



Montana Department of Corrections  
Clinical Services Division

Connie Winner  
Clinical Services Division Administrator

# *CLINICAL SERVICES DIVISION (CSD)*

- Responsible for:
- Treatment and oversight of all aspects of:
  - MEDICAL
  - BEHAVIORAL HEALTH
  - DENTAL
  - TREATMENT SERVICES
    - Substance Use Disorder, Sex Offender Treatment

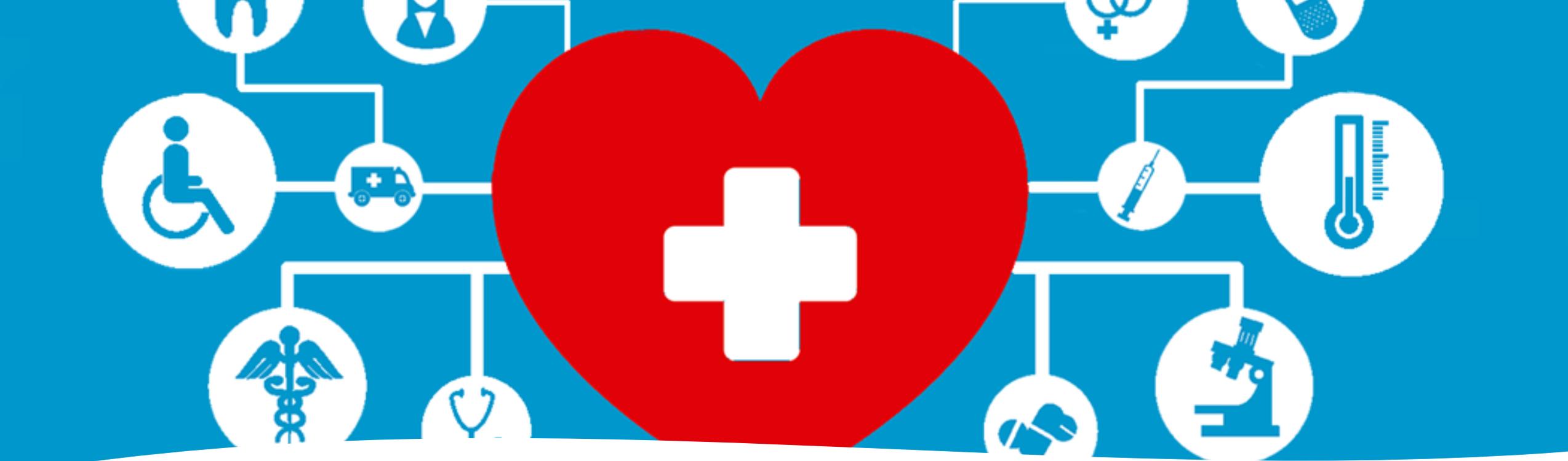


**Health  
care  
Services**

# CLINICAL SERVICES DIVISION

- Constitution and case law
- National Commission on Correctional Health care
- State law, policies and procedures
- Community standard of medical care





CSD patients:

- Cancer
- Coronary artery disease
- Diabetes
- Stroke
- ALS
- Liver disease
- Dental infections

# CSD Behavioral Health Patients



- Anxiety Disorder
- Depression
- Post Traumatic Stress Disorder
- Psychosis
- Schizophrenia
- Personality Disorders
- Substance Use Disorders



# CSD MEDICAL SERVICES

- An infirmary
- A clinic
- A behavioral health treatment center
- A nursing home
- A dental clinic
- Vision services

# Overview of Clinical Services Division

- Central Office staff – Helena;
- MSP Infirmary, Behavioral Health, Treatment Services, Dental and Vision services – Deer Lodge;
- MWP Clinic, Behavioral Health, Treatment Services, Dental and Vision services - Billings;
- Pine Hills Clinic, Behavioral Health, Treatment Services, Dental and Vision services – Miles City;
- Riverside Special Needs Unit – Infirmary -- Boulder.

# CENTRAL OFFICE STAFF HELENA

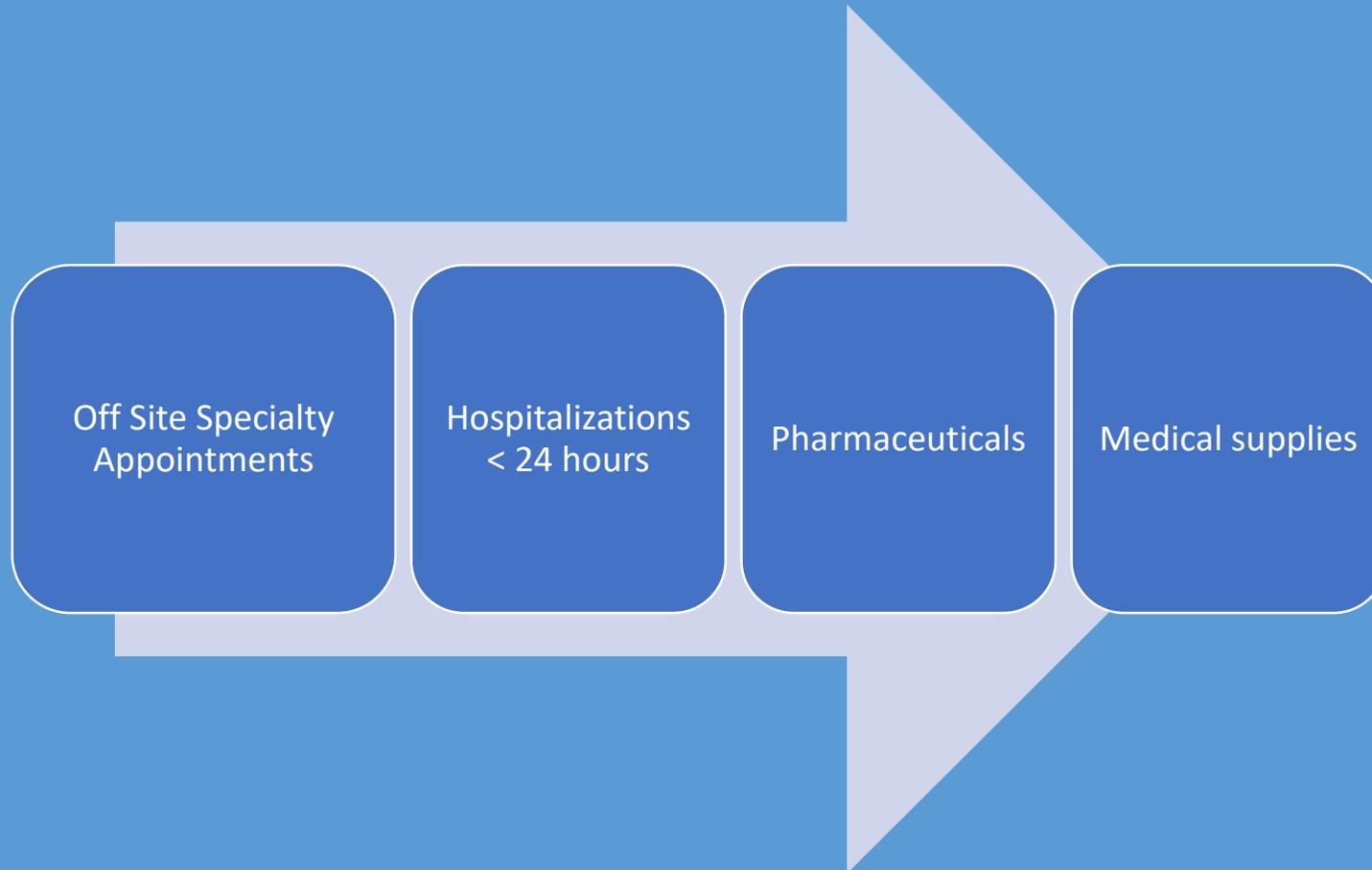
- Administrator
- Medical Services Bureau Chief
- Behavioral Health Bureau Chief
- Administrative Assistant



# CENTRAL OFFICE STAFF

- Managed Care RNs;
  - Provide resources and help coordinate/ensure consistency in services throughout all facilities;
  - Appropriate placement of offenders;
  - Care coordination for hospitalizations;
    - Quality of care
    - Cost-effective care
    - Follow-up care;
    - Necessary supplies/prescriptions
    - Respond to family inquiries, letters, grievances
    - Review medical and pharmaceutical requests and invoices

# Department of Corrections Payment Sources



Department of Corrections  
budget pays at MEDICAID  
RATE

# Department of Corrections Payment Sources

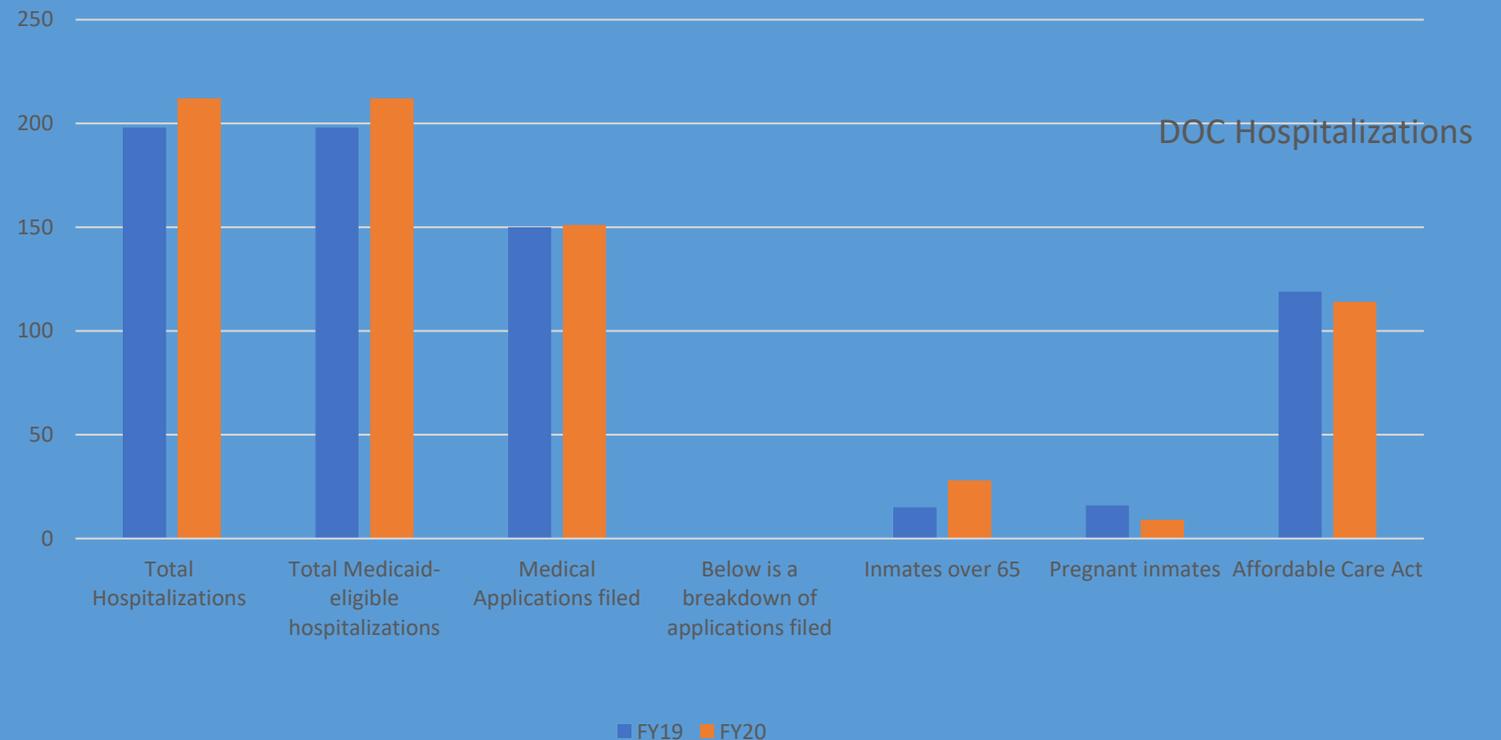
Hospitalizations > 24 hours

FEDERAL MEDICAID

# Central Office Staff Medicaid Admin Officers

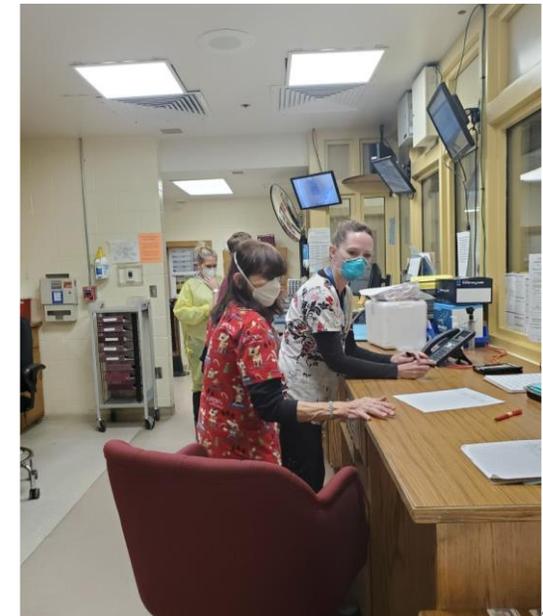
## Medicaid Administrative Officers –

- Medicaid applications
  - Hospitalizations
  - Eligibility
  - Claims review



# CSD Services at MSP

- 24-hour medical care
- Infirmary
- Clinic
  - Out-patient sick call
  - Chronic care
  - Urgent and Emergent Care
  - Proactive Care
  - Routine and Preventative
  - Medication Management
  - Re-entry to community services



# Patient Care . . . . .

Medical providers conduct between 1500 to 2000 on-site patient visits per month

Psychiatry services range from 141 to 349 visits per month

Does not include:

- Therapeutic treatment services



# CSD Dental and Vision Services . .

Dental Intake assessments;

Routine dental care;

Emergent dental issues;

Dental services range from a low of 89 due to COVID and a high of 456 visits per month

Vision services



# BEHAVIORAL HEALTH AND TREATMENT SERVICES

- Intake screening;
- Behavioral health treatment by on-site staff
  - Individual therapy
  - Group therapy
  - Urgent/Emergent calls
  - Education
- Tele-psychiatry visits



# Offenders with Behavioral Health Diagnosis MSP

- 792 → Number of inmates with a mental health diagnosis
- 301 → Number of inmates with diagnosis of Serious Mental Illness (SMI)
- 600 → Number of inmates on psychotropic medications
- 15 → Guilty but Mentally Ill (GBMI)
- 47 → Infirmary admits for mental health reasons
- 188 → Emergency on-call requests
- 200 → Requests for individual therapy on waiting list

# TREATMENT SERVICES.....

- Substance Use Disorder

- Group sessions
- Individual sessions
- Intensive SUD Program
  - Treatment in a dedicated housing unit
  - Offenders working program together
  - 119 participated and graduated by 9/1/2020
  - Restarting program after COVID

# TREATMENT SERVICES.....

- Sex Offender Treatment
  - Approximately 60 SOP I and 60 SOP II completed per year
  - Approximately 190 BOPP evaluations completed per year
  - Waiting list:
    - SOP I – 260
    - SOP II – 100
    - SOP III – 180
  - Reviewed duties –
    - Created SOP Tech position
    - Contracted with two part-time therapists
    - Moved SOP treatment to housing unit with 55 SOP offender capacity



# National Commission on Correctional Health Care

## NCCCHC Accreditation

- First accredited: 2011
- Subsequent Accreditations:
  - 2014
  - 2017
  - 2020 – delayed due to COVID-19



# CSD Services at Montana Women's Prison

- Clinic setting for medical;
  - Out-patient sick call;
  - Chronic care;
  - Routine and Preventative care;
  - Vaccinations;
  - Health Education;
  - Medication Management;
  - Collaboration with DPHHS and River Stone Health for on-site mammograms and cervical screenings.



## MWP services . . . . .

- On-site behavioral health and treatment services:
- Co-occurring treatment services to address both behavioral health and substance use;
- Implementation of gender specific curricula;
- Incorporating criminal thinking, substance use and trauma;
- Ability to provide psychological assessments;
- Staff training in Dialectical Behavior Therapy (DBT), Personality Disorders

# CSD Services at Pine Hills Correctional Facility

Clinic setting for medical;

- Sick call
- Routine medical care
- Vaccinations
- Health education
- Chronic care
- Medication management
- Urgent/Emergent

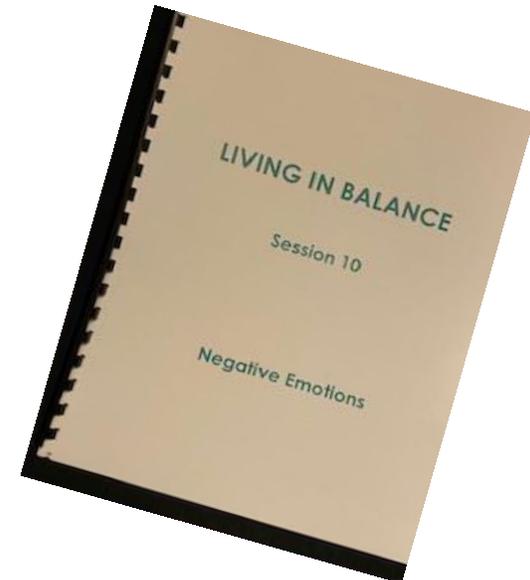
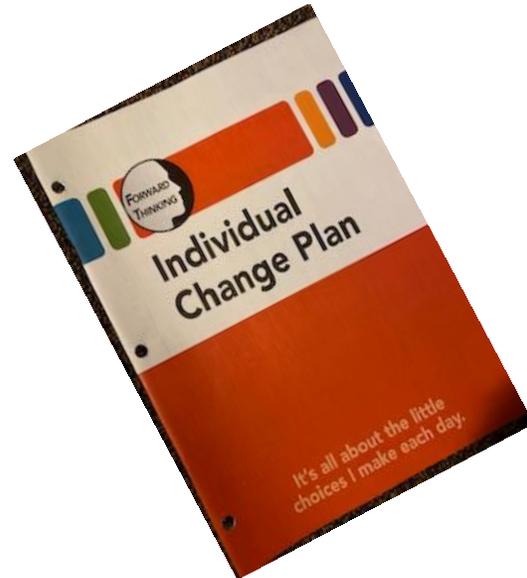
Transported to community hospital for serious illness or injury.



# CSD Services . . . .



- On-site mental health therapists and treatment services:
  - Individual therapy
  - Group therapy
    - Substance Use Disorder
    - Sex Offender Treatment
    - Tele-psychiatry services





# RIVERSIDE SPECIAL NEEDS UNIT

## Residents with chronic medical conditions

- Dementia
- Heart disease
- Diabetes
- Cancer
- Sight or hearing impaired
- End of life care
- Residents who use walkers, wheelchairs, confined to bed
- Assistance with activities of daily living –
  - feeding, bathing, dressing
- Medical Parole

## **MISSION**

The Montana Department of Corrections enhances public safety, supports the victims of crime, promotes positive change in offender behavior, and reintegrates offenders into the community

## **VISION**

To promote and contribute to the success of individuals engaged with the criminal justice system while providing safety and security for victims and Montana communities

## **VALUES**

We are Professional and Respectful.  
We work with the highest level of Integrity and Dedication to achieve excellence

## **GOALS**

- Increase safety of communities, staff and offenders**
- Empower, inform and support victims of crime**
- Increase offender success and reduce recidivism**
- Effectively collaborate with criminal justice partners**
- Implement an integrated healthcare model at all secure care facilities**
- Advise and educate the public**
- Invest in our staff for their professional development, growth and success**



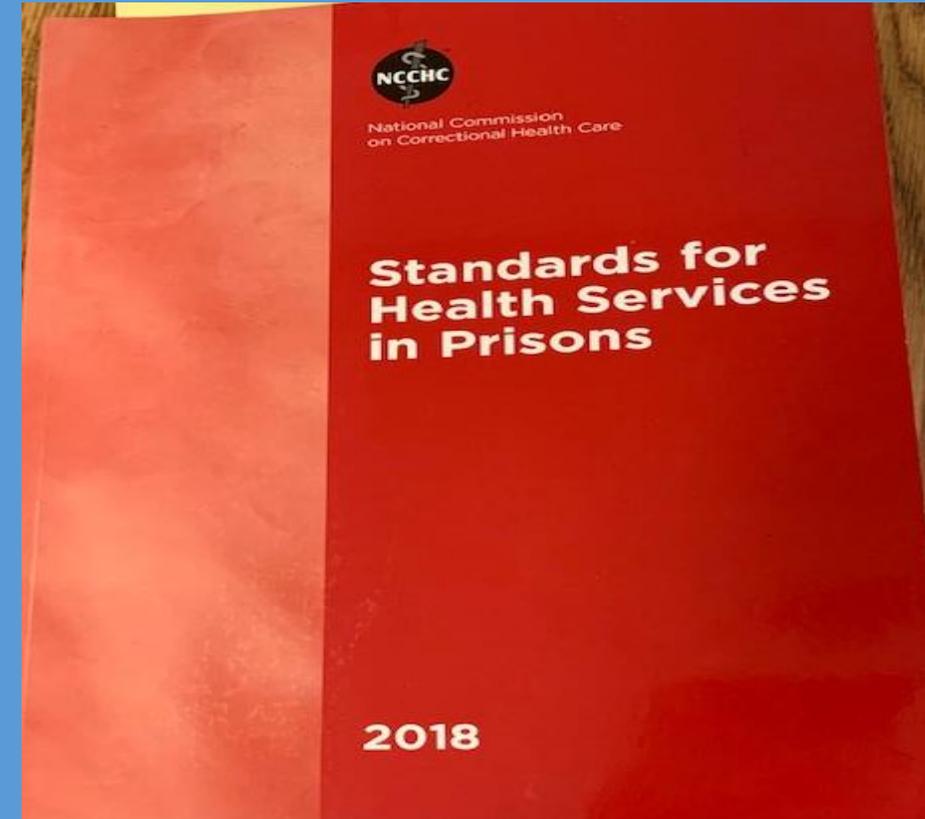
<b>Strategic Goal</b>	<b>Implement an integrated healthcare model at all secure care facilities</b>
<b>Objective:</b>	<b>Improve offender healthcare through a wholistic approach to treatment</b>
<b>Activities:</b>	<ol style="list-style-type: none"> <li>1. Establish multidisciplinary healthcare teams</li> <li>2. Draft a protocol for assessing cooccurring medical and treatment needs</li> <li>3. Procure and implement electronic health records</li> </ol>
<b>Performance Measures:</b>	<ol style="list-style-type: none"> <li>1. Multidisciplinary teams include medical, mental health, chemical dependency and addiction treatment professionals who meet on a regular basis will be established by July 1, 2019.</li> <li>2. Finalize process for assessing cooccurring medical and treatment needs by November 1, 2019.</li> <li>3. Procure electronic health records by July 1, 2020.</li> <li>4. Develop an implementation plan within 3 months of procurement.</li> <li>5. Utilize electronic health records to measure success.</li> </ol>

A photograph of a room filled with shelves of colorful, folded fabric bundles. The bundles are arranged in rows on wooden shelves, creating a dense, multi-colored wall. The colors include red, blue, green, yellow, and purple. The text "INTEGRATED HEALTH CARE MODEL . ." is overlaid in white, sans-serif font across the center of the image. Below the main text, there are two small white dots.

# INTEGRATED HEALTH CARE MODEL . .

. .

# ELECTRONIC HEALTH RECORD. . . . .



# ELECTRONIC HEALTH RECORDS. . . . .

- Not only will the EHR provide efficiencies with staff
- Ensure NCCHC standards are met
- Increased quality of patient care
- Integrated health care for the patient
- Data will be easier to acquire!







# ELECTRONIC HEALTH RECORDS

## Review Pharmaceutical Costs and Efficiencies. . . . .

- In the past, CSD compared pharmaceutical costs with 340B and Medicaid pricing
  - Our price was less
- Working with Governor's Office to:
  - Review pricing
  - Efficiencies
  - Other options



# CHRONIC ILLNESS & MEDICATION

- 974 Chronic Illnesses
- 518 patients with chronic illness
- Average number of Rx's per month = 4500
- Pill Boxes prepared by Nursing staff = 650
- AVERAGE MONTHLY BILL: \$235,000 TO \$245,000

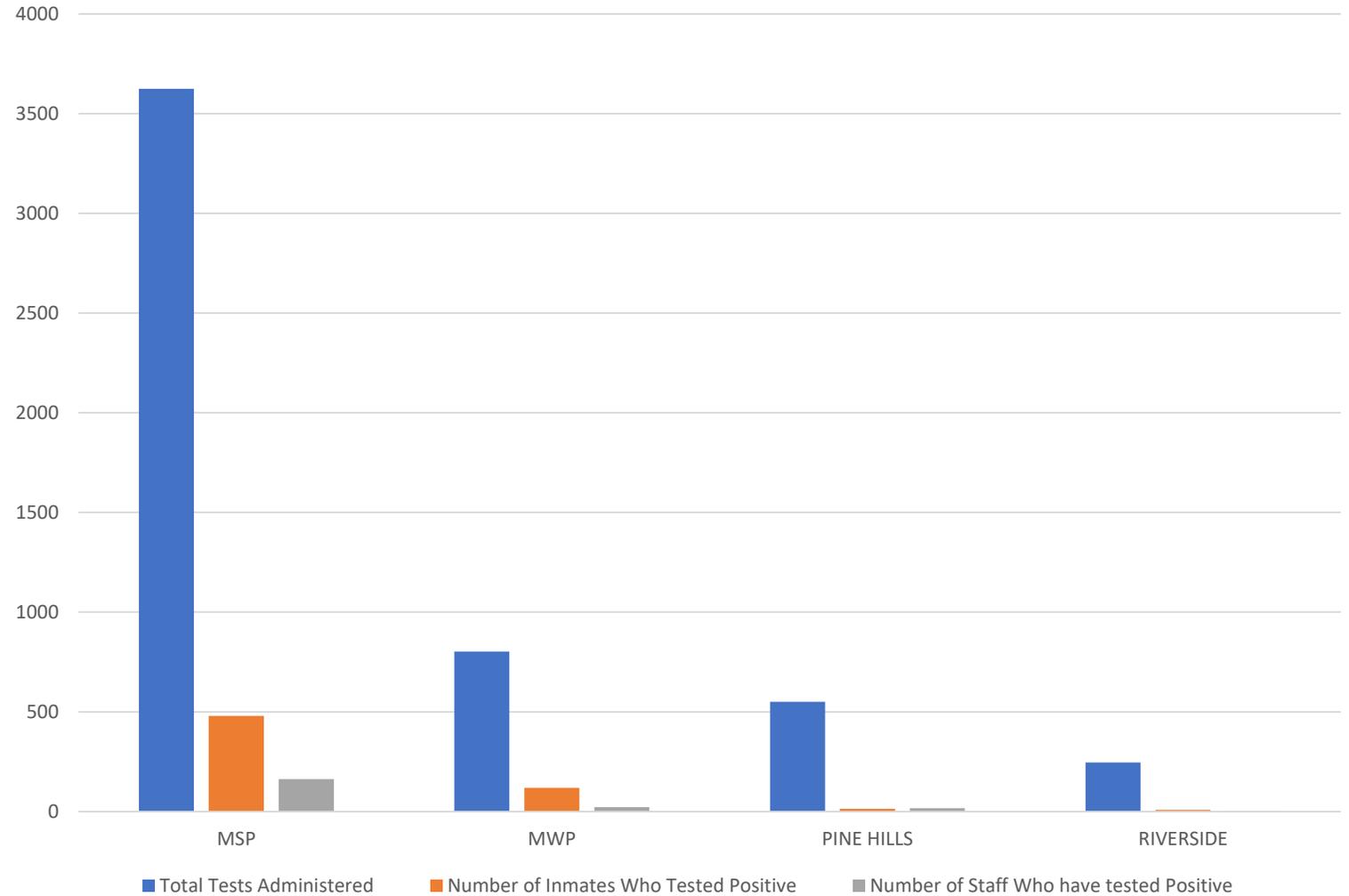
Chronic Care	FY-20
CAD/Cardiac	88
Diabetes	101
HIV	9
Hypertension	311
Hyperlipidemia	171
Pulmonary	153
Seizures	59
Thyroid	82



- Early planning
  - Education
  - PPE
  - Over-flow infirmary
- Proactive measures
  - Daily Screening staff and offenders
  - Review offender movement
  - Education
  - Communication
  - Collaboration

# COVID TESTS ADMINISTERED

NUMBER OF COVID TESTS ADMINISTERED  
(as of 1/7/2021)



# COLLABORATION

- DPHHS
- DES
- Community Hospitals
- Infectious Disease Specialists
- Local Health Care Officials



**MONTANA DISASTER  
AND EMERGENCY SERVICES**  
*Creating a Disaster Resilient Montana*



We were so happy and relieved to see the Montana Army National Guard show up!



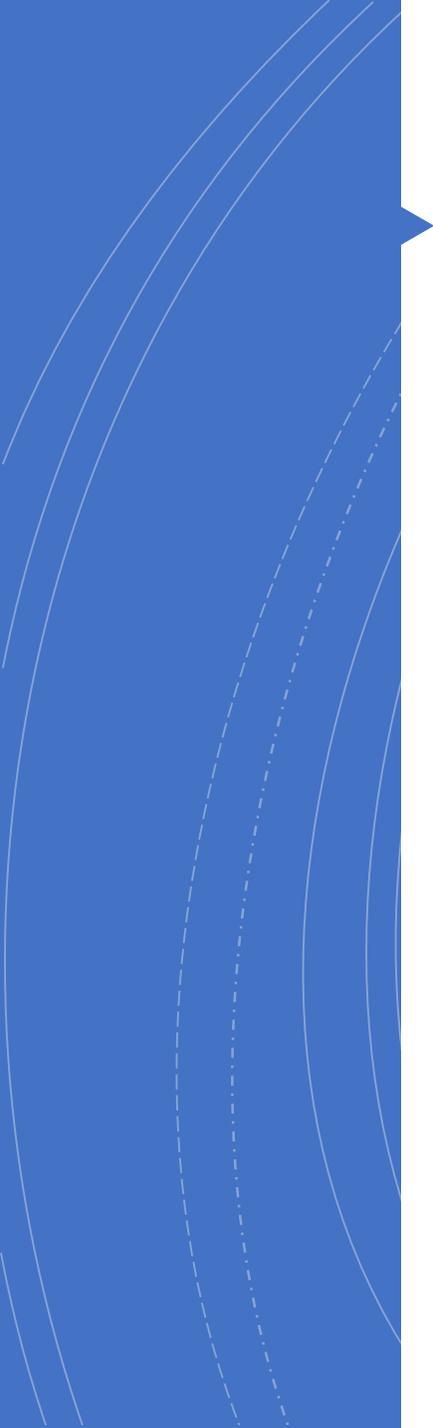


Staff worked long hours, many days in a row, gave up scheduled vacations, moved work schedules and took on additional duties.

One manager said, "Teamwork during this time has been the best accomplishment of all."

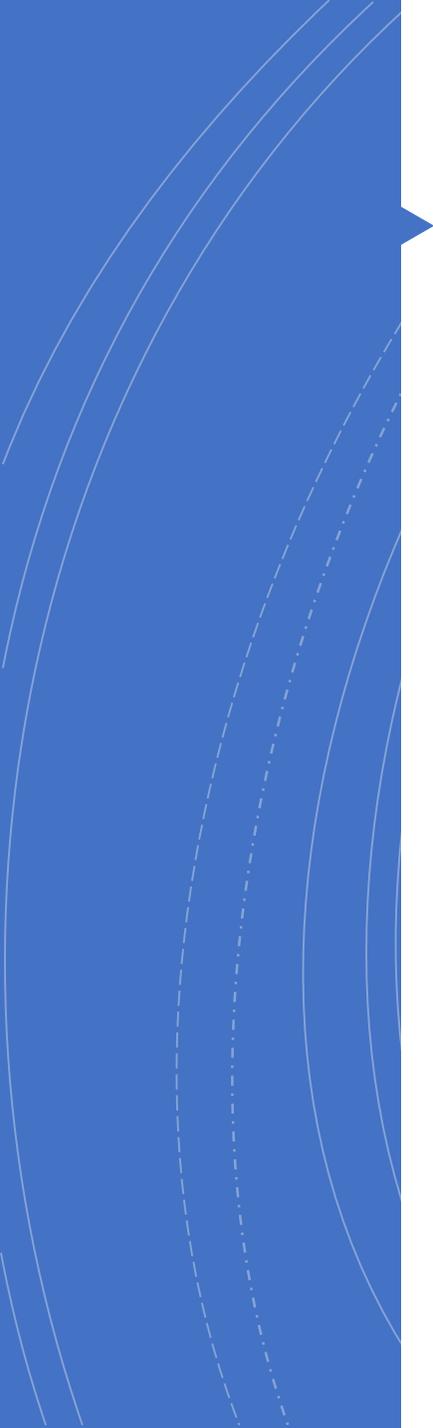
# CSD Staff -- Governor's Award





# COVID-19 CARES ACT FUNDING

- Tele-medicine equipment
- Disinfectant machines
- Hand washing stations
- Thermometers and blood pressure equipment
- Small transport vehicle
- Negative pressure room upgrade



# EVIDENCE-BASED PROGRAMMING

- Department commitment
  - Inventory current programming
  - Research/Evaluate Curriculum
  - Approval
  - Training
  - Implementation
  - Audit
- Assessing most appropriate EBP for all facilities

# Approved evidence-based programs

## Montana State Prison (MSP)

- A New Direction: Modules- Criminal and Addictive Thinking Co-occurring Disorders
- Anger management for substance abuse and mental health clients (SAMHSA)
- Living in Balance
- Thinking for a Change

## Montana Women's Prison (MWP)

- Beyond Violence
- Dialectical Behavior Therapy (DBT) Skills group
- Moving On
- Seeking Safety
- Thinking for a Change

# Approved evidence-based programs

## Pine Hills

- DBT skills group - youth
- Interactive Journaling - youth
- Juvenile Sex Offender Program
  - Pathways
  - Footprints
  - Stages of Accomplishment
  - NIC supplemental workbooks
- Seeking Safety - youth

## Contracted facilities

- Regional jails
- Prerelease centers
- Treatment centers
  
- DOC web page

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# What is Medication Assisted Treatment?

**Medication assisted treatment (MAT) is the use of medications in combination with counseling and behavioral therapies for the treatment of substance use disorders. A combination of medication and behavioral therapies is effective in the treatment of substance use disorders, and can help some people to sustain recovery.**

SAMSHA

<https://www.integration.samhsa.gov/clinical-practice/mat/mat-overview>



# What has the department done?

- Training at MSP and in Billings
  - Invited DOC staff and community partners
- Education
- Local professional perspective
  - Dr. Greg Holzman, DPHHS
  - Dr. Dan Nauts
  - Dr. Robert Sherrick
- Correctional perspective
  - Dr. Mauer
  - Warden Feliciano
  - Deborah Daniel, RN

# RESTRICTIVE HOUSING

## Implementation of HB763

Create policies/procedures to address treatment of seriously mentally ill (SMI)

Create definition of Severely Mentally Ill

Create mental health levels to determine appropriate services/placement of inmate

Communicate level to staff to ensure most appropriate treatment/placement of inmate

Remove SMI inmates from Restrictive Housing

Move to Secure Adjustment Unit (SAU) -- A unit dedicated to treatment of SMI

Assign dedicated therapists to provide treatment in the SAU and RHU

Assign dedicated mental health techs to provide mental health support in the SAU and RHU

Create three teams of security staff/MH staff to build cohesiveness in team building.

SAU team building security treatment plans

Therapeutic treatment plans to ensure better support for offenders

# RESTRICTIVE HOUSING

## Implementation of HB763

Provide *Mental Health First Aide* (MHFA) training to all staff

Provide *Management of Aggressive Behaviors* (MOAB) to all staff

Updated mental health training for new employee orientation

Purchased *Becoming Trauma Informed*: a mandatory training for corrections professionals

Purchased *Moving from Trauma Informed to Trauma Responsive* for leadership

Began pilot of *Stepping Up, Stepping Out*, a program specifically for SMI in a restrictive setting.

# CSD Challenges

- Understaffed over all areas
- Increasing age of offenders
- Increasing and more complex medical needs of offenders
- Increasing and more complex behavioral health needs of offenders
- Shortage of psychiatrists, therapists, licensed addiction counselors, medical staff
- Increased reporting criteria
- Rising pharmaceutical costs
- Outdated equipment and facilities





## BUDGET CONSIDERATIONS

# BUDGET REQUESTS

- NP – 6416001 -- Hepatitis C treatment requirements
- NP – 6416002 -- Additional medical & mental health services
  - 2 FTE Nursing
  - 1 FTE Medical records
  - 1 FTE Licensed addiction counselor
  - 1 FTE Mental health therapist

## Department of Corrections' Treatment of Hepatitis C

Fiscal Year	Number Treated	Cost of Treatment
2016	1	\$49,136.00
2017	8	\$462,686.00
2018	25	\$632,798.00
2019	40	\$551,066.14
2020	20	\$381,085.38 *
2021 (July 1 – Dec 24, 2020)	14	\$269,164.55 **

\*Fewer cases were presented due to COVID-19 pandemic

\*\*Fewer cases were presented due to COVID-19 pandemic

# HEPATITIS C TREATMENT

The community standard of care is to treat all Hep C patients who want to be treated.

DOC needs to provide the community standard of care.

## 5.0 FTE Medical and Mental Health Staff

- Clinical services staff have been understaffed for years
  - Population is aging
  - More complex medical issues
  - Increased number of inmates with behavioral health issues
  - Increased responsibilities of medical and mental health staff
- 
- Inadequately staffed to provide the mandated services as well as the day-to-day services provided on site





MONTANA DEPARTMENT OF  
**CORRECTIONS**

**Questions?**