Participant Activities Handout



Integrating Addiction Medicine with Treatment Courts—Live In-Person Training

Training Learning Objectives:

- 1. Describe ways to reduce stigma against people with substance use disorders, including the use of accurate terminology.
- 2. Explain the role of timely and accurate diagnosis and treatment for clients/participants first engaging in treatment courts.
- 3. Define addiction as a chronic and manageable disease.
- 4. Describe the purpose, structure, and effectiveness of treatment courts.
- 5. Define the roles and responsibilities of treatment court team members.
- 6. Describe the roles and responsibilities of medical providers within treatment court settings.
- 7. Apply best clinical and partnership practices to case examples of patients who are engaged in treatment court and addiction treatment.
- 8. Advocate effectively for access to evidence-based treatment with treatment court team members.
- 9. Coordinate care withing professional settings to individuals involved in treatment courts.

Schedule at a Glance

09:00 am - 09:15 am	Welcome & Course Overview
09:15 am - 11:20 am	The Promise of Treatment Courts: An Introduction to the Model
11:20 am - 11:30 am	10-Minute Break
11:30 am - 01:00 pm	Applying Addiction Fundamentals in Treatment Court Settings
01:00 pm - 01:30 pm	30-Minute Break
01:30 pm - 02:30 pm	Working Effectively with Justice-Involved Individuals
02:30 pm - 02:40 pm	10-Minute Break
02:40 pm - 04:00 pm	Navigating Evidence-Based SUD Treatment in Treatment Courts

Activity #1: Understanding The Treatment Court's Function—Question and Answer (Q&A) Activity

Large Group Activity: Consider questions you would like to ask All Rise's expert about how treatment courts work. Faculty will call on individuals to share.

Guiding Questions:

- What emerging questions do you have about treatment court programs and processes?
- What topics of our treatment court discussion would you most like to hear more about?

Time allotted: 15 minute	Time a	lotte	d: 15	minut	es
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Activity #2: Medical Providers Engaging with Treatment Courts

Small Group Activity: At your table, share your interest in working with treatment courts or the legal system to support patients.

Discussion Questions:

- What benefits to working with treatment courts or the legal system can you identify?
- What challenges to working with the treatment courts or the legal system might present themselves?

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Activity #3: The Promise of Treatment Courts: An Introduction to the Model—Session #1 Reflection Exercise

Large Group Activity: Consider the discussions on treatment court purpose, models, teams, processes, and structures.

Guiding Question:

• How can you use what you've learned in this session in your professional work?

Time allotted:

• 5 minutes for large group discussion

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Activity #1: Stigma in Professional Settings—Eliminating Stigmatizing Language Exercise

Small Group Activity: At your table, share examples of stigmatizing language or practices you have encountered in your healthcare setting. Consider any examples among justice-involved patients.

Discussion Question:

- What are examples of stigmatizing terms or practices you have encountered in your medical settings, particularly towards any justice-involved patients?
- What are some ways you have encouraged or could encourage less stigmatizing, evidence-based practice in your settings?

Time allotted:

7 minutes

Stigmatizing Language	Alternative Terminology
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Activity #2: DSM-5 Diagnosis for Anita—Case Exercise

Case Study: Anita

- Anita is a 58-year-old cisgender woman with a history of depression, anxiety, and alcohol use who is arrested after a second driving under the influence (DUI) charge in one year. The initial report notes that a breathalyzer showed a high alcohol level after she was pulled over.
- Overnight in jail, she complained of anxiety, nausea, and tremors, and needed to be taken to the ER for medications.
- She had been referred to treatment after her previous DUI but could not afford treatment after losing her job when her boss learned of her arrest.
- She attempted AA but states meetings triggered urges to drink, and she soon returned to increasingly heavy drinking on most days.
- She lives with a roommate after a recent separation from her husband, who also cares for their daughter.

Small Group Activity: At your table, review Anita's case. Discuss a diagnostic assessment for her based on the DSM-5 criteria for substance use disorders.

Discussion Questions:

- What DSM-5 criteria does Anita meet?
- Based on the number of criteria that Anita meets, how would you diagnose her?
 - □ Mild = 2-3 criteria
 - □ Moderate = 4-5 criteria
 - ☐ Severe = 6 or more criteria

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

- 7 minutes for small group activity
- 5 minutes for large group debrief

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Session 2: Setting the Stage: Fundamentals of Addiction Medicine

Activity #3: Applying Addiction Fundamentals in Treatment Court Settings—Question & Answer (Q&A) Activity

Large Group Activity: Consider questions you would like to ask about promoting evidence-based addiction treatment in court settings. Raise your hand to ask a question. Faculty will call on individuals to share.

Guiding Questions:

- What questions do you have about the chronic disease model or pharmacotherapy in treatment courts?
- How much does this apply to your work experience?

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

Time allotted:

10 minutes for large group discussion

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Activity #1: Supporting Patients in Treatment Court - Case Exercise

Case Study: Joe

- Joe is a 28-year-old man treated in the ER and started on buprenorphine after surviving an opioid overdose. Joe then followed up in your clinic to continue the medication. He's been on buprenorphine for one week and is doing well.
- He lets you know that he was referred to treatment court by the arresting officer and is currently on probation, looking at a revocation. 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.
- 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.
- Joe's probation officer has been working with Joe to help with unemployment and housing.
- The Judge has voiced concerns about Joe's prescribed medication, mentioning that the only medication 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 Activity: At your table, discuss ways you could educate the Judge and support Joe.

Discussion Questions:

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

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

- 7 minutes for small group activity
- 3 minutes for large group debrief

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Activity #2: Release of Information and Care Coordination - Case Exercise

Case Study: Amy

- Amy is a 42-year-old woman who recently entered treatment court. She engages in outpatient substance use counseling services as a result of her treatment court requirements. She sees you for buprenorphine treatment in a primary care setting.
- She says that the treatment court team asked her to sign an ROI to release records from your clinic, including her toxicology reports because "it's just easier" if they can use the urine toxicology results from your clinic.
- Amy's medical chart includes past STIs, past pregnancy termination, as well as ongoing physical health concerns and mental health diagnoses.
- Amy has reduced her substance use but continues to have urine toxicologies that are intermittently positive for a variety of substances including methamphetamine, alcohol, and cannabis.

Small Group Activity: At your table, examine Amy's case and discuss how you might discuss this release of information (ROI) request with Amy.

Discussion Questions:

- What questions would you ask Amy?
- What information would you want Amy to have?
- What are alternatives to a full release of records?

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

- 7 minutes for small group activity
- 3 minutes for large group debrief

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Activity #3: Working Effectively with Individuals who are Justice-Involved – Session #3 Reflection Exercise

Large Group Activity: Consider the strategies discussed to promote effective collaboration with individuals who are justice-involved in your community setting. Write down one change you can implement in your professional settings.

Guiding Question:

• What is one change you can implement in your professional settings?

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Session 4: Navigating Evidence-based SUD Treatment in Treatment Courts

Activity #1: Common Challenges to Effective Treatment

Large Group Activity: Share examples of challenges you have experienced in providing evidence-based treatment to patients who are involved in the legal system. Raise your hand to comment. Faculty will call on individuals to share.

Discussion Questions:

- What challenges, if any, have you had in providing evidence-based care for patients who are justice-involved?
- How have you navigated these challenges (e.g., in collaboration with treatment court team members)?

Time Allotted:

10 minutes for large group discussion

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Activity #2: Coordinating Care for Ben—Case Exercise

Case Study: Ben

- Ben is a 40-year-old divorced Hispanic male with OUD, MUD, tobacco use disorder, COPD, and HTN approved for treatment court. He admits to using fentanyl for two years prior to incarceration, and enjoys the euphoria associated with use. Uses methamphetamine to treat opioid withdrawal symptoms.
- Longest period of abstinence: 90 days while incarcerated. No history of in-patient treatment. No past OBOT. Some counseling.
- Reports only past MOUD use was non-prescribed buprenorphine by injection.
- Current charges possession and distribution, robbery and assault. He spent 12 years in and out
 of custody, no harm reduction services with most recent release.
- Only withdrawal management--"comfort measures" in jail; no MOUD provided while incarcerated. Jail staff believe that buprenorphine is their biggest problem, ahead of fentanyl, heroin, and other illicit substances.
- Cravings for fentanyl upon release from custody with return to use within 48 hours of release. Ben experienced near-fatal overdose with rhabdomyolosis.
- Upon hospital discharge, no Rx for buprenorphine or referral to OTP.
- The treatment court team is made aware of the overdose, and an appointment with you is made for the next day.

Small Group Activity: At your table, review the case information for your patient, Ben. Discuss strategies to support Ben, who needs effective treatment.

Discussion Question:

• Ben is motivated for treatment. What recommendations do you have about care coordination with your team as the medical provider for treatment court?

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

- 7 minutes for small group activity
- 3 minutes for large group debrief

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Session 4: Navigating Evidence-based SUD Treatment in Treatment Courts

Activity #3: Providing Effective Care in Treatment Courts—Question & Answer (Q&A)

Large Group Activity: Share questions you have about engaging with the treatment court team. Raise your hand to ask a question. Faculty will call on individuals to share.

Guiding Question:

- What questions do you have about the medical provider's role in treatment courts?
- What opportunities do you see to work with your local treatment court for improved treatment outcomes?

Time Allotted: 10 minutes

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Activity #4: Revisiting Ben - Case Coordination Exercise

Case Study: Ben

- You welcome Ben into treatment court and ask about his treatment goals.
- Ben is motivated to do whatever it takes--he never wants to return to jail again. Ben is happy to be working with a clinician to assist him in his recovery. He expresses that it is a bonus to being a part of treatment court, to be receiving care he desperately neglected for many years.
- Clinical Opiate Withdrawal Scale (COWS): 14. Point-of-care testing (POCT) positive for THC.
- Ben is provided harm reduction training and is started on buprenorphine/naloxone 2/0.5 mg film. He restates he has not used opioids in more than 48 hours. He experiences no precipitated withdrawal and understands he can take another dose based on his symptoms.
- The jail did not reinstate his Medicaid, but treatment court staff have successfully reactivated his coverage.
- Ben is also now integrated with programming: toxicology screening (calling daily for his "color").
- Ben did well the first day on buprenorphine, took the medication as prescribed, did not
 experience precipitated withdrawal, and tapered upward over to his current dose of 8/2 mg film
 bid.
- However, he ran into old friends who offer him fentanyl and he returns to use.
- He regrets using and is fearful of the consequences—that he will be incarcerated with no access to MOUD or other supports.

Small Group Activity: At your table, review the case information for your patient, Ben. Discuss strategies to coordinate care for Ben in treatment court settings.

Discussion Questions:

- How do you coordinate with the treatment team?
- How can you, as the clinician on this team, work to support Ben in his efforts to succeed in programming?

Large Group Activity: A follow-up large group debrief will be facilitated by faculty. Faculty will ask you to share highlights of discussions at your table. You are encouraged to volunteer if you wish to do so.

- 7 minutes for small group activity
- 3 minutes for large group debrief

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Session 4: Navigating Evidence-based SUD Treatment in Treatment Courts

Activity #5: Navigating Evidence-Based SUD Treatment in Treatment Courts – Session #4 Reflection Exercise

Large Group Activity: Consider the discussions on treatment challenges, implications for medical clinicians, and strategies to provide effective SUD treatment in treatment court settings. Write down one change you can implement in your professional settings.

Discussion Question:

What is one change you can implement in your professional settings?

Time Allotted: 5 minutes

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