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Compiled Statutes

[Public Acts](#)

[Legislative Reports](#)

[IL Constitution](#)

[Legislative Guide](#)

[Legislative Glossary](#)

Search By Number
(example: HB0001)

[Search Tips](#)

Search By Keyword

[Search Tips](#)

[Advanced Search](#)



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[Back to Act Listing](#) [Public Acts](#) [Search](#) [Guide](#) [Disclaimer](#) [Printer-Friendly Version](#)

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GENERAL PROVISIONS

(5 ILCS 820/) Community-Law Enforcement Partnership for Deflection and Substance Use Disorder Treatment Act.

(5 ILCS 820/1)

(Text of Section before amendment by P.A. 101-652)

Sec. 1. Short title. This Act may be cited as the Community-Law Enforcement Partnership for Deflection and Substance Use Disorder Treatment Act.

(Source: P.A. 100-1025, eff. 1-1-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 1. Short title. This Act may be cited as the Community-Law Enforcement and Other First Responder Partnership for Deflection and Substance Use Disorder Treatment Act.

(Source: P.A. 100-1025, eff. 1-1-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/5)

(Text of Section before amendment by P.A. 101-652)

Sec. 5. Purposes. The General Assembly hereby acknowledges that opioid use disorders, overdoses, and deaths in Illinois are persistent and growing concerns for Illinois communities. These concerns compound existing challenges to adequately address and manage substance use and mental health disorders. Law enforcement officers have a unique opportunity to facilitate connections to community-based behavioral health interventions that provide substance use treatment and can help save and restore lives; help reduce drug use, overdose incidence, criminal offending, and recidivism; and help prevent arrest and conviction records that destabilize health, families, and opportunities for community citizenship and self-sufficiency. These efforts are bolstered when pursued in partnership with licensed behavioral health treatment providers and community members or organizations. It is the intent of the General Assembly to authorize law enforcement to develop and implement collaborative deflection programs in Illinois that offer immediate pathways to substance use treatment and other services as an alternative to traditional case processing and involvement in the criminal justice system.

(Source: P.A. 100-1025, eff. 1-1-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 5. Purposes. The General Assembly hereby acknowledges that opioid use disorders, overdoses, and deaths in Illinois are persistent and growing concerns for Illinois communities. These concerns compound existing challenges to adequately address and manage substance use and mental health disorders. Law enforcement officers, other first responders, and co-responders have a unique opportunity to facilitate connections to community-based behavioral health interventions that provide substance use treatment and can help save and restore lives; help reduce drug use, overdose incidence, criminal offending, and recidivism; and help prevent arrest and conviction records that destabilize health, families, and opportunities for community citizenship and self-sufficiency. These efforts are bolstered when pursued in partnership with licensed behavioral health treatment providers and community members or organizations. It is the intent of the General Assembly to authorize law enforcement and other first responders to develop and implement collaborative deflection programs in Illinois that offer immediate pathways to substance use treatment and other services as an alternative to traditional case processing and involvement in the criminal justice system, and to unnecessary admission to emergency departments.

(Source: P.A. 100-1025, eff. 1-1-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/10)

(Text of Section before amendment by P.A. 101-652)

Sec. 10. Definitions. In this Act:

"Case management" means those services which will assist persons in gaining access to needed social, educational, medical, substance use and mental health treatment, and other services.

"Community member or organization" means an individual volunteer, resident, public office, or a not-for-profit organization, religious institution, charitable organization, or other public body committed to the improvement of individual and family mental and physical well-being and the overall social welfare of the community, and may include persons with lived experience in recovery from substance use disorder, either themselves or as family members.

"Deflection program" means a program in which a peace officer or member of a law enforcement agency facilitates contact between an individual and a licensed substance use treatment provider or clinician for assessment and coordination of treatment planning. This facilitation includes defined criteria for eligibility and communication protocols agreed to by the law enforcement agency and the licensed treatment provider for the purpose of providing substance use treatment to those persons in lieu of arrest or further justice system involvement. Deflection programs may include, but are not limited to, the following types of responses:

(1) a post-overdose deflection response initiated by a peace officer or law enforcement agency subsequent to emergency administration of medication to reverse an overdose, or in cases of severe substance use disorder with acute risk for overdose;

(2) a self-referral deflection response initiated by an individual by contacting a peace officer or law enforcement agency in the acknowledgment of their substance use or disorder;

(3) an active outreach deflection response initiated by a peace officer or law enforcement agency as a result of proactive identification of persons thought

likely to have a substance use disorder;

(4) an officer prevention deflection response initiated by a peace officer or law enforcement agency in response to a community call when no criminal charges are present; and

(5) an officer intervention deflection response when criminal charges are present but held in abeyance pending engagement with treatment.

"Law enforcement agency" means a municipal police department or county sheriff's office of this State, the Department of State Police, or other law enforcement agency whose officers, by statute, are granted and authorized to exercise powers similar to those conferred upon any peace officer employed by a law enforcement agency of this State.

"Licensed treatment provider" means an organization licensed by the Department of Human Services to perform an activity or service, or a coordinated range of those activities or services, as the Department of Human Services may establish by rule, such as the broad range of emergency, outpatient, intensive outpatient, and residential services and care, including assessment, diagnosis, case management, medical, psychiatric, psychological and social services, medication-assisted treatment, care and counseling, and recovery support, which may be extended to persons to assess or treat substance use disorder or to families of those persons.

"Peace officer" means any peace officer or member of any duly organized State, county, or municipal peace officer unit, any police force of another State, or any police force whose members, by statute, are granted and authorized to exercise powers similar to those conferred upon any peace officer employed by a law enforcement agency of this State.

"Substance use disorder" means a pattern of use of alcohol or other drugs leading to clinical or functional impairment, in accordance with the definition in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), or in any subsequent editions.

"Treatment" means the broad range of emergency, outpatient, intensive outpatient, and residential services and care (including assessment, diagnosis, case management, medical, psychiatric, psychological and social services, medication-assisted treatment, care and counseling, and recovery support) which may be extended to persons who have substance use disorders, persons with mental illness, or families of those persons.

(Source: P.A. 100-1025, eff. 1-1-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 10. Definitions. In this Act:

"Case management" means those services which will assist persons in gaining access to needed social, educational, medical, substance use and mental health treatment, and other services.

"Community member or organization" means an individual volunteer, resident, public office, or a not-for-profit organization, religious institution, charitable organization, or other public body committed to the improvement of individual and family mental and physical well-being and the overall social welfare of the community, and may include persons with lived experience in recovery from substance use disorder, either themselves or as family members.

"Other first responder" means and includes emergency medical services providers that are public units of government, fire departments and districts, and officials and responders representing and employed by these entities.

"Deflection program" means a program in which a peace officer or member of a law enforcement agency or other first responder facilitates contact between an individual and a licensed substance use treatment provider or clinician for assessment and coordination of treatment planning, including co-responder approaches that incorporate behavioral health, peer, or social work professionals with law enforcement or other first responders at the scene. This facilitation includes defined criteria for eligibility and communication protocols agreed to by the law enforcement agency or other first responder entity and the licensed treatment provider for the purpose of providing substance use treatment to those persons in lieu of arrest or further justice system involvement, or unnecessary admissions to the emergency department. Deflection programs may include, but are not limited to, the following types of responses:

(1) a post-overdose deflection response initiated by a peace officer or law enforcement agency subsequent to emergency administration of medication to reverse an overdose, or in cases of severe substance use disorder with acute risk for overdose;

(2) a self-referral deflection response initiated by an individual by contacting a peace officer or law enforcement agency or other first responder in the acknowledgment of their substance use or disorder;

(3) an active outreach deflection response initiated by a peace officer or law enforcement agency or other first responder as a result of proactive identification of persons thought likely to have a substance use disorder;

(4) an officer or other first responder prevention deflection response initiated by a peace officer or law enforcement agency in response to a community call when no criminal charges are present; and

(5) an officer intervention deflection response when criminal charges are present but held in abeyance pending engagement with treatment.

"Law enforcement agency" means a municipal police department or county sheriff's office of this State, the Department of State Police, or other law enforcement agency whose officers, by statute, are granted and authorized to exercise powers similar to those conferred upon any peace officer employed by a law enforcement agency of this State.

"Licensed treatment provider" means an organization licensed by the Department of Human Services to perform an activity or service, or a coordinated range of those activities or services, as the Department of Human Services may establish by rule, such as the broad range of emergency, outpatient, intensive outpatient, and residential services and care, including assessment, diagnosis, case management, medical, psychiatric, psychological and social services, medication-assisted treatment, care and counseling, and recovery support, which may be extended to persons to assess or treat substance use disorder or to families of those persons.

"Peace officer" means any peace officer or member of any duly organized State, county, or municipal peace officer unit, any police force of another State, or any police force whose members, by statute, are granted and authorized to exercise powers similar to those conferred upon any peace officer employed by a law enforcement agency of this State.

"Substance use disorder" means a pattern of use of alcohol or other drugs leading to clinical or functional impairment, in accordance with the definition in the Diagnostic and Statistical Manual of Mental Disorders (DSM-5), or in any subsequent editions.

"Treatment" means the broad range of emergency, outpatient, intensive outpatient, and residential services and care (including assessment, diagnosis, case management, medical, psychiatric, psychological and social services, medication-assisted treatment, care and counseling, and recovery support) which may be extended to persons who have substance use disorders, persons with mental illness, or families of those persons.

(Source: P.A. 100-1025, eff. 1-1-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/15)

(Text of Section before amendment by P.A. 101-652)

Sec. 15. Authorization.

(a) Any law enforcement agency may establish a deflection program subject to the provisions of this Act in partnership with one or more licensed providers of substance use disorder treatment services and one or more community members or organizations.

(b) The deflection program may involve a post-overdose deflection response, a self-referral deflection response, an active outreach deflection response, an officer prevention deflection response, or an officer intervention deflection response, or any combination of those.

(c) Nothing shall preclude the General Assembly from adding other responses to a deflection program, or preclude a law enforcement agency from developing a deflection program response based on a model unique and responsive to local issues, substance use or mental health needs, and partnerships, using sound and promising or evidence-based practices.

(c-5) Whenever appropriate and available, case management should be provided by a licensed treatment provider or other appropriate provider and may include peer recovery support approaches.

(d) To receive funding for activities as described in Section 35 of this Act, planning for the deflection program shall include:

(1) the involvement of one or more licensed treatment programs and one or more community members or organizations; and

(2) an agreement with the Illinois Criminal Justice Information Authority to collect and evaluate relevant statistical data related to the program, as established by the Illinois Criminal Justice Information Authority in paragraph (2) of subsection (a) of Section 25 of this Act.

(Source: P.A. 100-1025, eff. 1-1-19; 101-81, eff. 7-12-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 15. Authorization.

(a) Any law enforcement agency or other first responder entity may establish a deflection program subject to the provisions of this Act in partnership with one or more licensed providers of substance use disorder treatment services and one or more community members or organizations. Programs established by another first responder entity shall also include a law enforcement agency.

(b) The deflection program may involve a post-overdose deflection response, a self-referral deflection response, an active outreach deflection response, an officer or other first responder prevention deflection response, or an officer intervention deflection response, or any combination of those.

(c) Nothing shall preclude the General Assembly from adding other responses to a deflection program, or preclude a law enforcement agency or other first responder entity from

developing a deflection program response based on a model unique and responsive to local issues, substance use or mental health needs, and partnerships, using sound and promising or evidence-based practices.

(c-5) Whenever appropriate and available, case management should be provided by a licensed treatment provider or other appropriate provider and may include peer recovery support approaches.

(d) To receive funding for activities as described in Section 35 of this Act, planning for the deflection program shall include:

(1) the involvement of one or more licensed treatment programs and one or more community members or organizations; and

(2) an agreement with the Illinois Criminal Justice Information Authority to collect and evaluate relevant statistical data related to the program, as established by the Illinois Criminal Justice Information Authority in paragraph (2) of subsection (a) of Section 25 of this Act.

(3) an agreement with participating licensed treatment providers authorizing the release of statistical data to the Illinois Criminal Justice Information Authority, in compliance with State and Federal law, as established by the Illinois Criminal Justice Information Authority in paragraph (2) of subsection (a) of Section 25 of this Act.

(Source: P.A. 100-1025, eff. 1-1-19; 101-81, eff. 7-12-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/20)

(Text of Section before amendment by P.A. 101-652)

Sec. 20. Procedure. The law enforcement agency, licensed treatment providers, and community members or organizations shall establish a local deflection program plan that includes protocols and procedures for participant identification, screening or assessment, treatment facilitation, reporting, and ongoing involvement of the law enforcement agency. Licensed substance use disorder treatment organizations shall adhere to 42 CFR Part 2 regarding confidentiality regulations for information exchange or release. Substance use disorder treatment services shall adhere to all regulations specified in Department of Human Services Administrative Rules, Parts 2060 and 2090.

(Source: P.A. 100-1025, eff. 1-1-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 20. Procedure. The law enforcement agency or other first responder entity, licensed treatment providers, and community members or organizations shall establish a local deflection program plan that includes protocols and procedures for participant identification, screening or assessment, treatment facilitation, reporting, and ongoing involvement of the law enforcement agency. Licensed substance use disorder treatment organizations shall adhere to 42 CFR Part 2 regarding confidentiality regulations for information exchange or release. Substance use disorder treatment services shall adhere to all regulations specified in Department of Human Services Administrative Rules, Parts 2060 and 2090.

(Source: P.A. 100-1025, eff. 1-1-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/21)

(This Section may contain text from a Public Act with a delayed effective date)

Sec. 21. Training. The law enforcement agency or other first

responder entity in programs that receive funding for services under Section 35 of this Act shall and that receive training under subsection (a.1) of Section 35 shall be trained in:

- (a) Neuroscience of Addiction for Law Enforcement;
- (b) Medication-Assisted Treatment;
- (c) Criminogenic Risk-Need for Health and Safety;
- (d) Why Drug Treatment Works?;
- (e) Eliminating Stigma for People with Substance-Use Disorders and Mental Health;
- (f) Avoiding Racial Bias in Deflection Program;
- (g) Promotion Racial and Gender Equity in Deflection;
- (h) Working With Community Partnerships; and
- (i) Deflection in Rural Communities.

(Source: P.A. 101-652, eff. 7-1-21.)

(5 ILCS 820/25)

Sec. 25. Reporting and evaluation.

(a) The Illinois Criminal Justice Information Authority, in conjunction with an association representing police chiefs and the Department of Human Services' Division of Substance Use Prevention and Recovery, shall within 6 months of the effective date of this Act:

(1) develop a set of minimum data to be collected from each deflection program and reported annually, beginning one year after the effective date of this Act, by the Illinois Criminal Justice Information Authority, including, but not limited to, demographic information on program participants, number of law enforcement encounters that result in a treatment referral, and time from law enforcement encounter to treatment engagement; and

(2) develop a performance measurement system, including key performance indicators for deflection programs including, but not limited to, rate of treatment engagement at 30 days from the point of initial contact. Each program that receives funding for services under Section 35 of this Act shall include the performance measurement system in its local plan and report data quarterly to the Illinois Criminal Justice Information Authority for the purpose of evaluation of deflection programs in aggregate.

(b) The Illinois Criminal Justice Information Authority shall make statistical data collected under subsection (a) of this Section available to the Department of Human Services, Division of Substance Use Prevention and Recovery for inclusion in planning efforts for services to persons with criminal justice or law enforcement involvement.

(Source: P.A. 100-1025, eff. 1-1-19.)

(5 ILCS 820/30)

(Text of Section before amendment by P.A. 101-652)

Sec. 30. Exemption from civil liability. The law enforcement agency or peace officer acting in good faith shall not, as the result of acts or omissions in providing services under Section 15 of this Act, be liable for civil damages, unless the acts or omissions constitute willful and wanton misconduct.

(Source: P.A. 100-1025, eff. 1-1-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 30. Exemption from civil liability. The law enforcement agency or peace officer or other first responder acting in good faith shall not, as the result of acts or omissions in providing services under Section 15 of this Act, be liable for civil damages, unless the acts or omissions constitute willful and

wanton misconduct.

(Source: P.A. 100-1025, eff. 1-1-19; 101-652, eff. 7-1-21.)

(5 ILCS 820/35)

(Text of Section before amendment by P.A. 101-652)

Sec. 35. Funding.

(a) The General Assembly may appropriate funds to the Illinois Criminal Justice Information Authority for the purpose of funding law enforcement agencies for services provided by deflection program partners as part of deflection programs subject to subsection (d) of Section 15 of this Act.

(b) The Illinois Criminal Justice Information Authority may adopt guidelines and requirements to direct the distribution of funds for expenses related to deflection programs. Funding shall be made available to support both new and existing deflection programs in a broad spectrum of geographic regions in this State, including urban, suburban, and rural communities. Activities eligible for funding under this Act may include, but are not limited to, the following:

(1) activities related to program administration, coordination, or management, including, but not limited to, the development of collaborative partnerships with licensed treatment providers and community members or organizations; collection of program data; or monitoring of compliance with a local deflection program plan;

(2) case management including case management provided prior to assessment, diagnosis, and engagement in treatment, as well as assistance navigating and gaining access to various treatment modalities and support services;

(3) peer recovery or recovery support services that include the perspectives of persons with the experience of recovering from a substance use disorder, either themselves or as family members;

(4) transportation to a licensed treatment provider or other program partner location;

(5) program evaluation activities.

(c) Specific linkage agreements with recovery support services or self-help entities may be a requirement of the program services protocols. All deflection programs shall encourage the involvement of key family members and significant others as a part of a family-based approach to treatment. All deflection programs are encouraged to use evidence-based practices and outcome measures in the provision of substance use disorder treatment and medication-assisted treatment for persons with opioid use disorders.

(Source: P.A. 100-1025, eff. 1-1-19; 101-81, eff. 7-12-19.)

(Text of Section after amendment by P.A. 101-652)

Sec. 35. Funding.

(a) The General Assembly may appropriate funds to the Illinois Criminal Justice Information Authority for the purpose of funding law enforcement agencies or other first responder entities for services provided by deflection program partners as part of deflection programs subject to subsection (d) of Section 15 of this Act.

(a.1) Up to 10 percent of appropriated funds may be expended on activities related to knowledge dissemination, training, technical assistance, or other similar activities intended to increase practitioner and public awareness of deflection and/or to support its implementation. The Illinois Criminal Justice Information Authority may adopt guidelines and requirements to direct the distribution of funds for these activities.

(b) For all appropriated funds not distributed under subsection a.1, the Illinois Criminal Justice Information Authority may adopt guidelines and requirements to direct the distribution of funds for expenses related to deflection programs. Funding shall be made available to support both new and existing deflection programs in a broad spectrum of geographic regions in this State, including urban, suburban, and rural communities. Funding for deflection programs shall be prioritized for communities that have been impacted by the war on drugs, communities that have a police/community relations issue, and communities that have a disproportionate lack of access to mental health and drug treatment. Activities eligible for funding under this Act may include, but are not limited to, the following:

(1) activities related to program administration, coordination, or management, including, but not limited to, the development of collaborative partnerships with licensed treatment providers and community members or organizations; collection of program data; or monitoring of compliance with a local deflection program plan;

(2) case management including case management provided prior to assessment, diagnosis, and engagement in treatment, as well as assistance navigating and gaining access to various treatment modalities and support services;

(3) peer recovery or recovery support services that include the perspectives of persons with the experience of recovering from a substance use disorder, either themselves or as family members;

(4) transportation to a licensed treatment provider or other program partner location;

(5) program evaluation activities.

(6) naloxone and related supplies necessary for carrying out overdose reversal for purposes of distribution to program participants or for use by law enforcement or other first responders; and

(7) treatment necessary to prevent gaps in service delivery between linkage and coverage by other funding sources when otherwise non-reimbursable.

(c) Specific linkage agreements with recovery support services or self-help entities may be a requirement of the program services protocols. All deflection programs shall encourage the involvement of key family members and significant others as a part of a family-based approach to treatment. All deflection programs are encouraged to use evidence-based practices and outcome measures in the provision of substance use disorder treatment and medication-assisted treatment for persons with opioid use disorders.

(Source: P.A. 100-1025, eff. 1-1-19; 101-81, eff. 7-12-19; 101-652, eff. 7-1-21.)

[Top](#)

[Home](#) | [Legislation & Laws](#) | [House](#) | [Senate](#) | [My Legislation](#) | [Disclaimers](#) | [Email](#)



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