In July 2015, the White House hosted a National Convening on LEAD with interested delegations from nearly 30 jurisdictions including district attorneys, police chiefs, city council members, community police reform advocates, state legislators, and human service providers.