Supporting and advocating for patients who are engaged in drug court

Elizabeth Salisbury-Afshar, MD, MPH

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Disclosure Information

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3PM April 14, 2023 Elizabeth Salisbury-Afshar, MD, MPH

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Learning Objectives

- Describe the purpose and function of drug courts.
- Talk to patients about legal involvement in a non-judgmental and non-stigmatizing way.
- List 3 ways you can support patients who are engaged in drug court or the broader criminal legal system.



History of Drug Courts in US

- Began in 1989 in Miami FL
- Recognition that many individuals in the criminal legal system:
 - Had SUD contributing to charges
 - Had non-violent crimes
 - Were repeatedly cycling through system





Purpose of Drug Courts

- Serve as an alternative to incarceration
- Key components:
 - Early access to treatment services
 - Court supervision
 - Rewards for progress
 - Sanctions for not meeting program requirements
 - Successful completion can allow underlying offenses to be dismissed





Drug Court Eligibility

Legal screening & clinical assessment should determine appropriateness

- "High risk, high need"
- Not intended for low level possession cases
- Serve individuals with extensive legal histories who are deemed unlikely to do well on standard probation



Drug Courts serve less than 10% of those with drug offenses



Drug Court Structure

- Frequent appearances in court
- Support and encouragement from the drug court team
- Clinical treatment for substance use disorders
- Frequent and random drug tests
- Individualized case management services, connecting participants to employment opportunities, community services, pro-social activities, and education
- Participation over a series of months to years



Drug Court Team





NADCP Best Practice Standards Volume II. <u>https://www.nadcp.org/wp-content/uploads/2018/12/Adult-Drug-Court-Best-Practice-Standards-Volume-2-Text-Revision-December-2018-1.pdf</u>

Client meets eligibility criteria:
✓ High Risk/High Need

Initiation of Treatment:

- ✓ Psychosocial Counseling
- ✓ Medical Assessment and Treatment Plan

Legal Resolution of Case:

- ✓ Pleads guilty/no contest to a charge
- Pre-plea (charge held in abeyance)

The Treatment Court Intake Process



Formal Acceptance into Treatment Court

Failure to complete the program: Case is processed in traditional court





Successful completion of the program: Case closure

Drug Court Distribution

Using The National Drug Court Resource Center (NDCRC) – Interactive Map Locator

Turn on County View





Source: https://ndcrc.org/interactive-maps/

Drug Court Distribution

Using The National Drug Court Resource Center (NDCRC) – Interactive Map Locator

Select the county. Select court type.

Explore the Data:						
US Treatment Courts	Alcohol-Related	Crime Rates	Drug-Related	Veterans	Census	5
Court Type	State	County			United States	Wisconsin 99
All	Wisconsin	∨ Dane	\sim		Total Court Count	State Total Court C
Freatment Courts by Coun	ty			County View 💿 🔵	Wisconsin	
	ĺ				Court Type	Court Cou
					Adult Co-occurring Di	sorder
					Adult Drug	
					Adult Mental Health/V	Vellness
					Adult Other	
					Adult Reentry	
					DUI/DWI	
					Family Treatment	
					Hybrid Drug/DUI	
					Juvenile Co-occurring	Disorder
					Juvenile Drug Treatme	nt
					County Treatment	
					State County	Court Type Co
					Wisconsi Dane n	Adult Drug
					Wisconsi Dane n	DUI/DWI
					Wisconsi Dane	Veterans



Source: https://ndcrc.org/interactive-maps/

Drug Court Research

- Commonly studied outcomes:
 - ♦ Re-arrest
 - Re-incarceration
 - Cost effectiveness
- Typical study design:
 - Not randomized (drug court is opt-in)
 - Typical control groups are standard proceedings (incarceration/probation)



Drug Court Outcomes

- Meta-analyses found reduction in recidivism compared to standard legal processes:
 - Reduce recidivism by an average of 12%
 - Most effective drug courts reduce recidivism by as much as 50%

Limitations:

- Most studies had significant risk for bias
- Significant variability in study outcomes



Mitchell. (2012) et al. <u>https://doi.org/10.1016/j.jcrimjus.2011.11.009</u> Trood et al. (2021). <u>https://doi.org/10.1016/j.jcrimjus.2021.101796</u> Marlowe et al. (2022) https://doi.org/10.1016/j.jsat.2022.108850



Drug Court Best Practice Standards

- Recommend that the clinical assessment directs the treatment plan.
- Recommend drug courts know about MOUD and obtain expert medical consultation.
- Recommend courts allow the use of all FDAapproved medications when prescribed.
- Recommends drug court supports participants to receive social services (housing assistance, mental health treatment, vocational or educational services)



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Ten Key Components

- 1. Integrate SUD treatment with justice processing
- 2. Nonadversarial approach
- 3. Early and prompt identification and entry into drug court
- 4. Continuum of SUD treatment and rehabilitation services
- 5. Frequent toxicology testing
- 6. Coordinated strategy governs court responses
- 7. Ongoing judicial interaction
- 8. Monitoring and evaluation gauge effectiveness
- 9. Interdisciplinary education
- **10**. Community partnerships enhance drug court effectiveness





Drug Court Practices

Drug court adherence to ten key components varies widely.

 Drug courts with high fidelity implementation are more effective and reduce recidivism by up to 40% compared to traditional probation.

 Survey of drug courts in high opioid mortality communities found (N=169):

- 75% rely principally on medical judgement for medication decisions
- ◆ 73% provide access to all 3 FDA-approved MOUD
- ◆ 80% provide naloxone training & 62% provide naloxone kits
- $\frac{1}{4}$ to $\frac{1}{2}$ of clients with OUD receive MOUD
- ◆ 36% of jails in these communities do not offer agonist MOUD



Supporting Patients in Drug Court



- Part of the standard intake process
 - Use non-stigmatizing language
- Provide rationale for why you are asking, namely to:
 - Support the patient
 - Understand:
 - Any treatments recommended or discouraged
 - Available services and resources through court/probation/parole



When a patient is justiceinvolved, ask questions related to:

Outstanding Charges





When a patient is involved in the criminal legal system, ask....

Outstanding Charges

- What is the anticipated outcome?
- Which county?
- If jail time is anticipated, when?
 - Does the jail allow MOUD?



When a patient is involved in the criminal legal system, ask....

Parole or Probation

- For what length of time?
- Does probation/parole officer know you are engaging in SUD treatment?
- Is the officer aware/supportive of medications for addiction treatment?



When a patient is involved in the criminal legal system, ask....

Treatment Court

- Has the court recommended/required a specific treatment provider?
- What is the Judge's stance on medications for addiction treatment?



Strategies to Support Patients with Legal Involvement

• Offer to:

- Write a letter describing engagement in (SUD) care.
- Coordinate services with court-mandated treatment provider.
- If the Judge or probation/parole officer does not support MOUD, offer to:
 - Write a letter explaining diagnosis and recommending medication.
 - Share resources with court (written or verbally).
 - Call court representative with patient to discuss recommended treatment.





Sample Letter



To Whom it May Concern:

Jane Doe has been under my care for her opioid use disorder for the past 1.5 years. During this time, she has been experiencing homelessness and was experiencing intimate partner violence. While homeless, her drug use escalated, and she was charged with drug-related offenses. Jane is no longer with her previous partner, and she recently got housing through a county program. She is very interested in drug court and is highly motivated to abstain from drug use and hopes to get a job. Our clinic will continue to work with Jane on her psychiatric, SUD, and primary care needs.



Advocating for Evidence-Based Treatment In your Community

- *Reach out to the treatment court team:*
 - Clarify their stance on MOUD.
 - Offer to email resources on evidence behind MOUD.
 - Offer to meet with the treatment court team to give a presentation or answer questions.
- *Reach out to the intake assessment agency:*
 - Clarify their stance on MOUD.
 - Clarify their roles within drug court.
 - If the patient agrees and a signed release is on file, offer to coordinate care.



Resources:

- ASAM Public Policy Statement- Access to Medications for Addiction Treatment for Persons Under Community Correctional Control
- National Association of Drug Court Professionals (NADCP) Standards- Adult Treatment Court Best Practices



Coordinating Services with Courts or Court-Assigned Treatment Provider

- Requires a signed release of information (ROI).
 - Should be as specific as possible.
- If broad release is signed, it is possible the other party can get records without patient or clinician awareness in future.
- The court-mandated treatment provider reports back to the court system.





Discussing Release of Information

Ensure the patient understands what the release includes:

- Specific time periods
- Types of records and labs

If a patient wants to revoke a release, it should be done <u>in</u> <u>writing</u>.

 Revoking an ROI can have legal implications if it was part court of agreement





42 CFR 164.508(5) https://www.govinfo.gov/content/pkg/CFR-2018-title45-vol1/pdf/CFR-2018-title45-vol1-sec164-508.pdf Photo purchased from istock

Benefits and Risks of Release of Information

Potential Benefits

- Can allow the clinical team to share relevant information with the treatment court.
- Allows treatment court to have a better understanding of patient engagement in treatment.



Potential Risks

- May disrupt patient-clinician trust and therapeutic alliance.
- May make it harder for patient to be open about drug use.
- It is difficult to know how information you provide may be used in court.





Alternatives to Release of Information

- Understand what information the court needs/wants.
- Draft a letter that the patient can review/deliver.
- Call the court professional with the patient during an office visit.
 - Discuss goals of the call with the patient prior to the call.
 - Be clear about what you have permission to discuss.



Being a Good Partner with Treatment Courts

- Be clear about boundaries
 - If releasing information will damage therapeutic alliance with patient, let the court know your concerns.
- Offer to send resources describing evidence behind recommended services.
- Remember: The goal for all parties is to support the patient to receive evidencebased addiction treatment, support recovery and avoid incarceration.





Planning for Anticipated Jail Time

When patients know about jail time in advance, it's helpful to:



Find out which medications are allowed in jail (MOUD and psych)



Find out if patient needs to bring own medications and coordinate with jail.



Send medical diagnoses and a medication list to jail (with signed ROI).



Discuss whether the patient wants to sign additional ROI for care coordination while incarcerated.



Planning for Anticipated Jail Time

If MOUD is **not** allowed to be continued:

- According to the Department of Justice, not allowing someone to continue prescribed MOUD while incarcerated is a violation of the Americans with Disabilities Act (ADA).
- Encourage the patient to report case to the Department of Justice (DOJ) or have patient sign release so you can submit on their behalf.





Small Group Case Discussion

- Joe is a 28-year-old man experiencing homelessness who was treated in the ER after survinging an opioid ovedose and and started on buprenorphine.
- He is following up in your clinic one week later to continue buprenorphine. He's reports doing well.
- He lets you know that he was referred to treatment court by the arresting officer and is currently on probation, at risk of going back to jail. Joe is scheduled to be in court in seven days.
- The prosecutor determines that Joe fits within legal criteria to enter treatment court and will agree to treatment court instead of moving forward with the probation violation.



Small Group Case Discussion

- Joe was assessed with severe OUD, and the SUD court counselor recommends acceptance into treatment court with IOP placement.
- Joe confirms with his defense attorney that he is open to entering treatment court and understands the conditions and requirements of the program.
- The Judge has voiced concerns about Joe's prescribed medication, mentioning that the MOUD he prefers in his court is XR Naltrexone.
- The SUD treatment provider on the team reaches out to you about the Judge's MOUD preference for XR Naltrexone.



Small Group Case Discussion

Discussion Questions:

- 1. What information can you provide to educate the Judge and advocate for your patient to remain on buprenorphine?
- 2. What resources can you offer?
- 3. In addition to prescribing medication, how can you support Joe in meeting his goals for recovery?



Small Group Debrief



Final Takeaways/Summary

- Standardize intake forms to ask about legal involvement in a non-judgmental and non-stigmatizing way:
 - Ask permission to collect this information.
 - Explain it is being collected to support their care.
- Discuss the potential benefits and risks of completing release of information for treatment court:
 - Inform patients of their right to revoke a previously completed release of information (depending on circumstances could have legal repercussions).
- Advocate for evidence-based treatment for all patients who are court-involved.



For more information:

Integrating Addiction Medicine with Treatment Courts

<u>FREE</u> educational activities to learn how to integrate appropriate addiction treatment for patients involved in treatment courts and the legal system:

1.Integrating Addiction Medicine with Treatment Courts Course (6 Hours)2.Office Hour Mentoring Sessions (1 Hour each)3.Learning Community

Sign-up here: https://elearning.asam.org/treatment-courts

ASAM has partnered with the National Association of Drug Court Professionals (NADCP) through an Office of National Drug Control Policy (ONDCP) grant initiative to allow medical providers active with and new to the drug treatment court field access to training to help guide them in the successful integration of services for individuals with substance use disorders involved in the justice system.

