

MCHENRY COUNTY | 701.537.5732

BOTTINEAU COUNTY | 701.228.3101 MCLEAN COUNTY (GARRISON) | 701.463.2641 BURKE COUNTY | 701.377.2316 | MCLEAN COUNTY (WASHBURN) | 701.462.3330 | WARD COUNTY (KENMARE) | 701.385.4328

SHERIDAN COUNTY | 701.363.2506 RENVILLE COUNTY | 701.756.6383 WARD COUNTY (MINOT) | 701.852.1376

The following is the collaborative plan with Ward County, City of Minot, and First District Health Unit (FDHU). This plan was developed by the Ward County Opioid Taskforce established by the Ward County Commission and led by FDHU. Ward County has committed their opioid settlement funds to a Medication for Opioid Use Disorder (MOUD) program in the Ward County Detention Center. The City of Minot will be transferring their opioid settlement funds to First District Health Unit as outlined in the 2025 service agreement between FDHU and City of Minot. FDHU will then transfer the funds to Ward County for implementing the MOUD program established by Ward County.

If you have any questions, you can contact: **Holly Brekhus** First District Health Unit 701-721-9110

# Ward County Opioid Task Force Opioid Settlement Funds Plan

#### Update-9/30/24

The Ward County Opioid Task Force has been meeting for the past several months to develop and implement a plan to use the Opioid Settlement funds. The Task Force decided that these funds would be concentrated in the Ward County Detention Center (WCDC) for Inmates who are currently in recovery for Opioid Use Disorder (OUD) or those inmates in need of Medications for Opioid Use Disorder (MOUD).

#### Goals

- 1. Training for Officer on recognizing the symptoms of Detox
- 2. Training for Officers for accessing the need for MOUD
- 3. Continuing treatment and peer support for Inmates that come into the facility that are currently receiving a MOUD
- 4. Induction of a MOUD to inmates that are in need and follow-up treatment/peer support
- 5. Provide guidance to inmates upon release of where they can go to get services for OUD
- 6. Provide Data that shows the success of the program
- 7. Reduce overdoses of inmates released from jail
- 8. Reduce recidivism in the community and re-integrate the inmates back into society with the tools to deal with their substance use disorder.

There are many different agencies that have offered assistance to meet these goals.

#### **First District Health Unit**

First District Health Unit has been responsible for coordinating the meetings and bringing all of the different organizations together.

#### **City of Minot**

They will provide technical support that will track the success of the program.

#### **Community Medical Services (CMS)**

In 2017, Ward County entered into an agreement with CMS to provide Methadone inside the facility. CMS provides doses for inmates who are currently enrolled in their MOUD program. We are in the initial talks for CMS to provide Tele medical appointments for admissions into their program. We may need another contract for them to provide evaluations and Treatment plans. They have offered to come up with a screening tool for inmates that may be a candidate for induction and to provide assistance in tracking the inmates that are participants when they leave the Detention Center.

#### **Quality Health Associates of ND**

Quality of Health Associates of ND help set up a virtual meeting with the DOCR Correctional Health Authority of the Department of Corrections-Stephanie Gravning, MD. She was very interested in our progress and will provide resources for training.

#### **North Central Human Service Center**

North Central Human Service Center has a provider who is able to prescribe Suboxone. If we were to provide this service in the jail, it would be through a telehealth platform. There would be some concern about capacity and timeliness of appointments as we currently only have one provider who is able to prescribe Suboxone and he is split between two centers.

It is critical in my opinion that treatment for the incarcerated individuals not only include Medication for Opioid Use Disorder, but more comprehensive treatment to include services from a Licensed Addiction Counselor. This would include a proper evaluation by a Licensed Addiction Counselor to establish a needed level of care based on ASAM criteria. Depending on that level of care recommendation, individuals need access to groups and individual sessions to treat their opioid use.

North Central is working towards a designation as a Certified Community Behavioral Health Clinic. Part of this designation will allow us to enhance our Care Coordination efforts. I anticipate that we would have the ability to strengthen our presence within the jail and help facilitate an individual's transition from incarceration to treatment at the human service center. I anticipate that we would have a Care Coordinator in place within the next 4-5 months.

## **Management and Training Corporation (MTC)**

The WCDC has twelve inmates from the ND Department of Corrections that are serving the remainder of the sentencing and are working in the community. MTC is providing treatment for these individuals outside of the jail. There may be a possibility of MTC providing some in house group treatment for a specific inmate population.

## Minot Area Recovery Community Organization (MARCO)

A MARCO representative will be joining the Task Force for the next meeting. There may be some additional funding available for justice-involved individuals with substance abuse disorders through the Bureau of Justice Assistance/Department of Justice. They may be able to offer some peer support.

#### **Ideal Options**

Ideal Options offers MOUD care to facilitate diagnosis and treatment of OUD.

#### **ONE** program

NDSU offers an Opioid and Naloxone Education program that focuses medication and opioid safety for people who are incarcerated. A screening tool provided by the ONE program will be utilized in the jail.

Ward County Jail has developed a policy on how the MOUD program would be implemented in jail (Attachment A) along with a budget (Attachment B) to fund the project for two years. The Task Force is working in conjunction with a fellow in the Reaching Rural Fellowship program to apply for a grant for additional funds to support the implementation of this program. This program would only continue as long as opioid settlement funds and/or grants are funding the program. Mill levy funds will not be utilized to maintain the program.

Next Steps: The Opioid Task Force duties, set forth by the Ward County Commission, have been completed. The Taskforce will be transitioned to a standing committee to monitor and work on the Reaching Rural Implementation grant. The committee members will include representatives from First District Health Unit, North Central Human Services, Ward County Detention Center, representatives appointed by the Ward County Commission, and grant administrator, Jennifer Perdue.

# **Ward County**

# **Medication for Opioid Use Disorder Program**

In response to the growing Opioid Crisis the Ward County Detention Center has constructed this policy to better address recognizing symptoms of Detox and a plan to induce inmates that are candidates for the MOUD program.

**MOUD PROGRAM** includes medication, treatment, and other wrap around services.

#### **ACRONYMS**

MOUD: Medications for Opioid Use Disorder

OUD: Opioid Use Disorder

#### MOUD MEDICATION

Methadone Buprenorphine-Suboxone Naltrexone-Vivitrol

#### **Area MOUD providers**

North Central Human Service Center

(701) 857-8500

1015 South Broadway,

**Community Medical Services** 

(701) 858-1801

300 30<sup>th</sup> Ave N.W.

#### **Ideal Options**

(701) 401-6733

3520 N Broadway

#### Northland Health Center

(701) 852-4600

1600 2<sup>nd</sup> Ave S.W., Suite 19

#### PROCEDURE A: INMATES CURRENTLY PARTICIPATING IN A MOUD PROGRAM

- 1. The MOUD Coordinator will review all booking screenings for MOUD.
- 2. The MOUD Coordinator will be responsible for contacting the providers that have been identified as currently participating in a MOUD program.
- 3. The MOUD Coordinator will work with the provider to ensure that the medication is continued while the inmate is in custody. Peer support services will be provided for inmates in a MOUD program.

#### PROCEDURE B: MEDICATION SAFETY QUESTIONNAIRE

The MOUD Officer or designee will ensure that all inmates who are incarcerated fourteen days receive the Opioid and Naloxone Education (ONE) Medication Safety Questionnaire which includes the Opioid Misuse Risk Assessment, the Accidental Overdose Risk Assessment and MOUD History.

Inmates will receive education on four topics:

- 1. Medication storage
- 2. Medication disposal
- 3. Medication adherence
- 4. Medication diversion

Depending on their answers to the Medication Safety Questionnaire, inmates will be able to receive:

- 1. Naloxone
- 2. Medical disposal device
- 3. Pill organizer
- 4. 1 in 4 brochure
- 5. Medication lock box

After completing the assessment, the MOUD Officer will forward the screening form to Correctional Administrative Assistant. The Correctional Administrative assistant will be responsible for placing the items indicated on the Medical Safety questionnaire in the Inmate property bag so they have them when released from the facility.

The Correctional Administrative Assistant will then log the information from the Medication Safety Questionnaire in the RedCap electronic data collection system. The form will then be returned to the MOUD officer for follow-up.

For inmates eligible for induction into a MOUD program see Procedure C- Phase 1.

#### PROCEDURE C: INDUCTION OF INMATES

The MOUD Coordinator or designee will use a Two-Phase approach as a guide for inmates that may be candidates for induction into a MOUD.

#### Phase 1

Inmates that have been identified through the ONE Medical screening form as at risk for Opioid Misuse, Accidental Overdose or possible participation in a MOUD program.

- 1. The MOUD Coordinator will ask the individual if they would like to participate in a MOUD program.
- 2. If the inmate respond that they are not interested, he MOUD Coordinator will document their response on the MOUD request for treatment form. The MOUD request for treatment form will be placed in their medical file.

- 3. If the Inmate responds yes, the MOUD Coordinator will document their response on the MOUD request for treatment form and contact a MOUD provider. Peer support services will be provided to all inmates who participate in the MOUD program.
- 4. A copy of the MOUD request for treatment will be forwarded to the MOUD provider and the MOUD Coordinator will obtain the original.

#### Phase 2

Inmates that are sentenced for Ward County Charges and are approaching their release date that have identified prior opiate usage or interest in being induced into a MOUD program

- 1. The MOUD Coordinator will be responsible for monitoring the WCDC Daily report. For all Inmates sentenced over fifteen days, the MOUD Coordinator will contact the inmate within seven days of their released date.
- 2. The MOUD Coordinator will ask the inmate if they are interested in participating in a MOUD program once released from the facility.
- 3. If the inmate respond that they are not interested, he MOUD Coordinator will document their response on the MOUD request for treatment form and place the form in their medical file.
- 4. If the Inmate responds yes, the MOUD Coordinator will contact a MOUD provider and submit their request for participation. A copy of the MOUD request for treatment form will be placed in the inmate's medical file. The inmate will be provided a peer support specialist to assist in the transition back into the community and continuation in recovery after release.

#### PROCEDURE D: TRACKING DATA

The WCDC will track the data for participants in the MOUD program. The WCDC will be assisted by the MPD and the MOUD providers to obtain the data. The data will consist of the following:

- 1. Inmates that come in currently on a MOUD program.
- 2. Inmates induced into the MOUD program.
- 3. Inmates that refuse induction into a MOUD program.
- 4. Inmates removed from a MOUD program.
- 5. Inmates that remain in the program until release.
- 6. Inmates released from the facility and then induced by a MOUD provider.
- 7. Length of time these individuals remain in a MOUD program.
- 8. Inmates that overdose while incarcerated.
- 9. Inmates that overdose after release from the facility within two weeks.
- 10. Overdose data from the City of Minot and Ward County.

## PROCEDURE E: COMMUNICATION

- 1. Signage will be placed in the booking area to encourage inmates to be truthful about their drug use during the booking process.
- 2. The Reliance texting devices that are issues to most inmates have many different self-help guides and other information about OUD.

# PROCEDURE F: STAFF TRAINING

- 1. During their orientation training, all staff will receive training on recognizing the symptoms of withdrawal.
- 2. All staff will receive training on a yearly basis on OUD. The Training will include:
  - a) Recognizing the symptoms of withdrawal.
  - b) The benefits of MOUD
  - c) The administration

Grant Budget 3/1/25 throug	şh 5/31/26
MOUD Officer Salary \$51,558.00	Salary 3/1/25-2/28/26
Ward County Auditor \$5,000.00	1
Peer Support \$10,000.00	1
Grant Administrator \$10,000.00	
Supplies-Medication \$23,442.00	
Total \$100,000.00	-
Opioid Settlement Funds 2025 Budget	_
MOUD Officer Salary \$8,593.00	Salary 1/1/25-2/28/25
MOUD Officer 2025 Benefits \$26,236.50	
MOUD Officer Computer \$1,600.00	
MOUD Officer Phone \$400.00	
\$36,829.50	_
Opioid Settlement Funds 2026 Budget	_
MOUD Officer Salary \$45,113.00	Salary 3/1/26-12/31/26
MOUD Officer 2026 Benefits \$27,398.50	5% Increase
Supplies-Medication \$10,000.00	6/1/26-12/31/26
\$82,511.50	
2025 Opioid Settlement Funds \$36,829.50	
2026 Opioid Settlement Funds \$82,511.50	
Total \$119,341.00	

Opioid Settlement Funds received thus far by Ward County and City of Minot is \$151,119.38 according to numbers reported by ND HHS. (Attachment C)