## NAPHCARE'S EXPERIENCE WITH OPIOID-ADDICTED PATIENTS IN JAILS

## How has the opioid issue impacted NaphCare?

The opioid epidemic is severely impacting NaphCare's patient population. Each year NaphCare supervises thousands of patients through the dangerous process of withdrawing from opioids, and also administers opioid maintenance medication to opioid-addicted, pregnant patients. Our opioid addicted patients are at risk of the following:

- Death by overdose, either upon entry to jail while under the influence of opioids, or through use of illegal drugs smuggled into the jail and used by our patients while incarcerated;
- Death during opioid withdrawal as a function of complications from the withdrawal process;
- Death by overdose after release from jail, as a function of patients returning to a high dose of illegal opioids after a period of non-use while incarcerated;
- Risks to the developing fetus and complications after birth as a function of fetal abstinence syndrome.

## What is Naphcare seeing in jails?

As of July 2017 NaphCare provided comprehensive, proactive healthcare to a total average daily population of 25,371 patients in 23 jails. As of July 2017, 2,999 of these NaphCare patients (almost 12%) were being monitored during opiate withdrawal using COWS (Clinical Opiate Withdrawal Scale). As opposed to past views, the medical community now recognizes that opioid withdrawal can be life threatening.

The severity of the epidemic varies by region. For example, NaphCare provides patient care at three jails in Ohio – in Montgomery, Hamilton and Franklin Counties – that are at the epicenter of the opioid addiction crisis. These jails have extremely high levels of opioid-addicted patients. In July 2017 NaphCare had 246 patients out of a total population of 840 on COWS monitoring at the Montgomery County, Ohio jail. On the other extreme, NaphCare had only 1 out of 243 patients on COWs monitoring at the Black Hawk County, Iowa jail.

NaphCare also has a considerable number of opioid-addicted pregnant patients who require opioid maintenance therapy to prevent opioid withdrawal, which could trigger miscarriage or other complications of a developing fetus.

<sup>&</sup>lt;sup>1</sup> NaphCare services a substantial additional population of inmate patients by providing its award-winning Electronic Health Record *Tech*Care® to counties that directly employ a health care staff to provide health care to the inmate population.

NaphCare also routinely administers Narcan to incarcerated patients to prevent overdoses. So far during this fiscal year (October 2016 to June 2017), NaphCare dispensed 346 doses of Narcan — placing it in the top 30 drugs NaphCare has administered at its 23 jails. NaphCare staff members have saved numerous lives through administration of Narcan. For example, earlier this year, one of NaphCare's nurses at the Spokane County, Washington jail had to administer Narcan to save a patient during an intake screen. Our nurse was alerted to a potential problem when she noticed that the patient was taking longer than expected to provide a urine sample. She entered the restroom to find the patient passed out on the floor with several blue pills — hydrocodone — in her hand. Our nurse resuscitated the patient and provided Narcan, saving the patient's life. Unfortunately, this kind of life-saving administration of Narcan is not an infrequent occurrence.

## What is Naphcare doing to combat the epidemic of opioid abuse?

NaphCare has grown increasingly concerned that the traditional opiate detox protocol, which consists of COWS monitoring and administration of comfort medications, is insufficient to protect the lives and health of our patient population. NaphCare has tested a new supervised withdrawal protocol at the Washington County (Hillsboro), Oregon jail. The central feature of the new protocol is the administration of a five-day taper using buprenorphine (Subutex). The protocol also calls for close supervision and monitoring of patients and administration of electrolyte containing fluids.

NaphCare is working to expand its base of providers who hold the required license to prescribe buprenorphine. NaphCare is working to expand its ability to maintain pregnant patients on buprenorphine or methadone while incarcerated; to work with our partners in corrections to develop centralized "detox units" wherever possible; to enhance our staff training regarding detox assessment and management; and to expand its new Washington County buprenorphine detox protocol to other jails wherever possible.

NaphCare also engages in discharge planning activities to guide inmates to community resources upon release. In some locations, NaphCare works in partnership with corrections to administer Vivitrol shots to inmates who elect to receive this medication to reduce opioid cravings upon initial re-entry into the free world. In terms of release planning, NaphCare prefers endeavors to provide patient education upon discharge. Ideally, patients released from jail would be given the choice to pursue an appropriate medication assisted treatment option, either a maintenance approach (methadone or buprenorphine) or use of Vivitrol, together with addiction counseling, drug rehabilitation and other needed services.