

# A HOLISTIC, INTERDISCIPLINARY APPROACH TO SUCCESSFUL REENTRY

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# LEARNING OBJECTIVES

- **1: DESCRIBE PROGRAMMING AND APPROACHES TO TREATMENT THAT ARE PROVEN TO REDUCE RECIDIVISM**
- **2: EXPLORE WAYS THE CRIMINAL JUSTICE SYSTEM CAN ENHANCE FOCUS ON TREATMENT RATHER THAN PUNITIVE MEASURES**
- **3: DISCUSS THE NECESSITY FOR CONTINUITY OF CARE, OR BRIDGE SERVICES, AS INDIVIDUALS TRANSITION BACK TO THE COMMUNITY**

# AGENDA

## Intro

- Quality Correctional Care
- Quality 360 Healthcare Alliance
- Quality RX

## The Nursing Process

- Patient Safety
- Technology
- Continuity of Care
- Discharge

## Medication Philosophy

- Evaluation
- Compliance Considerations
- MAT

## Increasing Access to Treatment

- Increasing Access to Treatment
- Programming
- Future State

# THE NURSING PROCESS

- **ARRIVAL**
  - **INTAKE MEDICAL SCREENING QUESTIONNAIRE**
    - **MEDICATION VERIFICATION**
    - **PROVIDER NOTIFICATION**
    - **ORDER ENTRY**
- **ACCESS TO CARE (J-A-01)**
  - **ACUTE ILLNESS OR INJURY**
  - **ROUTINE HEALTHCARE REQUESTS (24 HOURS)**
- **CHRONIC DISEASE MANAGEMENT**
  - **MENTAL ILLNESS**
  - **CARDIOVASCULAR**
  - **RESPIRATORY**
  - **HIV**
  - **SEIZURES**
  - **HYPERLIPIDEMIA**
- **OTHER**
  - **LABORATORY STUDIES**
  - **DENTAL**
  - **ORTHO**
  - **OFFSITE COORDINATION OF CARE**
- **HEALTHY INDIANA PLAN REGISTRATION COMPLIANCE**
- **DISCHARGE PLANNING**

# MH PROCESS

- SUICIDE MONITORING
- SUICIDE MONITORING FOLLOW-UP (30 DAY PERIOD)
- ALTERED MENTAL STATUS INMATES
- SICK CALL/MENTAL HEALTH REQUESTS
- RESTRICTED HOUSING / SEG REVIEWS
- THERAPY
  - GROUP THERAPY
  - INDIVIDUAL THERAPY
- ONGOING MH TRAINING/CONSULTATION

# CARE CHALLENGES

- PATIENT LIFESTYLE  
NONCOMPLIANCE  
AGING POPULATION
- POOR MEDICAL HISTORIANS  
UNAWARE CURRENT MEDICATION REGIMENS  
POOR RECALL HEALTH HISTORY  
UNTREATED OR UNDIAGNOSED MALADIES
- RECORDS HARD TO TRACK AND EASILY LOST
- LIMITED ON-SITE MEDICAL HOURS
- LIMITED ON-SITE MENTAL HEALTH HOURS
- UNDER-TRAINED CUSTODY STAFF  
TURNOVER
- BUDGETARY CONSTRICTIONS

# ELIMINATING BARRIERS THROUGH TECHNOLOGY

- ELECTRONIC MEDICAL RECORDS  
ACA COMPLIANT BY 2021
- SIGNIFICANT IMPROVEMENT IN CONTINUITY OF CARE AND EFFICIENCY
- ACCESSIBLE BY ALL PROVIDERS ACROSS INDIANA
- CAN VIEW MEDICAL RECORDS FROM OTHER JAILS IN THE QCC NETWORK
- NATIONWIDE MEDICATION QUERY OF RETAIL PHARMACIES
- ELECTRONIC PRESCRIBING OF MEDICATIONS UPON RELEASE

Overview Patient MAR Worksheet Assessment Orders Observations Documentation											
Home Med List			Admission Med Rec			Discharge Med Rec			Medication Orders		
Source	Class	Description	at e	Prescriber	Qty	Days Supply	Refills	Order Date	Last Fill	Pharmacy	
MQ	hormones	ethinyl estradiol-norgestimate triphasic 25 mcg TAB			84	84	2	12/18/20	03/09/21	CVS/pharmacy #6599	
MQ	Unknown	promethazine Oral 25 mg TAB		BEESON,	20	3	1	02/15/21	02/15/21	CVS/pharmacy #6656	
MQ	hormones	predniSONE Oral 20 mg TAB		PETRO, C	14	7	1	01/21/21	01/21/21	CVS/pharmacy #6656	
MQ	hormones	predniSONE Oral 10 mg TAB		BEESON,	30	5	1	12/13/20	12/13/20	CVS/pharmacy #6656	
MQ	central ne	ondansetron Oral 4 mg DT		KEIHN, C	20 ea	5	1	01/10/21	01/10/21	CVS/pharmacy #6640	
MQ	central ne	SUMatriptan Oral 100 mg TAB		BEESON,	9	30	4	12/18/20	02/15/21	CVS/pharmacy #6656	
MQ	central ne	SUMatriptan Oral 100 mg TAB		METZ, MI	3 ea	3	5	01/12/21	02/06/21	CVS/pharmacy #5423	
MQ	central ne	SUMatriptan Oral 100 mg TAB		KEIHN, C	2 ea	2	1	01/10/21	01/10/21	CVS/pharmacy #6640	
MQ	central ne	SUMatriptan Oral 100 mg TAB		METZ, MI	5 ea	3	4	12/27/20	01/03/21	CVS/pharmacy #6656	
MQ	central ne	SUMatriptan Oral 100 mg TAB		METZ, MI	2 ea	2	2	12/15/20	12/18/20	CVS/pharmacy #6599	
MQ	cardiovas	propranolol 80 mg ERC		METZ, MI	30	30	1	12/22/20	12/22/20	CVS/pharmacy #6656	
MQ	anti-infect	clindamycin Oral 300 mg CAP		BEESON,	30	10	1	12/13/20	12/13/20	CVS/pharmacy #6656	



A glass pill bottle is lying on its side, tilted towards the right. Several blue, oval-shaped pills are spilling out of the bottle's opening and are scattered on the surface in front of it. The background is dark and out of focus.

# MEDICATION IN CORRECTIONS

## MEDICATION PHILOSOPHY

- APPROACH TO PRESCRIBING
- POLYPHARMACY
- SIDE EFFECT RISK PROFILES
  - SEDATION
  - DRUG INTERACTIONS
- RISK OF DIVERSION

## MEDICAL EVALUATIONS

- ASSESSMENT COMPONENTS
- INDIVIDUALIZED TREATMENT PLANS



# Compliance Considerations

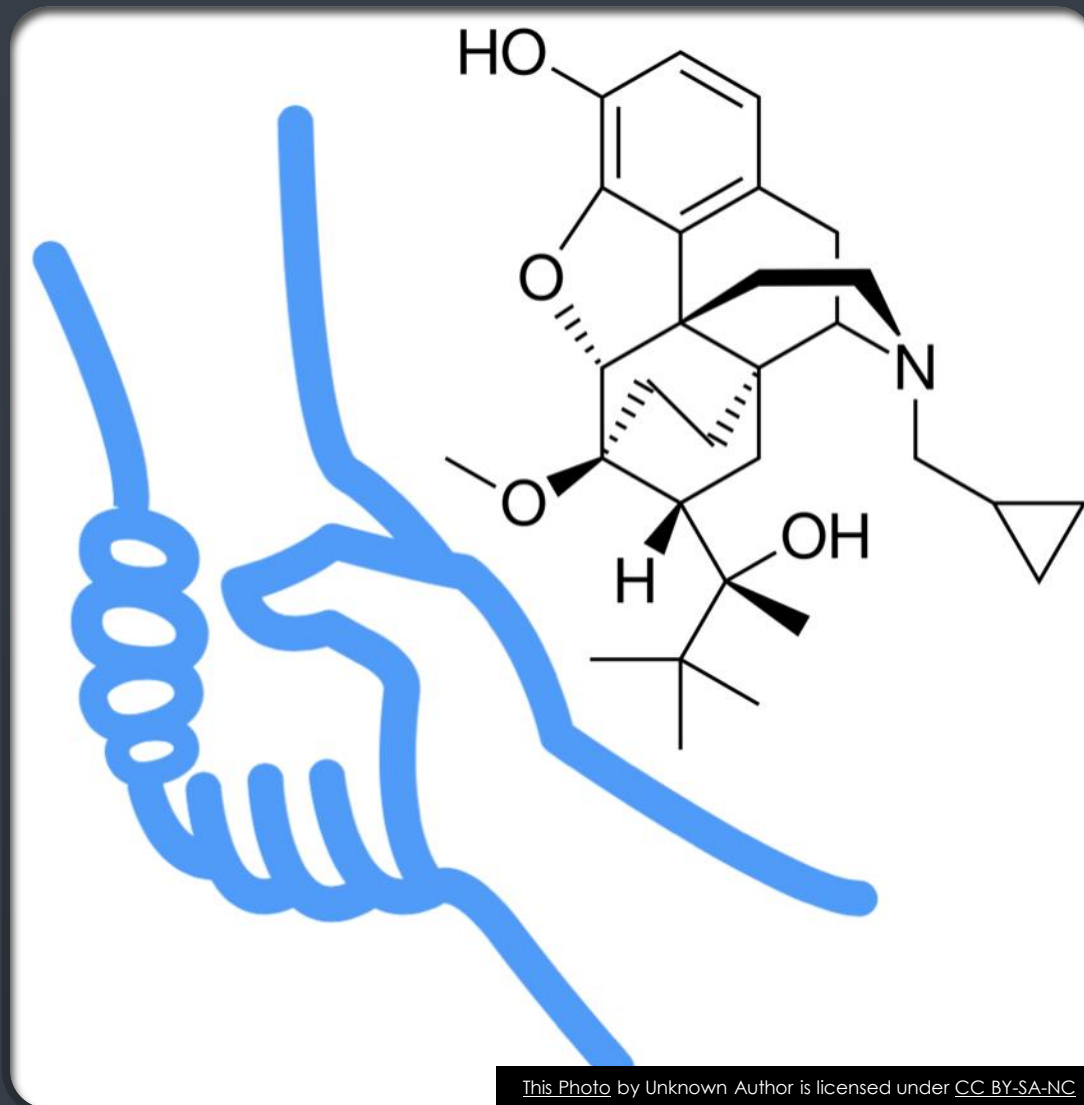
## Affordability/access upon release

- Release with supply
- Cost impacts compliance
- HIP
- Compliance correlates with recidivism

## Ease of regimen

- Injectable Q Monthly or Bi-weekly
- Oral Daily

According to a 2017 NIH study, 49% of psychiatric disorder patients were nonadherent to prescribed medication regimens.



## MEDICATION ASSISTED TREATMENT IN CORRECTIONS

# INCREASING ACCESS TO TREATMENT

## Development of Quality 360 Healthcare Alliance

- Interdisciplinary approach (QCC, QRX)
- Grant funded programs

## Current State

- 28 contracts in Indiana
- More than 250 active participants
- Comprehensive approach to treatment



# GOALS

- ONLY 11% OF INMATES WITH SUBSTANCE USE DISORDER RECEIVE PROPER TREATMENT
- ACUTE STABILIZATION
- THERAPY AND EDUCATION
- INCREASED MEDICATION COMPLIANCE
- CONTINUITY OF CARE
- REDUCE RECIDIVISM
- IMPROVED HEALTH
  - CONTRIBUTING TO COMMUNITY
  - FAMILY MEMBERS
  - EMPLOYEES

# PROGRAMS

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Group Counseling

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Individual Counseling

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Life Skills

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Case Management

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MAT

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JCAP Study Results

# DISCHARGE PLANNING AND REENTRY

Planning for release with case management

Medications provided upon release and prescriptions at local RX or QRX

Medication and Disease Education

Community Resources

Coordination with community providers

Appointments post release



# FUTURE STATE

## Continued expansion of programming

- Addition of peer support
- Increase in frequency/duration
- Access for more participants

## Mobile units

- Monthly site visits
- Access to MD, counselor, case manager

## Diversion as an alternative to incarceration

- Impacts on access to employment, housing, assistance

## Continued expansion of MAT

- Education
- Continuity



# TESTIMONY

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**QUESTIONS?**