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ATTORNEY GENERAL ADMINISTRATIVE EXECUTIVE DIRECTIVE NO. 2024-01

TO: All Division Directors, Department of Law and Public Safety

FROM: Matthew J. Platkin, Attorney General

DATE: March 13, 2024

SUBJECT: Directive Creating the Office of Alternative and Community Responses

New Jersey is facing mental health and substance use crises that require innovative approaches for 21st Century law enforcement and stretch the bounds of traditional criminal justice responses. The opioid crisis is an epidemic that is entering its third decade, continuing to evolve and become even deadlier, sparing no community in our state from the wanton destruction to individuals and families. Similarly, we are experiencing an unprecedented mental health crisis, which, according to the United State Conference of Mayors is marked by “staggering increases in stress, depression, isolation, loneliness, and accompanying mental health hurdles faced by Americans of all ages.”¹ Suicide accounts for the majority of gun deaths in the United States, and firearms are the leading instrumentality for suicide.² A person in crisis, no matter the root cause of that crisis, with access to a firearm, can cause irreparable harm to themselves, others, or an entire community. Relying on traditional criminal justice responses to reduce or alleviate these harms is not enough when lives are at stake. It is time to rethink the way in which this Department and our State respond to these challenges.

These public health crises have demanded a public safety response that traditional law enforcement strategies—arrest, prosecution, and incarceration—are not adequately designed to handle. This is particularly true in relation to substance use disorders and addiction, as well as mental and behavioral health issues and crises, which require coordination with professionals from outside of law enforcement community. In the past, reliance on responses that exclusively involved law

¹ THE UNITED STATES CONFERENCE OF MAYORS, *THE MENTAL HEALTH CRISIS IN AMERICA’S CITIES AND THEIR RESPONSES TO IT: A 117-CITY SURVEY* (June 2023).

² Emily Baumgaertner, *U.S. Rate of Suicide by Firearm Reaches Record Level*, N.Y. TIMES (Nov. 30, 2023).



enforcement have placed undue burden on our law enforcement agencies and personnel, particularly our frontline police officers. Traditional law enforcement responses also do not leverage the expertise of public health professionals or the community itself.

These current crises carry significant implications for public safety and our criminal justice system. In the US, approximately half the people in jails and over one third of the prison population have been diagnosed with a mental health condition.³ People who suffer from mental illness are more likely to be injured during police encounters. A singular focus on arrest and prosecution as the solution for non-violent individuals suffering from addiction does not address the harms of addiction for the individual or the community: data show that individuals who would benefit from treatment are unlikely to receive it within the criminal justice system, and that there are high rates of relapse and recidivism amongst those who are addicted and become involved in the criminal justice system.⁴ Additionally, the demands placed on law enforcement are untenable; all too often, we ask law enforcement officers to assume roles they never expected when choosing to serve—mental health experts, addiction specialists, and social workers, just to name a few. Increasingly, police are asked to act like physicians, pharmacists, or psychiatrists, determining what drug a person may have taken, or what mental health condition they may be experiencing, and then provide people the resources to address these specific concerns.

The toll on law enforcement officers in responding to these and other demands is staggering. As stated in Attorney General Law Enforcement Directive No. 2019-1, the immediate and enduring effect can contribute to a range of mental and physical health issues, and for that reason the Directive established a statewide law enforcement resiliency program. The need for resiliency programming cannot be separated from the underlying work charged to law enforcement officers, and requires collaboration and coordination.

Treatment and preventative strategies for individuals who suffer from addiction and/or mental health disorders can lead to less crime and safer communities. There is also a broad misperception that mental health disorders are at the root of violent crime. On the one hand, studies have demonstrated that the large majority of people with serious mental illnesses are not violent.⁵ On the other hand, there is a strong association between mental health disorders and increased risk of suicide,⁶ which accounts for over half of US firearm-related fatalities. Recognizing the accurate scope of these overlapping crises points to more appropriate law enforcement approaches.

³ Ebonyque Taylor, *Mental Health and Reentry: How Court Services Offender Agency Meets the Challenge of Mental Health Community Supervision*, COMMUNITY POLICING DISPATCH, May 2022, vol. 15, issue 5, https://cops.usdoj.gov/html/dispatch/05-2022/mental_health_reentry.html.

⁴ Steven Belenko, Matthew Hiller, & Leah Hamilton, *Treating Substance Use Disorders in the Criminal Justice System*, CURR PSYCHIATRY REP., Nov. 2013 vol. 15, issue 11. *See also*, THE PEW CHARITABLE TRUSTS, MORE IMPRISONMENT DOES NOT REDUCE STATE DRUG PROBLEMS, March 2018, https://www.pewtrusts.org/-/media/assets/2018/03/pspp_more_imprisonment_does_not_reduce_state_drug_problems.pdf.

⁵ John S. Rozel & Edward P. Mulvey, *The Link Between Mental Illness and Firearm Violence: Implications for Social Policy and Clinical Practice*, 13 ANNU REV. CLIN. PSYCHOL. 445-469 (May 2017).

⁶ Farzana Akkas & Allison Corr, *Mental Health Conditions Can Contribute to Suicide Risk*, THE PEW CHARITABLE TRUSTS (May 2022), <https://www.pewtrusts.org/en/research-and-analysis/articles/2022/05/02/mental-health-conditions-can-contribute-to-suicide-risk>.

The last decade has seen a shift in New Jersey—within the Department of Law and Public Safety, the 21 County Prosecutor Offices, local police departments, community, the courts, and local, county, and state government—where leaders have recognized the critical importance of alternative public health and safety responses and have implemented new approaches. These approaches look to therapeutic treatment, recovery and supportive services as alternatives to criminal justice involvement, diverting individuals to solutions that will address the root causes of the problem. The participation and engagement of community in these alternative responses solidifies public safety as a shared responsibility.

Most notable among these strategies is the development of the Alternative Responses to Reduce Instances of Violence and Escalation (ARRIVE) Together program, which has a presence in all 21 New Jersey counties and, as of the date of this Directive, is available to roughly 50 percent of New Jersey’s population. ARRIVE Together is at the forefront of a historic shift in law enforcement-led policing strategies that achieve better public safety and health outcomes than traditional policing. According to the Brookings Institution, “it is clear that ARRIVE Together is a highly effective program for reducing arrests and use of force (even across racial groups and other demographic outcomes), providing people experiencing mental health symptoms with specialized services, and reducing the workload and lack of specialized training among law enforcement so they can direct resources to address violent crime and other criminal activity.”⁷ To date, ARRIVE teams have helped over 2,800 individuals suffering from mental health or emotional distress, effectively eliminating the use of force and arrests and producing better healthcare outcomes.

Additionally, New Jersey’s Recovery Courts, Veterans Diversion Programs, and Mental Health Diversion Programs are successful for many of those who utilize them, but they still require entry into the criminal justice system. Utilizing the criminal justice system as a source of treatment often has the effect of creating additional harms to the individual seeking help. Finally, over the past five years, the Administration of Governor Murphy, the State Legislature, and this Department have invested millions of dollars of opioid settlement funds into strategies that reduce and prevent addictions and overdose due to opioids and other drugs. These strategies show the benefits of targeted interventions for populations at key contact points with law enforcement and the criminal justice system—police response, arrest, and court involvement.

These varied approaches to address the overall public safety and public health needs of New Jerseyans require a coordinated approach by law enforcement and those who share the responsibility of public safety. We must build on these alternative public safety strategies that are smart, just, and which make our communities safer. We must continue to transform law enforcement and public safety in New Jersey.

Through this Directive, I am establishing a central unit, the Office of Alternative and Community Responses (the Office, OACR), to lead DLPS’s transformation of this area, and improve public safety through alternative responses to traditional law enforcement. It will do this across four key areas:

⁷ Rashawn Ray, *New Jersey ARRIVE Together Program Could Reform Policing as We Know It*, THE BROOKINGS INSTITUTION, (March 16, 2023).

1. Preventing crime and involvement with law enforcement through the support of community-led strategies and partnerships that combat addiction and the conditions leading to it as well as other issues at the intersection of public health and the criminal justice system;
2. Promoting the resiliency of law enforcement officers by supporting preventative strategies and interventions that address the mental and emotional dimensions of their work and the trauma resulting from it;
3. Transforming law enforcement's response to emergencies, distress, and/or crime by incorporating, partnering with, or coordinating a behavioral health or community response, and giving law enforcement the tools, resources and encouragement to pursue alternative and diversionary pathways to arrest or continued police involvement; and
4. Improving public safety through innovative and alternative prosecutor- and law enforcement-led approaches. Such approaches could include working with the courts to seek diversionary pathways from the criminal justice system and/or incarceration where appropriate.

Underpinning and guiding OACR and its organizational units are several critical goals for OACR and the Department:

1. Consolidate, lead, and coordinate efforts by the Department at the intersection of public health and safety and criminal justice.
2. Incorporate public health strategies into public safety responses to the opioid and addiction crises by preventing addiction, mitigating the deleterious impacts of addiction, combating the misuse of harmful drugs, and blunting the use of deadly substances.
3. Support and improve the wellbeing of police officers and law enforcement through resiliency efforts as well as through modernization of public safety strategies that reduce undue burden on law enforcement.
4. Improve how law enforcement officers interact with community members suffering from mental and behavioral health emergencies through training, exposure to, and making available to them other available tools for responding to crises in the community other than through more traditional law enforcement strategies.
5. Advance the health and well-being of individuals with mental and behavioral health emergencies and eliminate stigma by connecting individuals to care and resources rather than the criminal justice system through community-led responses, alternative law enforcement-led responses, and diversionary strategies in the courts.

6. Bolster trust and collaboration between law enforcement and community. Build partnerships with communities that can participate in or lead public safety initiatives in coordination with law enforcement, empowering community to make public safety a shared mission.
7. Develop and support initiatives that lead to fewer arrests, fewer uses of force, fewer injuries, and address racial disparities in policing and prosecution.
8. Coordinate and support law enforcement agencies across the state on practices that ensure local law enforcement's responses to matters at the intersection of public health and crime are consistently effective, and evidence- and trauma-informed across New Jersey communities.
9. Assist the Department in streamlining funding opportunities and requests that avoid compartmentalization of public health and safety issues, avoiding funding limitations that only address part of a multi-pronged challenge, and allow for holistic and interdisciplinary solutions.
10. Provide training and technical assistance to the Division of Criminal Justice (DCJ), the 21 County Prosecutor Offices, law enforcement agencies, and the courts on alternative law enforcement responses with respect to policy, operations, and programming.
11. In conjunction with the Office Justice Data (OJD), promote transparency in how law enforcement, in the course of their work, interacts with individuals with mental health, addiction, and behavioral health emergencies.

Therefore, pursuant to the authority granted to me under the New Jersey Constitution; the Law and Public Safety Act of 1948, N.J.S.A. 52:17B-1, *et seq.*, which provides for general responsibility of DLPS's operations and the supervision of the organization of DLPS; and the Criminal Justice Act of 1970, N.J.S.A. 52:17B-97, *et seq.*, which provides for the general supervision of criminal justice by the Attorney General as chief law enforcement officer of the State in order to secure the benefits of a uniform and efficient enforcement of the criminal law and the administration of criminal justice throughout the State, I have determined that the organization described herein is necessary for the efficient and effective operation of DLPS and its law enforcement functions and hereby direct all DLPS personnel to implement and comply with the following directives.

I. Office of Alternative and Community Responses

- A. ***Establishment.*** There is established in the Department of Law and Public Safety the Office of Alternative and Community Responses (the Office, or OACR).

- B. ***Leadership of OACR.*** The Office shall operate under the supervision of a Director, who shall be an attorney appointed by, and operate under the authority of, the Attorney General. The Director shall direct and supervise the work of the Office and its constituent organizational units, and shall devote their entire time to the duties of the Office. The leadership team of OACR shall include, among others, at least one senior attorney who shall oversee and manage policy and operations relating to law enforcement's role in the Extreme Risk Protective Order Act of 2018, N.J.S.A. 2C:58-20 to -32, and shall provide direction and guidance to DCJ and the 21 County Prosecutor Offices in their strategic use and management of this critical public safety tool.
- C. ***Organization of OACR.*** With the approval of the Attorney General, the Director may organize the work of the Office into any bureaus or other organizational units as may be necessary for the efficient and effective operation of the Office. The Director may delegate to employees in the Office and its constituent organizational units such powers as the Director deems appropriate, to be exercised subject to the supervision and control of the Director. The Attorney General shall assign to the Office such employees of DLPS as may be necessary to assist the Director in the performance of their duties. To the extent not inconsistent with law, the Attorney General may delegate duties to the Director assigned to the Attorney General to assist the Office in fulfilling its purpose.
- D. ***Duties of the OACR Director.*** The Director will set the programmatic and policy vision of OACR, manage performance and outcomes of OACR bureaus, and identify funding, grant, and legislative opportunities for the Department. The Director or their designee will serve as the lead point of contact, subject matter expert, and coordinator for DLPS on all matters relating to:
- Opioid and substance use disorder prevention and response;
 - Law enforcement resiliency;
 - Law enforcement interaction with mental health and special needs populations, alternative law enforcement responses; and
 - Prosecutorial diversion programming.

Working with the Attorney General's Director of Community Engagement, the Director or their designee will develop and maintain strong working relationships with local, State, and federal partners, community stakeholders, the New Jersey Administrative Office of the Courts, the 21 County Prosecutor Offices, statewide law enforcement agencies, and other organizational units and divisions within DLPS and other State agencies. The Director or their designee will coordinate or support training and outreach efforts by OACR's constituent organizational units, and manage shared services among them, including research, training, policy support, management of programmatic and policy elements of grants, grant applications, technical assistance, and community outreach.

In addition, the Director or their designee will oversee statewide ARRIVE Together programming and serve as the Chair of the Attorney General's Statewide Steering

Committee on Mental Health Working Groups as established by Attorney General Law Enforcement Directive No. 2020-14.

The Prescription Monitoring Program (PMP) established within the Division of Consumer Affairs (DCA) under N.J.S.A.45:1-45 et. seq. will continue to be overseen by the PMP Administrator and Director of DCA. The DCA Director and PMP Administrator will coordinate with OACR as permitted by law.

- E. **Structure of OACR.** In addition to any bureaus or other organizational units established by the Director pursuant to Section I.C of this Directive, the following constituent organizational units are hereby established in the Office, and shall operate under the general direction and supervision of the Director, and under the immediate supervision of a Bureau Chief. The Director may issue, subject to the approval of the Attorney General, standard operating procedures or similar policies related to the functions encompassed within OACR, including those within its constituent units, applicable throughout the Department.

1. **Opioid Prevention and Response Bureau.** There is established an Opioid Prevention and Response Bureau (OPRB). The focus of OPRB shall be the development of community-led strategies and partnerships that combat addiction, the conditions associated with addiction, and the deleterious consequences flowing therefrom. OPRB shall oversee addiction-fighting efforts across the Department, creating partnerships with law enforcement agencies, stakeholder groups, and other entities similarly committed to identifying and implementing solutions to the opioid crisis and drug addiction. A primary objective of the Bureau shall be addressing the effects of opioid substance use disorder prior to any interaction with law enforcement or the criminal justice system.

OPRB shall be the lead entity in DLPS with respect to recovery and treatment services for substance use disorders, which shall include services for co-occurring substance use disorder and mental health conditions. OPRB shall also be the lead entity and point of contact in DLPS for grant and funding opportunities related to opioid prevention and response. It shall also be the point of contact in DLPS for discussions involving the use of settlement funds related to State's various opioid litigation matters.

The Department's New Jersey Coordinator of Addiction Responses and Enforcement Strategies (NJ CARES) office shall continue under the supervision of the OPRB Bureau Chief. The Director of OACR shall assign programs operated under NJ CARES to the appropriate bureau within OACR.

2. **Resiliency Bureau.** The New Jersey Resiliency Program for Law Enforcement in DLPS as established pursuant to Attorney General Law Enforcement Directive No.

2019-1 in the Division of Criminal Justice shall be administratively allocated to OACR. Within OACR, it shall be administered by the Resiliency Bureau. The Resiliency Bureau's mission shall be to address and provide interventions to ameliorate the mental and emotional toll taken on law enforcement due to the demanding, and at times dangerous and traumatic nature of their work.

The Resiliency Bureau shall oversee and manage the New Jersey Resiliency Program for Law Enforcement and include a Statewide Chief Resiliency Officer to oversee, coordinate, train, and support the Resiliency Program Officers pursuant to Attorney General Law Enforcement Directive No. 2019-1. The Bureau will also include a Chief Resiliency Officer for DLPS, which may be the same person as the Statewide Chief Resiliency Officer.

3. **Law Enforcement-Led Alternative Policy and Programming Bureau.** There is established a Law Enforcement-led Alternatives Policy and Programming Bureau (LEAPP). LEAPP shall be the primary point of contact for the Department's programming and initiatives to transform how law enforcement interacts or responds to individuals experiencing a mental health, behavioral health or substance use related crisis, including diversionary pathways when available and appropriate. It shall manage, operate, and oversee policies, initiatives, and programming related to situations where law enforcement typically responds, but where an alternative response—whether pursued by law enforcement, in coordination with law enforcement, or via referral from law enforcement—would better advance public safety.

LEAPP shall have primary responsibility for the statewide operation of the Department's ARRIVE Together program and shall support the OACR Director in expanding and developing ARRIVE models across New Jersey. The Bureau shall also oversee other law-enforcement led alternative responses, including the Department's Opioid Response Teams, which blend law enforcement and health and/or substance use disorder professionals in response teams for the purpose of diverting from arrest into treatment and recovery; the Law Enforcement Assisted Diversion Program (LEAD), which provides law enforcement officers discretion to divert individuals who commit low-level offenses that are driven by substance use, mental illness, and/or poverty directly to services; and Operation Helping Hand, a police-led substance use disorder diversionary program.

4. **Diversionary Policy Bureau.** There is established a Diversionary Policy Bureau (DPB) which shall set policy for and oversee initiatives and programming led by DCJ and the 21 County Prosecutor Offices that involve the courts or criminal justice system and are diversions to prosecution and incarceration. Diversionary programming includes strategies for individuals facing criminal charges to avoid incarceration where an alternative would improve public health and safety.

DPB will be the lead entity on behalf of the Attorney General and point of contact for the New Jersey Judiciary and Prosecutors' Offices related to all diversionary programs and strategies, and shall lead the Department in developing new diversionary strategies, programs, policies, and protocols, particularly as they relate to mental health, special needs, substance use disorder and recovery, and other issues and situations that can be better addressed by alternatives to involvement in the criminal justice system. DPB shall oversee and help coordinate the roles of the Department, and the County Prosecutors' Offices in all existing diversionary programs including:

- Opt for Help and Hope;
- Veteran's Diversionary Program operated pursuant to N.J.S.A. 2C:43-26;
- Mental health diversionary programming for individuals with mental health disorders who are facing criminal charges;
- Recovery Courts operated pursuant to N.J.S.A. 2C-35-14; and
- School and behavioral threat programs.

Training and operations of diversionary programs under the supervision of DCJ shall remain in and under the supervision of DCJ, but done in coordination with DPB. DPB will set statewide policy, identify best practices, and may receive reports regarding performance and compliance with protocols and policies for both DCJ and the 21 County Prosecutor Offices.

- F. ***Coordination with Law Enforcement.*** Under the supervision of the Attorney General or their designee, OACR shall collaborate and coordinate with law enforcement agencies across the state, including DCJ, the Division of the New Jersey State Police, the 21 County Prosecutor Offices, to promote public safety, develop innovative alternative responses to public health issues facing law enforcement, and develop diversionary pathways in lieu of involvement in the criminal justice system.
- G. ***Coordination with DCJ.*** DCJ shall coordinate with OACR on any policy and program matters under OACR's subject matter purview.
- H. ***Coordination with OJD.*** OJD shall coordinate with OACR to promote transparency of law enforcement's interactions with individuals with mental health, addiction, and behavioral health emergencies, and use data to inform policy and programs.
- I. ***Supersession of Previous Directives.*** Any provisions of the following Directives that are inconsistent with this Order are superseded:
- a. Attorney General Law Enforcement Directive No. 2019-1;
 - b. Attorney General Law Enforcement Directive No. 2020-9; and
 - c. Attorney General Law Enforcement Directive No. 2020-14.

J. ***Access to Department Resources.*** OACR shall be authorized to call upon the expertise and assistance of every division, agency, office, bureau, and unit within DLPS, in order to carry out its mission. Such entities are hereby required, to the extent not inconsistent with law, to cooperate with the Office and to provide such assistance as the Office may require to accomplish the purposes of this Directive.

II. **Other Provisions**

A. ***Non-enforceability by third parties.*** This Directive is issued pursuant to the Attorney General’s supervisory authority over DLPS and the statutory authority to ensure the uniform and efficient enforcement of the laws and administration of criminal justice throughout the State. This Directive imposes limitations that may be more restrictive than the limitations imposed under the United States and New Jersey Constitutions, and federal and state statutes and regulations. Nothing in this Directive shall be construed in any way to create any substantive right that may be enforced by any third party.

B. ***Severability.*** The provisions of this Directive shall be severable. If any phrase, clause, sentence or provision of this Directive is declared by a court of competent jurisdiction to be invalid, the validity of the remainder of the Directive shall not be affected.

C. ***Questions.*** Any questions concerning the interpretation or implementation of this Directive shall be addressed to the Director of OACR, or their designee.

D. ***Effective date.*** This Directive shall take effect immediately. The provisions of this Directive shall remain in force and effect unless and until it is repealed, amended, or superseded by Order of the Attorney General.



Matthew J. Platkin
Attorney General

ATTEST:



Lyndsay V. Ruotolo
First Assistant Attorney General
Dated: March 13, 2024