NOTE: Due to the COVID-19 national emergency, applicants are hereby notified that virtual site visits are under consideration in lieu of in-person site visits. Although in-person visits are preferred for the Jail-Based Mentor Site Program implementation, public health considerations are prioritized by BJA to ensure participant safety and optimal program benefit. Successful applicants will be given the option to either participate or opt out of the program based on their site's specific public health circumstances as conditions change.

Bureau of Justice Assistance's Comprehensive Opioid, Stimulant, and Substance Abuse Program Evidence-based Treatment in Custody

Jail-Based Mentor Site Selection Application

Frequently Asked Questions

The Bureau of Justice Assistance (BJA) is pleased to announce the creation of the Evidence-based Treatment in Custody, Jail-Based Mentor Site Program, expected to launch in September 2020. This program is part of the training and technical assistance (TTA) available for local jurisdictions through BJA's Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP).

Developed as part of the 2016 Comprehensive Addiction and Recovery Act, COSSAP provides financial and technical assistance to states, units of local government, and Indian tribal governments to plan, develop, and implement comprehensive efforts to identify, respond to, treat, and support those impacted by the opioid epidemic. COSSAP was expanded in 2019 to include stimulants and other substances.

Advocates for Human Potential, Inc. (AHP), in its role as a COSSAP TTA provider, is facilitating the selection process for mentor sites.

Q: What is medication-assisted treatment (MAT)?

A: MAT is the use of Food and Drug Administration (FDA)-approved medications, in combination **with counseling and behavioral therapies**, to provide a whole-patient approach to treatment of substance use disorders.¹

Q: What is evidence-based behavioral therapy?

A: Behavioral therapies are structured treatment approaches that help patients recognize the impact of their behaviors on their substance use and ability to function in a healthy, safe, and productive manner. Behavioral therapies also motivate and teach patients how to change their behaviors in order to recover from substance use disorders.² For evidence-based behavioral

therapies to be delivered appropriately, they must be provided by qualified, trained providers.

Examples of evidence-based behavioral therapies include the following:

- Cognitive Behavioral Therapy (CBT)
- Contingency Management
- Motivational Enhancement Therapy
- Interventions that target criminal thinking and behavior
- Relapse Prevention Therapy
- Mutual aid support groups (e.g., AA/NA)
- Peer recovery support



Jail-Based Mentor Site Selection Application

Frequently Asked Questions

Q: Who comprises the pre-trial detainee population?

A: Pre-trial detainees are individuals charged with a crime and detained while awaiting trial, either because of a failure to post bail or denial of release. These individuals have not been convicted or sentenced.

According to the Prison Policy Initiative data, pre-trial populations account for up to 75 percent of the local jail population.³

Q: What medications are approved by the FDA for MAT?

A: Three FDA-approved medications are commonly used to treat opioid addiction:⁴

- Methadone is an opioid agonist that prevents withdrawal but does not block the effects from other narcotics. It is administered daily in liquid form by regulated specialty clinics.
- Naltrexone is a nonaddictive opioid antagonist that blocks the effects of all opioid drugs. It is administered in an office setting as a daily pill or by monthly injection. (Naltrexone is also effective in treating alcohol addiction.)
- Buprenorphine is an opioid agonist/antagonist that blocks the effects from other narcotics while reducing withdrawal risk. It is administered either daily as a dissolving tablet or a cheek film or via a 6-month implant under the skin.

Q: What is naloxone?

A: Naloxone is a medication approved by the FDA to prevent opioid overdose, such as from heroin, morphine, and oxycodone. It blocks opioid receptor sites in the brain and can reverse the toxic effects of overdose. The medication can be administered by intranasal spray, intramuscularly (into muscle), subcutaneously (under the skin), or through intravenous injection.⁵

Q: What are common types of MAT programs?⁶

- Off-site medication administration: Individuals are transported to community opioid treatment programs (OTPs), hospitals, or other medical providers.
- On-site medication administration by an external provider: External OTPs or other prescribers administer medication to individuals within the correctional facility and under the license of the external OTP or provider.
- Licensed OTP: The correctional facility obtains
 OTP licensure permitting use of methadone and
 buprenorphine for treatment of opioid use disorders
 and withdrawal.
- Licensed correctional prescribers: Facility
 physicians, nurse practitioners, or physician
 assistants who are licensed to prescribe
 buprenorphine administer medication within the
 correctional facility for treatment of opioid use
 disorders and withdrawal. Correctional health care
 providers administer naltrexone within the facility.
- Licensed health care facility: The correctional facility obtains State and Drug Enforcement Administration licensing, which entitles the facility to the same exemptions as hospitals for dispensing methadone or buprenorphine during pregnancy or ensuring treatment of other conditions (e.g., HIV, mental illness).

Q: What is the purpose of the COSSAP evidence-based treatment in custody mentor programs?

A: Jail-based mentor sites will provide a unique opportunity for jails across the country interested in providing MAT services to observe and learn from established and innovative programs that have shown success in meeting the substance use treatment needs of individuals in jail. The mentor sites selected through

Jail-Based Mentor Site Selection Application

Frequently Asked Questions

this application process will host individuals and teams from facilities interested in starting a MAT program or established programs interested in learning innovative practices.

A process for facilities to electronically submit a request to visit a mentor program will be developed, and BJA will support the travel of up to three individuals from approved facilities to one of the mentor sites.

Q: What will BJA require of mentor sites?

A: Mentor sites will serve as hosts for similar facilities interested in planning and implementing a MAT program for individuals within their jails. The selected sites will be expected to serve as mentor sites for two years, beginning on or around September 1, 2020.

BJA anticipates that each mentor site will be asked to host two to three peer-to-peer exchange visits to support the mentor program each year for the life of the grant. Mentor site visits will typically be conducted over 1.5 days plus travel. During this time, mentor sites will be expected to provide opportunities for observation and peer-to-peer exchanges. The selected mentor sites should be prepared to work with BJA's TTA provider, Advocates for Human Potential, Inc., to schedule visits, create site visit agendas, provide opportunities to observe the MAT program in action, and allow peer facilities to engage with all program personnel.

Q: What are the benefits of being a mentor site?

A: Mentor sites will be recognized by BJA as exemplary models of providing MAT to individuals, who often have a short length of stay in a facility. As part of the program, the sites will be provided with TTA. A stipend of \$2,000/site will be provided to cover costs associated with hosting visitors, such as for photocopying and transportation.

Q: How will mentor sites be selected?

A: Interested MAT jail programs must submit online applications by **June 15, 2020**. BJA and AHP will review completed applications and requested attachments. Applicants do not need to be current COSSAP grantees to apply. BJA or AHP will conduct phone interviews with finalists and may conduct site visits to finalize selections.

Applicant programs will be evaluated on a variety of areas, including, but not limited to:

- Current program operations
- Overall impact of MAT treatment program
- Geographical location
- Jurisdiction size

Jails with programming specifically targeted to pretrial detainees will be awarded additional points in application scoring.

BJA anticipates selecting two to six mentor sites that are geographically diverse and span a variety of operational models. The timeline for selection is as follows:

- Applications due: June 15, 2020
- Review of applications: August 5, 2020
- Notification of selected mentor sites: No later than August 19, 2020
- Orientation webinars for new mentor sites:
 September–November 2020
- Launch of peer visits: November 2020

Jail-Based Mentor Site Selection Application

Frequently Asked Questions

Endnotes

- ¹ Substance Abuse and Mental Health Service Administration. (2019, September 9). *Medication-assisted treatment*. U.S. Department of Health and Human Services, Substance Abuse and Mental Health Service Administration. https://www.samhsa.gov/medication-assisted-treatment.
- ² Center for Health Information and Analysis. (2015). *Access to substance use disorder treatment in Massachusetts*. (15-112-CHIA-01). Boston, MA: Center for Health Information and Analysis, Commonwealth of Massachusetts.
- ³ Prison Policy Initiative. (2020, February). *Mass incarceration: The whole pie 2019.* https://www.prisonpolicy.org/reports/pie2019.html.
- ⁴ Substance Abuse and Mental Health Service Administration. (2019, September 9). *Medication-assisted treatment*. U.S. Department of Health and Human Services, Substance Abuse and Mental Health Service Administration. https://www.samhsa.gov/medication-assisted-treatment.

- ⁵ Substance Abuse and Mental Health Service Administration. (2019, September 27). *What is naloxone*. U.S. Department of Health and Human Services, Substance Abuse and Mental Health Service Administration. https://www.samhsa.gov/medication-assisted-treatment/treatment/naloxone.
- ⁶ Vital Strategies and National Council for Behavioral Health. (2020, January). *Medication-assisted treatment for opioid use disorder in jails and prisons: A planning and implementation toolkit.* National Council for Behavioral Health. https://www.thenationalcouncil.org/medication-assisted-treatment-for-opioid-use-disorder-in-jails-and-prisons/.

Bureau of Justice Assistance's Comprehensive Opioid, Stimulant, and Substance Abuse Program (COSSAP) Evidence-based Treatment in Custody

Jail-based Mentor Site Selection

Application

Submission Deadline

Applications for the Bureau of Justice Assistance's COSSAP Evidence-based Treatment in Custody Program are due by 5:00 p.m., ET, on June 15, 2020. If you are using Adobe Acrobat Reader, please complete this form and submit it through the button on the form. A free download for Adobe Acrobat Reader can be found here.

If you are using another PDF program, please complete the form, save your responses, and email a copy of the

completed form, along with any required documents or attachments, to COSSAP@iir.com. Thank you.

Questions

Should you have any questions about the application process or issues with submission, please send an email to COSSAP@iir.com. We will do our best to respond promptly.

Applicant information
Contact information for person submitting the application:
Name
Job title
Agency
Address
Phone
Email
Name of applicant site
Name of applicant program

Community Information and Type of Substance Use Disorder (SUD) Challenges

Locatio	on (select all that apply, and specify):
	Town
	City
	County
	Tribal jurisdiction
	Region
What is	s the population size of the community/communities served by your facility?
Your co	ommunity is described as:
	Urban
	Suburban
	Rural
	Other
Info	ormation About Your Jail Facility
How m	any jail facilities operate in your community?
	any jail facilities operate in your community? s the average daily population in the jail facility applying to be a mentor site?
	s the average daily population in the jail facility applying to be a mentor site?
What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial
What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced
What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced s the average length of stay for inmates?
What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced s the average length of stay for inmates? Pre-trial
What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced the average length of stay for inmates? Pre-trial Sentenced
What is What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced the average length of stay for inmates? Pre-trial Sentenced our program have a website? yes no
What is What is	s the average daily population in the jail facility applying to be a mentor site? Pre-trial Sentenced s the average length of stay for inmates? Pre-trial Sentenced our program have a website? yes no If yes, please provide the URL to your website.

General Jail Protocols for Individuals with Substance Use Disorders (SUDs)

Please submit a copy of all protocols/tools with your application.

Do you have a protocol for screening and/or assessment for SUDs? yes no

What percent of the detainees and inmates in your facility have been identified as having a:

SUD

Primarily OUD

Do you have a formal detox protocol for opioids? yes no

Do you have a formal detox protocol for alcohol? yes no

Do you have a formal detox protocol for pregnant women? yes no

Do you have a protocol for screening for co-occurring disorders in your detainee/inmate population? yes no

Behavioral Health Programming

What behavioral health programming do you offer in custody? (check all that apply)

Cognitive behavioral therapy (CBT)

What curriculum do you use, if any? (please specify)

Contingency management

Motivational enhancement therapy

Evidence-based interventions that target criminal thinking and behavior

What curriculum do you use, if any?

Relapse prevention therapy

Mutual aid support groups (e.g., AA/NA)

Peer recovery support services

How many full-time equivalent peers are assigned to your jail?

Other behavioral health treatment services (please describe)

	In person
	Individual sessions
	Group sessions
	Combination of individual and group sessions
	Via telecommunication/telemedicine
	Other (please describe)
What p	ore-release planning/reentry services do you offer and/or connect to? (check all that apply)
	Case management
	Recovery coaching/peer support
	Housing
	Transportation
	Mental health treatment
	Behavioral therapy/SUD treatment
	Medicaid or Medicare enrollment assistance
	Supplemental Nutrition Assistance Program (SNAP) enrollment
	Family reintegration supports
	Veterans benefit program
	Other (please describe)
How m	any full-time equivalent pre-release/reentry staff serve your facility?
Do you	provide naloxone to individuals upon release? yes no
Do you	operate a specific housing unit in the jail for individuals participating in substance use treatment? yes no
	If yes, is programming offered as a component of the housing unit?
	If yes, is there a minimum length of time individuals must reside in this unit?

Which methods of delivery do you use for behavioral therapies? (check all that apply)

Medication-ass	isted Treatment (MAT)
Do you offer a medica	ation-assisted treatment (MAT) program? yes no
What year did your pr	rogram begin?
Who is the target pop	oulation for your program? (check all that apply)
Pregnant w	omen
Individuals	entering jail already on MAT
Individuals	entering jail who are NOT on MAT but have an identified OUD
Other (plea	se describe)
What percent of eligib	ole inmates with an OUD participate in MAT while in custody?
When do you induct i	ndividuals on to MAT? (check one)
Shortly afte	r jail entry, after managed withdrawal
Shortly afte	r jail entry without managed withdrawal
Just prior to	o release from jail
Other (plea	se explain)
What medications do	es your MAT program dispense? (check all that apply)
Methadone	
Buprenorph	nine products (please specify pills, film, etc.)
Naltrexone	products (please specify type(s); e.g., injectables, tablets)
Other	

How do you classify your program model? (check all that apply) Off-site medication administration On-site medication administration by external provider Licensed correctional prescribers on-site Facility is an opioid treatment program (OTP)¹/narcotic treatment program (NTP)² Facility is a licensed health care facility Other (please describe) What population does your MAT program serve? (check one) Pre-trial population only Sentenced population only Both pre-trial and sentenced populations Other (please explain) Who is served by your MAT program? (check all that apply) Men Women Pregnant women Other (please describe)

¹ OTPs are certified by the Substance Abuse and Mental Health Services Administration (SAMHSA) and independently accredited by an independent, SAMHSA-approved accrediting body to dispense opioid treatment medications for people diagnosed with an opioid use disorder. OTPs must register with the Drug Enforcement Administration (DEA).

² DEA refers to OTPs that register with DEA to prescribe, write orders for, or dispense Suboxone® or Subutex® to patients for addiction/dependence treatment under the provisions of the Drug Addiction Act of 2000 as NTPs and provides guidelines regarding diversion control, security, and auditing of narcotics within the OTP.

How many individuals does your program serve?	
Annual average	
Monthly average	
Daily average	
How many individuals have participated in your program since its inception?	
Are individuals who receive MAT required to participate in the facility's drug treatment program? yes no	
Are individuals who receive MAT housed together in the same housing unit? yes no	
Do you have exclusion criteria? yes no	
If yes, what would exclude someone from participating?	
How is your program funded? Include the names of any grants you receive.	
Federal funding	
State funding	
Local funding	
Philanthropic funding	
Other	
Data	
Have you produced any reports or presentations about the outcomes of your program? yes no	
If yes, please submit a copy of your latest report or presentation with your application.	

Mentor Site Activities
What program components, practices, or activities have been particularly effective in your facility that would benefit other facilities as they plan, implement, or enhance their programs?
What barriers and/or challenges have you overcome that other facilities may face in program planning and implementation?
What activities could peer facilities observe and participate in when they visit?
Do you have policies and procedures manuals for your program? If yes, please submit copies with your application. When was the manual last updated? Are you willing to share this document with mentees? yes no
Does your program have memoranda of understanding, data and information sharing agreements, chain-of-custody forms, universal release-of-information forms, or other legal or program documents that can be used as model templates? yes no If yes, please provide a copy with your application. Are you willing to share these documents with mentees? yes no

Logistics						
Is your facility close to a major airport?	yes	no				
If yes, what is the name of the airport and the	ne estimate	ed travel time fro	om the airpo	rt to your loc	ation?	
Is there a hotel available within 10 miles of y	our facility	? yes	no			

Visit the COSSAP Resource Center at www.cossapresources.org.

About BJA

BJA provides leadership and services in grant administration and criminal justice policy development to support local, state, and tribal law enforcement in achieving safer communities. To learn more about BJA, visit www.bja.gov and follow us on Facebook (www.facebook.com/DOJBJA) and Twitter (www.facebook.com/dojaga) and Twitter (<a href="www.face

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