

MOUD in Corrections: Moving to Implementation Notetaking Template – Breakout Rooms

Day: 1 Interactive Breakouts: Taking a Lay of the Land
Room name: 5B: Fully adopted, some having trouble maintaining/expanding and some have no problems

Questions asked:

Not really any questions were asked

Discussion themes that arose:

Education – the need for all stakeholders to be educated to reduce stigma, inform better practices, to learn the process and how to implement fully.

Major barriers: continuity of care, whether it be from facility to facility or from the facility to the community, if clients are released to a facility without medication, or released to the community where MOUD cannot be easily accessible – how do we address that prior to release?

Stigma is another major barrier, could this be avoided by unifying this community of individuals to a singular unit where the staff are able to assist, or how do you provide the education/support for multiple units implementing MOUD?

Transfer of medical records and how that plays a major role in continuity of care

Operational changes could make the MOUD implementation process more successful

Summary (a brief description summarizing key points that came out of interactive breakout session):

Education, reducing stigma, consistency, buy-in, and continuity of care were all discussed.

We spent a lot of time discussing current barriers that each were experiencing.

We had several members from who were unable to have lengthy discussion, due to this it was a lot of recognizing and thinking independently on how to address these barriers.

At the end, we discussed several points to focus on as challenges: operational, continuity of care, assessment, and deflection/diversion