JCOIN PIERS: Providing Interventions for Enhancing Recovery during Supervision
Research Team

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THE STATE OF THE OVERDOSE CRISIS IN NORTH CAROLINA
In 2019, 92% of all medications and drug overdose were unintentional.

120% increase in all medication and drug overdose deaths in the last 10 years.
A growing number of deaths involve multiple substances in combination (i.e., polysubstance use).

These counts are not mutually exclusive. If the death involved multiple substances, it can be counted on multiple lines.

*Heroin and/or Other Synthetic Narcotics (mainly illicitly manufactured fentanyl and fentanyl analogues); *Commonly Prescribed Opioid Medications

Technical Notes: These counts are not mutually exclusive; if the death involved multiple substances it can be counted on multiple lines; Unintentional medication, drug, alcohol poisoning: X40-X45 with any mention of specific T-codes by drug type; limited to N.C. residents


Analysis by Injury Epidemiology and Surveillance Unit
STATE OF THE OVERDOSE CRISIS IN BUNSWICK COUNTY
COUNTY MEDICATION & DRUG OVERDOSE DEATHS BY INTENT
Brunswick County Residents, 2010-2019

Technical Notes: Medication and drug overdose: X40-X44, X60-X64, Y10-Y14, X85; Limited to N.C. residents
Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics
Analysis by Injury Epidemiology and Surveillance Unit
SUBSTANCES* CONTRIBUTING TO UNINTENTIONAL OVERDOSE DEATHS
Brunswick County Residents, 2010-2019

Analysis by Injury Epidemiology and Surveillance Unit
RATE OF UNINTENTIONAL MEDICATION & DRUG OVERDOSE DEATHS
Per 100,000 North Carolina Residents, 2015-2019

Technical Notes: Rates are per 100,000 N.C. residents; Unintentional medication and drug poisoning: X40-X44
Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics; Population-NCHS
Analysis by Injury Epidemiology and Surveillance Unit
# Rate of Unintentional Opioid Overdose Deaths

Per 100,000 North Carolina Residents, 2015-2019

<table>
<thead>
<tr>
<th>Brunswick County</th>
<th>22.9</th>
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<tbody>
<tr>
<td>Statewide</td>
<td>15.3</td>
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</table>

**Technical Notes:** Rates are per 100,000 N.C. residents. Unintentional medication and drug poisoning: X40-X44 and any mention of T40.0 (opium), T40.2 (Other Opioids), T40.3 (Methadone), T40.4 (Other synthetic opioid) and/or T40.6 (Other/unspecified narcotics).

**Source:** Deaths-N.C. State Center for Health Statistics, Vital Statistics; Population-NCHS Analysis by Injury Epidemiology and Surveillance Unit
## Brunswick Community Supervision Figures

All Community Corrections, 2021

<table>
<thead>
<tr>
<th>Category</th>
<th>All Ages</th>
<th>&gt;=18 Yrs of Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Total Supervision Population (06/30/2021)</td>
<td>1184</td>
<td>1182</td>
</tr>
<tr>
<td>Entries Into Supervision (01/01/2021 – 12/31/2021)</td>
<td>727</td>
<td>726</td>
</tr>
<tr>
<td>Drug Offenses Among Supervision Population (06/30/2021)</td>
<td>377</td>
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Source: NC Department of Public Safety, Public Safety System Query, Accessed 3/28/2022

These make up about 1/3 of the county’s total supervision population.
Objective is to study approaches to increase high-quality care for people with opioid misuse and opioid use disorder in justice settings.

Will test strategies to expand effective treatment and care in partnership with local and state justice systems and community-based treatment providers.

EVERY INDIVIDUAL INVOLVED IN THE JUSTICE SYSTEM WITH A SUBSTANCE USE DISORDER SHOULD HAVE ACCESS TO EVIDENCE-BASED TREATMENT, WHILE DETAINED OR IN THE COMMUNITY.
PIERS: PROVIDING INTERVENTIONS FOR ENHANCING RECOVERY DURING SUPERVISION

Objective: To improve linkage to the continuum of evidence-based care for justice-involved individuals

Research Partners:
- Brown University, RI (primary grantee)
- Temple University, PA
- University of Rhode Island, RI
- University of North Carolina at Chapel Hill, NC
THE EPIS MODEL AS AN IMPLEMENTATION FRAMEWORK

EPIS
Exploration, preparation, implementation and sustainment

1. Exploration
   Evaluate needs and program fit
   - Adoption Decision

2. Preparation
   Plan how to integrate into system
   - Gain internal and external support

3. Implementation
   Put the program into place
   - EBP Delivered with Fidelity

4. Sustainment
   Program is embedded

Source: Aarono, Hurthurt and Horowitz, 2011
• Baseline observation
  • Period of aggregate data collection by JCOIN PIERS research staff

• Organizational assessments
  • Stakeholder interviews, focus groups, and web-based staff surveys
  • Loosely timed with stages of the Exploration, Preparation, Implementation, Sustainability (EPIS) Model

• Local Change Team (LCT) development & implementation
  • Members will consist of community corrections, community treatment providers, and other local stakeholders
  • Led by JCOIN PIERS-provided Facilitator (aka “Coach”)
  • LCT will drive changes to the system that may assist with MOUD referral and durable engagement in treatment

• Randomized Control Trial (RCT) with offender/client participants
  • Standard of care MOUD referral vs. MOUD referral with peer support specialists
**Who:**
- JCOIN PIERS research staff

**When:**
- Initial phase of project

**What:**
- Data collection to gather information about current:
  - procedures and practices,
  - rates of OUD treatment referrals and MOUD treatment,
  - knowledge about and attitudes toward innovation and organizational change, and
  - knowledge about and attitudes toward MOUD.
**ORGANIZATIONAL ASSESSMENTS**

**Who:**
- Staff from **both** community corrections and community service providers

**When:**
- Initial interviews and surveys in spring 2021
- Follow-up interviews (2 additional), focus groups (2 additional), and surveys (3 additional) over the course of about 18-24 months

**What:**
- Stakeholder interviews & focus groups
  - 1.5-2 hour conversation with JCOIN PIERS staff person or focus group
  - For each completed interview or group, will receive $5 gift card, if allowed
- Web-based surveys
  - 30-45 minute self-directed survey (link will be emailed)
  - For each completed survey, will receive $10 gift card and be entered into $100 raffle, if allowed
- Will cover experiences, attitudes, and perception of substance abuse and MOUD and other treatment services; attitudes and beliefs regarding evidence-based practices and innovation,
**What:**

- Cross-organizational group with the objective to:
  - Identify barriers to organization change, and
  - Determine the most promising approaches to overcome obstacles in order to maximize organizational functioning, efficiency, and impact on clinical outcomes

**Who:**

- Representatives from:
  - Community Corrections (staff & leadership)
  - Community treatment providers (staff & leadership)
  - Additional local stakeholders
  - Individual(s) with lived experience
  - JCOIN PIERS Facilitator will serve as trainer and mentor for LCT
LOCAL CHANGE TEAM (LCT), CTD.

JCOIN PIERS Facilitator:

• aka “Coach”
• Assists in the development of LCT goals and works through goal achievement activities during the implementation phase
• Provides on-going feedback on progress toward reaching goals
• Gives feedback on data driven decision making
• Assists in the adoption/expansion of evidence-based practices
Collaborative activities between LCT & UNC JCOIN PIERS research staff:

- Needs Assessment
- Site Feedback Report
- Skill-based and educational training
- Goal Achievement Training (GAT)
  - Data Driven Decision Making (DDDM)
- Goal Selection
- Regular Site Check-ins
**Who:**
- Approximately 100 offender/client participants diagnosed with OUD

**When:**
- Enrollment will begin after LCT implementation and will end in summer 2023
- Final data collection January 2024

**What:**
- Participants will be randomized to either:
  - Standard of care MOUD referral, or
  - MOUD referral with peer support specialist
- In-person surveys conducted by JCOIN PIERS research staff at enrollment and 3, 6, and 12 months post-enrollment
- Additional data collection via record abstraction and urine toxicology
Progress to Date

10 Stakeholder interviews with community supervision staff

Created a needs assessment from available data

Started to form our local change team

Developed our materials for the peer support intervention
ACKNOWLEDGEMENTS

- NC Department Of Public Safety
- Brunswick County Community Corrections
- Coastal Horizons Center, Inc.
- U.S. National Institutes of Health
- Research Partners:
  - University of North Carolina at Chapel Hill
  - Brown University
  - Temple University
  - University of Rhode Island
Thank you for your time.