

136002

**METROPOLITAN DADE COUNTY
DEPARTMENT OF HUMAN RESOURCES
OFFICE OF REHABILITATIVE SERVICES**

Mae D. Bryant, Director

**INNOVATIVE SUBSTANCE ABUSE TREATMENT
OPTIONS FOR CRIMINAL JUSTICE POPULATIONS
WHICH INCLUDE ACUPUNCTURE DETOXIFICATION
AS PART OF AN OVERALL TREATMENT PROGRAM**

**PRESENTED AT:
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ACQUISITION

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**U.S. Department of Justice
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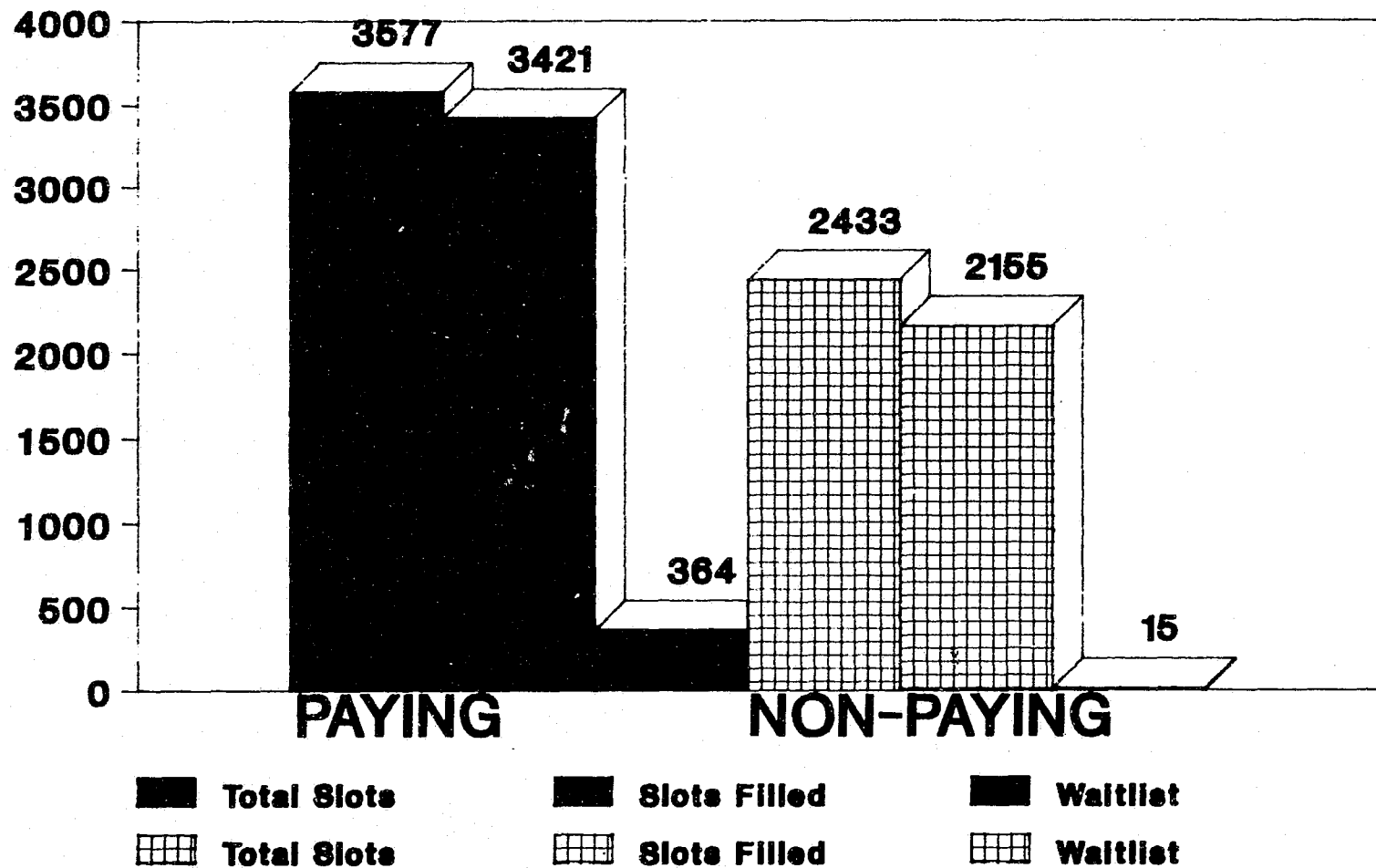
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NON-RESIDENTIAL SLOTS

- **Capacity more evenly matches apparent need**
- **Programs have greater flexibility by regrouping clients and counselors**
- **The Waitlist is negligible for both categories, "Paying" and "Non-Paying"**

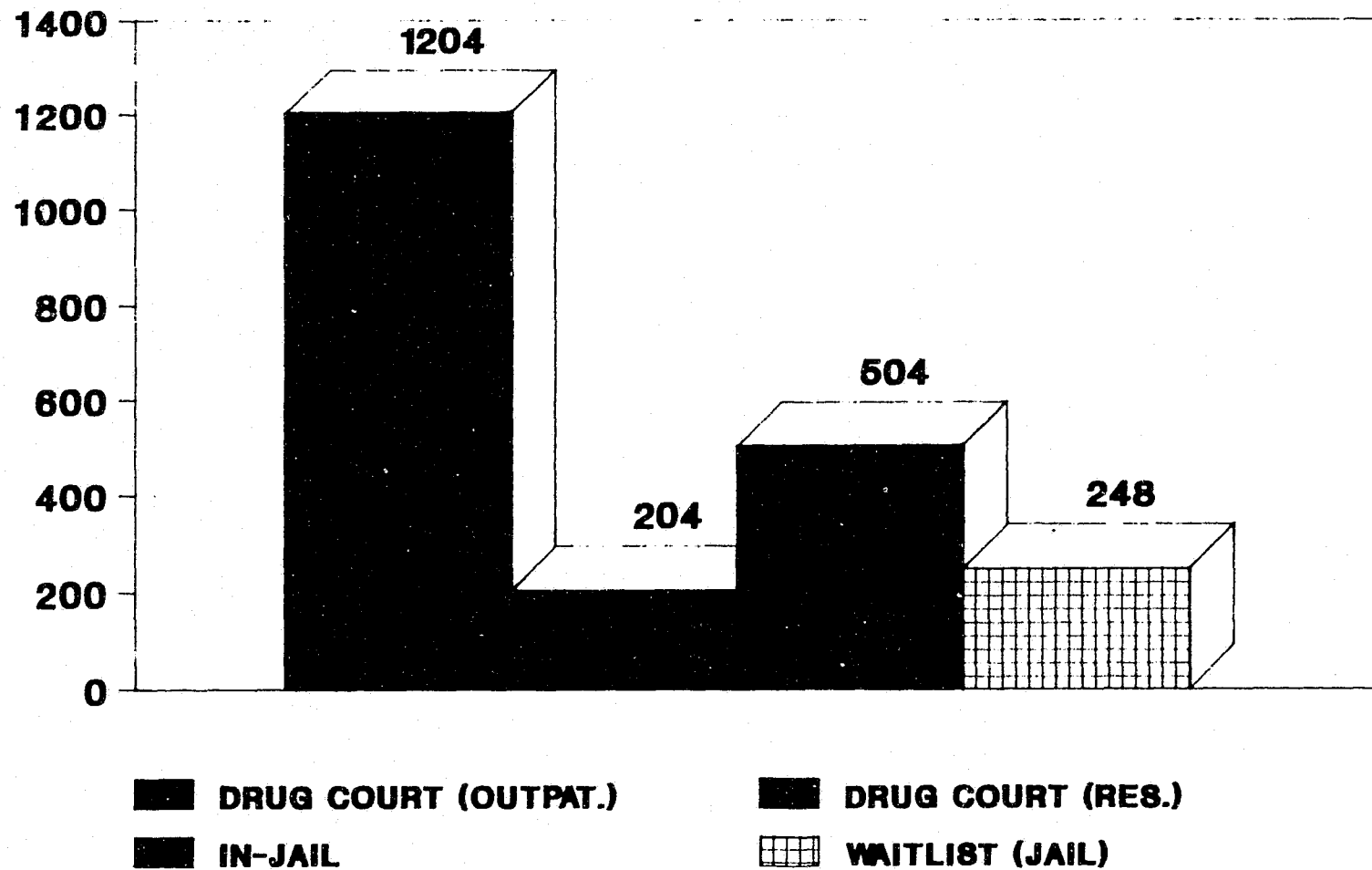
NON-RESIDENTIAL SLOTS



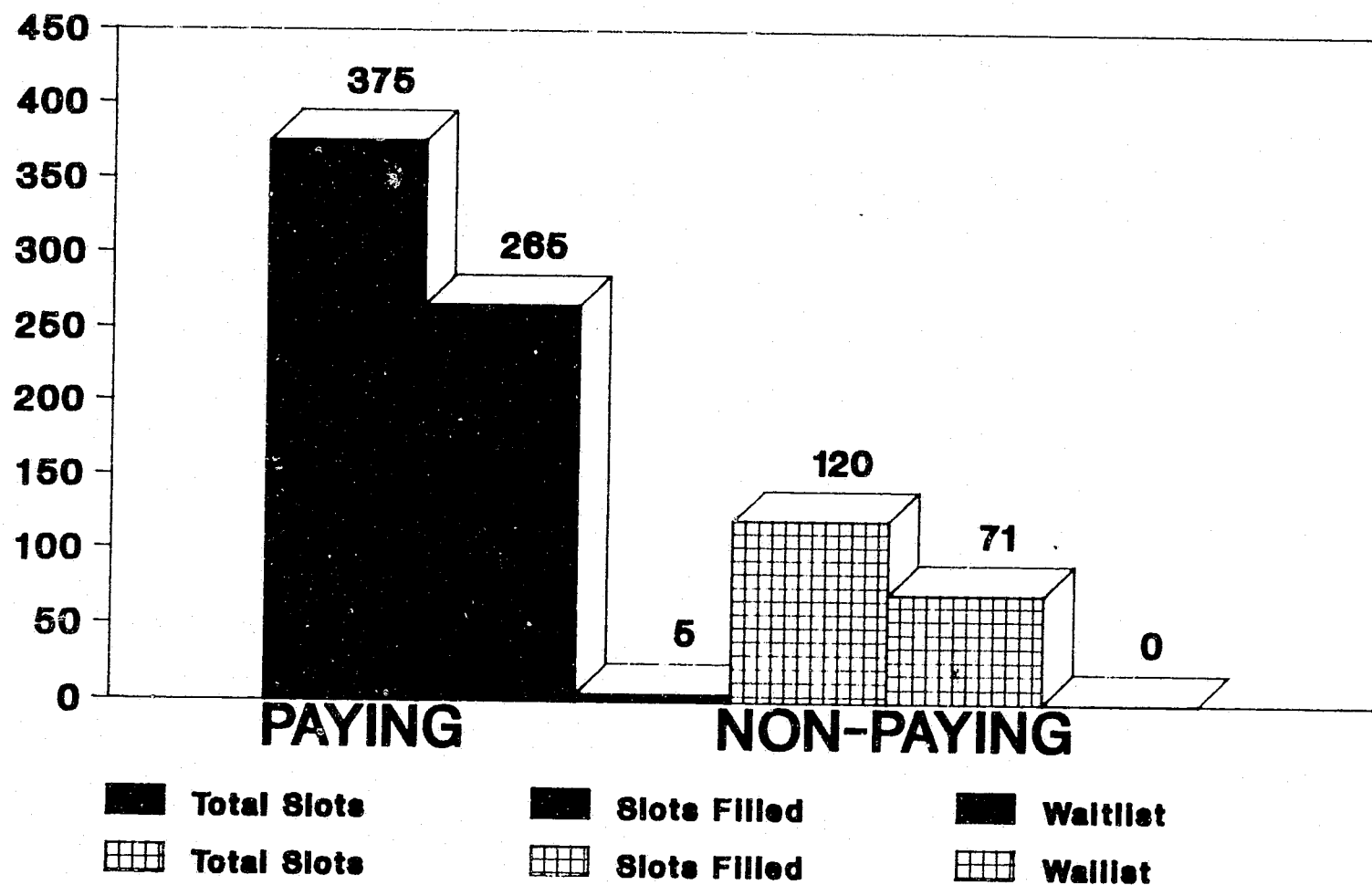
CRIMINAL JUSTICE

- **Drug Court capacity driven by number of arrests**
- **204 Residential (Private not-for-profit) beds are shared with cocaine mothers**
- **Waitlist is primarily for males**

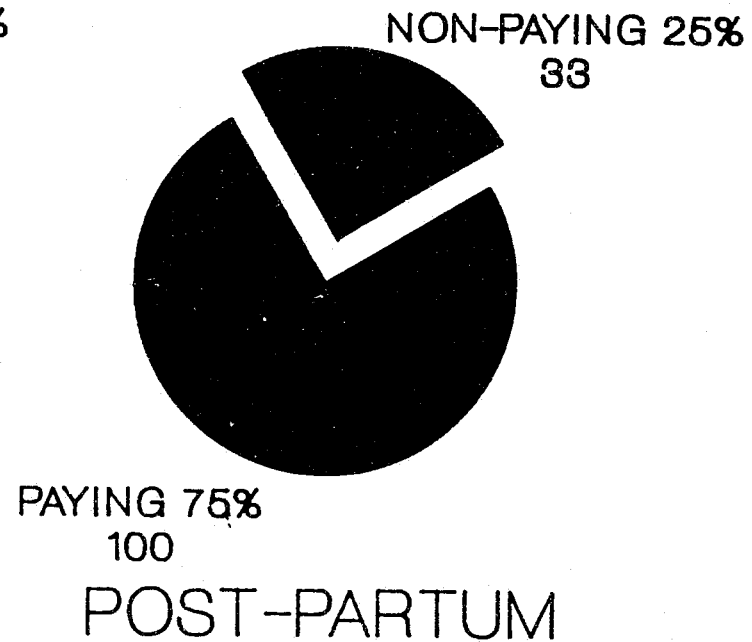
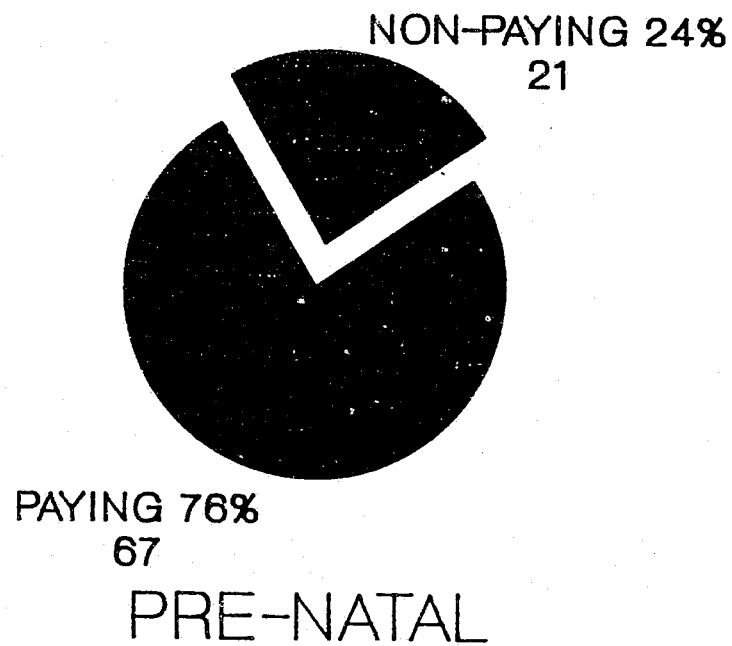
CRIMINAL JUSTICE



JUVENILE SLOTS



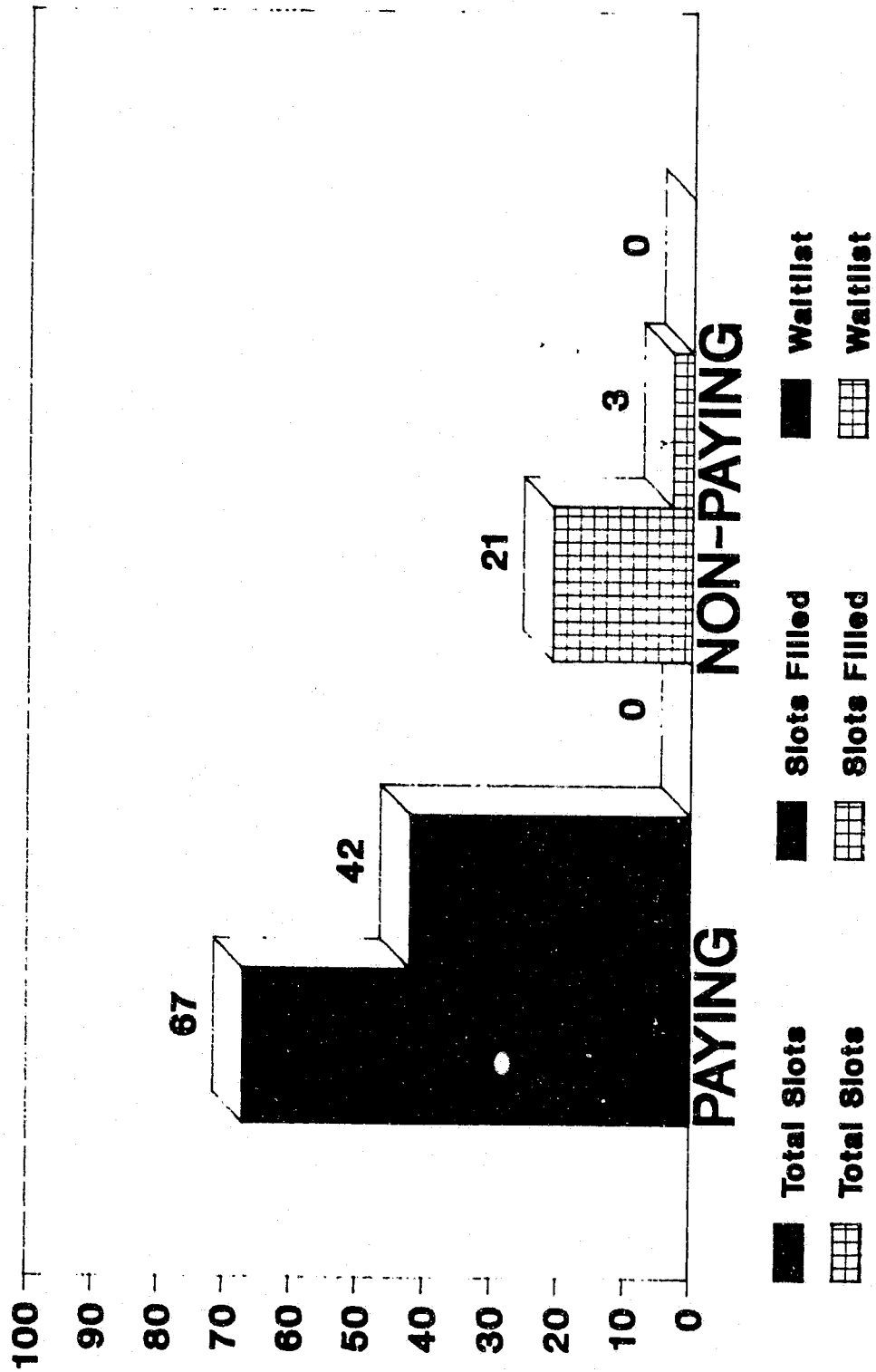
PRE-NATAL AND POST-PARTUM SLOTS



PRE-NATAL SLOTS

- **1600 Cocaine positive births in Dade County for 1990**
- **22% of these births were to women who had at least one previous cocaine positive birth**
- **Medicaid is currently available in the majority of cases**

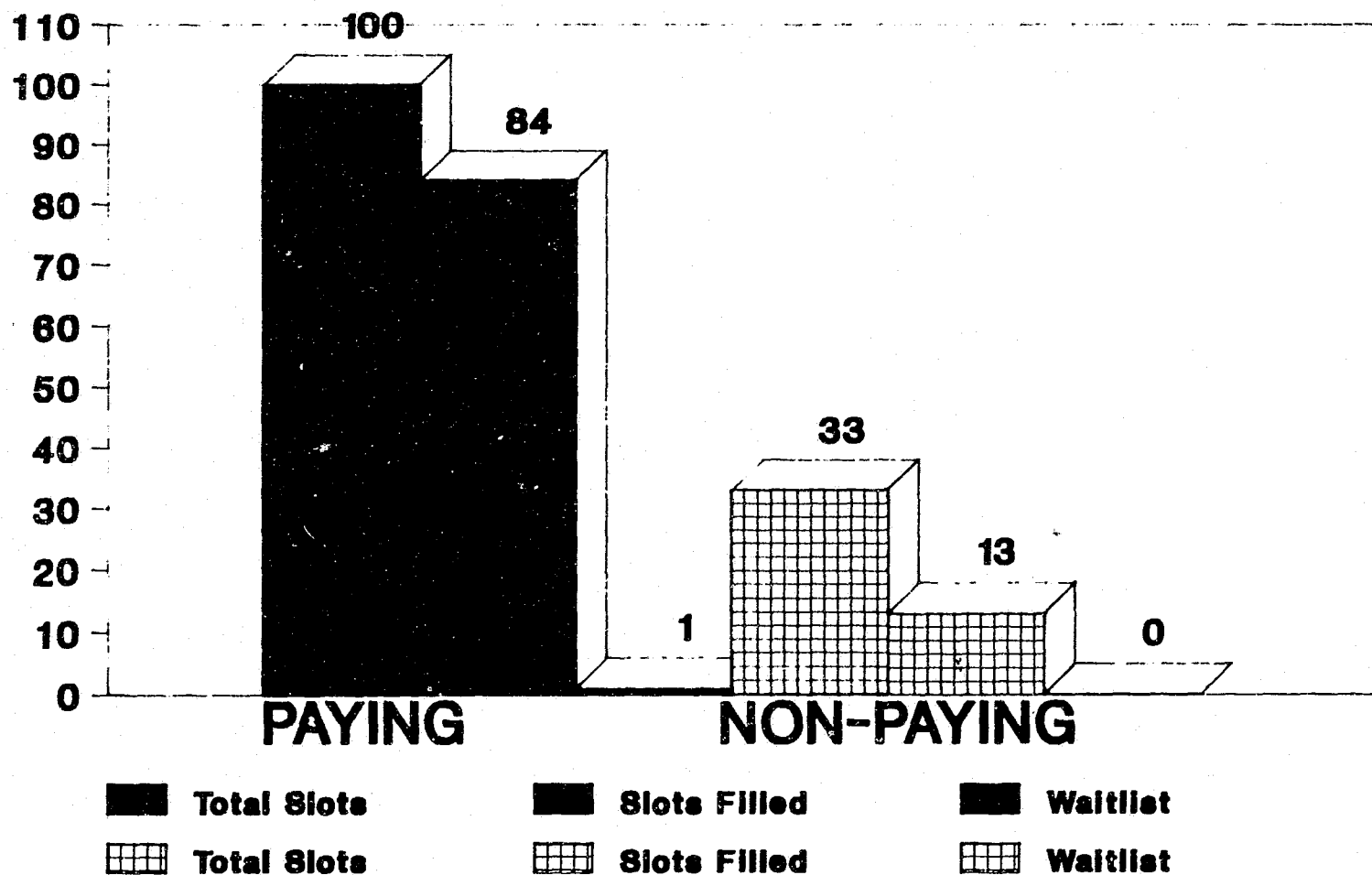
PRE-NATAL SLOTS



POST-PARTUM SLOTS

- **More information is needed regarding services such as childcare, parenting, nutrition, etc.**
- **Linkage between Pre-Natal and Post-Partum services not included in the survey**

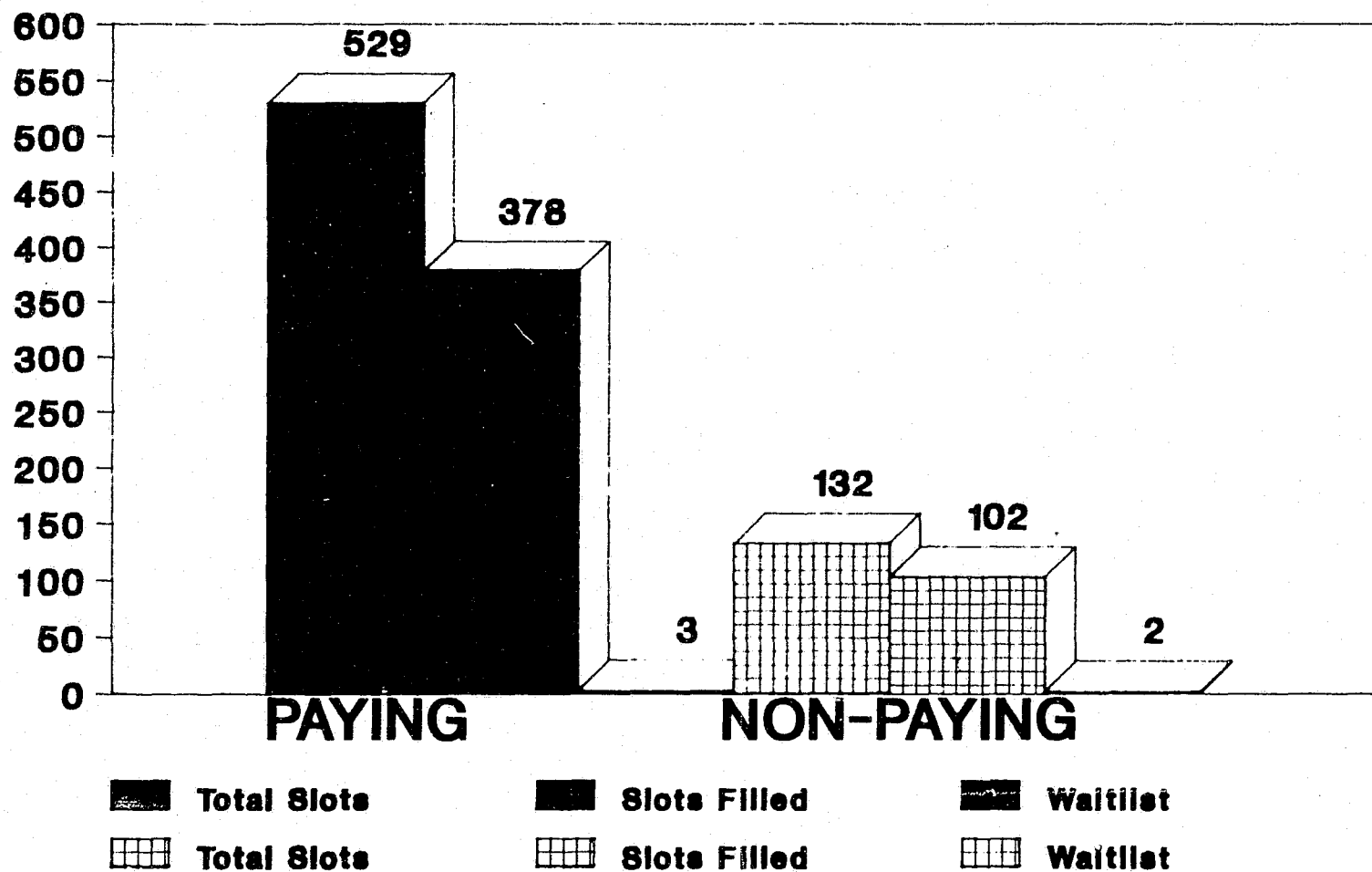
POST-PARTUM SLOTS



DUAL DIAGNOSIS SLOTS

- **Identification of slots are not restricted by licensing or staffing**
- **In-depth analysis is needed for programming in this area of treatment**

DUAL DIAGNOSIS SLOTS



AVAILABLE RESOURCES/APPARENT NEED

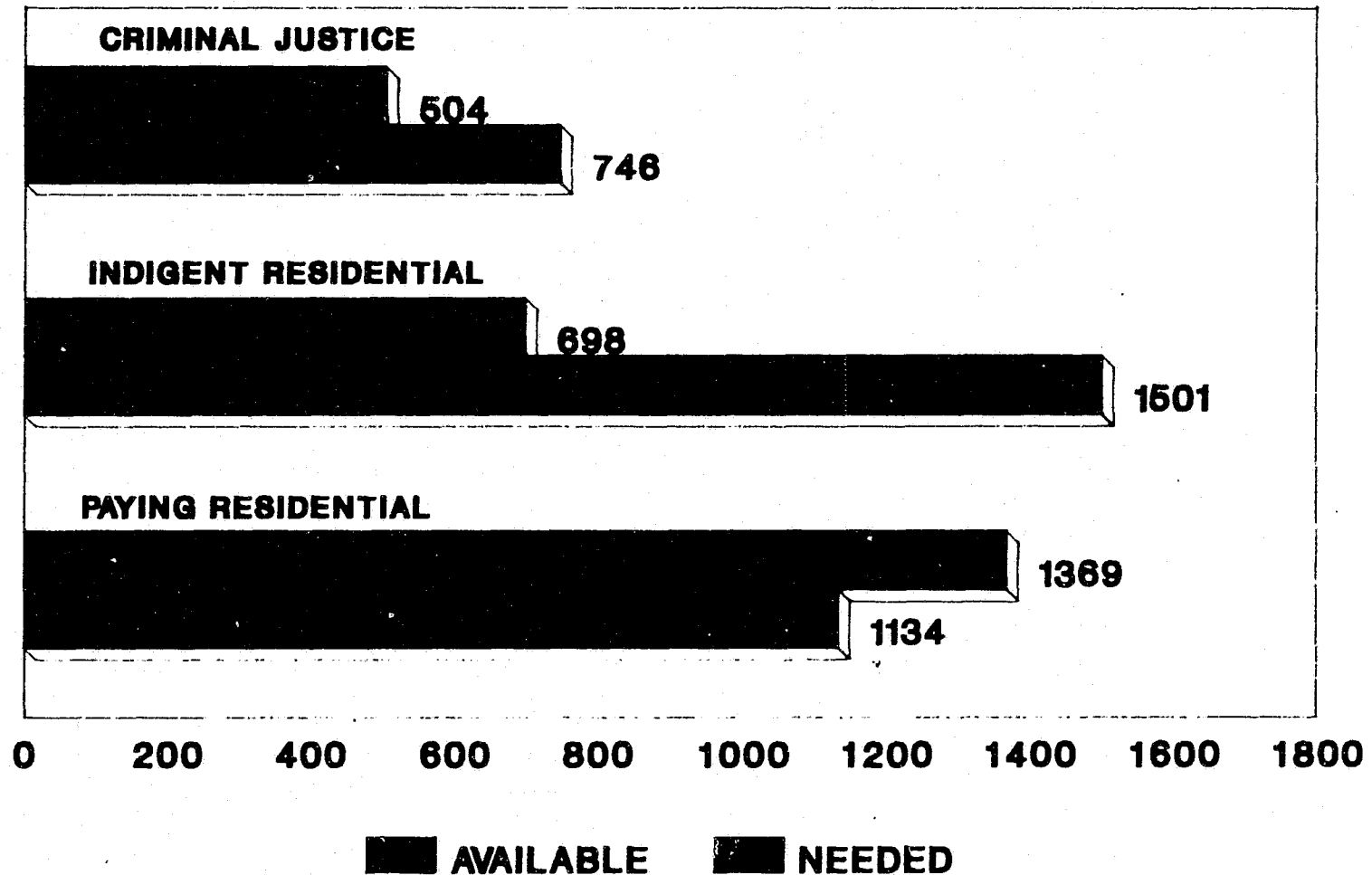


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A. BACKGROUND AND SIGNIFICANCE

Metropolitan Dade County has been involved in providing substance abuse treatment to Dade's residents since 1971. From the beginning, Metropolitan Dade County realized that in order for treatment to be effective, a comprehensive eclectic approach needed to be applied. The County also recognized the correlation between substance abuse and criminal activity. Taking these two issues into consideration, a comprehensive treatment program which would accommodate the needs of the community in general, and the criminal justice system was carefully planned. During the 1970s, the County's substance abuse programs were innovative in their treatment and were pioneers in their field. The County started one of the first in-jail substance treatment programs and one of the first Treatment Alternatives to Street Crime (TASC) programs.

The programs under the operation of the County grew and flourished until 1981 when budget cuts forced the closing of a number of units. With the closing of these programs, the increased demand for substance abuse services, and an escalating crime rate in the Miami-Dade area, the situation came to a head. In the spring of 1986, the Dade County Grand Jury came out with a report citing gaps in the community's abuse service system. The report indicated the need for increased services for substance abusers involved in the Criminal Justice System.

Metro-Dade government responded with a significant financial commitment for new substance abuse treatment efforts for criminal justice clients. In addition, lobbying efforts resulted in new State funding of approximately \$1 million for adolescent substance abuse programs. These funds served as the genesis for a major reorganization within the Department of Human Resources which resulted in the creation of the new Office of Rehabilitative Services (ORS).

In spite of these efforts, drug and alcohol abuse related crime continued to have a dramatic impact on the Dade County community, stretching the resources of law enforcement, prosecution, the courts and our correctional system to their limits. As a result of this serious problem, the Chief Judge of the Eleventh Judicial Circuit, the Metropolitan Dade County Manager, and the Chief Justice of the Florida Supreme Court, in an unprecedented action, implemented an innovative approach to attacking the problem. In November 1988, the Associate Chief Judge of the Eleventh Judicial Circuit, the Honorable Herbert M. Klein, began a special assignment to coordinate and lead public sector anti-drug efforts within the Dade County community.

Since November of 1988, the Metropolitan Dade County's Office of Rehabilitative Services, Office of Substance Abuse Control and the Dade County Department of Corrections and Rehabilitation have worked very closely with Judge Klein and others in the

development of a plan to combat this very serious problem here in Dade County. The plan, entitled Strategies for Action Combatting Drug and Alcohol Abuse in Dade County, focuses on eight key areas, three of which directly relate to the provision of services to the criminal justice population.

As a direct result of these efforts, several new and innovative initiatives have been implemented here in the Dade-Miami area. In less than two years, the number of treatment beds in local correctional facilities has been expanded from 100 to over 500 beds, and significant improvements have been made in the programming available within these programs. In addition, a comprehensive Diversion and Treatment Program (DATP) has been established to provide a timely and effective alternative for dealing with the large number of drug related offenses which come to the attention of the Dade County Court System. DATP, which is described in greater detail in Section B of this paper, has been specifically designed to treat large numbers of individuals using the latest techniques available in substance abuse treatment, including Acupuncture. The program's population is also closely monitored through regular urinalysis.

The Diversion and Treatment Program was also designed, and implemented with the recognition that truly effective substance abuse treatment must consist of a holistic approach to treating the multiple problems which have influenced the individual's behavior and his addiction. With this in mind, a partnership was established with Miami-Dade Community College (MDCC), the leading two-year college in the United States. DATP's aftercare component has two locations operating directly on the North and South campuses of Miami-Dade Community College. MDCC staff conducts assessments of those DATP clients determined to be in need, with the goal of providing a full range of services, academic, vocational and support, which are necessary to fully ensure the maintenance of healthy and productive lifestyles.

B. PROGRAM DESCRIPTIONS

DIVERSION AND TREATMENT PROGRAM

The Diversion and Treatment Program (DATP) is a three-phase comprehensive substance abuse intervention strategy designed to intervene, at the earliest stages, with offenders charged with substance abuse related offenses. DATP is a joint project of the Eleventh Judicial Court, Office of the State Attorney, Office of the Public Defender, Department of Corrections and Rehabilitation, Department of Human Resources' Office of Rehabilitative Services, and Miami-Dade Community College. Two of the program's most innovative components are the aftercare services available through Miami-Dade Community College and the Acupuncture treatment component.

Miami-Dade Community College (MDCC) provides comprehensive, on-campus services for this population once they have completed the intensive substance abuse and intervention services in Phase I and Phase II of DATP. Appropriate offenders receive a comprehensive assessment by MDCC personnel to determine their level of academic and vocational functioning. A wide range of educational, vocational, remedial and training programs available through the college are tailored to each individual's needs. For that portion of the population needing other services not provided by MDCC, DATP utilizes a host of other resources including Dade County public schools to provide the necessary resources.

The acupuncture component of DATP is modelled after a unique design for outpatient substance abuse treatment which has been identified as a viable intervention in the treatment of addictions. Similar programs are successfully treating large populations at reduced costs in clinics around the world. This component was developed with the assistance of Dr. Michael Smith, Director of the Lincoln City Hospital Acupuncture Clinic located in New York, which was originally designed to provide an alternative to Methadone maintenance treatment for Heroin addicts. Over the years, the effectiveness of acupuncture treatments as a method of detoxifying and reducing the craving for many substances became evident. The experiences gained by Dr. Smith over the past fifteen years were incorporated into the DATP design. ~ ~

DATP is a twelve month, three-phase, multi-disciplinary approach to substance abuse treatment that encompasses both traditional and innovative interventions. Phase I provides assessment and evaluation techniques designed to identify individuals who are most likely to benefit from acupuncture treatment. Daily needling sessions reduce cravings, enabling participants to better utilize conventional treatment interventions. Urinalysis testing, as part of initial assessment efforts, helps identify those individuals needing more intensive treatment. These individuals are referred to more appropriate treatment resources.

Phase II addresses the participants' receptiveness to substance abuse treatment in an outpatient setting through the use of acupuncture, emphasizing a drug free lifestyle, social adjustment and the development of mechanisms for coping with stressful situations. Urinalysis monitoring continues as a strong component of this phase.

Participants progress to Phase III where they receive on-going substance abuse support and urinalysis surveillance at both aftercare locations. Client tracking encourages abstinence, thereby maximizing potential for recovery and ensuring compliance with court ordered release conditions.

With its comprehensive service approach, this program provides a viable option for the individual seeking recovery. Further, the program provides for early intervention and serves as a meaningful alternative to incarceration for individuals who, with appropriate support, can adequately function in the community environment. Individuals successfully completing DATP may move to have their arrest records expunged. Those individuals failing to comply with program requirements will be referred back to the courts at any phase for further court action.

CORRECTIONAL SUBSTANCE ABUSE REHABILITATION AND AFTERCARE PROGRAM

The Correctional Substance Abuse Rehabilitation and Aftercare Program (CSARAP) represents an innovative and comprehensive approach to treating offenders with substance abuse problems who are sentenced to Dade correctional facilities. CSARAP takes advantage of the secure Corrections environment to employ a continuum of intensive substance abuse treatment interventions. CSARAP is a joint project of the Eleventh Judicial Circuit Court, Office of the State Attorney, Office of the Public Defender, Department of Corrections and Rehabilitation, and the Department of Human Resources' Office of Rehabilitative Services.

CSARAP is a twelve-month, three-phase, multi-disciplinary approach to substance abuse treatment that encompasses both traditional and innovative interventions. Individuals may begin the program in either Phase I or Phase II, based on an assessment of their treatment needs. While incarcerated, offenders receive a comprehensive assessment to determine their level of academic and vocational functioning. This information is utilized to assist in decisions regarding client placement in the correctional facilities' educational and vocational programs as well as their suitability for the Phase III aftercare component.

Those offenders successfully completing Phase I and/or Phase II of CSARAP are eligible for early release from incarceration, contingent upon their participation in an ORS Aftercare component. ORS staff will be responsible for placing these individuals in programs operated by other community resources.

CSARAP utilizes both the Dade County Stockade and Turner Guilford Knight Correctional Facility, with 227 beds available at the Stockade and 288 at Turner Guilford Knight (96 of these are for females offenders). During Phase I of the program, selected inmates are in a modified "locked down" status for approximately the first 30 days of program participation. Phase I addresses the participants' receptiveness to substance abuse treatment within a forensic setting through the use of acupuncture, and emphasizes prison adjustment and adaptation to the treatment setting. The individual's specific needs relating to the modification of his/her drug seeking behavior are also addressed at this time.

After this initial 30 day phase, participants who successfully complete Phase I requirements may petition to move to Phase II. All Phase II participants are eligible for participation in either work details or educational and vocational programs available through Corrections and the Dade County Public School system. Phase II is designed to promote the participants' sense of personal responsibility and to facilitate a smooth transition into the community. Acupuncture continues to be a key component of the program and is made available upon request to the inmate population. In addition to their work responsibilities, substance abuse treatment continues to be provided by ORS staff who will focus on ensuring the transition of clients into Phase III aftercare components. ORS staff are responsible for developing a total release plan which takes into account the individual's housing and financial needs.

Phase III provides a comprehensive aftercare program with ongoing substance abuse support, enabling the participants to maximize their potential and become self-sufficient through education and gainful employment. Ideally, the participants in Phase III are on probation under the supervision of the Florida Department of Corrections.

Those individuals who fail to comply with the requirements of the Department of Corrections and/or to successfully complete the CSARAP will be referred back to the courts for violation of probation and possible sanctions including confinement in the State prison system.

CSARAP provides a meaningful alternative to long-term incarceration and expensive residential treatment for individuals who, with appropriate support, can adequately function in a community environment. This program, with its comprehensive service approach, provides a unique opportunity for the individual seeking recovery.

C. CLINICAL ASPECTS OF ACUPUNCTURE

ACUPUNCTURE TREATMENT FOR SUBSTANCE ABUSE

Acupuncture helps people recover from drug and alcohol problems. It is used in clinics throughout the United States. Acupuncture can decrease cravings for drugs or alcohol, reduce withdrawal symptoms, relieve tension, and help people relax. Acupuncture treatments, taken enough times, clear the mind, build energy, and give a sense of well being.

According to Chinese tradition, placing acupuncture needles in the ear affects specific organs such as the liver and kidneys. Western science has confirmed that acupuncture treatments change levels of chemicals in the body and act on the nervous system. Acupuncture itself is not a substitute for therapy but is used in addition to counseling and self-help programs.

ACUPUNCTURE TREATMENT PROGRAM

Five tiny, very thin needles are placed in each ear, and then the client rests quietly for 45 minutes. This is a time for him/her to relax, meditate or think about changes to be made in his/her life. In detoxification treatment, points in the ear correspond to specific organs including the lungs, liver, kidneys, and nervous system. One of the points is for relaxation. The treatment triggers the release of natural body chemicals, including endorphins, which help reduce cravings for drugs, ease withdrawal symptoms, and increase relaxation.

HOW WILL THE CLIENT FEEL DURING THE TREATMENT?

Once the needles have been placed, the ear may tingle or feel warm. Some people even fall asleep. These are normal responses. Some people say they feel very relaxed when they are having a treatment, other don't feel much at all. Even if they don't feel much, they are getting benefits from treatment. Acupuncture is most effective after a series of treatments, over a period of time.

THE DETOXIFICATION PROCESS

During detoxification, your body filters out the toxins that you have been storing up. Blood circulation begins to improve. Sometimes during the detoxification period the client may feel achy, not sleep well, be cranky, or even have drug dreams. The client should let the acupuncturist know if he/she has any of these symptoms so that additional acupuncture points can be added to the treatment.

HOW IT ALL STARTED

Although acupuncture is fairly new to this country, it has been practiced in China and other Asian countries for over 3,000

years. Acupuncture treatment for addicts started in China when a doctor applied electric acupuncture to surgery patients for pain. Several of the surgery patients were heroin addicts. The doctor noticed that the acupuncture treatments reduced or stopped their withdrawal symptoms. In this country, both medical doctors and acupuncturists have spent many years testing acupuncture treatments for substance abuse. Results of their work helped develop the treatment we use today. In fact, acupuncture is now used very successfully for all types of drug addiction.

APPENDIX A

PROCEDURES FOLLOWED BY THE MIAMI METRO-DADE ACUPUNCTURE DRUG DETOXIFICATION CLINICS

The acupuncture detoxification clinics are part of the Office of Rehabilitative Services Substance Abuse Program functioning within Department of Corrections Facilities.

THERAPEUTIC APPROACH OF SUBSTANCE ABUSE PROGRAM

Two major therapeutic approaches of substance abuse programs supported by the tenets of AA, NA, CA, as well as behavioral and analytic based theorists are to encourage self-responsibility and active participation in the recovery program. The drug abuser or drug addict requires a structured program which will allow, encourage, and foster self-responsibility as well as responsibility towards others. The more the client participates and has responsibility in his treatment the quicker he can be expected to recover. This self-responsible active participation approach is considered part of good health care delivery. An example of this type of self-responsible active participation is demonstrated with the diabetic patient, where the diabetic actually learns to inject the insulin him/herself.

SECONDARY THERAPEUTIC APPROACHES

In addition to self-responsibility and participation, substance abuse programs encourage reflective thinking, respect for self and others, enhancement of self-esteem, goal setting, cooperation, communication of feelings, listening and other communication skills. The program also encourages punctuality, good hygiene, and the development of work ethic.

ALIGNMENT WITH THERAPEUTIC APPROACHES

The acupuncture detoxification treatment protocol is designed to follow the therapeutic approaches of the overall substance abuse programs. The clients participate in their treatment in a variety of ways including: the maintenance of the clinic room, respecting and reminding others to respect the quiet, meditative milieu, signing in and out of the clinic in an orderly manner, swabbing their own ears with an alcohol pad prior to needling, removal of their own auricular point needles, wiping their ears after treatment, asking for assistance when needed, making sure the acupuncturist removes all body point needles, discarding of waste projects appropriately.

The insertion of auricular acupuncture needles is 0.1 inch or less in depth and does not include insertion into any muscle tissue. The needle is inserted into the skin layer and does not go into the cartilage, thus the removal of the needle can not risk damage to muscle tissue as with body points. The client is instructed to wipe out his ears with the gauze pad after

removing the needles. If one of the points should bleed, the client already has a gauze pad. He is instructed to hold the gauze pad on the point and call the acupuncturist to handle the bleeding.

ACUPUNCTURE DETOXIFICATION TREATMENT ORIENTATION

All clients are required to attend an orientation session about the acupuncture treatment. Orientation sessions are given once a week to all new clients and initiated clients who may have questions. The orientation session includes a presentation on acupuncture and the acupuncture detoxification treatment; instructions on the protocol of the clinic; a demonstration of the auricular treatment; and a question and answer period.

PROCEDURES FOLLOWED BY THE CLIENT (INMATE):

1. Washes hands with soap and water before entering clinic.
2. Signs-in with drug counselor upon entering clinic and receives file card and a clean disposable bowl containing the following:
 - a. 1 alcohol prep
 - b. 1 sterile gauze pad
3. Sits in a comfortable chair, opens alcohol prep and wipes out both ears with alcohol wipes.
4. Remains seated with the needles inserted for 45 minutes after acupuncturist inserts needles according to the acupuncture detoxification treatment protocol.
5. Removes own auricular needles or has the acupuncturist remove the needles after 45 minutes and drops them into the disposable bowl. If the client should bleed he is instructed to hold his gauze pad on the point of the ear that has blood and call the acupuncturist over to take care of the ear point. If the client contaminates his hands with his own blood, client washes hands with soap and water.
6. Disposes of paper and plastic wrappings in the trash containers.
7. Returns all possibly infected materials (needles, bloody gauze pads, etc.) for appropriate disposal of infectious waste.
8. Has ears inspected by the counselor or acupuncturist for cleanliness; if there is a problem the acupuncturist responds appropriately.
9. Signs out by returning file card for verification of needle count and time of check-out.

PROCEDURES FOLLOWED BY ACUPUNCTURIST:

1. Washes hand with soap and water before starting clinic.
2. Wears a rubber glove on hand that is not doing the needling and uses this hand to handle dirty or bloody gauze or alcohol preps as necessary when needling. The insertion of the acupuncture needles does not draw blood. The needles

are #32 gauge (extremely thin) and simply pierce the skin. On occasion the removal of the needles draws blood. The hand doing the needling is not gloved. This is necessary because the needling technique requires a twirling procedure which is not possible to do with a rubber glove. When the acupuncturist removes needles from the person the acupuncturist should change gloves and wash hands. When handling something bloody the acupuncturist should put gloves on both hands and then when finished, remove gloves, wash hands and put on new gloves before treating the next client.

3. Picks up the prepared needles by the wrapper and may rest needle package on client's shoulder or hold needles with non-needling hand so that needles are easy to access for the auricular treatment.
4. Treats additional body points for side effects of detoxification (upon the discretion of the acupuncturist), with the permission of the client or upon the request of the client
 - a. Selects points appropriate to the presenting problem
 - b. Inserts and removes all body needles
 - c. Records additional treatment on the client's treatment card
5. Inserts needles following sterile procedure-i.e. needle is grasped by the handle so that the needle shaft and tip are not touched and do not touch anything before insertion.
6. Wash hands and change glove if client presents with an obvious skin infection, severe acne, or if client has bled.
7. Re-needles auricular point using a new sterile needle should a needle fall out of the ear at any point after being inserted.
8. Removes all body point needles using gloved hands and gauze pads or alcohol swabs.
9. Removes auricular point needles upon request.
10. Follows appropriate medical and acupuncture procedures if a client should faint.
11. Discards needles into biohazard disposal container and returns biohazard disposal container to the medical clinic.
12. Leads an orientation meeting (one a week) for new clients to explain the acupuncture treatment, give a demonstration of the needling, and enlist clients into the acupuncture treatment program.

PROCEDURES BY THE COUNSELORS

1. Washes hands before starting clinic
2. Wears rubber gloves when checking out clients. The counselor is to avoid touching any of the materials but rather is to direct the client as to the proper disposal. If possibly infectious material is touched by the counselor the gloves are changed in the hands are to be washed.
3. Records all clients names on a daily roster, maintains files, assists the acupuncturist in recording the date and times, assists with the certifications of treatment, checks

all clients into the clinic, checks clients out of clinic at the end of treatment period.

4. Check - Out
Records time out, counts needles returned (needles are to be counted by eyeing only, used needles are not to be touched by anyone at the check out point) checks that ears have been cleaned with a gauze pad, gives out alcohol swabs and gauze pads as needed or requested.
5. Is responsible for the maintenance and order of the clinic
6. Elicits clients (inmates) into the acupuncture treatment program

INFORMATION RECORDED ON CLIENT FILE CARDS:

1. Date
2. Type of treatment delivers:
 - a. Auricular detoxification
 - b. Body points and associated symptom being treated
3. Number of points needled
4. Time needles were inserted
5. Time needles were removed
6. Number of needles turned in
7. Initials of person checking out client and counting needles turned in
8. Signature of acupuncturist