

**Overview and Initial Issues Identification
The Law Enforcement Assisted Diversion (LEAD)
and Multi-Disciplinary Team (MDT) Programs**

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Introduction

This issue paper addresses two complementary human services programs that operate in the downtown area. One is the Law Enforcement Assisted Diversion (LEAD) program and the other is the Multi-Disciplinary Team (MDT). Both programs are funded in part by the Seattle Human Services Department (HSD) with General Subfund (GSF). The LEAD and MDT programs also receive funding from foundations, non-profits, and government agencies other than the City.

Program Descriptions

The LEAD program was established as a pilot in 2011 as a means of diverting low-level drug and prostitution offenders to case-managed services rather than booking them into jail. The main goal of the program is to reduce criminal recidivism and reduce the cost – both in dollars and stresses on the criminal justice system – of dealing with repeat offenders. The program is also intended to improve the well-being, housing situation, and quality of life of those in enrolled in LEAD. The LEAD program is administered by the Public Defender Association, a non-profit organization that contracts with Evergreen Treatment Services, another non-profit, for case management services.

Currently, Evergreen Treatment Services has five half-time and five full-time case managers (7.5 Full-time Equivalents (FTEs)) for the LEAD program in downtown Seattle. They assess client needs and work with each client to develop an Individual Intervention Plan. They also connect clients with services such as addiction treatment, housing, and mental health counseling. In addition, the following 4.5 FTE serve both the downtown area and the LEAD program operating in unincorporated King County:

- 2 0.26 FTE Co-Directors
- 0.5 FTE Program manager
- 0.5 FTE Housing/Employment specialist
- 1 FTE Nurse
- 1 FTE Intake/Outreach Coordinator
- 0.25 FTE Admin Assistant
- 0.75 FTE Financial Assistant.

The Multi-Disciplinary Team (MDT) program is administered by the Metropolitan Improvement District (MID), which is a division of the Downtown Seattle Association (DSA). The MDT began operating July 2013 and is comprised of representatives of the MID, HSD, Seattle Police Department (SPD), City Attorney's Office, the State Department of Corrections, Seattle Park rangers, Municipal Court (Community Court), and the Public Defender Association representing LEAD. The goal of the MDT is to identify individuals who cause a disproportionate amount of

disorder and low-level crime in the downtown area and actively seek to address their behavior through coordinated law enforcement and social service efforts. Those assisted by the MDT are provided access to case management services, shelter, and other social services. The MDT currently has six outreach workers serving downtown Seattle, four of whom are funded by the MID and two by the City.

Geographic Area Served

When the two programs were established, they served different geographic areas of downtown. LEAD focused on the Belltown neighborhood, and the MDT applied to the greater downtown area. In 2014 the Council provided funding to expand LEAD, and the two programs now operate in the same areas of downtown, and also serve part of South Lake Union.

Clientele

The LEAD and MDT programs have different clientele. At first, LEAD participants were identified by specially trained police officers who referred them to the program after an arrest rather than booking them into jail. However, the program was soon expanded to include people identified by police officers who are eligible for diversion because they have committed low-level drug offenses in the past and have not committed violent offenses. Participation in the program is offered to these individuals without them having committed a crime leading to an arrest.

MDT enrollment is more flexible, and clients do not need to be referred by a police officer. They are identified by case workers who meet with potential enrollees and offer the opportunity to enroll. Potential enrollees either:

- demonstrate problematic behavioral health issues (i.e. mental health, substance abuse) who are not committing crimes (and thus are not eligible for LEAD) but who are in need of services; or
- are excluded from referral to LEAD by a disqualifying violent criminal conviction history, but nonetheless pose behavioral issues for downtown and who would benefit from services.

MDT case workers may refer people with substance abuse issues to SPD for referral to the LEAD program.

City Funding for LEAD and MDT programs

LEAD was initially funded through a \$4 Million grant from the Ford Foundation, and other granters. When the geographic area of the LEAD program expanded in 2014, Council added \$830,000 in GSF to the HSD budget for a contract with the Public Defender Association. The same amount of funding was provided in the 2015 Adopted, 2016 Endorsed, and 2016 Proposed Budgets, as shown in Table 1 below. The funding is located in a reserve in Finance General in the 2016 Endorsed Budget, based on a 2015 Council budget action (97-1-B-1), which required that a detailed evaluation of the LEAD program be provided before the funds would be released. This evaluation has been completed, and the Mayor is proposing to move the LEAD funding to HSD.

Overview and Initial Issues Identification
LEAD and MDT Programs

The MDT is funded by a HSD contract with the DSA. In 2014, the MDT budget was almost \$500,000, an amount comprised of \$155,000 of carryover from 2013 and \$344,059 in new funds. As shown on Table 1, the MDT budget has remained close to \$350,000 in the 2015 Adopted, 2016 Endorsed, and 2016 Proposed Budgets.

Since 2014, \$300,000 has been available in a Finance General reserve for either program, in the event additional funding is warranted.

Table 1: City Funds for LEAD and MDT Programs by Year and Department
(All General Subfund dollars)

	2014 Adopted Budget ¹		2015 Adopted Budget		2016 Endorsed Budget		2016 Proposed Budget		2016 Revised Proposal ³	
	HSD Budget	Finance General	HSD Budget	Finance General	HSD Budget	Finance General	HSD Budget	Finance General	HSD Budget	Finance General
LEAD	\$830,000	\$0	\$830,000	\$0	\$0	\$830,000	\$830,000	\$0	\$830,000	\$0
MDT	\$499,059	\$0	\$351,284	\$0	\$344,059	\$0	\$354,094	\$0	\$514,059	\$0
Additional ²	\$0	\$300,000	\$0	\$300,000	\$0	\$300,000	\$0	\$300,000	\$0	\$300,000
Total	\$1,329,059	\$300,000	\$1,181,284	\$300,000	\$344,059	\$1,130,000	\$1,184,094	\$300,000	\$1,354,094	\$300,000
	\$1,629,059		\$1,481,284		\$1,474,059		\$1,484,094		\$1,654,094	

¹In 2014, the MDT amount is comprised of \$155,000 of carryover from 2013 and \$344,059 in new funds.

²These funds are available to both programs.

³The MDT amount is comprised of \$344,059 from the 2016 Endorsed Budget plus \$170,000 carried over from Finance General from 2015.

Source: City Budget Office 10-16-15

Program Costs and Evaluation

A team of experts from the University of Washington Harborview Medical Center has been evaluating the LEAD program and the team has published two reports. The most recent evaluation, dated June 16, 2015, states that the LEAD program cost approximately \$899 per participant per month (\$10,787 per participant per year) in the first 29 months of operation, between October 2011 and July 2014. The report also notes that costs have decreased over time to \$532 per participant per month (\$6,384 per year) as the program has moved past the start-up phase. The evaluations provide a great deal of detailed information about LEAD.

According to HSD, the annual MDT cost per client was \$3,886 in 2014 and \$1,646 per client in 2015 through August. However, this cost is based only on the City-funded portion of the MDT program, and does not include client costs paid by the MID. The City does not know the full cost of the MDT program, and no formal program evaluation of the MDT has been done.

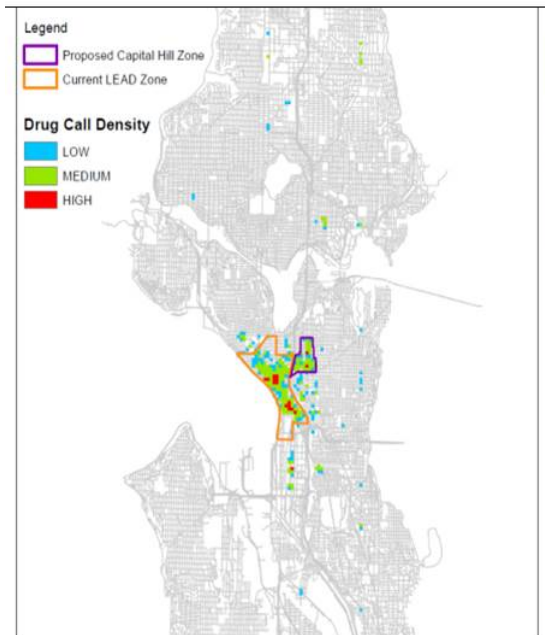
It is very difficult to compare the costs and effectiveness of the two programs because they have different goals and clientele, and because the information provided to the City is not prepared in a consistent way that would permit such an analysis. This also makes it hard evaluate the costs of expanding these programs to areas beyond downtown and Capitol Hill.

Identified Budget Issue: Potential expansion of LEAD and MDT Programs

In 2015, the Mayor used \$130,000 of the funding for LEAD and MDT in Finance General to contract with Christopher Fisher of the Council of State Governments Justice Center for several studies of drug diversion program operations and opportunities for expansion. Based on the results of the first study, the Mayor is proposing an expansion of both the LEAD and MDT programs to the Capitol Hill area.

As shown in the study excerpts on the following page, in the past four and a half years, almost 60% of all drug-related 911 calls for service in Seattle occurred in the downtown LEAD service area and the proposed Capitol Hill expansion study area. Similarly, 51 percent of all city-wide drug-related arrests occur in these two areas, which together make up only 2.5 percent of Seattle's total land. These results are summarized in the excerpts from the study on the following page. The full study is attached as Appendix A to this paper.

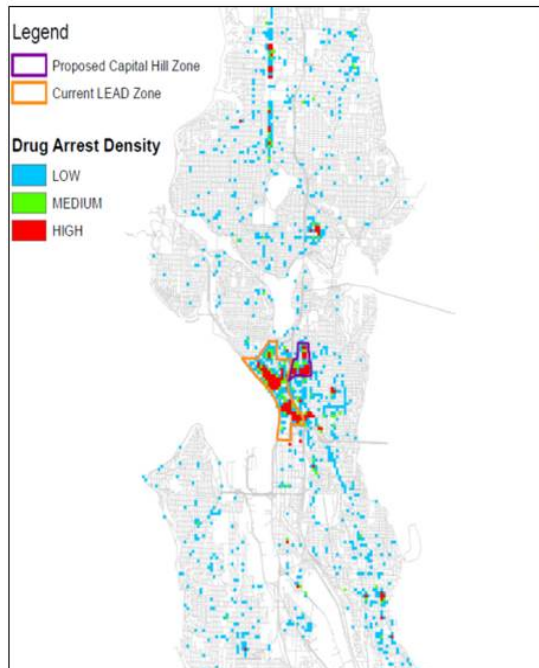
Analyses of Calls for Service (911) Involving Drugs



Calendar Year	Total Citywide Calls	Calls in LEAD Zone	% of Calls in LEAD Zone	Calls in Capitol Hill Zone	% of Calls in Capitol Hill Zone	% of Calls Across Both Zones
2011	16709	7495	45%	1626	10%	55%
2012	17711	8526	48%	2072	12%	60%
2013	17042	9211	54%	1574	9%	63%
2014	18357	9626	52%	1367	7%	60%
2015 (thru May)	10746	5389	50%	598	6%	56%
Total	80565	40247	50%	7237	9%	59%

- Density analyses reveal three substantial concentrations of calls for service for drug-related concerns
 - Downtown – Pike/Pine
 - Downtown – Pioneer/Occidental
 - Capitol Hill – Pike/Pine & Cal Anderson
- The concentration has ebbed but still represents ~60% of all drug-related calls for service
 - The LEAD Zone is 1.51 square miles (~2% of total Seattle area)
 - The Capitol Hill Zone would be .35 square miles (~0.5% of total Seattle area)

Analyses of Drug-Related Arrests



Calendar Year	Total Citywide Arrests	Arrests in LEAD Zone	% of Arrests in LEAD Zone	Arrests in Capitol Hill Zone	% of Arrests in Capitol Hill Zone	% of Arrests Across Both Zones
2011	1548	687	44%	111	7%	52%
2012	1080	474	44%	68	6%	50%
2013	979	444	45%	86	9%	54%
2014	740	281	38%	61	8%	46%
2015 (thru May)	287	118	41%	20	7%	48%
Total	4634	2004	43%	346	7%	51%

- Density analyses reveal three substantial concentrations of drug-related arrests similar to calls for service.
 - Downtown – Pike/Pine
 - Downtown – Pioneer/Occidental
 - Capitol Hill – Pike/Pine & Cal Anderson
- There is a broader diffusion of arrests than calls, but these three areas still represent close to or above 50% of all city-wide drug-related arrests.
- For the entire time period (2011 – May 2015) across the entire city, 3,531 individuals accounted for the 4,634 total arrests.
 - Half of all individuals arrested citywide on drug-related charges had such an arrest in these zones (1,768 people in 2,350 arrests)
 - 1507 individuals had arrests in the LEAD Zone
 - 296 individuals had arrests in the Capital Hill Zone
 - 35 individuals had an arrest in both zones

It is possible for LEAD to expand to Capitol Hill without additional funding for three reasons. The first is that the expansion area abuts the current downtown service area and does not create substantial additional costs for travel and supervision. The second is that LEAD is not getting as many referrals as predicted, so that there is additional staff capacity for the expansion. The third reason is that the Public Defender Association is working with the City on several operational improvements that should make administration of the program more efficient.

To fund the expansion of the MDT program to Capitol Hill in 2016, the Mayor is proposing to carry over \$170,000 in GSF that remains in the 2015 Finance General reserve for the LEAD and MDT programs into 2016. This would increase the total City contribution to the MDT to \$514,059 in 2016. The increased costs of expansion will be an ongoing expense if the program is continued in future years.

Options:

Option A: Approve the expansion of only the LEAD program to Capitol Hill. This could be accomplished by adopting the 2016 Proposed Budget, which moves the funding for LEAD from Finance General to HSD. No additional funding would be required.

Option B: Approve the expansion of only the MDT program to Capitol Hill, and move the \$170,000 from the 2015 MDT Finance General reserve to HSD in the 2015 4th quarter supplemental budget legislation. If this option is chosen, consider whether the current funding level for LEAD is appropriate or could be reduced.

Option C: Approve the expansion of both the LEAD and MDT programs to Capitol Hill.

Option D: Maintain the current boundaries of both the LEAD and MDT programs. As noted in Option B, if this option is chosen, consider whether the LEAD current funding level for LEAD is appropriate or could be reduced. A condition for the expansion could be the production of a comparison of the cost and effectiveness of the two programs.

Appendix A: LEAD Expansion Data Presentation, September 29, 2015



City of Seattle – Mayor’s Office / Police Department *Informing the Expansion of the LEAD Initiative*



Council of State Governments Justice Center

Christopher Fisher, PhD, Senior Policy Advisor

September 25th, 2015 – All figures are subject to further analysis and revision.

Primary Analytic Questions

1. What is the penetration rate of the LEAD initiative in the existing service zone?
 - What is the size of the drug-related criminal justice population in the LEAD zone?
 - What proportion of these individuals have been offered LEAD participation?
 - What proportion of these individuals are ineligible based on operating protocols?

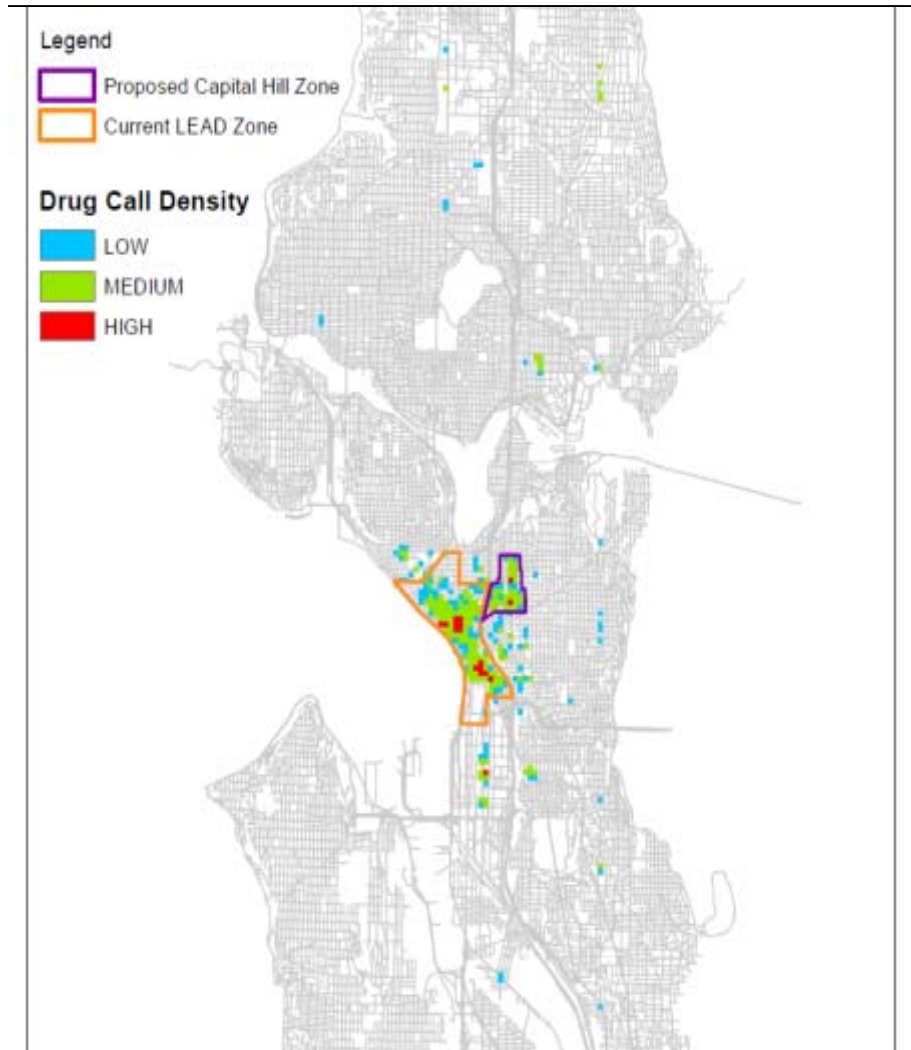
2. Where are other high-density drug-related criminal justice contacts happening?
 - What is the size of the drug-related criminal justice population in these areas?
 - What proportion of these individuals have contacts in the existing LEAD zone?
 - What proportion of these individuals have been offered LEAD participation?
 - What proportion of these individuals are ineligible based on operating protocols?

3. What is the history of jail bookings of these populations?

Analytic Overview

- The Seattle Police Department provided data on calls for service (911), police general offense reports, individuals contacted, and arrests for a general period of 2008 through May 2015.
- The King County Jail approved the use of jail booking data (supplied for statewide Justice Reinvestment work) for further enhancing these analyses.
- The included analyses considered data for 2011 through May 2015 to mirror the launch of LEAD in October 2011.
- Kernel density analyses of the 4.5 years of data revealed three primary high-density locations for drug-related calls for service and arrests. Two were in the existing LEAD zone and the third provided the creation of a draft Capitol Hill expansion zone to facilitate further analytic work.
- Drug-related calls and arrests were identified by recoding all events where the descriptive data field contained key words such as drugs, narcotics, illegal substance, overdose, VUCSA, marijuana, etc.

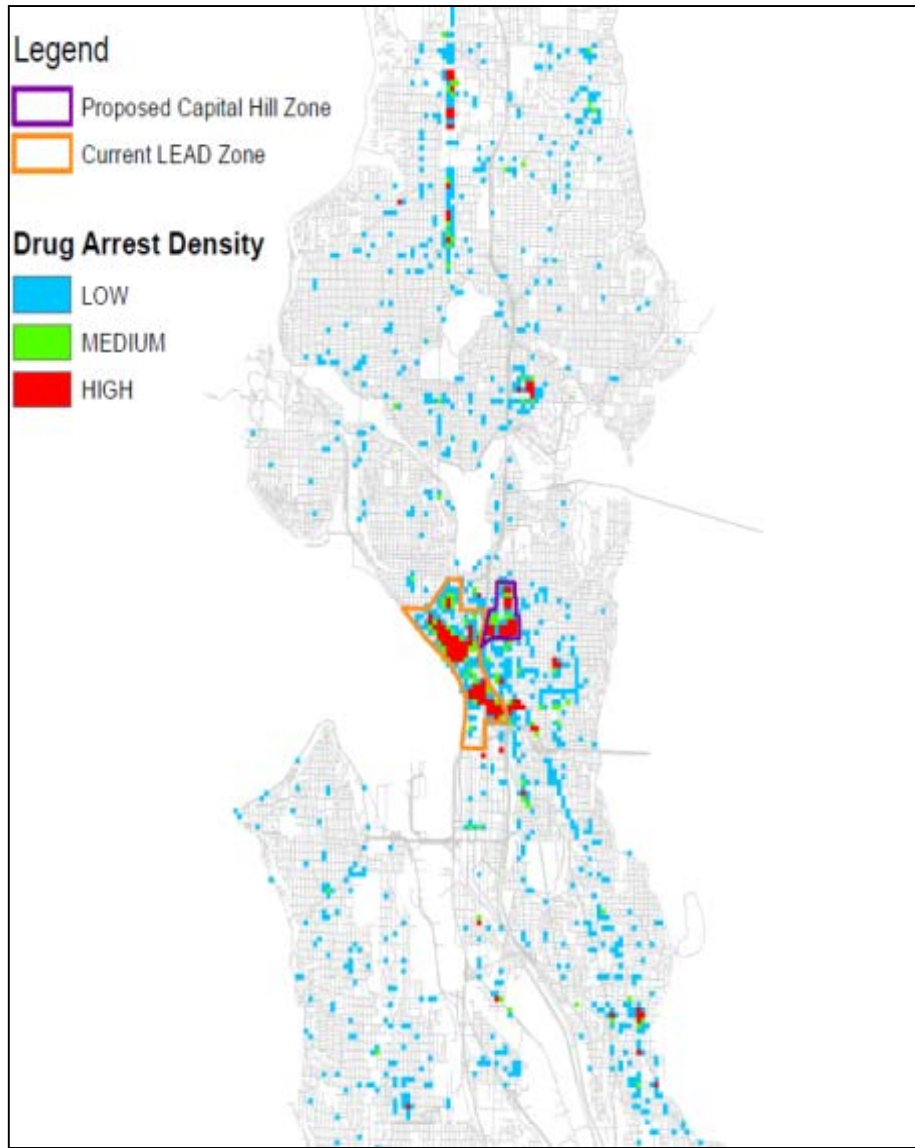
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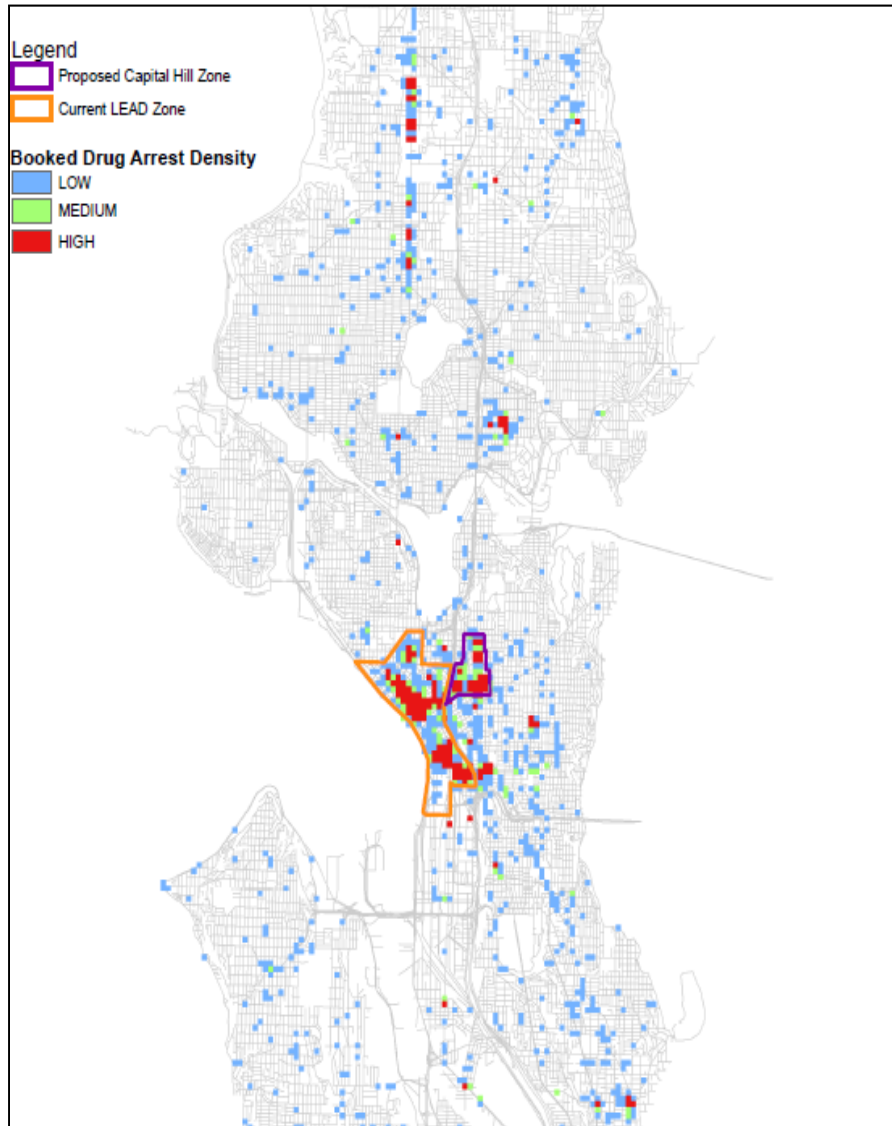
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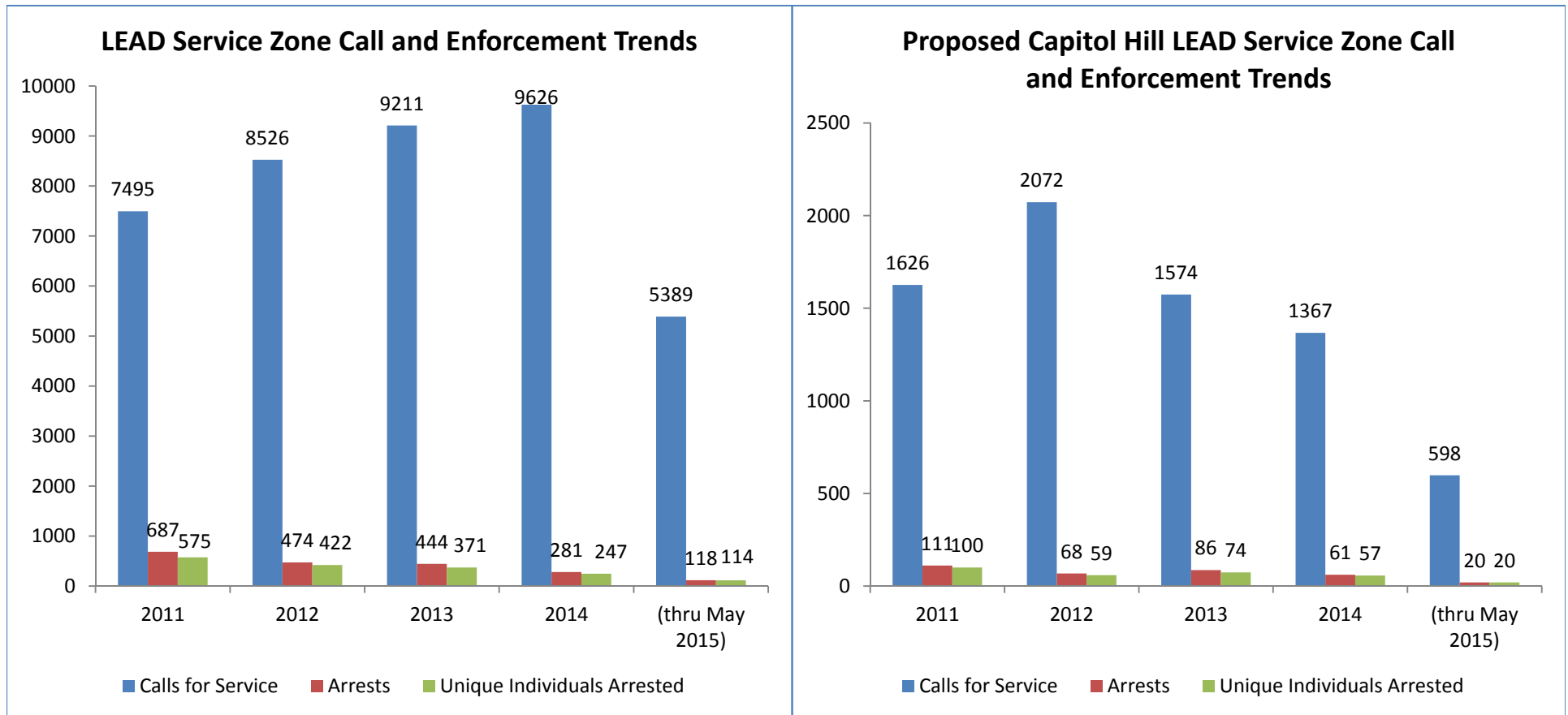
Analyses of Booked Drug Arrests



Calendar Year	Total Citywide Bookings	Bookings in LEAD Zone	% of Bookings in LEAD Zone	Bookings in Capitol Hill Zone	% of Bookings in Capitol Hill Zone	% of Bookings Across Both Zones
2011	1361	611	45%	105	8%	53%
2012	911	400	44%	61	7%	51%
2013	842	383	45%	74	9%	54%
2014	651	248	38%	56	9%	47%
2015 (thru May)	249	102	41%	17	7%	48%
Total	4014	1744	43%	313	8%	51%

- Density analyses reveal similar high-density areas for arrests that resulted in jail bookings.
 - Downtown – Pike/Pine
 - Downtown – Pioneer/Occidental
 - Capitol Hill – Pike/Pine & Cal Anderson
- The pattern for arrests leading to bookings appears to follow the trend in where arrests occur, with no evidence of particular areas producing a disproportionate concentration of bookings.

Calls for Service, Arrests, and Unique Offenders



- An approximate 10% “conversion” rate from calls to arrests suggests police were using alternative responses.
- Should more calls be addressed with a LEAD referral or does existing alternative response model already achieve desired outcomes?

Jail Days and Repeat Arrests

Average Jail Beds Occupied by Drug-related Bookings

Calendar Year	Average Jail Days for Drug Bookings Citywide	Median Jail Days for Drug Bookings Citywide	Average Jail Days for Drug Bookings LEAD Zone	Median Jail Days for Drug Bookings LEAD Zone	Average Jail Days for Drug Bookings Capitol Hill Zone	Median Jail Days for Drug Bookings Capitol Hill Zone
2011	26	3	28	4	18	3
2012	27	4	28	4	20	3
2013	19	3	17	3	19	5
Calendar Year	Average Daily Population	Average Daily Population	Average Daily Population	Average Daily Population	Average Daily Population	Average Daily Population
2011	73	8	45	6	5	1
2012	55	8	33	5	3	0.5
2013	32	5	17	5	4	1

Even with the biased mean measure, drug-related bookings account for a small number of jail beds.

Arrest Frequency of Offenders with at least 1 Drug-related Arrest

Calendar Year	Average (Median) # of Arrests in Prior Years (2008-) with 1+ current drug arrest Citywide	Average (Median) # of Arrests in Current Year with 1+ current drug arrest Citywide	Average (Median) # of Arrests in Prior Years (2008-) with 1+ current drug arrest LEAD Zone	Average (Median) # of Arrests in Current Year with 1+ current drug arrest LEAD Zone	Average (Median) # of Arrests in Prior Years (2008-) with 1+ current drug arrest Capitol Hill Zone	Average (Median) # of Arrests in Current Year with 1+ current drug arrest Capitol Hill Zone
2011	9.4 (8)	4.6 (3)	9.5 (7.5)	3.9 (3)	9.4 (8)	4.3 (3)
2012	4.6 (2)	3.1 (2)	5.9 (3)	3.3 (2)	4.6 (3)	5.2 (1.5)
2013	5.8 (2)	3.2 (2)	6.2 (3)	3 (2)	6.8 (2.5)	5.3 (3)

- There is no clear trend in the arrest histories of those arrested each year (at least once on a drug-related charge).
- The decrease in average number of 2008-YTD arrests for those arrested each year, may suggest that high frequency offenders were exiting the system, in some manner.

Initial Trends

- Consistency in concentration of drug-related calls for service, arrests, and jail bookings.
 - Three geographic hotspots, with two in the current LEAD service zone and one in a potential Capital Hill expansion zone.
- Existing and proposed service zones would cover 2.5% of Seattle's land area and account for ~60% of drug-related calls for service and ~50% of drug-related arrests.
 - The much larger existing zone accounts for ~40% and ~45%, respectively.
 - There is a not unexpected, given the focus of LEAD, decrease in arrests and bookings in the LEAD service zone.
- Three areas suggest the need for additional approaches (Aurora, University District, & Rainier Valley, as they have concentrations of enforcement without a matching density of calls for service.
- Across all 4.5 years of arrest data, there are 1,768 individuals arrested for drug-related behavior in these two zones, representing half of all individuals arrested for such charges citywide.
 - 34% (597) of these individuals have a violent offense (proxy due to data concerns) jail booking in their past (2008 thru May 2015).

Pending Analyses & Questions

- Penetration Rate

Due to concerns regarding the reliability of connecting LEAD contacts to arrest histories through personal identification numbers (PINs), analyses of which drug-involved arrestees have and have not been contacted by LEAD are pending.

- Behavioral Health Needs

With arrest data and jail data now joined, the identified potentially eligible ~1,200 individuals will be cross-matched with Familiar Faces to determine the proportion with identified mental health/substance abuse needs

- System Responses

For the approximately 1,200 LEAD-eligible individuals, their SPD and jail contact patterns will be examined to craft a picture of system involvement and their responses to those actions



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