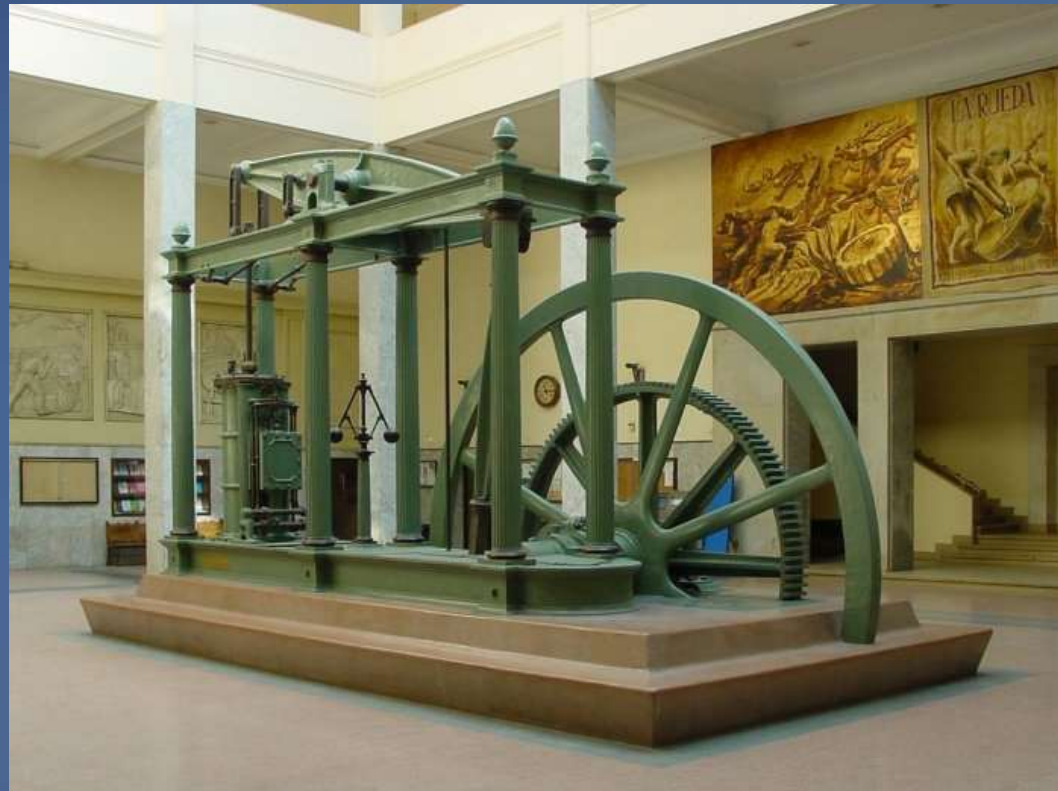


# The Opiate Alert Project

## Saving Lives through the Cooper Initiative

Presented by  
Craig A Cooper MS CADC  
Director of Operations, TASC Inc.  
May 5, 2015

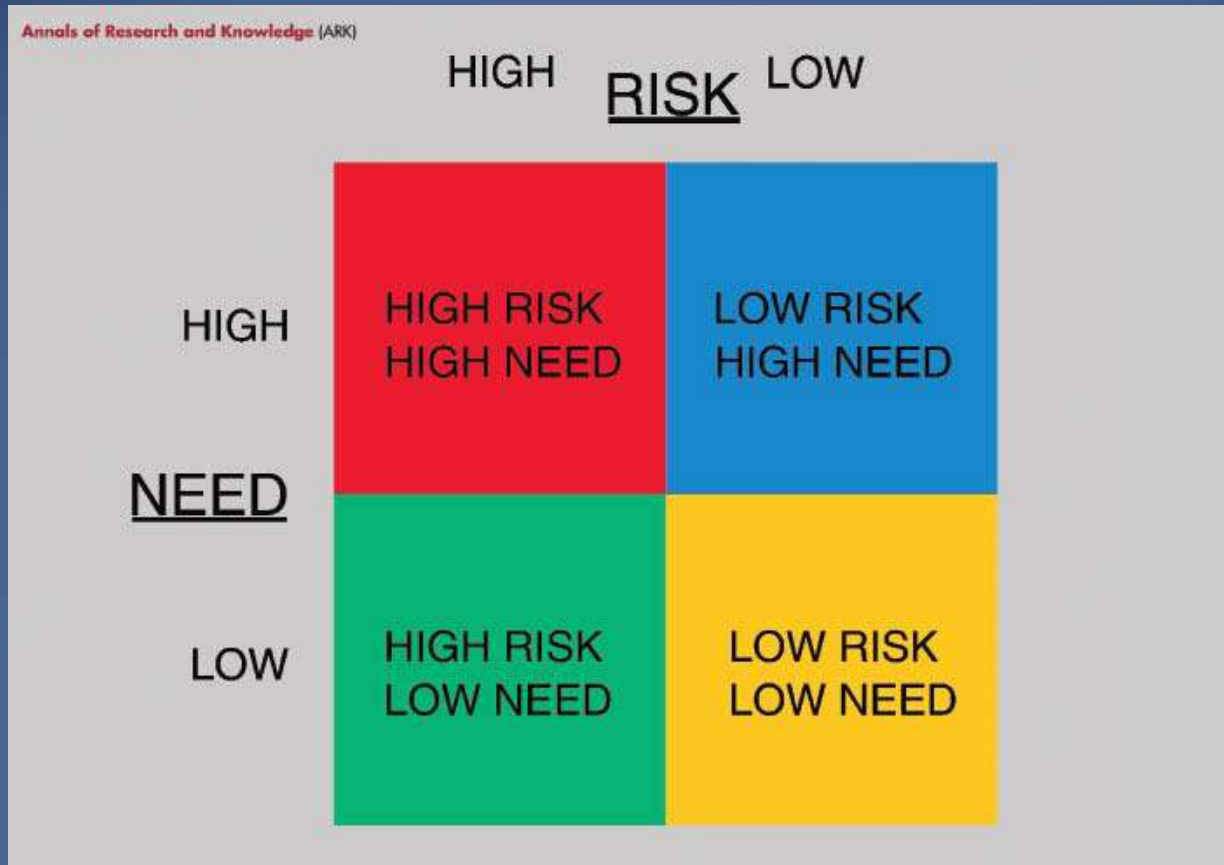
# Advances in Science and Research Have Revolutionized Our Fundamental Views of Drug use and Addiction



Each one of us are uniquely wired and  
require individual custom approaches



# Dr. Doug Marlowe



# The Madison County Opiate Alert Project

- Based on Research
- Foundation in Trust
- Simple and Action Oriented
- Goal to Reduce Death

# Grass Root Application

- Several research studies showing a significant risk for death of the opiate addicted person leaving a structured environment such as jail or treatment in the first 2 weeks. The average mortality rate for death for “any reason” upon the first two weeks of release is 12 times greater than the the general population and **129 times** greater risk for the opiate addicted individual.

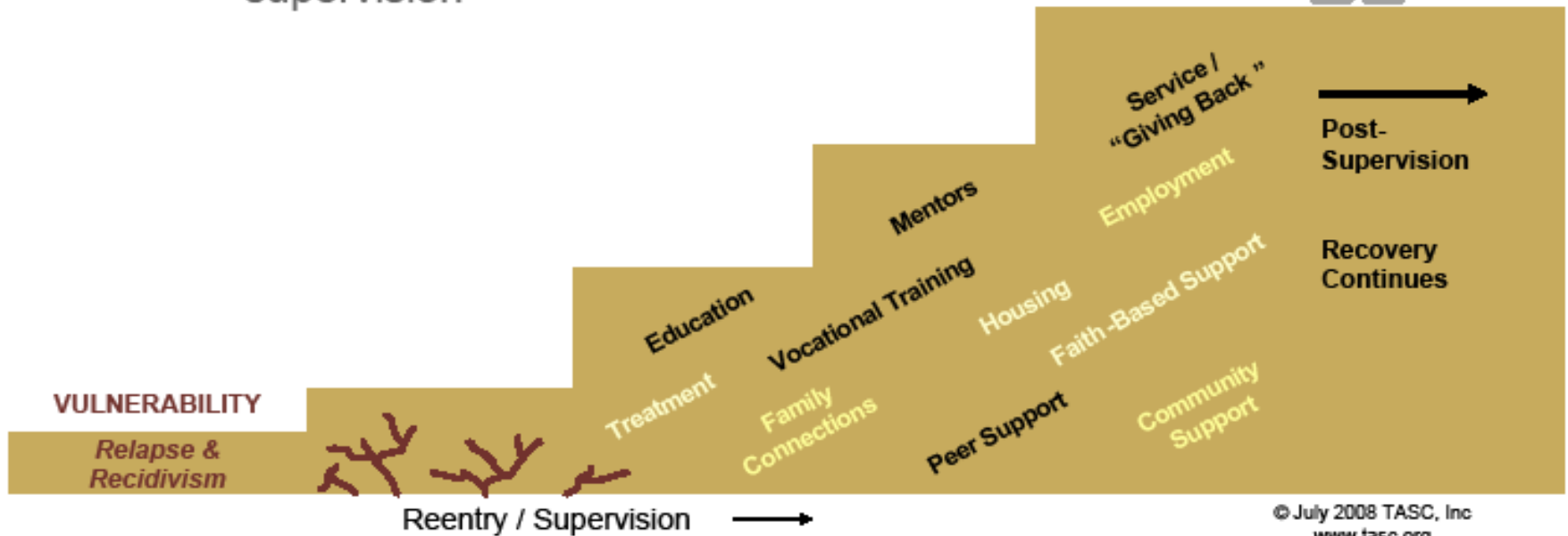


# Research articles related to Death Risk after release

- <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3329888/>
- 
- Binswanger IA, Stern MF, Deyo RA, Heagerty PJ, Cheadle A, et al. Release from prison—a high risk of death for former inmates. N Engl J Med. 2007;356:157–65. [[PMC free article](#)] [[PubMed](#)]
- 
- Seaman SR, Brettle RP, Gore SM. Mortality from overdose among injecting drug users recently released from prison: database linkage study. BMJ. 1998;316:426–28.
- 
- <http://www.ncbi.nlm.nih.gov/pubmed/17668280>
- 
- <http://www.esciencecentral.org/journals/connections-program-patients-a-descriptive-analysis-of-the-reintegration-needs-of-incarcerated-substance-users-2329-6488.1000133.pdf>

## Building Recovery Capital


Participant strengthens personal capacity & community supports to help maintain recovery beyond supervision






# The Cooper Initiative

- Strategy #1:
- Incarcerated Individuals
- **TASC Population at Risk:** Recently released from incarceration and a past user or abuser of opioids (and presumably with reduced opioid tolerance and high risk of relapse to opioid use)

- 
- The logo for Treatment Alternatives for Safe Communities (TASC) is positioned vertically on the left side of the slide. It consists of the letters 'TASC' in a large, bold, serif font, with a large 'O' above it, all in a light blue color.
- **IT Strategy:** TASC will use data in the ECR to identify this at-risk population using 1) incarceration status; and 2) one or more of the following - drug test results (internal & external), TCU Drug Screen Results, and TASC substance abuse data for drug of choice.

- The strategy for “Incarcerated Individuals” contains two levels of risk management: 1) *Incarcerated at Risk* clients will be put on a “Incarcerated Opioid at Risk Watch List” that will indicate to case managers to closely track an individual’s release date

- 
- The logo for Treatment Alternatives for Safe Communities (TASC) is positioned vertically on the left side of the slide. It consists of the letters 'TASC' in a large, bold, serif font, with a stylized 'O' above it. The letters are a light blue color, matching the background.
- 2) *Recently released from incarceration clients*, whom are at the highest risk for Opioid overdose, will be put on a “Newly Released from Incarceration High Risk List” that will indicate the need of critical intervention services from TASC case managers, treatment, and probation personnel and potential family members.

**Incarcerated Opioid at Risk Watch List:**  
*Clients on this list are determined to be actively incarcerated and have an indicator of previous Opioid use.*

- The List: ECR Flag Report that both the active Case Manager and the Supervisor can see

- Affirmative ECR Fields:
  - Incarceration: Profile Screen –  
*Current Living Situation*: =  
“incarcerated” (**Question:** If the  
*Current Living Situation* is null; and  
there is an indication of Opioid Use;  
and the Referral Screen =  
Incarcerated at Time of Referral, and;



## – Opioid Use:

- **TCU Drug Screen:** 1. How Often in the Last Month: f. Heroin & Cocaine; h. Heroin; j. other opiates; and/or
- **TASC Drug Test:** Positive for Opiate; and/or
- Referral Screen: **Non TASC Drug Testing History** = Positive Opiate; and/or
- Assessment: **Drug History** - Primary, or Secondary or Tertiary Drug = Heroin; and/or Opiates and/or other synthetics; and/or Prescription Opioids

- Removal from List: The client comes off the Incarcerated Opioid at Risk Watch List once the client is released from incarceration. (Note: at this point the client is immediately placed on the Newly Released from Incarceration High Risk List)

**Newly Released from Incarceration High Risk List**  
***Clients on this list are determined to be recently released from incarceration, within 14 days, and have an indicator of previous Opioid use***

- The List: ECR Flag Report that both the active Case Manager and the Supervisor can see.
- Affirmative ECR Fields:
- Incarceration: Profile – *Current Living Situation*: = “anything but incarcerated” and whose immediate previous *Current Living Situation* = “incarcerated”; and

## – Opioid Use:

- **TCU Drug Screen:** 1. How Often in the Last Month: f. Heroin & Cocaine; h. Heroin; j. other opiates; and/or
- **TASC Drug Test:** Positive for Opiate; and/or
- **Referral Screen: Non TASC Drug Testing History = Positive Opiate; and/or**
- **Assessment: Drug History - Primary, or Secondary or Tertiary Drug = Heroin; and/or Opiates and/or other synthetics; and/or Prescription Opioids**

- Removal from List: The client comes off the Newly Released from Incarceration High Risk List once 14 days has expired from the release of incarceration or the client has been placed into a residential LOC.

## Strategy #2:

### Inpatient Detox & Treatment Discharge

- **TASC Population at Risk:**  
Completing mandatory opioid detoxification or abstinent for a period of time (and presumably with reduced opioid tolerance and high risk of relapse to opioid use).



- **IT Strategy:** TASC will use data in the ECR to identify this at-risk population using 1) treatment placement status; 2) Provider Program Modality; and 3) one or more of the following - drug test results (internal & external), TCU Drug Screen Results, and TASC substance abuse data for drug of choice. The strategy for clients placed into inpatient detox or treatment contains two levels of risk management

- 1) *Inpatient clients* will be put on an “Inpatient Opioid at Risk Watch List” that will indicate to case managers to closely track an individual’s upcoming discharge date; and
- 2) *Recently released individuals from inpatient services*, whom are at the highest risk for Opioid overdose, will be put on a “Newly Discharged from Inpatient Services High Risk List” that will indicate the need of critical intervention services from TASC case managers, treatment, and probation personnel and potential family members.

# Inpatient Opioid at Risk Watch List

- *Clients on this list are determined to be admitted into inpatient services and have an indicator of previous Opioid use.*

- 
- The List: ECR Flag Report that both the active Case Manager and the Supervisor can see.
  - Affirmative ECR Fields:
    - Treatment Status: Placement Screen
      - *Current Status* = “admitted” and *Discharge Date* is “null”; and
    - Treatment Modality: Placement Screen – Modality = “Half-way House”, or “Methadone Detox”; or “Regular Detox”, or “Residential”; and

## – Opioid Use:

- **TCU Drug Screen:** 1. How Often in the Last Month: f. Heroin & Cocaine; h. Heroin; j. other opiates; and/or
- **TASC Drug Test:** Positive for Opiate; and/or
- **Referral Screen: Non TASC Drug Testing History = Positive Opiate; and/or**
- **Assessment: Drug History - Primary, or Secondary or Tertiary Drug = Heroin; and/or Opiates and/or other synthetics; and/or Prescription Opioids**

- Removal from List: The client comes off the Inpatient Opioid at Risk Watch List once the client is released from incarceration. (Note: at this point the client is immediately placed on the Newly Discharged from Inpatient Services High Risk List)



# Newly Discharged from Inpatient Services High Risk List

- *Clients on this list are determined to be recently discharged from inpatient SUD services, within 14 days, and have an indicator of previous Opioid use.*
- The List: ECR Flag Report that both the active Case Manager and the Supervisor can see.

- Affirmative ECR Fields:
  - Treatment Status: Placement Screen
    - *Discharge Date* is “with 30 days of current date”; and
  - Treatment Modality: Placement Screen – Modality = “Half-way House”, or “Methadone Detox”; or “Regular Detox”, or “Residential”; and
  - Opioid Use:
    - **TCU Drug Screen:** 1. How Often in the Last Month: f. Heroin & Cocaine; h. Heroin; j. other opiates; and/or
    - **TASC Drug Test:** Positive for Opiate; and/or

- Referral Screen: **Non TASC Drug Testing History** = Positive Opiate; and/or
- Assessment: **Drug History** - Primary, or Secondary or Tertiary Drug = Heroin; and/or Opiates and/or other synthetics; and/or Prescription Opioids
- Removal from List: The client comes off the Newly Discharged from Inpatient Services High Risk List once 30 days has expired from the *Discharge Date*

# Effective Tools Used Today

- Advanced Technology (TASC Internet Based Supervision)
- Research Informed Interventions
- Medication -Assisted Therapy

- Contact Information

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- 618-420-1979

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