Washington State Health Care Authority

Substance Use and Recovery Services Plan Recommendation

Recommendation – Build upon, and provide ongoing funding for, a data integration infrastructure that can receive and analyze standardized data gathered by law enforcement, courts, and prosecutors; Recovery Navigator Program case management; behavioral health treatment services; and recovery support services, to meet the mandates of Section 1.3(m).

Bill Requirement(s) – Per Section 1.3(m), this is a recommendation "regarding the collection and reporting of data that identifies the number of persons law enforcement officers and prosecutors engage related to drug possession and disparities across geographic areas, race, ethnicity, gender, age, sexual orientation, and income. The recommendations shall include, but are not limited to, the number and rate of persons who are diverted from charges to recovery navigator services or other services, who receive services and what type of services, who are charged with simple possession, and who are taken into custody."

Background & Supporting Data

- The focus in this recommendation is on a general data infrastructure for *reporting* key indicators. This may have substantial overlap with the data infrastructure required to *administer* diversion and the RNP program, including tracking of prior diversions throughout the state as required by law.

- Data is being collected in various sectors and programs related to substance use and behavioral health systems (law enforcement encounters, treatment, recovery support services programs, Recovery Navigator Program, etc.)

- Many of those data systems do not have a consistent identifier across systems, or consistent standards for data collection and classification, which creates redundancies and makes it difficult to link the data between sectors. This hinders understanding of the patterns taking place among different communities and their outcomes following an encounter with law enforcement.

- Consistent data gathering and integration methodologies such as those described in this recommendation would meet the data mandates of 1.3(m)

- A data integration infrastructure such as the one described in this recommendation has been implemented in four LEAD pilot sites per RCW 71.24.589 (Whatcom, Snohomish, Mason, and Thurston counties) and three Arrest and Jail Alternatives grantee sites per RCW 36.238A.450 (Olympia, Port Angeles, Walla Walla).

The data integration infrastructure should be able to gather, share, and report, at a minimum, the following data elements, most of which are required per 5476 §1.3(m):

Data element	Potential Source(s)	Mandated per 5476
The number and demographic information of incidents and unduplicated persons engaged by law enforcement officers on diversion-eligible charges.	Law Enforcement Records Management	YES
The number and percentage of persons engaged by LE on diversion-eligible charges who are arrested, released, or diverted from charges via referral to **recovery navigator services**, along with the demographics of both those stopped and those diverted ("Diversion utilization percentage" is a measure of outcomes of all potential diversions)	Law Enforcement Records Management Case management records	YES

The number, percentage, and demographics of diversion-eligible persons engaged by LE who are diverted from charges via referral to **RNP or other services**		Law Enforcement Records Management	YES
The number and demographics of diverted people who **complete enrollment** in RNP		RNP Case Management	YES
The number of persons receiving RNP **intensive case management** through RNP		RNP Case Management	
The number of persons enrolled in RNP who have received any SUD treatment and/or other support services		Datasets from SUD treatment and recovery support services programs (many services would not be captured in claims data) Provider One RNP Case Management	YES
If simple possession remains categorized as criminal activity:	Of those arrested for simple possession, the number, rate, and demographics of persons charged/prosecuted for simple possession	Prosecutors' Offices / AOC WA State Courts Judicial Information System	YES
	Of those arrested for simple possession, the number, demographics, and rate of persons booked into jail with charge of simple possession	Jail records WASPC/Provider One WA State Patrol (arrest records)	YES
	Of those arrested for simple possession, the number, demographics, and rate of persons offered post-arrest diversion	Prosecutors' Offices / AOC WA State Courts Judicial Information System	
	Of those arrested for simple possession, the number, demographics, and rate of persons receiving case disposition, including, but not limited to, conviction	Prosecutors' Offices / AOC WA State Courts Judicial Information System	

In addition to the data above, the following data should be collected and reported using this data integration infrastructure for inclusion in the Recovery Navigator Quarterly Reports from HCA:

System utilization

- Use of emergency medical services
- Arrest, days in jail
- **New charges** with incident date after of referral to RNP (divided by felony, misdemeanor), to be added to Case Management tab in RNP Data Collection tool
- **Convictions** with incident date after date of referral to RNP (broken into felony / misdemeanor), to be added to Case Management tab in RNP Data Collection tool
- Access to and engagement with culturally appropriate, non-punitive, community-based resources

System response

- Capacity and variety of local services aligned with RNP's commitment to harm reduction and holistic care
- Number and percent of substance-possession related law enforcement encounters (e.g., public order) that result in arrest, booking, and/or convictions for RNP-eligible behaviors, as well as the demographics of those individuals engaged by law enforcement in these encounters
- Racial disparity analysis that compares demographics of individuals who are arrested and booked into jail, compared to the demographics of those who are referred to RNP, among diversion-eligible individuals

Quality of life

- Self-report quality life/well-being
- Improved mental and physical health
- **Services & Access Gap Analysis**: Indicated by comparing services needed/requested by RNP participants, referrals made, referred services received by BHASO region, and reasons why services were not received (if applicable). If the data collection burden for case managers is too great for this level of analysis, request that case managers report areas where service gaps are a persistent problem.
- **RNP Participant Satisfaction**: Collected via survey every six months following enrollment in RNP, with procedures in place outlining minimum and maximum contact efforts

Concerns & Considerations

- A substantial investment is needed to secure the necessary software, staff to provide ongoing technical assistance, and staff to collect, analyze, and report the data.
- We don't have a list of the entities who are going to be collecting this information.
- The type of data these different organizations have, how they collect data, and specific types of data needed from each source must be clarified.
- This work needs long-term consistent funding for implementation, collection, and analysis.
- Need to be considering privacy of data; all data collected should be used for specified purposes and personally identifiable information should not be publicly available, especially to commercial data brokers.
- Need to confirm whether IRB approval is needed for this type of data collection and reporting.
- All data elements mentioned in this recommendation will need time frames specified (e.g., past 30 days? 90 days? Yearly rates?)
- Care needs to be taken around assigning causation to these data or using these types of measures as evaluation of efficacy of RNP or other system changes.
- Regarding the recommendation to include a measure of "Improved mental and physical health," a specific measurement tool still needs to be identified.
- Regarding the Services & Access Gap Analysis: This is a worthwhile area of inquiry, but it's operationally difficult. People may indicate desire for a service (public benefits, let's say), but the process of applying, getting denied (which is standard) and reapplying is time consuming and onerous - usually requires a case manager to help navigate, an SSI specialist, and ongoing effort. It's not just a matter of a referral and an outcome.
- For data related to RNP service referrals, "referred" has no operationally consistent definition: Is it somebody sent an email? Is the provider well-matched and culturally competent? Does the service provider have capacity, respond to the request, know how to reach the individual (who's usually hard to find)? Does the service provider think that completing the referral (getting the person connected) is their job, the client's job, or someone else's job? Does the referral remain active, meaning somebody keeps working to make it happen? Does the referring agency track and follow up to ensure the referred agency responds?
- The scope of data collection could be expanded to include other legislated diversion and jail alternative programs (in addition to RNP)
- Methods to share data must be developed and scaled, including utilization of a common data set, along with a common data model that automatically matches data fields across entities.
- This proposal doesn't include other data sources that may be of interest, such as mobile crisis response teams, the 988 line, and other crisis-level engagement programs.

Collaboration with Existing Resources:

- ***Existing state services/programs****: This recommendation would involve both integration of existing data streams across agencies, and support for implementing consistent data collection platforms for recovery navigator programs as needed (where existing LEAD/AJA programs cannot be leveraged)*

- ***Interagency involvement****: This recommendation would require cooperation between all law enforcement agencies within the state, in addition to HCA, WASPC, local RNPs, local prosecutors, AOC, and tribal courts.*
- ***Community partners****: This recommendation would require collaboration with existing community-based service providers who are operating as the case management agencies for RNPs, and other pre-arrest diversion programs.*
- ***Related grants or other potential funding sources****: This recommendation would be most effective if implemented in partnership with existing HCA, WASPC, and other locally- and federally funded initiatives aligned with the collective impact goals and intentions of the RNP*

Approximate Financial Support & Staffing Needed:

Implementation would require additional funding to support the following:

- Staff and technical experts sufficient to develop and lead data strategy, handle data integration, and manage data interoperability while maintaining privacy and security.
- Staff to provide technical assistance for data collection and management to RNP sites and BHASOs
- Staff and/or outside technical experts to analyze and report.

SURSA Committee Feedback: