



**ILLINOIS  
CRIMINAL JUSTICE  
INFORMATION AUTHORITY**

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**MINUTES**

**REGULAR MEETING  
ILLINOIS CRIMINAL JUSTICE INFORMATION AUTHORITY**

Friday, June 2, 2017, at 9 a.m.

Michael A. Bilandic Building, 160 N. LaSalle, N-502  
Chicago, Illinois

Roll Call

ICJIA Chair Elizabeth Robb welcomed Board members and guests to the quarterly Illinois Criminal Justice Information Authority Regular Meeting. She called the meeting to order at 9:09 a.m. and asked General Counsel Angie Weis to call the roll.

<b>ICJIA Board Member Attendance</b>	<b>Present</b>	<b>Absent</b>
Director John Baldwin		X
Clerk Dorothy Brown		X
Public Defender Amy Campanelli	X	
Sheriff Tom Dart		X
Director Patrick Delfino, Vice Chair		X
Director Brent Fischer		X
State's Attorney Kim Foxx		X
Superintendent Eddie T. Johnson		X
Clerk Maureen Josh	X	
State's Attorney Bryan Kibler	X	
Cynthia Hora for Attorney General Lisa Madigan	X	
Sheriff Michael McCoy	X	
Chief Jerry Mitchell	X	
Ms. Pamela Paziotopoulos		X
Director Michael J. Pelletier		X
President Toni Preckwinkle (after roll call)	X	
Judge Elizabeth Robb, Chair	X	
Director Leo Schmitz	X	
Director Nirav Shah (after roll call)	X	
Director George Sheldon		X
Ms. Jennifer Vollen-Katz		X
Paula Wolff	X	

After the initial roll call, nine of the 12 Board members needed for a quorum were present. Ms. Weis suggested moving to agenda items that did not require a quorum.

## Executive Director's Report

Director Maki first welcomed new ICJIA Board Member Peoria Police Chief Jerry Mitchell to his first meeting. The director then introduced Dr. David Olson as inaugural recipient of ICJIA's Dr. Candice Kane Lifetime Service Award.

Director Maki described ICJIA as being in a phase of rapid implementation. He said ICJIA is establishing criminal justice coordinating councils and addressing unmet needs for victims of crime. He invited the Board to an informational meeting about Dr. Alicia Boccellari's Trauma Recovery Centers Model, which provides healthcare services to populations that are traditionally difficult to engage, such as those with mental illness. He clarified that the agency was not proposing any specific program, but rather encouraging discussion on a model that ICJIA researchers identified as potentially beneficial.

## ICJIA General Counsel Report

Ms. Weis gave an overview of ICJIA Board Member responsibilities. She explained that the Board's role is to set priorities based on their experience and expertise across the criminal justice system. Staff then use those priorities to drive funding opportunities within the available state or federal funding sources. These sources often have strict rules on how funding can be spent, she said, and staff must design the funding opportunities accordingly. Staff then review and score applications to find programs that have the capacity and experience to effectively serve the intended populations, and use that review process to make funding recommendations upon which the Budget Committee votes. She added that Board members also are responsible for providing oversight on internal and external policy compliance to ensure integrity throughout the funding process, and that Board members must recuse themselves from voting when conflicts of interest arise.

## ICJIA Financial Report

ICJIA Chief Financial Officer Randy Kurtz was called upon by Chair Robb to give the financial report. He informed the Board that ICJIA was operating at approximately the same rate as the previous year and that 77 percent of the agency's activity is funded federally. Mr. Kurtz added that funding activity under Adult Redeploy Illinois was increasing and acknowledged the commitment of administrators during the budget impasse. He said the 2017 Victims of Crime Act award was expected to be \$70 million, of which the Budget Committee had just designated \$47 million.

## Committee Reports

Chair Robb explained that the \$47 million approved by the Budget Committee included a \$6 million appropriation for civil legal services and \$41 million for lead entities to address sexual assault and domestic violence.

Ms. Wolff informed the Board that the Strategic Opportunities Committee had received a research presentation on restorative justice, which included information on how different jurisdictions define the practice.

### Opioid Crisis Research Presentation and Panel

Jessica Reichert, manager of ICJIA's Center for Justice Research and Evaluation, presented slides and moderated discussion on the opioid crisis. She introduced the topic by cautioning against use of the words addict or abuser, which imply moral failing, and instead encouraging use of medical terminology, such as people with opioid use disorder (OUD). She reported that 2.6 million people in the United States are thought to suffer from OUD, which is a particularly dangerous substance use disorder (SUD) as opioids suppress breathing.

Ms. Preckwinkle asked about a graph that displayed a jump in overdoses in 2010, and Dr. Elizabeth Salisbury-Afshar, Medical Director of Behavioral Health at the Chicago Department of Public Health, responded that prescribing practices changed; many patients, who were no longer able to attain opioid prescriptions, sought illegal opioids, such as heroin, which had fatal consequences. Dr. Salisbury-Afshar added that higher concentrations of fentanyl in heroin makes the drug cheaper, more addictive, and more likely to cause overdose.

Ms. Reichert returned to the subject of prescribed opioids, the use of which is tied to the marketing practices of pharmacological companies. Misleading patient satisfaction surveys and falsehoods about addictiveness led to over-prescribing pain-management drugs, she said. Dr. Shah added that Illinois has seen a statistically significant increase in the number of opioid-related overdose deaths partially because of the state's proximity to Ohio and West Virginia, which have high concentrations of pill mills and cartel traffic.

Ms. Reichert recommended increased compliance with the Prescription Drug Monitoring Program, improved consumer education, and increased alternatives for pain management. For those who have already developed OUD, Ms. Reichert endorsed treatment focused on harm reduction, increased referral options, medication-assisted treatment (MAT), and reducing the stigma surrounding OUDs. Ms. Reichert said MAT combines behavioral therapy with FDA-approved medications, such as methadone, buprenorphine (Suboxone®), and naltrexone (Vivitrol®), and naltrexone. Dr. Salisbury-Afshar said naltrexone is under-studied, with low treatment retention, and a high risk of overdose following the 28 days the medicine blocks the effects of opioids. In addition to continued

pursuit of traffickers, according to Dr. Salisbury-Afshar, the criminal justice system can combat the epidemic by ensuring overdose reversal treatment, such as naloxone or Narcan, and training to administer it, are provided to first responders and those leaving supervision with a risk of overdose.

Ms. Reichert then introduced Dixon Police Chief Danny Langloss, who initiated the Safe Passage program in his jurisdiction after his 16,000-person city experienced three overdose deaths in 10 days. He said Safe Passage is a deflection program wherein citizens voluntarily surrender themselves to the police department and, rather than being arrested, are immediately ushered into treatment. He said the program had served 165 clients since August 2015 and focused on continuity of care from detox to inpatient or outpatient services. When Dr. Shah asked him how he attained buy-in from officers inclined toward arrest, Chief Langlos described a two-hour training program that explains recovery as a process, introduces the perspectives of people who have been affected by SUDs, and communicates the long-term benefits of addressing the problem with this strategy.

When asked to make final comments, the chief stressed the importance of increasing quality healthcare providers, Dr. Salisbury-Afshar emphasized the need for criminal justice-public health partnerships, and Dr. Shah recommended rigorous studies on treatment outcomes and cost-effectiveness.

### Adjourn

Chair Robb asked for a motion to adjourn the meeting. Ms. Preckwinkle moved to adjourn the meeting. The motion was seconded by Ms. Josh. The meeting was adjourned at 11:15 a.m.