Public Inebriate Program (PIP) Manual

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Table 1: Document Management History

Version Number	Version Date	Summary of Changes	Section/Page	Author
1.0	3/18/25	First version	All	VERMONT DEPARTMENT OF HEALTH
1.1	6/1/26	Added language around transportation enhancements Added guidance on situations where a person's condition changes post-screening	Overview: p. 5, Virtual Screening Tool: pp. 8-9, Transportation Option: p. 9	VERMONT DEPARTMENT OF HEALTH
1.2	7/1/26	Changed language to reflect the passing of 7/1 rollout date Added guidance on situations when an officer cannot conduct a screening due to audio/visual issues	Virtual Screening Tool: p. 8, 9	VERMONT DEPARTMENT OF HEALTH
1.3	10/26/26	Updated Virtual Screening Questions to reflect newly added question	Virtual Screening Form Questions & Data Dictionary: p. 11	VERMONT DEPARTMENT OF HEALTH

If you need help accessing or understanding this information, contact AHS.VDHDSU@vermont.gov.

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Introduction

This manual provides guidance on Vermont's Public Inebriate Program (PIP), focusing specifically on the process for law enforcement officers screening people who are experiencing a substance use crisis.

Purpose and Scope of Manual

The purpose of this manual is to provide guidance on the PIP screening processes and the steps to transport people to the appropriate location. It defines the roles, responsibilities, and procedures for all entities participating in screening and referral processes. The intended audience for this manual is any person or organizations that interact with PIP.

Overview of Vermont's Public Inebriate Program (PIP)

Program Background

The Vermont Public Inebriate Program (PIP) was originally established under 18 VT Stats § 4808 (2018) and is administered by the Vermont Department of Health. The program diverts people experiencing alcohol-related crises from law enforcement custody and high-cost settings such as Emergency Departments (EDs) and Department of Corrections (DOC) facilities and connects them to appropriate care. PIP has aimed to unite local healthcare providers, law enforcement, and community organizations to support people experiencing alcohol-related crises. Over time, this collaborative approach has led to improved access to care and a more compassionate response to people in crisis. In addition, the program expanded to address polysubstance use and co-occurring mental health conditions.

Closures of PIP services by key providers reduced access to appropriate services and increased transportation times for people in need. Additional challenges included the lack of standardized intake processes, limited data sharing infrastructure, and unclear stakeholder roles, all of which contributed to inefficiencies in service delivery. Without a centralized and coordinated approach, people in crisis were sometimes routed to inappropriate or higher-cost settings, which undermined both service quality and program.

In response to these challenges, the Vermont Department of Health is transitioning away from in-person screening and towards a centralized virtual screening tool. The tool can be accessed remotely at any time by a screener. It establishes consistent screening criteria and protocols to reduce unnecessary transport and emergency department utilization. The virtual screening tool only changes the process for requesting and conducting a screening; it does not change the public inebriate statute or an officer's legal responsibilities.

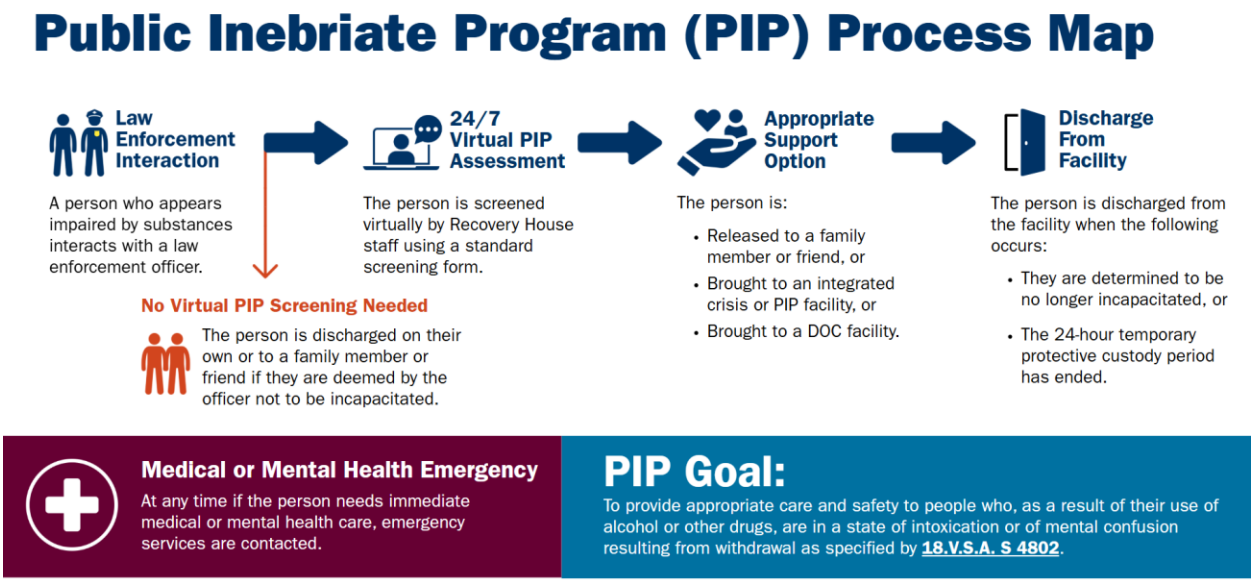
PIP Partnerships

The success of Vermont's Public Inebriate Program (PIP) relies on robust partnerships. These include:

- **Law Enforcement Agencies:** Responsible for initial contact and determination of whether a screening is needed. If a screening is conducted, responsible for transport to appropriate services.
- **Recovery House, Inc.** (referred to elsewhere as "**Recovery House**")**:** Conducts 24/7 centralized virtual screening through a standardized questionnaire, coordinates referrals, and serves as a PIP provider.
- **Designated Agencies (DAs):** Coordinate care for people referred through PIP to their facilities and serve as integrated crisis providers.
- **Department of Corrections (DOC):** Offers alternative placement and supervision for people who cannot be safely diverted to community settings (e.g., a PIP bed or a friend or family member).
- **Emergency Departments (EDs):** Serve people with acute medical needs, while collaborating with PIP to minimize unnecessary admissions. EDs will continue to serve as screening locations in the event a virtual screening is not feasible.
- **Vermont Agency of Transportation (AOT):** When no other transportation is available to a person exiting a PIP facility, the Recovery and Job Access Program may provide a ride to either the person's home, work or to the closest Recovery Services Organization.

Virtual Screening Tool

Overview



Vermont Department of Health provides a centralized virtual screening tool available for PIP screenings on a 24/7 basis. Screenings are conducted by staff from Recovery House, a PIP provider based in Rutland County.

A law enforcement officer initiates the virtual screening process when they encounter a person who may be in need of the services of a public inebriate program. If the officer determines a screening is needed, they call Recovery House to request a virtual screening using Microsoft Teams. The Recovery House screener provides a link to the Microsoft Teams session for the officer to join. Screenings may occur on-site or at any other safe, secure location with a sufficiently reliable internet connection to support a clear video feed for the virtual screening.

During the virtual screening, the officer provides the screener with video access to the person via their device while the screener leads a standardized screening form with support from the officer. The questions on the virtual screening form are the same as those on the paper screening form. After concluding the screening, the screener determines the most appropriate support option for the person based on their assessment and the officer's observations.

Based on the routing decision, the screener and the officer will coordinate with the identified support option. The officer will transport the person to the agreed-upon and confirmed provider. Depending on the screening results and the person's evolving needs, the person may be referred to and transported to more than one support option.

Following the screening, the screener will share a copy of the screening results with the officer via email. If the screener determines the person should be sent to a PIP provider or DOC facility (under the PIP statute), FastField will automatically send a copy to the appropriate provider.

Virtual Screening Process and Technology

The virtual screening process consists of the following steps:

1. Initial Encounter with Person
    - A law enforcement officer encounters or receives a dispatch regarding a person who may be under the influence of substances.
    - The officer either determines an appropriate routing path for the person (i.e., transports them to a responsible adult) or whether a screening is needed.

2. Establishing a Virtual Screening
    - If the officer has a mobile device or mobile data computer (MDC), the officer confirms they have a strong enough internet connection to support a clear video feed for the virtual screening and conducts the screening on-site or in a safe, secure location (e.g., a barracks parking lot).
    - Please note that the **Microsoft Teams app is required** to conduct a virtual screening on a mobile device or MDC. For information on how to download and use the Teams app, please refer to the full law enforcement virtual screening training resource on the Grantees & Contractors webpage.
        - If the officer does not have access to the Teams app, they should attempt to conduct the screening using a laptop or tablet (see step below).
        - If the officer does not have a mobile device available, the officer may conduct the screening using a laptop or tablet after transporting the person back to the barracks. If there is no space to conduct a screening inside the barracks, the officer may conduct the screening nearby in the parking lot while still connected to the barracks' wi-fi.
        - Once in a safe, secure location with a sufficiently reliable internet connection to support a clear video feed, the officer calls Recovery House at **802-694-5016** to request a virtual PIP screening.
        - **Note:** Officers should expect a **brief wait (approximately 1–5 minutes)** to be connected with a Recovery House screener, depending on staff availability. If Recovery House is unable to take the call, officers can leave a voicemail and Recovery House will call back as soon as possible.
        - After answering the call, the screener requests the officer's contact information—either a phone number for text or an email address—to send the Microsoft Teams meeting link. An email address is also required to deliver the

screening results, which can be the agency's shared inbox or the officer's email address.

- The screener schedules the session and sends a secure Microsoft Teams meeting link to the officer via email or text. The officer should remain on the call with the virtual screener until they have received the Teams meeting link.
- If the officer is unable to conduct a virtual screening due to audio and visual issues, the officer should transport the person to an emergency department.

3. Conducting the Virtual Screening

- During the virtual screening, the officer provides the screener with video access to the person via their device while the screener leads a standardized screening form with support from the officer. Note: the virtual form's questions are identical to the ones used during in-person screenings.
- The officer provides contextual observations and information from the beginning of the encounter, ensuring the screener has a comprehensive understanding of the person's situation.
- The screener works to establish if the person is incapacitated, and, if so, make sure they meet the statutory requirements for PIP placement. The screener documents all responses and observations in FastField Forms, a secure and HIPAA-compliant platform designed for standardized and accurate record-keeping. This documentation includes detailed notes on the person's condition, behavior, and any relevant medical or mental health information.

4. Virtual Screening Results

- The screener makes a decision on the appropriate support option for the person based on their observations and officer observations:
  - If the screener determines the person is appropriate for DOC, the officer coordinates with closest DOC facility via phone call and transports the person there.
  - If the screener determines the person is appropriate for a PIP bed, the screener places the officer on a brief hold. The screener then coordinates with the PIP provider located in the county where the person is currently located to confirm bed availability. If a bed is available, the screener confirms that a bed is available with the officer, who transports the person to the PIP facility. If a bed is not available, the screener confirms the person will be transported to the nearest DOC facility.

5. Review

- The screener reviews the documentation for completeness and accuracy before transmitting the results directly to the appropriate provider's inbox using FastField Forms. The screener also sends the law enforcement officer a copy of the screening results.

Next Steps

Based on the results of the screening, the screener determines the most appropriate placement for the person. A person may be routed to multiple locations based on the screening result:

- **High Priority Routing Paths:** If, at any point during the screening process, medical issues, mental health concerns, or behavioral challenges are identified by the screener or the law enforcement officer, they may need to transport the person to the emergency department or Department of Corrections facility, as appropriate.
    - If a person's medical condition deteriorates after a screening has been completed and the person is on the way to a PIP or DOC facility, the officer should instead transport the person to the emergency department. The officer does not need to call Recovery House for additional screening in this situation.
- **Release:** If the screener determines that they are not incapacitated, they may determine whether the person can be released.
- **Responsible Adult:** If the person is incapacitated and a responsible adult (e.g., a family member or friend) is available, the officer may release the person into their care.
    - **PIP Facility:** If the person is incapacitated and no responsible adult is available, the screener puts the officer on a brief hold and contacts that PIP facility to confirm bed availability via phone call. If a bed is available, the officer transports the person to the PIP facility and the screener transmits the results of the screening to them. The PIP facility must accept the results of the virtual screening. A screening is required for a person to be admitted to a PIP facility. The Designated Agency (DA) in each county will serve as a PIP provider for that county.
    - If a person's condition changes during transport so that they are better suited for a DOC facility, the officer should contact Recovery House. The screener will revise the screening form to reflect the change and send the updated form to the officer.
- **Department of Corrections:** If no PIP bed is available or the person is not appropriate to be placed in a PIP bed, the officer and screener determine whether an alternative placement is necessary, a person may be routed to a Department of Corrections facility (DOC). The officer coordinates with the appropriate DOC facility to facilitate the transfer (with the screener on hold), and the screener transmits the screening results to a centralized inbox. At the DOC facility, outreach and engagement staff are

involved to provide support and coordinate care. Note that a screening is required for a person to be admitted to a DOC facility under the PIP statute.

- **Emergency Department:** If a PIP bed is unavailable or the person cannot be transported to a Department of Corrections facility, they may be admitted to an emergency department. At the emergency department, the person may receive medical treatment and may be connected with an on-call recovery coach.

Post-Discharge Transportation Option

If no other transportation option is available upon exit from a PIP or DOC facility, the facility can contact the appropriate regional transit provider through the Recovery and Job Access Program. The Recovery and Job Access Program will provide a ride to the person's home, work, or the closest Recovery Services Organization. Ride availability and timing may vary based on location and provider capacity. For information on transportation resources and regional transit providers that may be available to support discharge planning from PIP and DOC facilities, please visit the Vermont Agency of Transportation's regional transit webpage.

Key Resources

Virtual Screening Form Questions & Data Dictionary

Field Name	Description	Valid Values
Is this screening occurring virtually?	Whether screening is virtual or not	Yes or no
Date	Date of virtual screening	Any valid date (MM-DD-YYYY)
Time	Time of virtual screening	Free text
Name (Last, First)	Last and first name of the person	Free text
Age	Numeric age of the person	Numeric value (integer)
Gender	Gender of the person	Male, Female, Transgender, Non-Binary, Other, Refused
Experiencing homelessness?	Indication if the person is experiencing homelessness	Yes or no
Law Enforcement Agency	Name of law enforcement agency	Free text
Officer Name	First and last name of officer	Free text
Substances Used, check all that apply	Option to identify substances used by the person (if available)	Alcohol, stimulants, benzodiazepines, cannabis, hallucinogens, and/or others
If 'other' substance, please add information	Opportunity to include additional substances used by the person available	Free text
Time last used	Time of last use of substance by the person	Time (HH:MM)
Amount last used	Quantity of substances used by the person	Free text
BAC 1	Numeric blood alcohol content of the person	Numeric value

BAC 2	Second numeric blood alcohol content result (if tested)	Numeric value
Refused BAC	Indication if the person refused BAC test	Yes or no
Comments on substances used	Comments field	Free text
Danger to self	Indication if the person is potentially dangerous to themself	Yes or no
Danger to others	Indication if the person is potentially dangerous to others	Yes or no
Psychiatric crisis	Indication if the person is experiencing psychiatric crisis	Yes or no
Oriented x3	Indication if the person is oriented to people, place, and time	Yes or no
Walk without assistance	Indication if the person is able to walk without assistance	Yes or no
Immediate medical concerns	Indication if the person presents immediate medical concerns that require transfer to emergency department	Yes or no
Prior screening in emergency department	Indication if the person was recently previously screened at an emergency department	Yes or no
Comments on presentation	Comments field	Free text
Incapacitation	Indication of whether the person meets the threshold for incapacitation	Yes or no
Disposition	Possible options for routing a person after screening	PIP, self, DOC, hospital, family, or other
If PIP disposition, which PIP is the person directed to?	Name of PIP facility to which a person is sent	Option list of PIP facilities
If Correction Facility, which facility	Name of DOC facility to which the person is sent	Option list of DOC facilities
If Correctional Facility or other disposition, select reason	List of options if a person needs to be sent to a correctional facility include: • **No beds available**: Program has no available beds or does not have adequate staffing to safely care for the incapacitated person. • **Medical concerns:** Concerns about the person's safety due to physical or mental health reasons. • **Behavioral concerns:** Person has verbally or through their actions refused to stay in a PIP program	No beds available, medical concerns, or behavioral concerns

If medical concerns, check all that apply	List of medical concerns a person may present during screening, including: • **Mental health:** Concerns whether the person has suicidal ideation with intent • **Physical health:** Concerns whether the person is displaying injuries from a fall, such as bleeding • **Drug/use interaction:** Concerns whether the person used multiple drugs or has other conditions that could result in a medical issue	Mental health, physical health, or drug use/interaction
If behavioral concerns, check all that that apply	Options for behavioral concerns a person may present include: • **Rule non-compliant:** A person who fails to follow rules or procedures • **Uncooperative:** A person who is unwilling to engage with a law enforcement officer • **Threatening, offensive, or violent:** A person displaying behavior that may pose a risk to the law enforcement officer or others • **Flight risk:** A person who may flee the scene or evade custody • **Overuse of services:** A person who repeatedly or excessively requires services beyond what is considered reasonable or necessary	Rule non-compliant, uncooperative, threating/offensive/violent behavior, flight risk, or overuse of services
Upon medical clearance, where should the person be directed?	If hospital is selected and a person is medically cleared, options include: • PIP bed • Correctional Facility • Call Recovery House for re-screen	PIP bed, correctional facility, call Recovery House for a re-screen
Upon medical clearance, if the person is appropriate for PIP bed, which one?	Name of PIP facility to which a person is sent.	List of PIP facilities

Upon medical clearance, if a person should go to a Correctional Facility, which one?	Name of DOC facility to which a person is sent	List of DOC facilities
Comments on disposition	Comments field	Free text
Screener name	First and last name of Recovery House virtual screener	Free text
Screener signature	Electronic signature of Recovery House virtual screener	Signature

Technical Assistance Materials

Technical assistance materials are available on the Grantees & Contractors webpage.

- Law enforcement training resource (full version)
- Law enforcement training (quick guide)
- PIP law enforcement one-pager
- PIP FAQs

For any questions about Public Inebriate Program or centralized virtual screening tool, please contact Julia.Harrison@vermont.gov