

# Substance Use Disorder ECHO

RUTGERS



State of New Jersey



MEDICATION-ASSISTED TREATMENT  
CENTERS OF EXCELLENCE



RUTGERS  
New Jersey Medical School

# Hub Team Introductions



**Mohammad Addar**  
Master Black Belt,  
Operational Excellence  
Cooper University Healthcare



**James Bailey, DO,**  
NeuroMusculoskeletal Institute  
Rehabilitation Medicine  
Rowan University



**Clement Chen, PharmD**  
Clinical Pharmacist/Academic Detailer  
Rutgers New Jersey Medical School

# Our Goal

- Combat the substance use crisis through education on best practices in a safe space for peer-to-peer learning
- Engage healthcare providers in the primary care setting to increase skills to safely and compassionately manage, treat, and support their clients with a substance use disorder
- Recognize the importance of reducing stigma to advance equity and improve access to care for patients with substance use disorders



# Speaker Spotlight

- Warden Taylor is a 25-year law enforcement veteran, currently overseeing the county jail and numerous alternatives to incarceration programs within Camden County.
- Under her leadership, Camden County was selected by the Arnold Foundation for the Jail Based Engagement and Community Reintegration Intervention Grant to work with its reentrants by developing partnerships with the community designed to reduce recidivism. Awarded the Department of Justice Comprehensive Opioid Abuse Site Based Program to link high-frequency utilizers with evidence-based support services and implement wraparound services.
- Sharon has been the Jail Population Manager for the Camden County, NJ, Department of Corrections, Camden County Correctional Facility since 2015.
- Sharon is the project administrator of the NJ Medication Assisted Treatment grant, the Department of Justice, Bureau of Justice Assistance Second Chance and COSSAP Reentry grants, and the COSSAP Building Bridges Planning Initiative. Since 2016, Sharon has worked on behalf of the Department of Corrections to receive more than \$5.5 million dollars in reentry grant funding to work towards the goal of ensuring individuals are better situated at the time of release from incarceration.



**Karen Taylor**  
Warden

Camden County  
Department of  
Corrections



**Sharon Bean**

Jail Population  
Manager

Camden County  
Department of  
Corrections

Jan 13, 2023

## Culture Shift in SUD Treatment in Correctional Facilities

Presented by:

**Karen Taylor, Warden**, Camden County Department of Corrections

**Sharon Bean, M.P.A.**, Jail Population Manager, Camden County  
Department of Corrections

# Financial Disclosures

- The following sessions leader(s) have no relevant Financial relationships with ineligible companies to disclose:
  - Karen Taylor
  - Sharon Bean

# Learning Objectives

- Share our experiences and lessons learned from implementation of medication assisted treatment for OUD.
- Review and discuss elements critical to successful OUD treatment inside the jail, including leading organizational change, communication and training for staff at all levels and integration of custody and healthcare staff.
- Share concrete strategies and solutions integral to an effective MAT program, including the value of fostering relationships with system stakeholders and community-based treatment providers.
- Realize the value and importance of knowing whether your program is successful and how to begin tracking and reporting outcomes and impact.

# Camden County Department of Corrections



County Population: 506,343

County Median Income: \$67,118

County Seat: Camden City

Camden City Population:  
77,344

Camden City Median Income:  
\$26,105

36.8% Persons below poverty  
line



# Why MOUD was Vital for Corrections:

- Similar to national trends, Camden County continues to experience a **serious** Opioid epidemic.
- Camden County had the largest number of Heroin deaths in New Jersey from 2004 to 2016: A total of **937 from Heroin alone**.
- Every municipality in Camden County had seen an increase in the number of overdose deaths from 2014–2016.

2017:	271 Fatalities
2018:	308 Fatalities
2019:	322 Fatalities
2020:	288 Fatalities
2021:	335 Fatalities

There were 2,859 overdoses in Camden County in 2022

# Progression of MOUD in Camden County DOC

- **June 2018** – Vivitrol offered to sentenced population **only** and **only** at the time of release (1 injection per person).
- **Late 2018** – Vivitrol offered to entire population and is administered as soon as a person is cleared by medical (multiple injections per person).
- **February 2019** – Administration of Buprenorphine begins; both continuing treatment and induction. Methadone expanded to include any person already receiving medication prior to booking in the jail as opposed to only pregnant women.
- **February 2021** – Administration of Sublocade begins.

\*Funding for MOUD provided by the NJ DOC and NJ DHS via grants since 2018.

# MOUD – Phase I

\*Education and Policy Development

\*Identify MAT Champion(s)

\*Identified Participants – Expanded Participant Group–Jail

\*Participant Education and Group Counseling

\*Extended-release Naltrexone

\*Naloxone (i.e. Narcan)

\*Facility Campaign promoting MOUD

\*Assigned Custody Staff to MOUD Program

\*Alerts in Jail Management System

\*Coordinated release time

\*Created MOUD Committee

# MAT– Phase II & III

- \* Developed Policy and Logistics
- \* Developed Community Providers for Referrals
- \* Increased Education Format
- \* Increased Group Counseling
- \* Expanded Participant Group–Jail
- \* Suboxone & Sublocade
- \* Continued Maintenance Methadone
- \* Established partnerships with various OTP providers
- \* Applied for Technical Assistance on MAT
- \* Developed Individual Counseling Format
- \* Collaboration & Building Data Capacity

# Primary Lessons Learned

- Getting the Actual Medication Is the Easy Part!
- You have to start somewhere!

# Challenges of MOUD Program

- Addressing the stigma associated with MAT with staff and inmates.
- Communication amongst key stakeholders; civilian, custody, medical
- Medication Diversion
- Planning for Release of Pretrial/Non-Sentenced Population
- Ensuring continuity of care:
  - ✓ Timely connection to community-based treatment provider upon release.
  - ✓ Access to medication to bridge the gap between release and scheduled appointment.

# Strategies To Address Challenges

- MAT Education for Incarcerated Population and Corrections Staff.
- MAT Planning & Implementation Conferences (held twice a month).
- Developed policy to minimize diversion of medication.
- Discharge Planning Process with Admissions and Medical

# Strategies, Continued

- Reallocate Existing Resources:
  - ✓ Reentry Corrections Officers
  - ✓ Jail Reentry Coordinator and Reentry Specialist
  - ✓ MAT Navigators
  
- Medicaid Presumptive Eligibility Screening
  
- Revising (often) policy of providing bridge meds at the time of release
  
- CCDOC Prescription Hotline



## Strategies, Continued

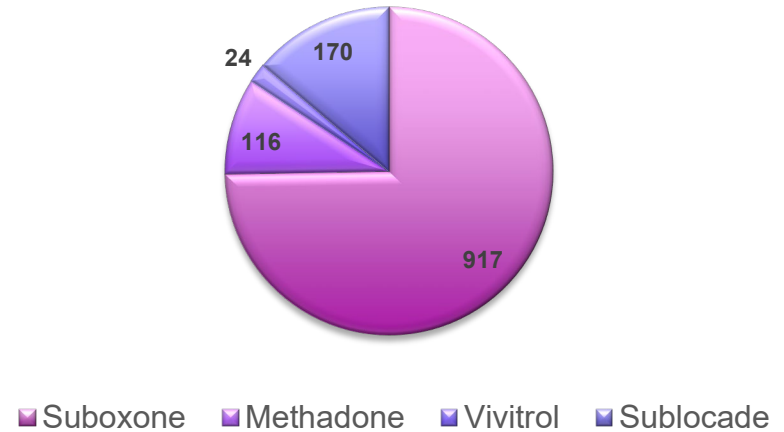
Relationships,  
Relationships,  
Relationships!

# Using Data to Track and Monitor Impact & Outcomes

2022 MOUD ADP



2022 MOUD Clients



# The **What**, When, Why, and How of MOUD Data Collection

## **Expected Program Impact:**

- Overdoses in Camden County, especially upon release from jail.
- Success rate of continued treatment post-release (30, 60, 90 days out).
- Rearrest and reincarceration rates.
- Suicide attempts inside the correctional facility.
- Negative interactions and encounters inmate, inmate and/or inmate, corrections officers.
- Hospitalizations, ER visits

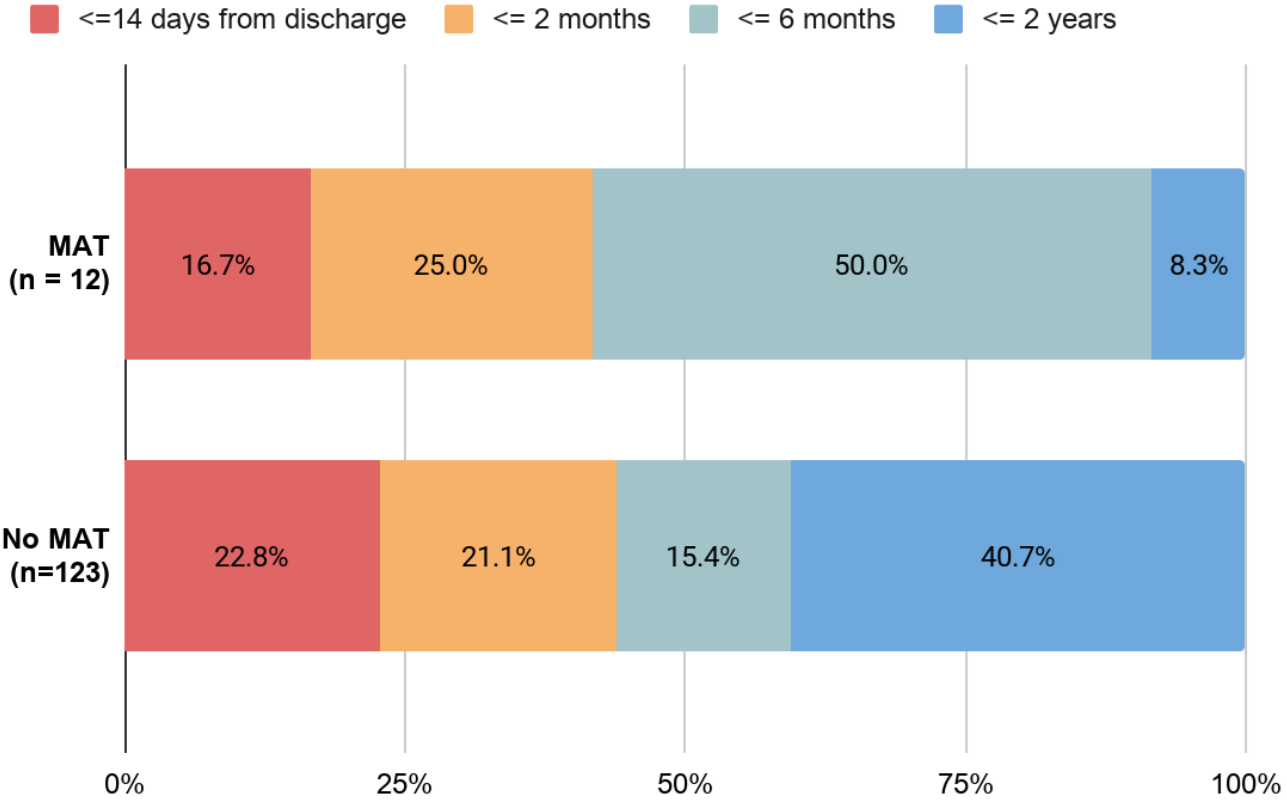
## **Program Impact Measures Captured:**

- Socio-demographic measures (DOB, gender, race/ethnicity, age at time of MOUD, marital status, employment)
- Self-reported mental health disorder, substance use disorder, and homelessness.

# The What, When, **Why**, and How of MOUD Data Collection

- Is the program having an impact?
- What kind of impact? Positive? Negative?
- Is the program successful? What and/or who defines successful?
- Are there any unintended consequences as a result of the program and related policies and practices?

# Time Between Jail Discharge and Fatal OD



Data Source: Preliminary Camden Coalition's Evaluation of CCDOC MOUD Evaluation

# Hospital & ED Utilization of MOUD Population

**1,227** individuals provided MAT

## Inpatient Visits

**599** (48.8%)  $\geq 1$   
**117** (9.5%)  $\geq 5$   
**39** (3%)  $\geq 10$

## ED Visits

**371** (30%)  $\geq 10$   
**36** (3%)  $\geq 50$

## Opiate ODs

**327** (26.7%)  $\geq 1$   
**78** (6.4%)  $\geq 3$

Data Source: Preliminary Camden Coalition's Evaluation of CCDOC MOUD Evaluation

# Pre and Post Overdoses for MAT Population

## Post-Index MOUD

MOUD population: 1370 records	All Sources
Any overdose?	
1 month prior to booking date	2.27%
6 months prior to booking date	8.47%
1 year prior to booking date	15.91%
2 years prior to booking date	24.82%

MOUD population: 1370 records	All Sources
Any overdose?	
1 week post release date	0.66%
1 month post release date	1.75%
3 months post release date	4.31%
6 months post release date	6.57%

Data Source: Preliminary Camden Coalition's Evaluation of CCDOC MOUD Evaluation

# Using Data to Inform Policy Changes

- Complete revamp of CCDOC's medical scope of work and new Request for Proposal issued to require comprehensive substance use component.
- All individuals have a SU screening at Intake and assessment if SU is reported.
- Partnered with Cooper Medical to confirm health insurance or complete application for Medicaid Presumptive Eligibility at the time of release.
- Continuously revise policy for distribution of bridge meds at the time of release (3 days, 7 days, 30 days, and currently 14 days).
- Successfully advocated for the reallocation of existing resources to support the growing MOUD program, adding two Reentry Corrections Officers and three MOUD Navigators.
- Created a more streamline process for flagging individuals for medical to meet with regarding MOUD.



**Thank you!**  
**Any questions?**