



## Policy 806

Subject	
<b>LAW ENFORCEMENT ASSISTED DIVERSION (LEAD) PROGRAM</b>	
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*By Order of the Police Commissioner*

### POLICY

The purpose of this policy is to establish the criteria and procedures regarding the Baltimore Police Department's (BPD) participation in the Law Enforcement Assisted Diversion (LEAD) Program. The BPD has partnered with Behavioral Health System Baltimore (BHSB), Baltimore Crisis Response Inc. (BCRI) the Office of the State's Attorney (OSA), the Office of the Public Defender, the Division of Parole and Probation, and the Baltimore City Health Department to implement the LEAD program in the BPD's Central District to divert eligible individuals engaged in minor offenses towards services, and away from the criminal justice system. LEAD intakes will occur between 10am – 6pm, Monday through Friday, unless otherwise noted.

The BPD is committed to the principle of the least police-involved response consistent with public safety to behavioral health and crisis-related interactions. While the LEAD Program is currently a valuable tool for BPD members, the above-listed partners – including the BPD – are working together to better-resource the community behavioral health system so that law enforcement's role in this system is less necessary. This policy is one of several that addresses an officer's interactions with individuals that have a Behavioral Health Disability or Mental Illness. and officers are guided by these policies to provide the most appropriate response. The BPD will periodically update its policies and training to reflect resource availability, but this policy provides guidance consistent with the system as currently designed as well as with the BPD's mission, vision, and values.

Officers who are approached by individuals seeking services for addiction, untreated mental illness, homelessness, and extreme poverty can refer individuals directly to the Here2Help Hotline at 410-433-5175. In the past this was considered a Social Contact Referral. Under this policy, these types of referrals are no longer routed through the OSA and instead officers can guide the individual to call the Here2Help Hotline.

### CORE PRINCIPLES

**Community and Officer Safety.** The goal of the LEAD program is to improve public health and public safety by reducing future harm by diverting individuals engaged in minor offenses away from the criminal justice system. The availability of LEAD provides members with a helpful tool to connect individuals to a trauma informed intensive case-management program to help achieve their personal goals. The program aims to address issues of addiction, untreated mental illness, homelessness, and extreme poverty through a public health framework.

**Diversion, Harm Reduction, and Non-Displacement.** Through a harm-reduction approach, the LEAD program diverts eligible individuals from prosecution and incarceration, and is more effective at reducing

recidivism, including occurrences of violent crimes, than traditional criminal justice approaches<sup>1,2</sup>. Participants are engaged where they are in their lives and recovery. Program goals include measures of health, employment, engagement, and overall well-being instead of abstinence. LEAD participants will not be penalized or denied services if they do not achieve or maintain abstinence. The objective of LEAD is to improve public health and public safety for the community as a whole, not just for individual LEAD participants. The LEAD program will supplement, not supplant, existing resources, and will not give LEAD participants preferential access over others to existing service resources, which the LEAD partners agree must be expanded and are working to expand.

**Community Planning and Implementation.** The BPD maintains a collaborative relationship with the behavioral health care system, people with lived experience, and advocacy groups in order to implement and evaluate opportunities for individuals to be diverted towards community services and away from the criminal justice system. LEAD is managed by BPD, Behavioral Health System Baltimore (BHSB), the Office of the State's Attorney (OSA), the Office of the Public Defender, the Division of Parole and Probation, and the Baltimore City Health Department, who participate in regular meetings and have access to program performance reports and 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 that participant safety and reputation depend on a commitment to confidentiality and privacy.

## **DEFINITIONS**

**Behavioral Health Disability** – Primarily refers to any Mental Illness and/or Substance Use Disorders, but may also be used to describe any disabling condition that impacts a person's ability to self-regulate their thinking, mood, or behavior, including intellectual and developmental disabilities, autism spectrum disorders, and dementia. A person may be suspected of experiencing a Behavioral Health Disability through a number of factors including:

- Self-report,
- Information provided to dispatch or members directly by witnesses or informants,
- An individual's previous interaction(s) with the BPD, or
- A member's direct observation including, but not limited to, behaviors consistent with psychiatric diagnoses, such as disorientation/confusion, unusual behavior/appearance (neglect of self-care), hearing voices/hallucinating, anxiety/excitement/agitation, depressed mood, crying, paranoia or suspicion, self-harm, and/or threatening violence towards others.

**NOTE:** The terms "disability" and "disorder" are often used interchangeably. In this context, the preferred term is disability.

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<sup>1</sup> Susan E. Collins, Heather S. Lonczak, and Seema L. Clifasefi (March 27, 2015). LEAD Evaluation: Recidivism Report. <http://leadkingcounty.org/lead-evaluation/>

<sup>2</sup> Sante Fe Law Enforcement Assisted Diversion (LEAD) Pilot Period Program Evaluation Summary Report\_October 2018. <https://www.lead-santafe.org/reports/>

**District LEAD Coordinator** – Act as the point of contact between the LEAD Case Managers, LEAD-trained officers, and the OSA LEAD coordinator.

**Harm Reduction** – Refers to policies and practices that aim to minimize the negative health, social, and legal impacts associated with substance use; mental illness; mental health, drug and alcohol policies, regulations and laws. Through LEAD, individuals are diverted away from the cycle of arrest, prosecution, and incarceration and towards health and social services. Goals of Harm Reduction include: offering non-judgmental and non-coercive services and resources to those who use, reducing the harm of drug laws and policy, and offering alternatives to approaches that seek to prevent or end drug use.<sup>3,4</sup>

**LEAD Case Manager** – An employee of a designated services provider assigned to support/supervise Lead Participants and act as a liaison between the LEAD Participants, the BPD, and other LEAD partner agencies described above.

**LEAD Participant** – An individual meeting the eligibility requirements described below, who is willing to participate in the LEAD program, and has been accepted into the LEAD program after approval from all operational partners.

**Mental Illness** – A health condition that significantly impairs a person’s thinking, mood, or behavior and may affect his or her ability to effectively address individual, interpersonal, and social challenges.

**Reasonable Articulate Suspicion (RAS)** – A well-founded suspicion based on specific, objective, articulable facts, taken together with the member’s training and experience, that a subject has committed, is committing, or is about to commit a crime.

**Stop Referral** – An encounter where a member has Reasonable Articulate Suspicion (RAS) to believe that an individual is committing or has committed a LEAD-eligible offense, the BPD member performs a lawful investigative stop, and refers the individual to the LEAD program.

**Substance Use Disorder** – a mental health disorder that affects a person’s brain and behavior, leading to a person’s inability to control their use of substances such as legal or illegal drugs, alcohol, or medications.

## **GENERAL**

The LEAD program is designed to divert eligible individuals from prosecution and incarceration and, instead, connect individuals with unmet behavioral health needs who reside in Baltimore City or frequent the Central District to services through a law enforcement referral. LEAD participants are referred to the program through what is called a “Stop Referral.” LEAD intakes will occur between 10am – 6pm, Monday through Friday, unless otherwise noted.

1. If a member stops an individual with RAS that they are about to commit, are committing, or have committed a non-violent misdemeanor offense (or a common lesser-offense as defined in Policy 1018, *Lesser Offenses & Alternatives to Arrest*) in the Central District, they may resolve the stop by referring the individual to the LEAD program. Individuals suspected of committing non-violent

<sup>3</sup> Harm Reduction International, [www.hri.global/what-is-harm-reduction](http://www.hri.global/what-is-harm-reduction)

<sup>4</sup> [Harm Reduction Principles | National Harm Reduction Coalition](#)

misdemeanor offenses for which LEAD case management could be a supportive resolution include, but are not limited to:

- 1.1. Controlled Dangerous Substance (CDS) possession or distribution for subsistence purposes,
- 1.2. Prostitution,
- 1.3. Larceny, including petty larceny and larceny from auto, for subsistence purposes,

NOTE: For incidents of shoplifting, members shall seek the victim/store owners' approval prior to referring an individual to LEAD.

- 1.4. Misdemeanor Trespass, and
- 1.5. Public urination.

2. Individuals may **not** be referred to LEAD via a Stop Referral when:

- 2.1. The suspected CDS activity involves Distribution or Possession with Intent to Distribute, and there is reason to believe the individual's primary motivation for distribution is beyond addiction motivation (i.e., when a person sells their own prescriptions to buy food or additional CDS.);
- 2.2. The individual does not wish to participate in the program;
- 2.3. The individual appears to exploit minors or others in a drug dealing enterprise;
- 2.4. The individual is suspected of promoting prostitution of another;
- 2.5. The individual has an existing peace or protective order prohibiting contact with a current LEAD Participant or LEAD staff member(s);
- 2.6. The individual has an open arrest warrant;
- 2.7. The individual is currently under supervision in any jurisdiction (e.g., parole, probation, pretrial release, etc.) for certain offenses that preclude eligibility. This will be evaluated on a case-by-case basis by the OSA, and the determination will depend on the facts and nature of the offense;
- 2.8. If at the time of the stop, an individual is intoxicated or incapacitated and unable to engage effectively in the intake process; and/or
- 2.9. If, in the member's and/or service provider's judgment, an individual is unable to provide informed consent and/or poses a risk to self or others.

3. BPD members and their supervisors shall be the primary decision makers for LEAD Stop Referrals based on LEAD training and officer discretion.

4. LEAD-trained officers shall utilize the LEAD Referral and Screening Form (see Appendix A) to determine if the individual is eligible to be diverted into the LEAD program.
5. Only LEAD-trained officers may offer LEAD Stop Referrals. If an officer who is not LEAD-trained identifies an individual who may be eligible for a Stop Referral, they may call a LEAD-trained officer to the scene to make a LEAD referral assessment.

## **DIRECTIVES**

### **Stop Referral Process**

If the stopped individual indicates a willingness to participate in the LEAD program:

6. Contact a LEAD Case Manager via the Communications Section or by contacting the LEAD Case Manager directly.
7. Contact the LEAD Coordinator for the OSA. Supply the OSA with the name, date of birth, address, and SID number (if applicable) for the individual.
8. Prepare an Incident Report detailing the facts and circumstances regarding the stop.
9. Forward a copy of the Incident Report to the LEAD OSA coordinator and the District LEAD Coordinator.
10. Be guided by the OSA to determine if the individual is eligible for LEAD.
11. If it is determined that the individual is not eligible for LEAD, given the facts and circumstances, the member may resolve the incident by following Policy 1018, *Lesser Offenses and Alternatives to Arrest*.
12. If it is determined that the individual is eligible for LEAD:
  - 12.1. Complete a LEAD Referral and Screening Form (Appendix A) in addition to all BPD related reporting.
  - 12.2. Provide the LEAD Case Manager with a copy of all reporting including the LEAD Referral and Screening Form.
  - 12.3. Stand by until the LEAD Case Manager has completed the intake and assessment process with the individual.
13. Submit any CDS or related evidence to the Evidence Control Section (see Policy 1401, *Control of Property and Evidence*). Submission should occur whether or not the person is arrested and charged or enrolled in the LEAD program.
14. Obtain a charging document for the individual only when advised to do so by the OSA.

**LEAD Notification**

15. If the officer confirms he/she is engaging a LEAD Participant, the officer shall notify LEAD staff if the participant is arrested or is in a crisis (i.e. emotional, behavioral, or medical emergency). A short message with the name of the LEAD Participant and a description of the crisis or arrest is all that is necessary.
16. Notify the Communications Section if assistance is needed in contacting LEAD staff.

**APPENDIX**

- A. Form 501, LEAD Referral and Screening Form

**ASSOCIATED POLICIES**

Policy 713, *Petitions for Emergency Evaluations & Voluntary Admission*  
Policy 1018, *Lesser Offenses & Alternatives to Arrest*  
Policy 1401, *Control of Property and Evidence*  
Policy 1739, *Reasonable Accommodations for Interactions with the Public*

**COMMUNICATION OF POLICY**

This policy is effective on the date listed herein. Each employee is responsible for complying with the contents of this policy.

**APPENDIX A**

Form 501, LEAD Referral and Screening Form, Page 1

Form 501  
 March 2022 Version



**Law Enforcement Referral and Screening Form**  
**Law Enforcement Assisted Diversion (LEAD) Program**  
 Complete for all individuals screened for LEAD Stop Referral

**Instructions**

If the **LEAD-trained BPD member** (“member”) and **LEAD Coordinator for the OSA** determine that an individual is eligible for LEAD, and the individual expresses willingness to participate in LEAD, the member will complete this form and all BPD related reporting at the handoff location. Reporting will include an Incident Report detailing the facts and circumstances regarding the stop. Provide the **LEAD Case Manager** with this form and relevant reporting.

The member will remain on standby until the LEAD Case Manager has completed the intake and assessment process with the individual.

*Note: If it is determined that the individual is not eligible or does not wish to participate in LEAD, refer to Policy 806 for next steps.*

Be sure to submit any CDS or related evidence to the Evidence Control Section.

Referring Officer & Sequence #: \_\_\_\_\_ Supervisor & Sequence#: \_\_\_\_\_  
 Date: \_\_\_\_\_ Time: \_\_\_\_\_ CC#: \_\_\_\_\_ CAD#: \_\_\_\_\_  
 Location: \_\_\_\_\_ Post#: \_\_\_\_\_

**Consumer Information:**

Name: \_\_\_\_\_ Phone: (If none, write N/A) \_\_\_\_\_  
 DOB: \_\_\_\_\_ Height: \_\_\_\_\_ Weight: \_\_\_\_\_ Eye Color: \_\_\_\_\_

Gender:  Male  Female  Non-Binary  Other      Sex:  Male  Female  Non-Binary  Other  
 White       Black or African American       American Indian or Alaska Native       Asian  
 Ethnicity:  Native Hawaiian or Other Pacific Islander       Other

Address: \_\_\_\_\_ Zip Code: \_\_\_\_\_ Homeless?:  Yes  No

**Consumer Suspected of Committing Non-Violent Misdemeanor Offense(s), Check all that apply:**

- Controlled Dangerous Substance (CDS) possession or distribution for subsistence purposes
- Prostitution
- Larceny, including petty larceny and larceny from auto, for subsistence purposes  
**NOTE: For incidents of shoplifting, you must seek the victim/store owners' approval prior to referring an individual to LEAD.**
- Misdemeanor Trespass
- Public Urination
- Other non-violent misdemeanor offense(s) for which LEAD case management could be a supportive resolution (include offense here): \_\_\_\_\_

**Referral Recommendation:**

Meets criteria for LEAD Referral, determined by BPD member and OSA:  Yes  No      Meets criteria but LEAD at Capacity and not accepting referrals:  Yes  No  N/A

**APPENDIX A**

## Form 501, LEAD Referral and Screening Form, Page 2

Form 501  
March 2022 Version

**Law Enforcement Referral and Screening Form  
Law Enforcement Assisted Diversion (LEAD) Program**  
Complete for all individuals screened for LEAD Stop Referral

**If does not meet the criteria, select the reason(s) below (Check all that apply.)**

- Does not wish to participate in the program
- Prior unsuccessful LEAD referral
- Suspected CDS activity involves dealing for profit and/or exploitation of others
- Suspected of promoting prostitution of another
- Existing peace or protective order with current LEAD participant or staff
- Open Arrest Warrant
- Currently under supervision in any jurisdiction for certain offenses that preclude eligibility, as determined by LEAD Coordinator in the OSA
- Unable to give informed consent due to medical condition/intoxication at time of stop
- Poses a risk to self or others at time of stop
- Unable to provide confirmed consent for other reason not listed above
- Unable to participate in LEAD intake process for other reason not listed above
- Other: \_\_\_\_\_

**If Consumer is referred to LEAD:**

Hand off location: \_\_\_\_\_ Hand off time: \_\_\_\_\_  
 Time spent at hand off location: \_\_\_\_\_ Approving Supervisor/Sequence#: \_\_\_\_\_  
 Case Manager: \_\_\_\_\_

**Release of Information**

Client Name: \_\_\_\_\_ DOB: \_\_\_\_\_

*I give permission for the Baltimore Police Department to share information relating to my diversion and previous police contacts with Behavioral Health System Baltimore and Baltimore Crisis Response, Inc. in order to provide case management services and secure resources on my behalf. I understand that information will only be shared when necessary to meet the requirements of my established service plan.*

\_\_\_\_\_  
Signature of LEAD Program Participant

\_\_\_\_\_  
Date/Time