



THE PEW CHARITABLE TRUSTS

# How Training Corrections Officers on the Science of Addiction Improves Opioid Treatment

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# **Presenter Disclosures**

## **How Training Corrections Officers on the Science of Addiction Improves Opioid Treatment**

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# Educational Objectives

- State why educating corrections officers on OUD and MOUD is key to successful correctional MOUD programs
- List the key components of a OUD and MOUD training program for corrections officers
- Explore how OUD and MOUD educational activities for corrections officers can be initiated in one's own facility or system

# Today's Topics

- Pew's Substance Use Prevention and Treatment Initiative
- Pew's New Jersey Technical Assistance
- Corrections Officer Training

A silhouette of a person stands on a rocky shore, looking out at the ocean under a warm, hazy sunset sky. The sun is low on the horizon, creating a soft glow over the water and distant hills.

# Substance Use Prevention and Treatment Initiative

Through its Substance Use Prevention and Treatment Initiative, Pew works to advance state and federal policies that address the toll of substance misuse, including expanded access to evidence-based treatment.

# NJ Technical Assistance

## Warden Survey

**Survey of wardens on OUD and reentry services provided at jails**

- MS word-based survey of jail wardens on OUD and reentry services provided
- Survey fielded in October and November 2019
- 19 of 21 counties responded

## Medical Vendor Interviews

**Interviews with jail administrators, medical director, and reentry coordinator on OUD services provided**

- 60-minute guided interview to clarify warden survey responses and to learn more about data collection processes, OUD and reentry services provided
- 15 interviews conducted

# NJ Technical Assistance

## Reentry Technical Assistance

**Support the development of a jail reentry council**

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- Create a formal way for jail reentry staff to share resources and best practices
- Contracting with a NJ organization to develop the reentry council structure

## Data Collection Technical Assistance

**Develop and test an excel-based tool to support monthly Annex A data reporting**

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- Develop a data collection tool to help jails with Annex A data reporting
- Provide one-on-one data collection technical assistance by request

# NJ Technical Assistance

## Correctional Officer Training

### **OUD, MOUD, and anti-stigma training for jail training directors**

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- Rutgers to design and deliver a train-the-trainer course on OUD, MOUD and anti-stigma for jail training directors
- Training directors will train all correctional officers
- The trainings in October and November 2021

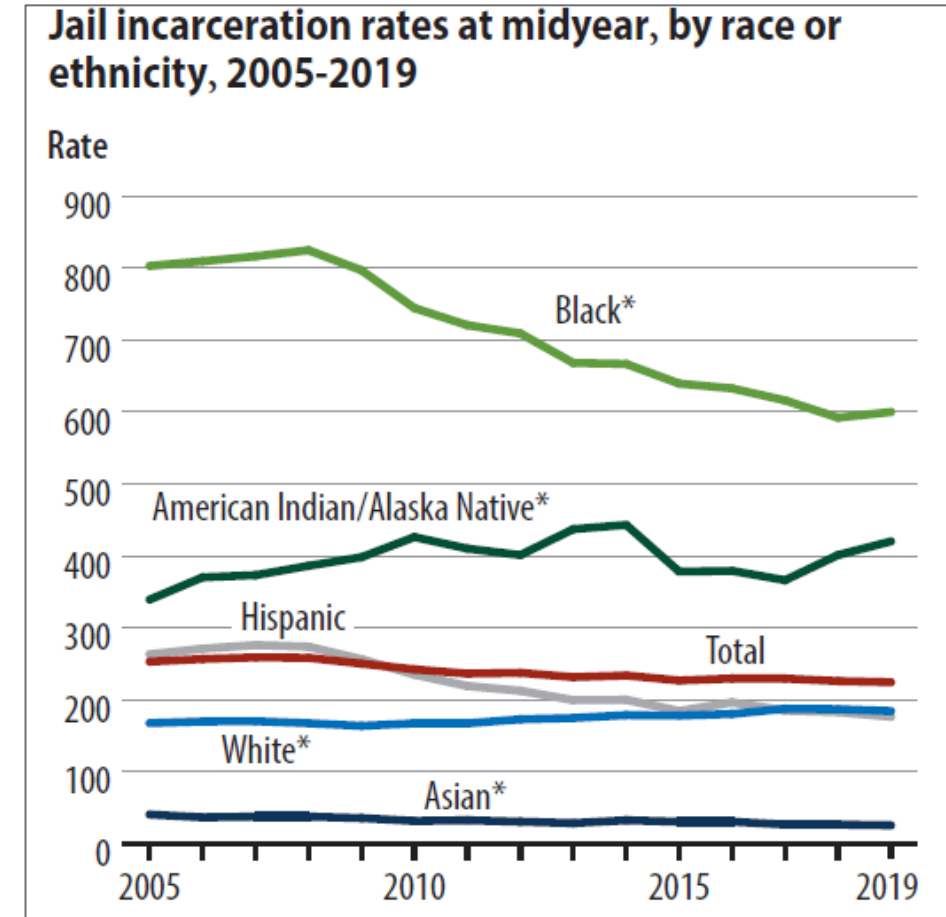
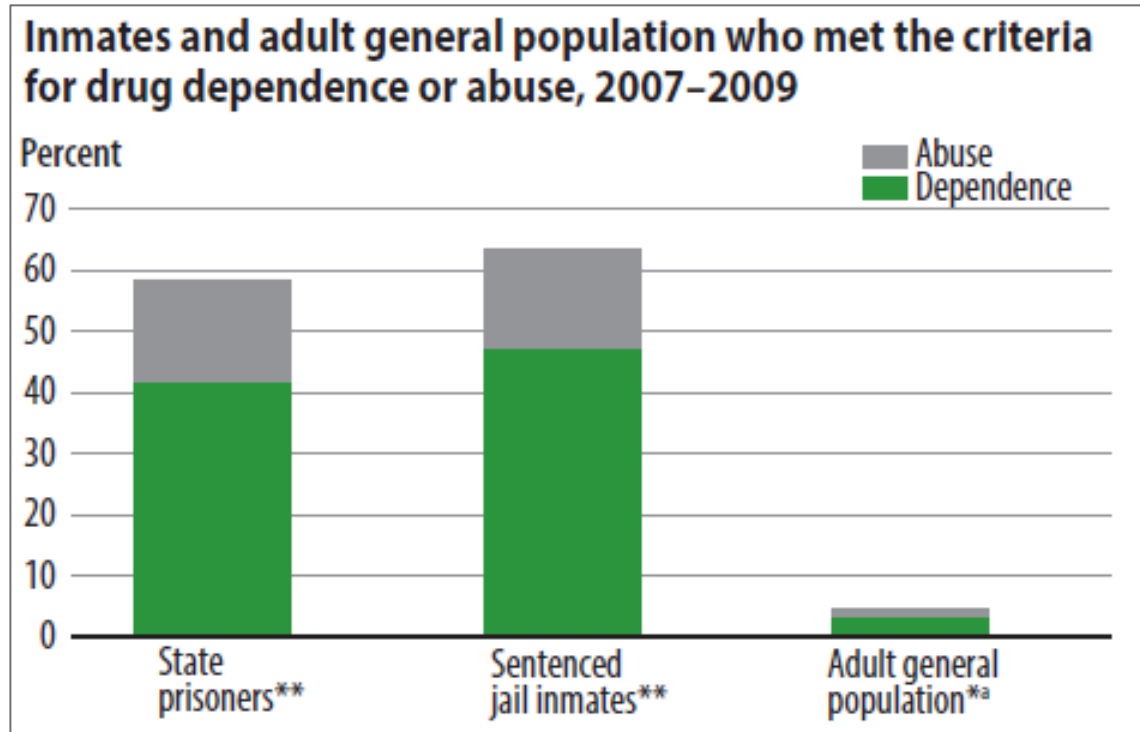


# Why to Treat OUD in Jails

- Increased overdose risk immediately after release<sup>1</sup>
- Reduced jail disciplinary tickets among those who are treated with methadone<sup>2</sup>
- The economic costs opioid overdose crisis are staggering, with most costs attributed to healthcare, criminal legal system, and lost productivity<sup>3</sup>

**Literature:** 1. Binswanger IA, Stern MF, Deyo RA, et al. Release from prison--a high risk of death for former inmates [published correction appears in N Engl J Med. 2007 Feb 1;356(5):536]. N Engl J Med. 2007;356(2):157-165. doi:10.1056/NEJMsa064115; 2. Moore KE, Oberleitner L, Smith KMZ, Maurer K, McKee SA. Feasibility and Effectiveness of Continuing Methadone Maintenance Treatment During Incarceration Compared With Forced Withdrawal. J Addict Med. 2018;12(2):156-162. doi:10.1097/ADM.0000000000000381; 3. The Council of Economic Advisers. The Underestimated Cost of the Opioid Crisis. 2017 Nov. <https://www.hsdl.org/?view&did=806029#:~:text=CEA%20estimates%20that%20in%202015,economic%20cost%20of%20the%20epidemic>; Society of Actuaries. Economic Impact of Non-Medical Opioid Use in the United States. 2019. [www.soa.org/globalassets/assets/files/resources/research-report/2019/econ-impact-non-medical-opioid-use.pdf](http://www.soa.org/globalassets/assets/files/resources/research-report/2019/econ-impact-non-medical-opioid-use.pdf)

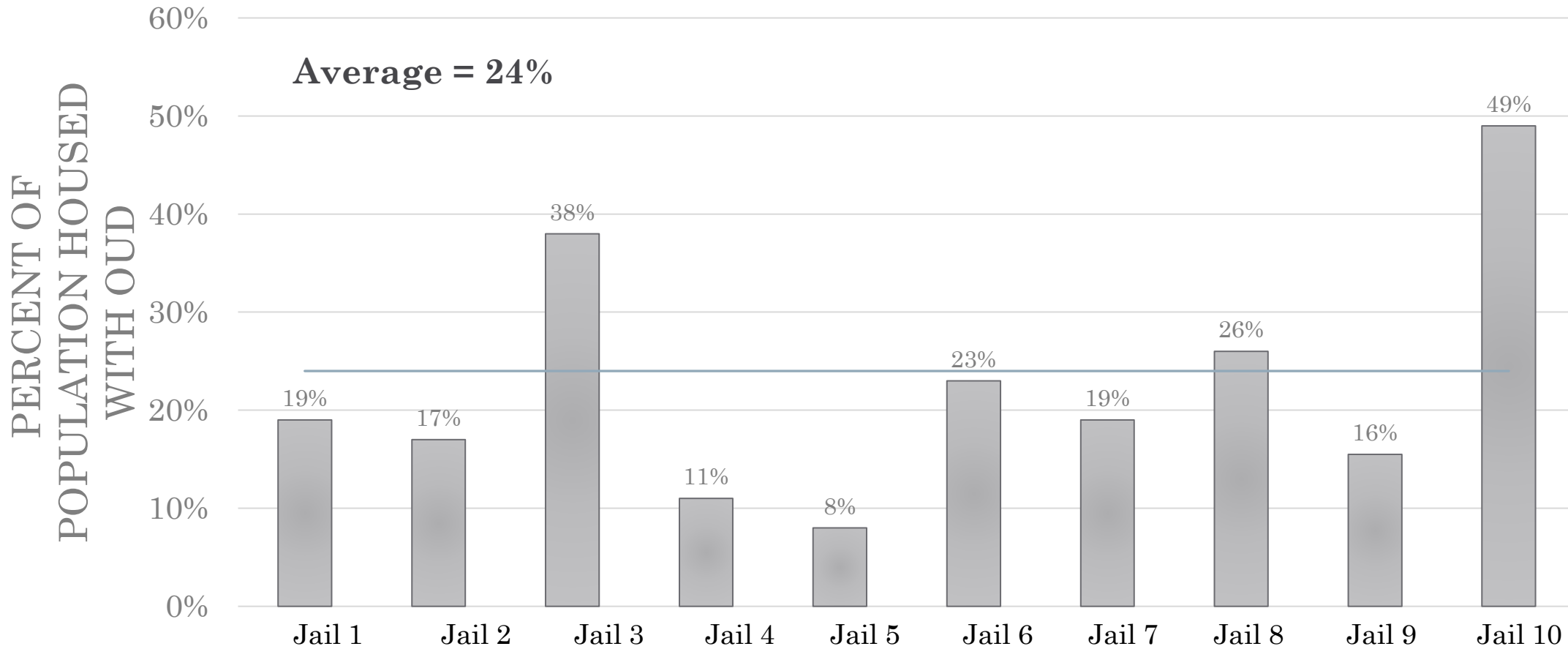
# Need for OUD Treatment in Jail



**Figures:** <https://www.ojp.gov/ncjrs/virtual-library/abstracts/drug-use-dependence-and-abuse-among-state-prisoners-and-jail>; <https://bjs.ojp.gov/library/publications/jail-inmates-2019>

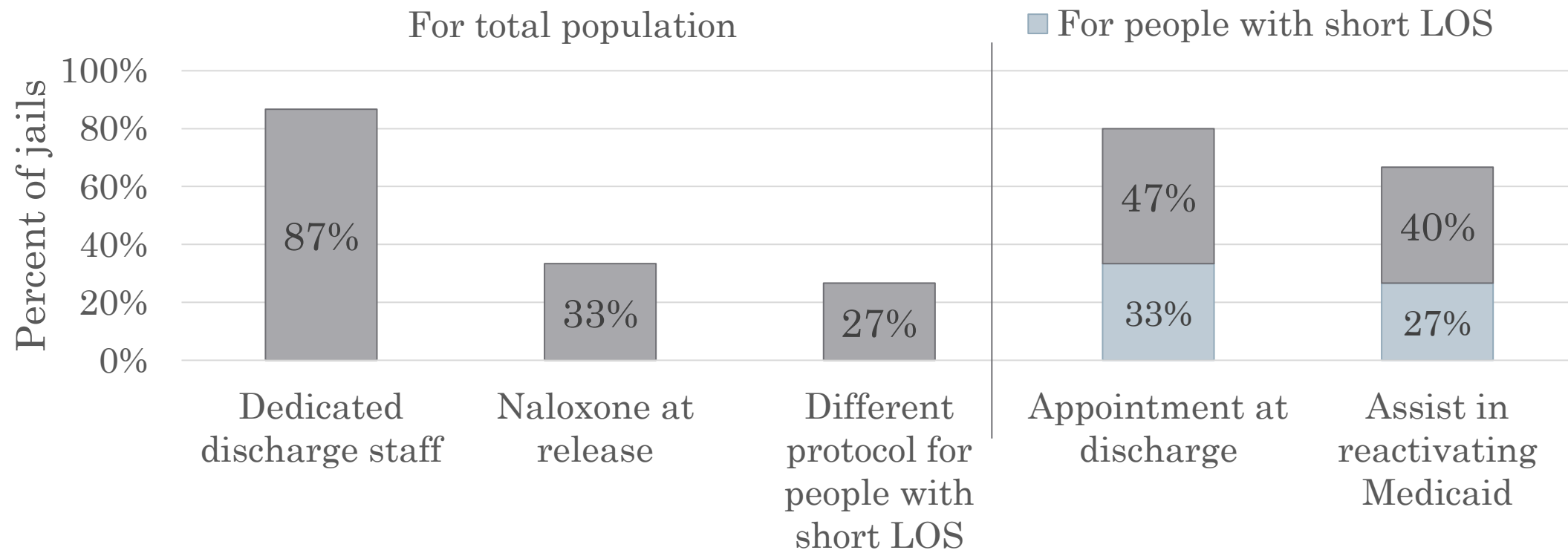
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# Opioid Use Disorder Prevalence on Sept. 30, 2019 in NJ Jails (N=10)



Based on any metric used by jails to define OUD

# Reentry Services Offered in NJ Jails (N=18)



Short LOS= Length of Stay <48 hours



# Medications for Opioid Use Disorders Train-the-Trainer Initiative

**Tameka Chatman**

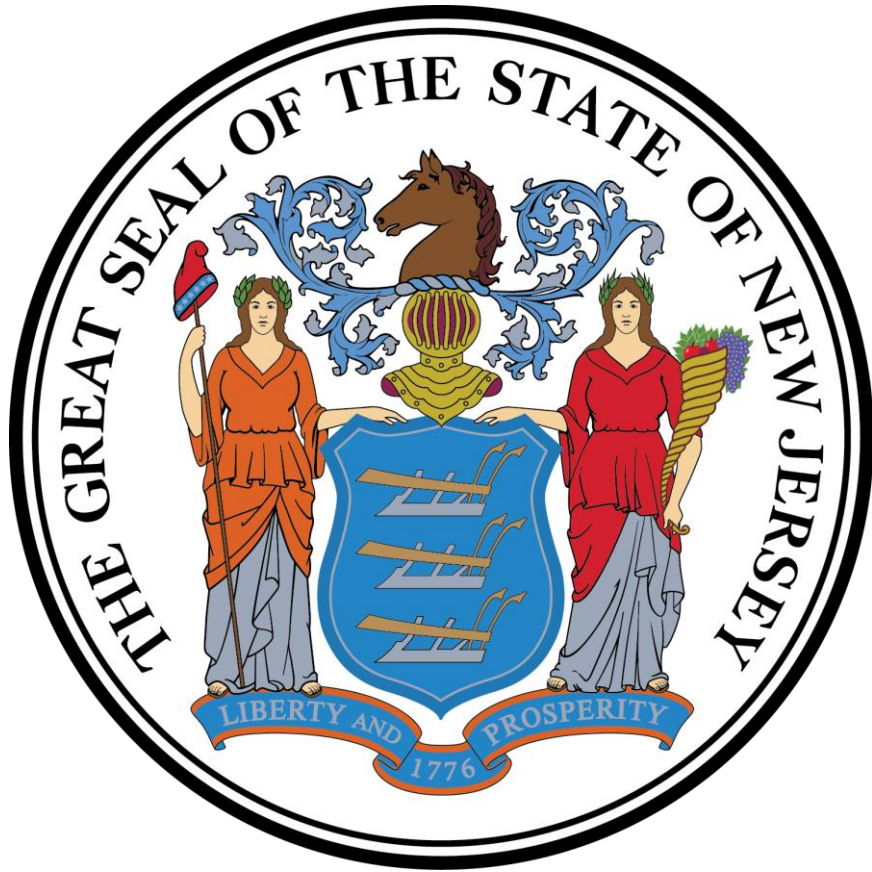
Rutgers University Behavioral Health Care  
Behavioral Research & Training Institute  
Technical Assistance Center

# **New Jersey Jail Staff Train-the-Trainer Initiative**

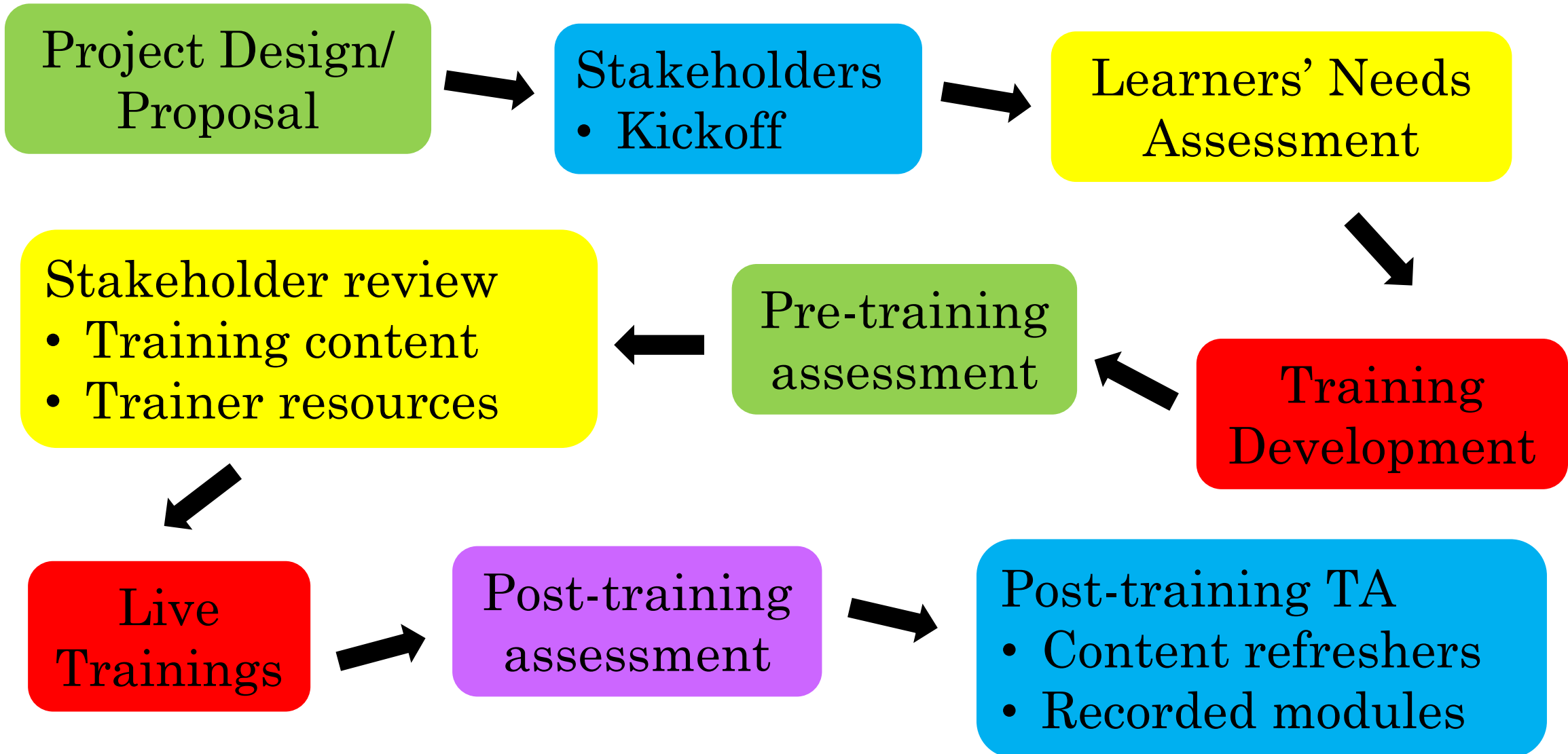
## **Project Goals**

- To enhance jail staff's knowledge of opioid use disorder and to support people reentering the community after incarceration.
- To reduce substance use related morbidity and mortality among individuals incarcerated in jails by supporting the implementation of evidenced-based treatments for opioid use disorder across New Jersey county jails.

# My Experiences...



# Program Components/Design





# Stakeholders

## Who?

- New Jersey County Jail Wardens Association
- New Jersey Division of Mental Health & Addiction Services
- Rutgers University Behavioral Health Care
- New Jersey Department of Corrections
- New Jersey Department of Health
- The Pew Charitable Trusts

## What?

- Ongoing project/planning meetings
- Review of training materials
- Ongoing support/guidance when needed
- Trainer selection/recruitment
- Facilitate “buy-in”
- Removal of barriers/problem-solving

# Learners' Needs Assessment

## Goals

- Baseline knowledge
- Tailored content
- Attitudinal appraisal
- Engagement/  
Involvement

### Needs Assessment for MOUD Trainers

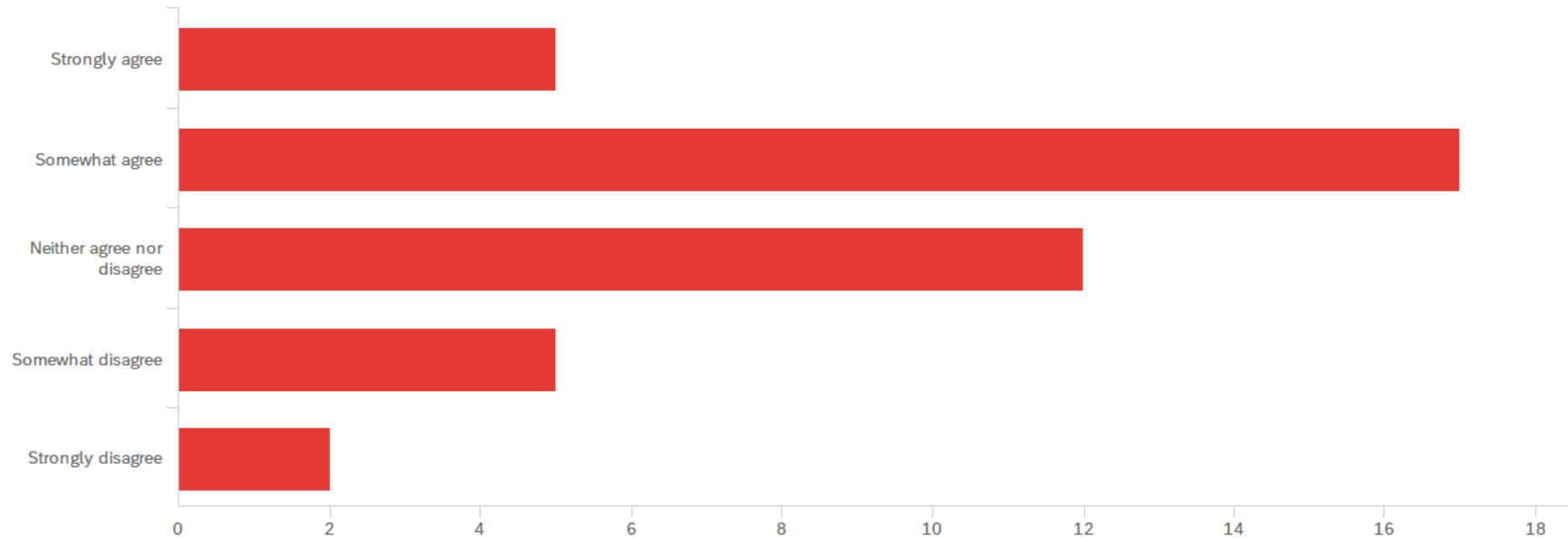
1. Overall, I am confident that I can provide quality trainings to correctional staff.
  - 1) Strongly disagree
  - 2) Disagree
  - 3) N/A –Neutral
  - 4) Agree
  - 5) Strongly agree
2. Opioid Use Disorder is a brain disease and should be viewed in the same manner as other medical diseases.
  - 1) Strongly disagree
  - 2) Disagree
  - 3) N/A –Neutral
  - 4) Agree
  - 5) Strongly agree
3. Learning more about medications to treat Opioid Use Disorder will be beneficial to the trainings that I provide.
  - 1) Strongly disagree
  - 2) Disagree
  - 3) N/A –Neutral
  - 4) Agree
  - 5) Strongly agree
4. I am confident that I can sufficiently answer audience questions concerning substance use disorders.
  - 1) Strongly disagree
  - 2) Disagree
  - 3) N/A –Neutral
  - 4) Agree
  - 5) Strongly agree
5. My knowledge of the medications (e.g. buprenorphine, methadone, and naltrexone) used to treat Opioid Use Disorders is \_\_\_\_
  - 1) None
  - 2) Very limited
  - 3) Good
  - 4) Very good
  - 5) Excellent

# Learners' Needs Assessment

Q2 - Opioid Use Disorder is a brain disease and should be viewed in the same manner

Q10 - One of the biggest challenges to providing medications to treat Opioid Use

Disorders in jails is that many people do not believe that this is an effective treatment.



# Learners' Needs Assessment

**Q14 - Do you anticipate challenges when delivering the OUD training to officers at your facility? If so, what resources do you anticipate needing to address those challenges?**

- “Education on the disease itself... personal stories - aka examples of normal everyday people struggling with addiction.”
- “I am not sure that the officers agree that OUD is a disease and not a choice. I am honestly not sure what resources would make them less cynical, statistics of how people start using maybe.”
- “Percentage recidivism and overdose. Visual aids on how medication affects the brain. Guarantees on how to stop diversion ...”
- “I would need as much information as possible because I am not well versed in addiction recovery and/or treatment.”

# Learners' Needs Assessment

**Q14 - Do you anticipate challenges when delivering the OUD training to officers at your facility? If so, what resources do you anticipate needing to address those challenges?**

- “Information of where this has been implemented in other facilities and the evidence to show that it makes a difference to get officer buy in to the medical necessity of such a treatment program. Techniques to overcome individuals who are resistant and negative to the training presented.”
- “It is tough to have staff on board with assisting with the treatment when they are used to just used to "jailing". The old school mentality, we tell the inmates what to do and we go home at the end of the shift.”
- “Corrections is changing daily, but the officers may not be changing with the new corrections... I hear all the time, ‘we are not social workers’...”

# Training Development

Overview of addiction

Overview of opioids

Addiction treatment in correctional settings

Overview of Medication for Opioid Use Disorders (MOUD)

Delivering MOUD in correctional settings

Benefits of MOUD in correctional settings

Challenges offering MOUD in jails

Discharge planning with MOUD

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Basics of Adult Learning & Strategies for Implementation

New Jersey Jail Staff Medications for Opioid Use Disorders (MOUD)  
Train the Trainer Initiative 2021

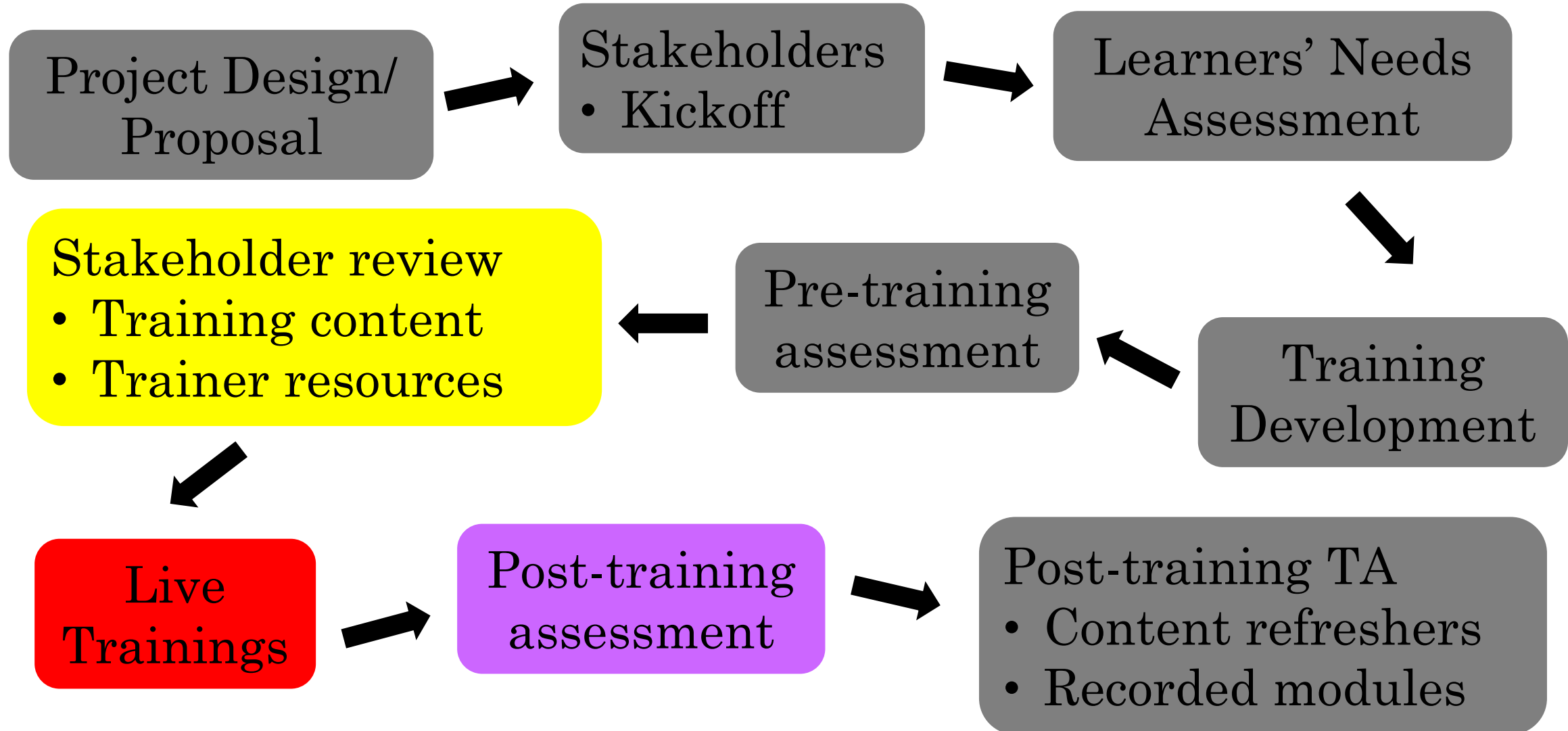
Pre/Post –Test

Please read each question and select the best answer.

1. Which is currently the #1 primary substance involved in overdose deaths in the United States?
  - a. Benzodiazepines
  - b. Heroin
  - c. Cocaine
  - d. Synthetic opioids (excluding Methadone)
  - e. Alcohol
2. Most people with substance use disorders receive treatment.
  - a. True
  - b. False
3. Drugs of abuse target the brain's natural reward pathway.
  - a. True
  - b. False
4. \_\_\_\_\_ is a risk factor for substance use/misuse.
  - a. Having a mental illness
  - b. Having a genetic predisposition
  - c. Experiencing trauma
  - d. All of the above
  - e. None of the above
5. What has been identified as the #1 reason for prescription opioid misuse?
  - a. The person is "hooked"
  - b. To get "high"
  - c. Physical pain relief
  - d. Emotional pain relief
  - e. Relaxation
6. Providing medications to treat opioid use disorders is the standard of care.
  - a. True
  - b. False

# Pre-training Assessment

# Program Components/Design







## Benefits of MOUD in Correctional Settings

- Decrease overdose deaths “inside” and after release

- What benefits, that may not be listed here, have you witnessed in your facility as a result of implementing an MOUD program?

**Please type your responses in the “Chat Box”**

- Reduces costs
- Improves path to recovery / Increased treatment adherence
- Black market value decreases / Reduces diversion
- Decreases other criminal activity in jails and prisons

LIVE...*virtually*

# New Jersey Jail Staff Medications for Opioid Use Disorders (MOUD)

Train the Trainer Initiative 2021

## Pre/Post –Test- RESULTS

PRE- Test % Correct (35 respondents)	POST- Test % Correct (38 respondents)	% Change	Question
42.8	71.05	+28.25	1. Which is currently the #1 primary substance involved in overdose deaths in the United States? a. Benzodiazepines b. Heroin c. Cocaine d. Synthetic opioids (excluding Methadone) e. Alcohol
91.43	92.11	+6.68	2. Most people with substance use disorders receive treatment. a. True b. False
97.14	100	+2.86	3. Drugs of abuse target the brain's natural reward pathway. a. True b. False
100	92.11	-7.89	4. _____ is a risk factor for substance use/misuse. a. Having a mental illness b. Having a genetic predisposition c. Experiencing trauma d. All of the above
62.86	78.95	+16.09	5. What has been identified as the #1 reason for prescription opioid misuse? a. The person is "hooked" b. To get "high" c. Physical pain relief d. Emotional pain relief e. Relaxation

# Post-training Assessment

# Post-training Assessment

New Jersey Jail Staff Medications for Opioid Use Disorders (MOUD) Train the Trainer Initiative 2021			
<u>Pre/Post –Test- RESULTS</u>			
PRE- Test % Correct (35 respondents)	POST- Test % Correct (38 respondents)	% Change	Question
62.86	94.74	+31.88	6. Providing medications to treat opioid use disorders is the standard of care. a. True b. False
65.71	70.27	+4.56	7. The FDA-approved medications to treat opioid use disorders are _____. a. Methamphetamine, buprenorphine, and naltrexone b. Bupropion, methamphetamine, and Vivitrol c. Naltrexone, buprenorphine, and methadone d. Varenicline, methadone, and Suboxone e. None of the above
85.71	97.37	+11.66	8. A benefit of providing medications for opioid use disorders in correctional settings is _____. a. Reduces diversion b. Decreases opioid overdose deaths c. Increases safety/security for staff and people in custody d. All of the above e. None of the above
100	100	0	9. A multidisciplinary team for a jail-based MOUD program includes _____. a. Nurses b. Custody staff c. Substance use counselors d. A program coordinator e. All of the above
			10. Best practices for providing addiction treatment in correctional settings include counseling,

# Post-training Technical Assistance



## **New Jersey Jail Staff Medications for Opioid Use Disorders (MOUD)** **Train-the-Trainer Initiative**

### **Tips for Getting Started**

- Regular communication with your facility's administration regarding resources, training frequency and strategies to resolve potential obstacles.
- Review MOUD trainer's resources and training PowerPoint. Be mindful that the statistics will change over time as you will want to include current data on trends, efficacy, etc.
- Participate in consultation services with Rutgers team as needed.
- Decide if you will deliver all 3 hours of content in one session or over multiple sessions.
- Determine the size of your audience and subsequent training location (if conducting in-person).
- Set training date(s) and send out announcements and registration information (if applicable).
- Revisit the goals of the training.
- Modify the training/re-arrange the slide deck to suit your delivery style.
- Utilize the "Facilitator Checklist for Adult Learning" to help with strategies for content delivery.
- If co-training, decide who will conduct which parts.
- Practice. Consider a "trial run" with a smaller audience of individuals who agree to provide constructive feedback.
- Utilize the Rutgers team for support and assistance throughout the process.

# Tips for Getting Started



# Things to consider...



Engagement



Us vs. Them



"Just shut up and take the lollipop."

Validate concerns



Who's in the room?

# More things to consider...

- Ascertain base level knowledge and understanding prior to training when possible
- Acknowledge differing viewpoints/opinions
- Include “layman’s science”
- Statistics, Statistics, Statistics!
- Stigma reducing activities
- Identify and utilize “champions” (informal leaders)





**Your Questions**



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