

ADAMS COUNTY COLORADO

Supporting People with Opioid Use Disorders Involved in the Justice System

Saturday, July 23rd, 2022 | 2:15 PM - 3:30 PM | MAPLE 4/5

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BUREAU OF JUSTICE ASSISTANCE (BJA)
NATIONAL INSTITUTE OF CORRECTIONS (NIC)

GUIDELINES FOR MANAGING SUBSTANCE WITHDRAWAL IN JAILS: A TOOL FOR JAIL ADMINISTRATORS, CORRECTIONAL OFFICERS, AND JAIL-BASED CLINICIANS

July 23, 2022 • 2:15-3:30 p.m.





SCOPE OF THE CHALLENGE









Substance Use Disorder in Jails



Two-thirds of individuals sentenced to jail meet the criteria for substance use disorder (SUD).



Within the first few hours and days of detainment, individuals who have suddenly stopped using substances often experience withdrawal symptoms, particularly when they have used the substances heavily or long-term.







Liability

Litigation stemming from inadequate medical care increases costs to local governments, jails, and health care providers:

- Large financial settlements or judgements
- Attorney's fees
- Court-enforced remediation
- Time
- Resource use

Incalculable Costs

The loss of life and the associated trauma experienced by both the loved ones of those who die unnecessarily in jail custody and correctional staff







Understanding the Challenge

BJA and NIC collaboratively developed a legal brief that:

- Describes the scope of the challenge facing jails.
- Provides an overview of key legislation and significant court cases related to substance withdrawal.
- Outlines steps for jails seeking to create a comprehensive response to SUD and lays out the need for guidelines for managing substance withdrawal in jails.

The brief is available at:

- https://bja.ojp.gov/doc/managing-substance-withdrawal-in-jails.pdf (BJA)
- https://nicic.gov/managing-substance-withdrawal-jails-legal-brief-0 (NIC)

BUREAU OF JUSTICE ASSISTANCE

MANAGING SUBSTANCE WITHDRAWAL IN JAILS: A LEGAL BRIEF

A disproportionate number of people in jalis have substance use discorder (SUD-I) incurrention provides a valuable opportunity for identifying SUD and addressing withdrawal. Within the first few hours and days of detailment, individuals who have suddenly stopped using alcohol, opioids, or other fung may experience withdrawal symptoms, particularly when they have used the substances heavily or long-term. Without its identification and timely subsequent medical attention, withdrawal can lead to serious injury or death.

Deaths from withdrawal an preventable, and jall administrations have a pressing responsibility to establish and implement withdrawal policy and protocols that will save lives and ensure legal compliance. This brief describes the scope of the challenge, provides an overview of constitutional rights and key legislation related to substance use withdrawal, and outlines steps for creating a comprehensive response to SUD.

Scope of the Challenge

Among sentenced individuals in jail, 63 percent have an SUD, compared to 5 percent of adults who are not incarcentact. From 2000 to 2019, the number of local jail inmates who died from all causes increased 33 percent; the number who died from drug/alcohol intoxication during the same period increased 337 percent.* Among women

An noted in the Substance Abuse and Mental Health Services Administration's <u>Use of Medication-Assisted Treatment for Openand-Idea Disorder in Criminal Justice, Settings (2019)</u>, medically supported withdrawal [also referred to as medical detoxification] is "designed to alleviate acute physiological effects of opioids or other substances in minimizing withdrawal discomfort, cravings, and other symptoms." When Kelly Coltrain was booked for unpaid trafficviolations in 2017, he totol all staff that she was drug dependent and had a history of sciurzes. Her request to go to the hospital for help with withdrawal symptoms was denied. She was placed in a cell that required 30-minute checks, but these checks rarely occurred. For the next 3 days, she was observed (by video cameral) vomiting, sleeping often, and eating little. On her third night in jail, she started convulsing hen, all movement cassed. For at least the next 4 hours, no deputies or medical staff came to the cell to determine why she was still. Kelly's family filed a wongful death sut, which was settled in 2019 for \$2 min proper she will be sufficient of the cell for \$2 min proper she described to the conposition and procedures to ensure proper care of inmates at risk of whickwal?

incarcerated in local jails, the average annual mortality rate due to drug/falchol intension was nearly visce that of their male counterparts. ¹ The median length of stay in jal before death from alcolor of ordug intoxication was just 1 days, ¹ indicating that individuals on short stays, including those who are detained in pertrail status, are equally at risk. It is not uncommon for individuals to experience substance whichwasel at the time of entry into jail, when access to their drug of holds in a sharply stopped. Estimates with specific regions vary widely, from 17 percent of people entering New York. City jails being in acute opioid withdrawal ¹ to a record 81 percent of people in a present of people in a present of people in a present of people and present of people in a present of people intensing a Pennsylvania county jail needing detoxilication services—half of them for opioid use disorders. ²

This project was supported by Grant No. 2019-AREXXXXI to Advocates for Human Potential, Inc. awarded by the Bussus of Justice Assistance, as component of the Office of Justice Programs, which also includes the Bussus of Justice Statistics, the National Institute of Justice, the Office of Justice Programs, which also includes the Bussus of Justice Statistics, the National Institute of Justice, the Office of Justice Programs (Registering, and Tacking), Advocates for Human Potential, (inc. vas supported by the Addiction and Publis Policy Institute of the CVNatifice) and Critical Hualth Law at Georgeton University Law Content Content of Content











Americans with Disabilities Act

In April of this year, the Department of Justice, Civil Rights Division released The Americans with Disabilities Act and the Opioid Crisis: Combating Discrimination Against People in Treatment or Recovery.



The Americans with Disabilities Act and the Opioid Crisis: Combating Discrimination Against People in Treatment or Recovery

The opioid crisis poses an extraordinary challenge to communities throughout our country. The Department of Justice (the Department) has responded with a comprehensive approach prioritizing prevention, enforcement, and treatment. This includes enforcing the Americans with Disabilities Act (ADA), which prohibits discrimination against people in recovery from opioid use disorder (DUD) who are not engaging in lilegal drug use, including those who are taking legally-prescribed medication to treat their OUD. This guidance document provides information about how the ADA can protect individuals with OUD from discrimination—an important part of combating the opioid epidemic across American communities. While this document focuses on individuals with OUD, the legal principles discussed also apply to individuals with other trues of substance use disorders.

1) What is the ADA?

The ADA is a federal law that gives civil rights protections to individuals with disabilities in many areas of life. The ADA guarantees that people with disabilities have the same opportunities as everyone else to enjoy employment opportunities, ³ participate in state and local government programs, ³ and purchase goods and services. ³ For example, the ADA protects people with disabilities from discrimination by social services agencies; child welfare agencies; courts; prisons and jalls; medical facilities, including hospitals, doctors' offices, and skilled nursing facilities; homeless shelters; and schools, colleges, and universities.

 Does an individual in treatment or recovery from opioid use disorder have a disability under the ADA?

Typically, yes, unless the individual is currently engaged in illegal drug use. See Question 5.

The ADA prohibits discrimination on the basis of disability. ⁴ The ADA defines disability as (1) a physical or mental impairment that substantially limits one or more major life activities,

RESPONDING TO THE CALL FOR ACTION









Working Together

BJA in partnership with **NIC** and in conjunction with the National Commission on Correctional Health Care (NCCHC), the American Society of Addiction Medicine (ASAM), and **Advocates for Human Potential, Inc. (AHP)** are developing guidelines with an expert advisory committee (EAC) to assist jail administrators, correctional officers, and jailbased clinicians in the detection and proper management of acute withdrawal from substances among individuals in custody.

















EAC: Integral to the Process

EAC members are contributing extensively to the development of the guidelines.

- Jail administrators
- Clinical experts
 - Correctional health care specialists
 - Psychiatrists
 - Addiction medicine professionals







Multi-phase Review

The EAC provided feedback on the draft Guidelines.

- ASAM moderated discussion of responses to EAC feedback.
- The collective development team revised the draft per the EAC's discussion.

External reviewers are reviewing the revised draft Guidelines.

- The collective development team will gather and address feedback from external reviewers.
- ASAM will moderate discussion among the EAC of outstanding issues from external reviewers.
- The collective development team will revise the Guidelines per the EAC's discussion.

GUIDELINES FOR MANAGING SUBSTANCE WITHDRAWAL IN JAILS











Purpose of the Guidelines

To provide guidance to jail administrators, correctional officers, and clinicians working with jails on how to:



Assess and build capacity for managing acute withdrawal.



Identify signs and symptoms of acute withdrawal.



Ensure alignment with ADA legislation.





Framework

Provide clear direction and practical information on managing SUDrelated care of people in jail custody, drawing on evidence-based practices and immediate resources.

Identify and manage acute withdrawal from substances as the first step in the continuum of care for individuals with SUD.







Preview of the Guidelines

- General Guidance
- Alcohol Withdrawal
- Sedative-Hypnotic Withdrawal
- Opioid Withdrawal
- Stimulant Withdrawal

NEXT STEPS









Finalize the Guidelines

Clinical and criminal justice organizations, as well as other relevant associations, are reviewing and providing comments on the draft guidelines, ensuring the voice of their constituents is heard.







Raise Awareness

Key stakeholders will be encouraged to:

- Leverage their networks to promote the Guidelines.
- Support participation in a webinar series introducing the *Guidelines* and addressing their implementation.
- Promote the online withdrawal management resource center (under development) and availability of technical assistance (TA).







Operationalize the Guidelines

BJA, NIC, and their partners will support jurisdictions' implementation of the recommendations through training and TA activities, which may include (but are not limited to):

- Withdrawal Management Resource Center, including an online toolkit
 - Checklists, reference sheets
 - Information on screening instruments, model policies, sample MOUs
 - Introductory webinar recordings
 - Curricula and training resources
- Communities of practice and learning sites

CONTACTS













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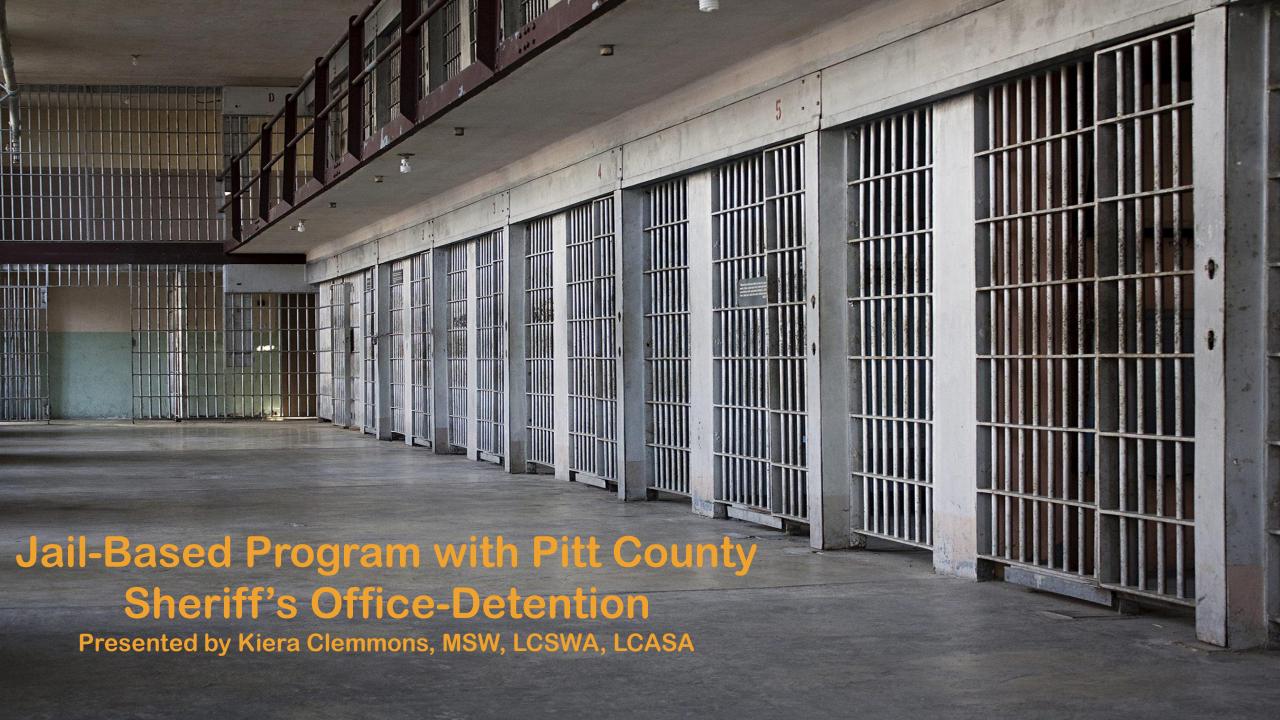
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Sheriff's Vision

► Reduce Recidivism

▶ Provide education

▶ Provide treatment for individuals



Sheriff Paula Dance

Development and Implementation

► Secure Federal grant

► Hire appropriate staff

Working through tradition and culture

Programs

- SHARP was the pilot program
- The focus of SHARP is mental health, substance use, and co-occurring disorder
- Offering tools for long-term recovery
- Parenting
- MAT



WEAR

► Is designed to educate and empower the women

Focus on Trauma

► Evidence-based Techniques

Parenting

► MAT



Community Partnerships

- ▶ Pitt Community College
- ► CareNet Counseling
- ► East Carolina University
- ► Narcotics Anonymous
- Alcohol Anonymous
- ► Greenville Art Museum















Role of the Social Worker

► Communicate with onsite psychiatrist

▶ Perform MH/SU diagnoses

▶ Provide direct services

Act as a liaison between the detention center and community support services

Outcomes

of Referrals (since implementation)

SHARP = 427

WEAR = 130

MAT = 337

Current Participants

SHARP = 12

WEAR = 6



Sustainability

- Grant funding
- Eventual county funding
- ► Continued services provided by stakeholders
- Sound partnerships
- ► Eliminating barriers/bridging the gaps



Conclusion

➤ Offering justice-involved individuals the tools and services necessary to take their first steps into long-term recovery

► Motivate the justice-involved for change

► Helping people with OUD to attain employment-related skills, gain employment, or access to further training

THANK YOU!

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Northwest Colorado's Rural Response to the Opioid Epidemic

July 23, 2022

Abbreviations

IIR ~ Institute for Intergovernmental Research

COSSAP ~ Comprehensive Opioid, Stimulant, and Substance Abuse Program

BJA ~ Bureau of Justice Administration

RROE ~ Rural Response to the Opioid Epidemic Demonstration Project

Consortium ~ Northwest Colorado RROE Consortium

MRH ~ Memorial Regional Health

OFR ~ Overdose Fatality Review

SUD ~ Substance Use Disorder

OUD ~ Opioid Use Disorder

Background

The Rural Responses Initiative is designed to reduce the morbidity and mortality associated with opioid overdoses among individuals who come in contact with law enforcement or are involved in the criminal justice system in high-risk rural communities and regions.

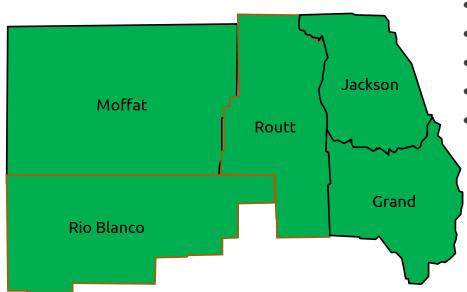
Memorial Regional Health applied for / received a RROE Planning/Implementation grant

- 18-month grant in the amount of \$635,000
- Grant period: 7/1/2020 12/31/2021 (extended to 12/31/2022 due to COVID)
- Activities:
 - Overdose Fatality Review Teams
 - Community Overdose Prevention & First Responder Support
 - Recovery Support

NW Colorado RROE Consortium Participants

- The 14th Judicial District
- Grand County Sheriff's Office
- Moffat County Sheriff's Office
- Rio Blanco County Sheriff's Office
- Routt County Sheriff's Office
- Craig Police Department
- Steamboat Springs Police Department

- Jackson County Public Health
- Moffat County Public Health Department
- Rio Blanco Public Health
- The Health Partnership Serving Northwest Colorado
- Grand Futures Prevention Coalition
- Memorial Regional Health
- Northwest Colorado Health
- Providence Recovery Services
- Open Heart Advocates
- Bears Ears Critical Incident Stress
 Management Team



NWCO RROE Activity #1 Overview

Overdose Fatality Review (OFR) Team:

- Multidisciplinary Team:
 - Law Enforcement Agencies
 - Behavioral Health Agencies
 - Public Health Agencies
 - Judicial Agencies
 - Department of Human Services
 - Community Agencies
- Purpose:
 - To Identify:
 - System Gaps and Barriers
 - Innovative Community-Specific Overdose Prevention and Intervention Strategies
 - Increase Public Awareness
 - Increase Advocacy Efforts
 - Strengthen Agency Relationships and Linkages

NWCO RROE Activity #2 Overview

Community Overdose Prevention & First Responder Training/Support

- School-Based Youth Prevention (In and Out of School-Based Settings)
- Regional Awareness and Education Campaigns
 - SUD Stigma Reduction
 - Medication Drop-Box Locations
 - Promote Awareness of Existing Locations
 - New Locations in Unserved Towns
 - Medication Safety
- Harm Reduction Kit Distribution

- First-Responder Training
 - Non-Violent Crisis Intervention
- First-Responder Self-Care/Resilience
 - Identifying and Addressing Secondary Trauma Experienced by First Responders
 - Integrated Training/Messaging re:
 Mental Health and Self-Care

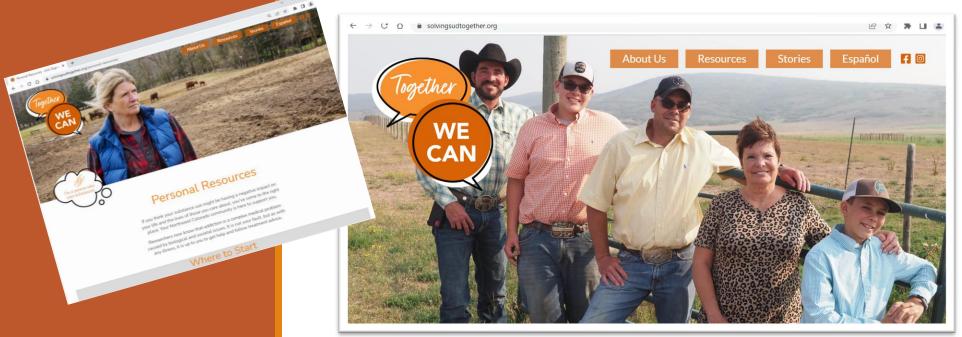


COMMUNITY OVERDOSE PREVENTION:

School-Based Youth Prevention

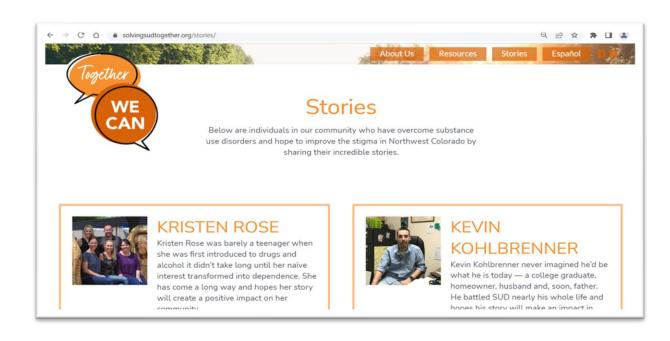






COMMUNITY OVERDOSE PREVENTION:

Regional
Awareness and
Education
Campaigns



Community Overdose Prevention: Year-round Medication Dropbox Locations

GRAND COUNTY

- > Fraser/Winter Park Police Department 79050 US Hwy 40, Winter Park, CO 80482
- > Granby Police Department Zero W. Jasper Ave., Granby, CO 80446
- > Grand County Sheriff's Office 670 Spring St., Hot Sulphur Springs, CO 80451
- > Kremmling Police Department 1318 Park Ave., Kremmling 80459

RIO BLANCO COUNTY

- > Rangely Pharmacy 225 Eagle Crest St., Rangely, CO 81648
- > Rio Blanco Sheriff's Office > Bonfiglio Drug 355 4th St. Meeker, CO 81641

ROUTT COUNTY

- > UCHealth Yampa Valley Medical Center 1024 Central Park Dr., Steamboat Springs, CO 80487
- 118 Main St., Oak Creek, CO 80467
- > Hayden Police Department 249 Hawthorne St.. Havden, CO 81639

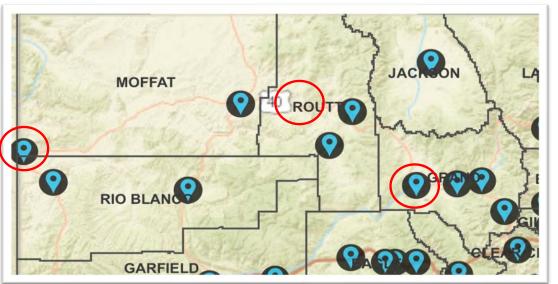
JACKSON COUNTY

> Jackson County Sheriff's Office 396 LaFever St., Walden, CO 80480

MOFFAT COUNTY

- > Dinosaur Marshal's Office 317 Stegosaurus Fwy., Dinosaur, CO 81610
- > Moffat County Sheriff's Office 800 W. First St., Craig, CO 81625

NEW LOCATIONS NOTED IN RED!





COMMUNITY OVERDOSE PREVENTION:

Medication Safety



TIPS YOU CAN USE NOW.

Safe Use. Safe Storage. Safe Disposal.

This card is designed to provide you with helpful quick tips on using, storing and disposing of your prescription medicines safely. For full details on each topic and much more valuable information, visit TakeMedsSeriously.org and look for the icons featured on both sides this card.

Prescription Drug Safety Starts With Yo



SAFE USE

Learn If Your Combination of Meds Are Safe Here's how:

- Create a list of all medicines you're taking, Please list all prescription and non-prescription medications, herbals, nutritional supplements, eye drops, inhalers, etc that you use.
- Review this medication list once a year with your doctor.
- · Ask your doctor to explain each medicine:
 - . Why are you taking it?
 - · How long can you expect to take it?
 - · Any possible side effects?

Remember:

- . Only take medicine prescribed for YOU.
- NEVER SHARE your prescription medicines.







Take Action. Learn More: TakeMedsSeriousMorg



Unused Medicine by the Numbers: 4 billion prescriptions filled in the U.S. every year. 1/3 of that medicine goes unused. Thats 200 million pounds of unused medication!

3 Tournemental Impact 1 disposamenations accessed BIT

6 SAFE STORAGE

- Store prescription medicines in a drawer or cabinet that can be locked or use a lock box.
- Monitor your medicine inventory. Know how much you've used, how much remains, and keep a list of all medicines in the house.
- Make sure other family members secure their medicines before your kids visit them.



SAFE DISPOSAL

How you dispose of medicines makes a difference. TakeMedsBack.org keeps you informed about:

- "Take-back" locations near you where medicines can be returned and destroyed.
- Safe home disposal options.



LOCATIONS NEAR YOU

GRAND COUNTY

- > Fraser/Winter Park Police Department 79050 US Hwy 40, Winter Park, CO 80482
- > Granby Police Department Zero W. Jasper Ave., Granby, CO 80446
- > Grand County Sheriff's Office 670 Spring St., Hot Sulphur Springs, CO 80451
- > Kremmling Police Department 1318 Park Ave., Kremmling 80459

JACKSON COUNTY

> Jackson County Sheriff's Office 396 LaFever St., Walden, CO 80480

MOFFAT COUNTY

- > Dinosaur Marshal's Office
- 317 Stegosaurus Fwy., Dinosaur, CO 81610
- > Moffat County Sheriff's Office 800 W. First St., Craig, CO 81625

RIO BLANCO COUNTY

- > Meeker Drugs
- 315 6th St., Meeker, CO 81641
- > Rangely Pharmacy 225 Eagle Crest St., Rangely, CO 81648

ROUTT COUNTY

- > UCHealth Yampa Valley Medical Center 1024 Central Park Dr., Steamboat Springs, CO80487
- Bonfiglio Drug

figlio Drug



COMMUNITY OVERDOSE PREVENTION:

Harm
Reduction Kit
Distribution



- Fentanyl Test Strips (10 each)
- Fentanyl Test Strip instructions
- Micro-Scoop (for testing)
- Naloxone (2 vials)
- Sterile Needles (2 sterile needles)
- Overdose Information (English/Spanish)
- Resource Card (English/Spanish)
- Encouragement Card (English/Spanish)

FIRST RESPONDER TRAINING

Non-Violent Crisis Intervention Training:

- Train the Trainer:
 - Routt & Moffat County
 - Craig Police Department, Open Heart Advocates, & Routt County Sheriff's Office
- Regional training opportunities for first responders







NWCO RROE Activity #3 Overview

Recovery Support

- Peer Recovery Support Team
 - Clean & Sober Events
 - Case Management

14th Judicial District

Adult

Diversion Program

- Treatment & Recovery Focused
- Case Management



RECOVERY SUPPORT:

Peer Recovery Support Team





RECOVERY WELLNESS WEEKEND
June 11th 10am-4pm / June 12th 9am-12pm

June 11th 10am-4pm / June 12th 9am- 12pm @ The Hayden Center

www.haydencolorado.com
Tickets and details at eventbrite.com
Tickets are Pay-What-You-Can, \$25-\$45 each
All prices get you access to the full weekend.
Sponsorship is available.

JUNE 12 FRIENDS ON THE FARM

12pm @ Mountain Bluebird Farm
For Recovery Weekend attendees Celebrate the Recovery Weekend completion
with Friends and Fresh Local Food

JUNE 16 WEALTH IN WELLNESS

4:30pm @ Fetcher Park 1795 Fetcher Park Drive Near the Picnic Area Dutdoor Recovery Yoga with Chris Ray

For more information thehealthpartnership.org/events



RECOVERY SUPPORT:

14th Judicial District Adult Diversion Program





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2022 ANNUAL CONFERENCE & EXPOSITION A DAMS COUNTY COLORADO

Questions?



2022 ANNUAL CONFERENCE & EXPOSITION A DAMS COUNTY COLORADO

Thank you!



