

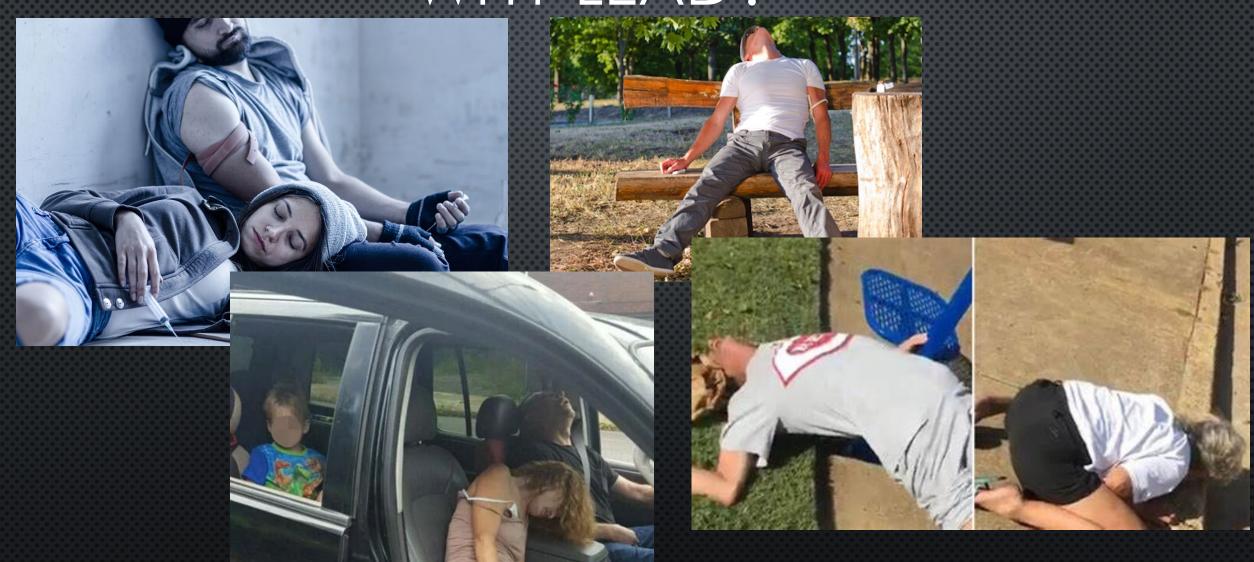
ECHO IDAHO: Opioids, Pain & Substance Use Disorders

Idaho Law Enforcement Diversion (ILED) Program
12/12/2024
Corporal Cody Evans, Boise Police Officer
Boise Police Department

None of the planners or presenters for this educational activity have relevant financial relationship(s) to disclose with ineligible companies whose primary business is producing, marketing, selling, re-selling, or distributing healthcare products used by or on patients.



MHA FEYDS



THE BEGINNING FOR BOISE

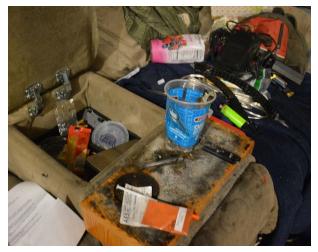
- Patients with Injuries- Opiates/Opioids being over-prescribed by doctors
- Pills socially accepted (doctor prescribes, parents have them, not a "real" drug)
- Injuries, pill parties, peer pressure
- Law enforcement/education marketing tactics- "Meth- not even once" (we missed this)
- Law Enforcement Fix- Board of Pharmacy/DEA Task Force
 - Less Pills Available resulted in price increase on street
 - Cartels started supplying heroin (cheaper/more potent along with synthetics)
 - 94% Heroin users switched from pills due to price/unavailable

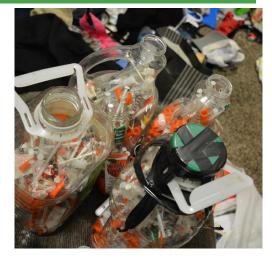






Ipad Case and the many others







INCREASED CRIME + INCREASED ENFORCEMENT = INCREASED ARREST

- Dramatic Increase in Opiate related calls for service (Deaths, OD/EMS Assist)
- Increase in burglary reports (Commercial, Residential, Vehicle) and Robberies
- Increase in violent crime
- Started targeting street level dealers (DEA, ATF, BPD Bureau Wide)
- Increase in Search warrants
- Increase arrests
- REPEAT



expecting different results.



WHAT IS THE MOST COMMONLY KNOWN DEFINITION OF INSANITY?



"We can't arrest our way out of an opiate problem..."





Law Enforcement Assisted Diversion



WHY WE CARE?

- Must understand what we are dealing with (Addiction, withdrawals)
- Expensive habit- results in no job and increase in theft/criminal activity to support addiction (continues even after arrests)
- Safety, Safety, Safety!!!- robberies (pharmacy, strong arm, etc.), needle pricks, fentanyl exposure
- Related crimes (Regan St Shooting, Increase in violent crimes)
- Everyone in the room knows someone, or will know someone addicted to opiates (coworkers, kids, relatives, friends)
- Drain on resources- calls for service Police, Fire, EMS, Coroner, ER's, etc.
- Save Lives, Save Communities!!!!



WHO QUALIFIES?

Candidate Criteria:

- One time only in the program
- No minors
- No Registered Sex Offenders
- Must not involve a crime of violence/no recent violent history/NCO's
- New charge must not involve trafficking weight/possession w/ intent to distribute
- No firearms during contact/related to call
- No new felonies while in program
- No significant health issues
- Can be on Probation (Misdemeanor/Felony) but no Parolees (Unless approved by Parole Officer.)
- Must sign release waivers (HIPPA, etc.)
- Ada County resident preferred (will consider alternatives on a case-by-case basis)
- Must want the help and be open and honest about drug usage/current criminal activity
- Can NOT be in a state of medical detox
- Can NOT be involved in a law enforcement CI (Confidential Informant) program



HOW DO WE FIND THEM?

Welfare checks

Shoplifters

Search warrants



THE PROCESS

Officers contact Officer Evans, who will;

- Respond out
- Work through LEAD criteria with potential candidate
- Review use history
- Upon meeting criteria, transport them to treatment provider



THE PROCESS

- Meet w/ LEAD Team
- Assign recovery coach and classes
- Review history and expectations
- Set up dosing if needed
- Set up UAs
- Review living situation, transportation, etc.
- Following treatment intake, LEAD Team continues to monitor candidate status.



REPORTS

- Officer completes a report, route to Evans
- Upon successful completion of treatment (1-year successful treatment), report routed to file
- Failure to complete program results in report being routed for warrant



To date

54 candidates

14 graduates

36 failed/discharged

4 currently in program



THANK YOU

Discussion/Questions?



CONTACT INFO

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