



Arkansas Community Correction

Two Union National Plaza Building
105 West Capitol, 3rd Floor
Little Rock, AR 72201-5731
501-682-9510 (office) 501-682-9513 (fax)

ADMINISTRATIVE DIRECTIVE: 18-04 Medication Assisted Treatment of Opioid Substance Use

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

APPROVED: _____ Signature on File _____

EFFECTIVE: April 9, 2018

- I. **PURPOSE.** To establish specific guidelines for the Medication Assisted Treatment of opioid substance use disorder offenders.
- II. **APPLICABILITY.** All ACC employees, Correct Care Solutions medical/mental health staff.
- III. **POLICY.** It is the policy of Arkansas Community Correction that the Medication Assisted Treatment (MAT) Program will provide for the initiation of treatment for eligible offenders prior to release once they receive appropriate education. The goals of the program are to increase and improve substance abuse treatment response among offenders prior to release and by this means, reduce relapse and recidivism related to future substance use.
- IV. **DEFINITIONS.**

Medication Assisted Treatment (MAT): Evidence-based substance use treatment approach made possible through prescribing and monitoring medications, along with other recovery supports such as counseling and peer support.
- V. **PROCEDURE.**
 - A. **Medication Assisted Treatment Training and Screening.**
 1. All Treatment Staff and Medical Staff participating in MAT will receive training on the methods to educate residents on the following:
 - a. Eligibility Criteria
 - b. Opioid Epidemic
 - c. Overview of opioid and alcohol dependency
 - d. Understanding types of medications used in MAT
 - e. Overview of the MAT program.

2. At the time of admission to the center, an approved opioid dependence screening tool must be completed by the appropriate treatment personnel.
3. Residents will not be coerced or pressured into receiving treatment in the MAT program at any time.
4. Once a resident is determined to have opioid dependency as indicated on the screening tool, the MAT counselor at the facility will provide education counseling and referral to medical staff if the resident is appropriate for the program.

B. Mental Health Evaluation.

1. During the program, a mental health professional will conduct a formal evaluation of the resident to determine if there are any current acute mental health contraindications before proceeding to a medical evaluation for MAT.
2. Mental health contraindications may include, but are not limited to, patients with current:
 - a. Acute psychiatric diagnosis
 - b. Suicidal ideations or plans
 - c. Mental incompetency for voluntary consent.
3. If any contraindications are identified, the mental health professional must make appropriate treatment recommendations or referrals. The resident may be reassessed when psychiatrically stable.
4. Residents who have no mental health contraindications and have completed the required MAT education will be sent to medical staff for medical consent and initiation of therapy.

C. Medical Evaluation.

1. The Medical Director, or designee, and appropriately trained nursing staff must meet with the resident and review risks and benefits of proposed MAT.
2. Informed consent will be obtained, and any MAT will be prescribed according to written order by the Medical Director.

D. Drug Screens and Initiation of/Continuation of Treatment.

1. A urine drug screen will be obtained prior to initiation of MAT.
2. Upon negative results, the resident will sign consent for treatment and be given the oral challenge medication.

3. The resident will be monitored for signs/symptoms of side effects or adverse reactions to the medication as per manufacturer recommendations. All signs/symptoms will be treated per the established community standard of care.
4. The initial injection of the medication will be initiated 4-5 weeks prior to release for residents in the Center eligible based on length of stay for two doses.
5. The final injection of medication will be provided within seven (7) days of release.
6. Discharge planning and aftercare planning will include information for the resident related to follow up treatment once released from incarceration. Follow up appointments will be scheduled for the resident, and oversight of continued treatment will be monitored according to policy of the accepting physician/treatment provider as well as probation/parole staff upon release.
7. All documentation related to the MAT preparation and initiation of treatment will be forwarded to the accepting physician/treatment facility upon release. ACC probation/parole staff will have access to documentation in eOMIS.

MARKUP – NEW ADMINISTRATIVE DIRECTIVE



Arkansas Community Correction

Two Union National Plaza Building
105 West Capitol, 3rd Floor
Little Rock, AR 72201-5731
501-682-9510 (office) 501-682-9513 (fax)

ADMINISTRATIVE DIRECTIVE: 18-04 Medication Assisted Treatment of Opioid Substance Use

TO: Arkansas Community Correction Employees

FROM: Sheila Sharp, Director

APPROVED: Signature on File

EFFECTIVE: April 9, 2018

I. PURPOSE. To establish specific guidelines for the Medication Assisted Treatment of opioid substance use disorder offenders.

II. APPLICABILITY. All ACC employees, Correct Care Solutions medical/mental health staff.

III. POLICY. It is the policy of Arkansas Community Correction that the Medication Assisted Treatment (MAT) Program will provide for the initiation of treatment for eligible offenders prior to release once they receive appropriate education. The goals of the program are to increase and improve substance abuse treatment response among offenders prior to release and by this means, reduce relapse and recidivism related to future substance use.

IV. DEFINITIONS.

Medication Assisted Treatment (MAT): Evidence-based substance use treatment approach made possible through prescribing and monitoring medications, along with other recovery supports such as counseling and peer support.

V. PROCEDURE.

A. Medication Assisted Treatment Training and Screening.

1. All Treatment Staff and Medical Staff participating in MAT will receive training on the methods to educate residents on the following:

- a. Eligibility Criteria
- b. Opioid Epidemic
- c. Overview of opioid and alcohol dependency

- d. Understanding types of medications used in MAT
- e. Overview of the MAT program.

2. At the time of admission to the center, an approved opioid dependence screening tool must be completed by the appropriate treatment personnel.

3. Residents will not be coerced or pressured into receiving treatment in the MAT program at any time.

4. Once a resident is determined to have opioid dependency as indicated on the screening tool, the MAT counselor at the facility will provide education counseling and referral to medical staff if the resident is appropriate for the program.

B. Mental Health Evaluation.

1. During the program, a mental health professional will conduct a formal evaluation of the resident to determine if there are any current acute mental health contraindications before proceeding to a medical evaluation for MAT.

2. Mental health contraindications may include, but are not limited to, patients with current:

- a. Acute psychiatric diagnosis
- b. Suicidal ideations or plans
- c. Mental incompetency for voluntary consent.

3. If any contraindications are identified, the mental health professional must make appropriate treatment recommendations or referrals. The resident may be reassessed when psychiatrically stable.

4. Residents who have no mental health contraindications and have completed the required MAT education will be sent to medical staff for medical consent and initiation of therapy.

C. Medical Evaluation.

1. The Medical Director, or designee, and appropriately trained nursing staff must meet with the resident and review risks and benefits of proposed MAT.

2. Informed consent will be obtained, and any MAT will be prescribed according to written order by the Medical Director.

D. Drug Screens and Initiation of/Continuation of Treatment.

1. A urine drug screen will be obtained prior to initiation of MAT.

2. Upon negative results, the resident will sign consent for treatment and be given the oral challenge medication.
3. The resident will be monitored for signs/symptoms of side effects or adverse reactions to the medication as per manufacturer recommendations. All signs/symptoms will be treated per the established community standard of care.
4. The initial injection of the medication will be initiated 4-5 weeks prior to release for residents in the Center eligible based on length of stay for two doses.
5. The final injection of medication will be provided within seven (7) days of release.
6. Discharge planning and aftercare planning will include information for the resident related to follow up treatment once released from incarceration. Follow up appointments will be scheduled for the resident, and oversight of continued treatment will be monitored according to policy of the accepting physician/treatment provider as well as probation/parole staff upon release.
7. All documentation related to the MAT preparation and initiation of treatment will be forwarded to the accepting physician/treatment facility upon release. ACC probation/parole staff will have access to documentation in eOMIS.