The background of the slide features a large, faint, circular seal of the Indiana Department of Correction. The seal contains the text "INDIANA DEPARTMENT OF CORRECTION" around the perimeter and "EMPLOYMENT THROUGH REFORMATION" in the center. It also includes a central emblem with a torch and stars.

TRANSITIONAL HEALTH CARE: USING A HOLISTIC MODEL TO ADDRESS SOCIAL DETERMINANTS OF HEALTH UPON RELEASE

Dr. Kristen Dauss, Chief Medical Officer

April Meggs

Indiana Department of Correction

INDIANA DEPARTMENT OF CORRECTION

MISSION STATEMENT

- We promote public safety by providing meaningful, effective opportunities for successful re-entry to the incarcerated individuals in our care.
- The Division of Parole Services was established within the Indiana Department of Correction in the 1960's severing its relationship with the State Welfare Department. Parole Services is charged with enhancing public safety by providing community-based supervision and services for individuals through the use of evidence-based practices as they transition from a Correctional Facility to Community Supervision. Parole Services Division operates out of ten district offices located across the State.

DISCLOSURE & DISCLAIMER STATEMENTS

- We have the following relevant financial relationship with a commercial interest. Centurion of Indiana is the contracted medical vendor, working in partnership with IDOC Transitional Healthcare.
 - **Disclaimer Statement:**
 - This informational presentation was developed by independent experts. The information provided in this presentation is not the official position or recommendation of NCCHC but rather expert opinion. This information is not intended to be appropriate for every clinical situation nor does it replace clinical judgment.
 - NCCHC does not endorse or recommend any products or services mentioned.

LEARNING OBJECTIVES

- Learning Objective 1: **Summarize the Indiana Department of Correction's Transitional Healthcare model**
- Learning Objective 2: **Examine the correlation between recidivism and social determinants of health**
- Learning Objective 3: **Evaluate the benefits of Transitional Healthcare within a community supervising agency**

TRANSITIONAL HEALTHCARE MISSION STATEMENT

- To provide a meaningful transition to the releasing population by creating a holistic approach to the continuum of care through recognizing individual strengths and barriers related to social determinants of health.

HISTORY OF TRANSITIONAL HEALTHCARE

Prior to September 2019:

- Medicaid Processing Unit and Special Needs Releases under umbrella of Case Management and Re-Entry Services
- Reentry planning under umbrella of Contracted Medical Vendor and Case Management
- Creating band-aid responses to social determinants of health issues

September 2019:

- Establishment of the Transitional Healthcare Department under umbrella of the Medical Division

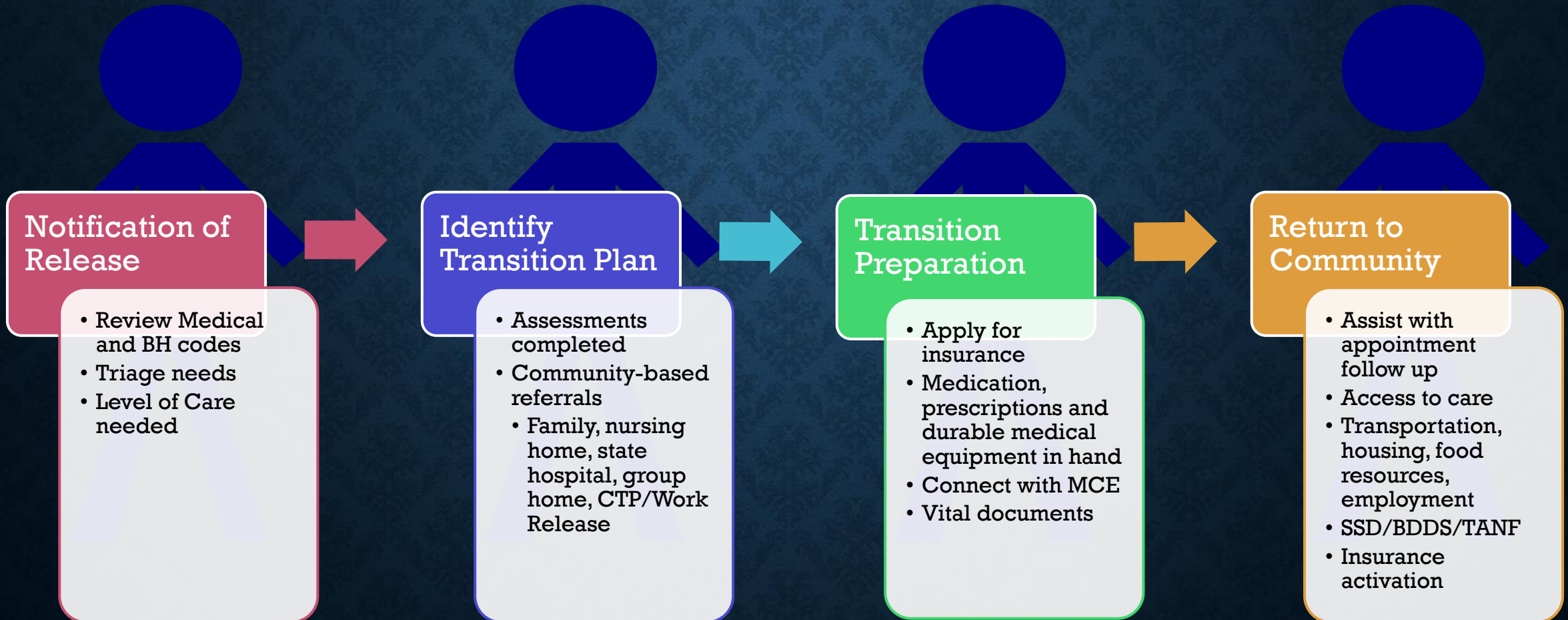


TRANSITIONAL HEALTHCARE TEAM

- IDOC Transitional Healthcare
- Transitional Healthcare Facilitators
- Transitional Healthcare Intake Facilitator
- Transitional Healthcare Liaisons
- Transitional Healthcare Special Needs Liaison
- Maternal Child Health Coordinator

"A successful team is a group of many hands and one mind"

TRANSITIONAL HEALTHCARE



HOW DO WE RELEASE PLAN?

- Triage by medical/behavioral health need
 - Ability to care for oneself
 - Psychotropic injections, prescribed life determining medication, need for durable medical equipment
- Identifying social determinants of health
 - Access to care, quality of care, income level, food insecurity, employment status, racial segregation, gender inequity, education, transportation
- Review time served in IDOC and age
- Releasing location that offers best success for transitional care into community

TRANSITIONAL HEALTHCARE DUTIES AND RESPONSIBILITIES

- Reviewing medical/mental status for release plans
- Assessing level of care needed upon release
 - Nursing home placements
- Applying for Medicaid
- SNAP applications
- BDDS assessment and services
- Locating primary care doctor
- Scheduling mental health appointments
- Ensuring medication available upon release
- Communicating with probation/community corrections about transition plan
- Connecting with insurance company
- Liaise post release with state agencies/community providers
- Providing medical records
- Hep C, HIV Care Coordination
- Advocating in IDOC and the community for continuum of care

Special Needs Report

All Special NeedsMarion County MinorityAll RWI

Instructions

To export a spreadsheet of only your offenders:

First, select the facilities you are responsible for, this will filter both the list of offenders to be released in the next six months as well as the Earliest Release date of the offenders at the relevant facilities.

Next, hover over the offender list, then hover over the arrows in the upper right of the offender list, then click on the icon next to the arrows (Export) to export the offenders at the relevant facilities and release dates as a spreadsheet.

DOCNUM ▲	Last Name	First Name	EPRDT	DOB	Age	Race	Length of Stay	INTKDT	RECVD	Facility
			08/23/2021	02/20/1973	48	WHITE	1.3	08/31/2007	03/10/21	<input type="checkbox"/> PD9
			08/23/2021	06/29/1977	44	BLACK	2.2	05/08/2019	05/08/21	<input type="checkbox"/> RDC
			08/07/2021	09/24/1976	44	WHITE	0.3	03/15/2021	03/15/21	<input type="checkbox"/> RTC
			12/14/2021	10/08/1971	49	WHITE	1.7	10/28/2019	10/28/21	<input type="checkbox"/> SBW
			10/30/2021	06/07/1970	51	AMERICAN INDIAN/ALASKAN	1.6	11/07/2019	11/07/21	<input type="checkbox"/> STP
			10/14/2021	05/27/1980	41	WHITE	9	06/20/2012	06/20/21	<input type="checkbox"/> WCA
			07/09/2021	07/09/1981	40	WHITE	2.4	02/14/2019	02/14/21	
			07/23/2021	09/09/1979	41	BLACK	11.2	10/11/2001	04/15/21	

SPECIAL NEEDS DATABASE

EPRD	DOC	LAST	FIRST	DOB	RECOVERY WORKS	REFERRALS	DME	SPECIFIC MEDICAL	OCMS NOTE	NOTES
07/01/2021				8/4/1966	Recovery Works referral to Aspire Indiana	Peer Recovery referral	None	Release Meds: 13 total (See EMR)	Yes	Hep C email sent out. Handout in Release Portfolio. Provided additional resources in her Release Portfolio.
07/02/2021				1/10/1994	Recovery Works referral to Aspire Indiana	No other referrals requested.	None	Release Med: Zoloft	Yes	Provided additional information in Release Portfolio. Emailed PD7 Liaison info.
07/03/2021				5/24/1985	Recovery Works referral to Centerstone of Indiana	Peer Recovery referral	None	Release Med: Biktarvy - HIV med	Yes	Provided additional information in Release Portfolio.
07/08/2021				1/16/1979	Recovery Works referral to Aspire Indiana	No other referrals requested.	None	Release Med: Entecavir, Prednisone	Yes	Met on 6/08. Discussed placement info on House of Shifra in Anderson. complete Recovery Works referral to Indiana once placement is confirmed in OCMS.
					Assessment scheduled for Aurora Housing in	No other referrals requested.	None	Release Med: None	Yes	Hep C email sent out. Handout in Release Portfolio.

SPECIAL NEEDS TRACKER

HANDOFF TO TRANSITIONAL HEALTHCARE LIAISONS IN THE COMMUNITY

Timelines and policies aligned with Parole to meet released persons based on physical and behavioral health codes

Confirmation of activation of healthcare coverage

Adding new released persons onto caseloads when they experience physical or behavioral health issues post-release

Working directly with Parole Agents, community providers, and Indiana Parole Board to prevent justice responses to social determinants of health

Seeking and expanding available resources by identifying new providers for released persons

Subject matter experts of programs and opportunities for justice-involved individuals in their regions

Providing specialty services via Special Needs Liaison

Being engaged in the counties they serve by volunteering and serving on boards and steering committees

Care coordination, support, education, advocacy after release

PILOT PROJECTS AND SPECIAL POPULATIONS OUTCOMES

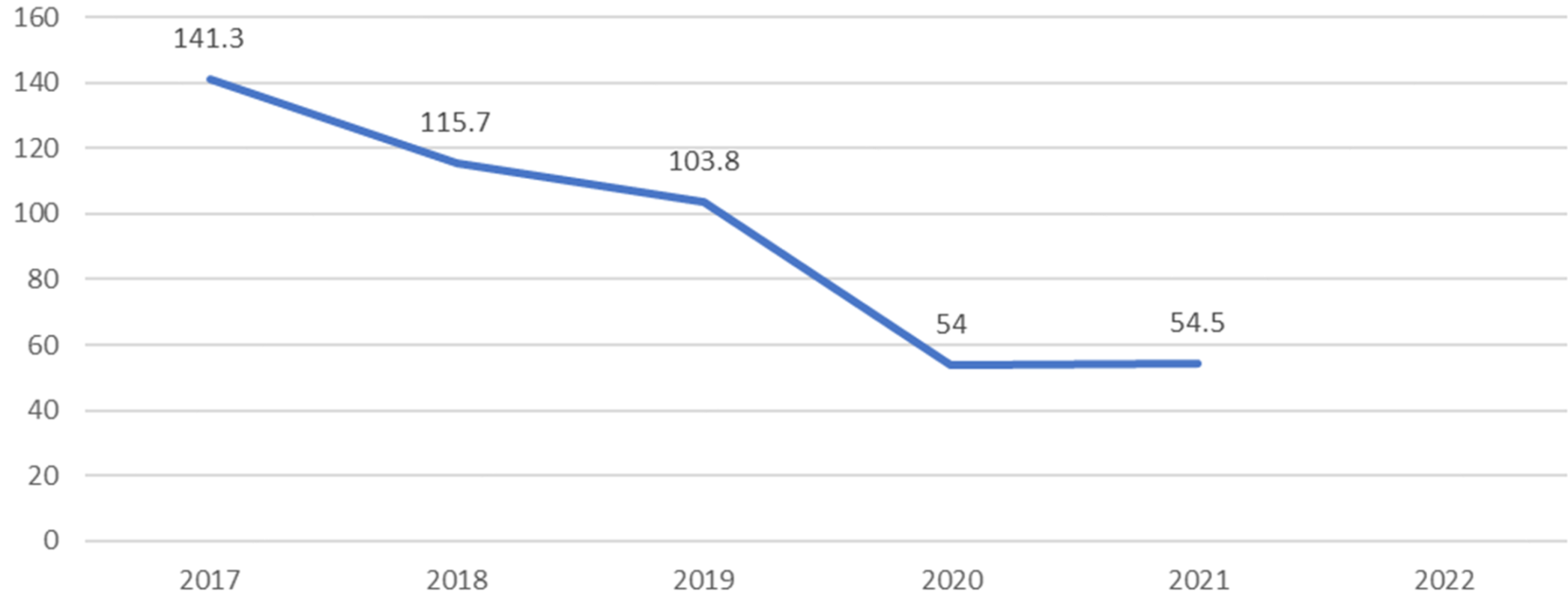
Projects

- Grant County Community Corrections
- Mothers on the Rise
- CareSource
- Naloxone at release
- SMI population care coordination
- Infectious Disease
- Leath Maternal Child Health Unit

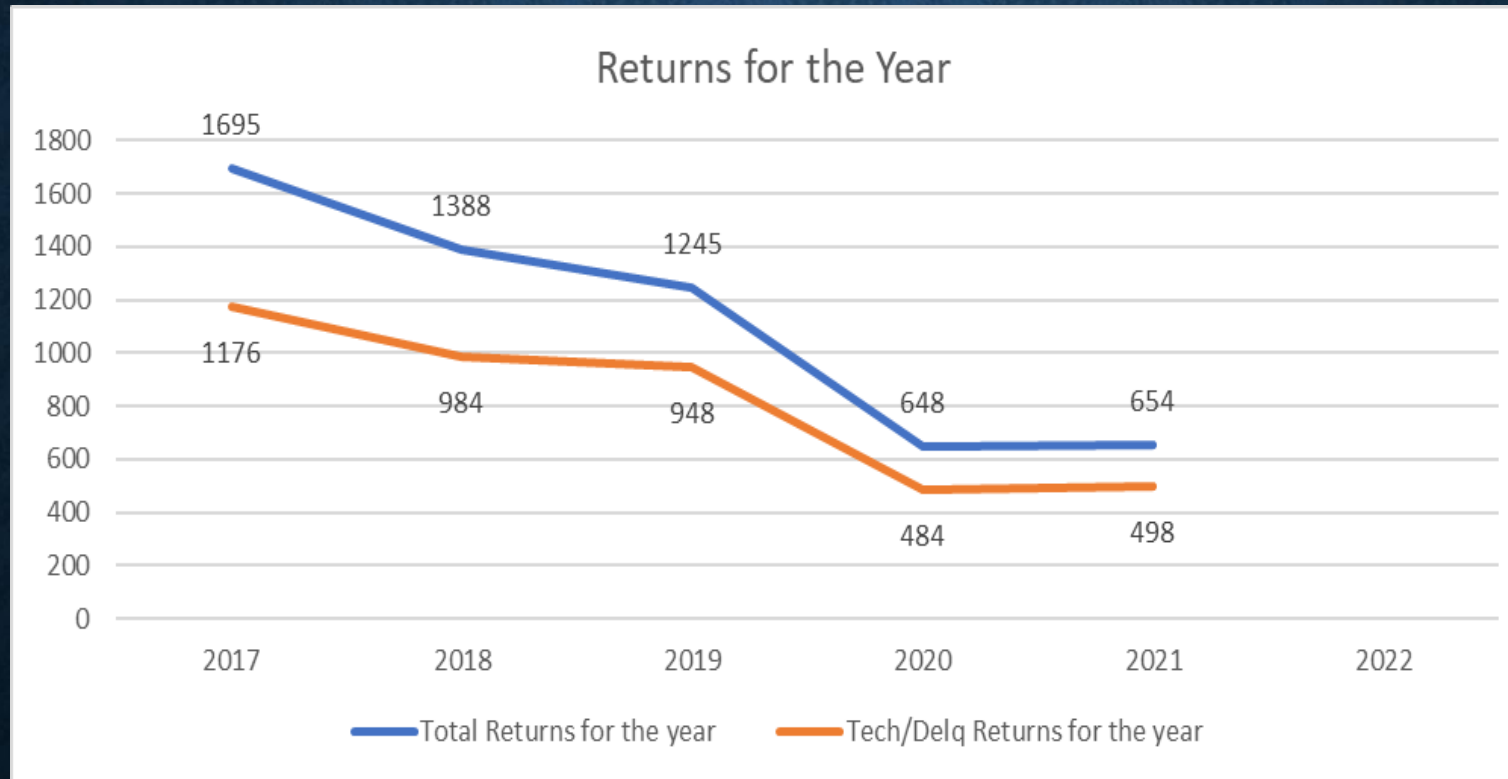
Outcomes

- 57 returns in 2020 to 3 in 2021
- 1 return since 2019
- 31% return rate for returning citizens
- Over 9,400 kits distributed
- Return rates dropped 3%
- Condoms and treatment at release
- Full continuum of care with 1 return

Average No. of Returns per month (Year)



TOTAL AND TECHNICAL RETURNS BY YEAR



PAROLE HOME VISITS

UNDERSTANDING SOCIAL DETERMINANTS OF HEALTH IN THE FIELD





FAMILY

After-hours team-building in Parole District 6 with
THL Shelita

Volunteering in the community by supporting
organizations that serve Indiana's most vulnerable



Staffing cases before meeting released persons

Daily affirmations between Director Keith and ED
Daniel

TROY KEITH DIRECTOR OF PAROLE SERVICES

"I am extremely proud of the partnership between our divisions. It is legitimately changing lives of the individuals we supervise while improving the safety of the public. This holistic approach addresses needs and encourages successful re-entry. We are seeing the results firsthand with a lower recidivism rate and fewer critical incidents in the community."



STEPPING STONES TO EFFECTIVE TRANSITIONAL HEALTHCARE IN PARTNERSHIP WITH SUPERVISING AGENCIES

Integrated,
individualized
healthcare and release
planning

Effective, integrated
communication
between Site Physical
and Behavioral Health
staff, TH, Parole

Proactive decision
making, critical
thinking, and
engagement

Commitment to
addressing social
determinants of health
along with a dedication
to safe releases

Including dedicated
positions in state and
local contracts

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