

# MINUTES

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## Opioid Crisis Task Force

17 APR 13 PM 4:16

MILLBURY, MASS.

Date: **March 1, 2017**

Members Present: Amy George, Beth Weidman, Doreen Thornburg, Valerie Comfort, Marie Graves, and

Special Guest: Don Siergie, Director of Inmate Services at Worcester County House of Corrections

Absent: Brian Ashmankas, Danielle Juare, Robert Giannette, Carrie Prest, Anne Parkinson

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Meeting called to order at 6:05pm.

Meeting began with all attendees providing a brief introduction of who they are, what they do, and why they joined the committee.

The entire meeting was devoted to listening to Don Siergio, Director of Inmate Services at the Worcester County House of Correction, speak about the demographics of the inmates at the House of Corrections; the programs and services they provide; and how they are collaborating with police departments, health departments, network providers, and program agencies to work as a unified force to deal with the issues of those incarcerated. Many have substance abuse issues and mental health issues and the HOC works to prevent inmates from re-entering the House of Corrections, and works to provide support services to inmates when they re- enter the community after incarceration Don had several handouts he shared with the group. Don did mention that the HOC does not have and has not had many admissions from Millbury.

**Demographics:** 1,100 inmates; 600 are pre-trial men, 500 men serving sentence post trial  
90% of men have substance use disorders, with 50-60% having mental health issues  
111 Sentenced admission in January 2017; 32% from Fitchburg, 27% Worcester  
82% Caucasian; 29% Hispanic; 14% Black or African American; 2% Asian  
54% do not have high school diploma; 33% HS credentials'; 6% have college  
27% are 31-40 yrs old; 23% are 26-30 yrs. old; 21% -18-25 and 41-50; 6%- 51+  
50% of inmates are not employed  
16% have gang membership  
25% are sentenced on assault charges- usually robberies/thefts to feed habits  
Longest stay in HOC is 2 ½ years, thereafter moved to the state system  
2016 Summary: 4,684 inmate arrivals throughout the year  
June, July, August heaviest monthly intakes (heavy opioid overdoses timeframe)  
Must be 18 to be there- age groups are getting younger and younger  
29% of inmates are security threat groups with 4 local gangs  
67% have an average length of stay of 0-6 months  
52% come back on other charges  
Inmates are housed according to their charge, length of stay, threat, etc.  
Does not house women – women are housed in Chicopee

## **House Of Correction Programs/Services:**

4 Divisions:: HOC divided into two main groups- Human Services and Re-Entry:  
Initial intake- immediate priority is to stabilize inmate; orientation – need to straighten out /stabilize before can help them,

Once stabilized, required to attend various educational classes – a full curriculum was one of the hand outs.

Many options available and inmates can earn time off sentence for attendance.in some of the classes. HiSet offered, highly encouraged since many do not have HS credentials.

Substance Abuse Education, Anger Management, Relapse Prevention, Domestic Awareness, Sex Offender Education, and various Men's Groups classes available

### **Re-Entry Service Plan**

-60 days prior to discharge date – a service plan to re-enter the community is designed

-Most inmates are known to Mental Health system- plans are drawn to ensure there is a continuum of care with plans for aftercare, appointments, treatments, Mass Health insurance (98% are on Mass Health- inmates lose Mass Health when enter HOC – HOC takes care of benefits for time they are incarcerated, HOC reinstates the Mass Health insurance as part of the plan when inmate is discharged)

-Talk about housing, work with a variety of shelters, transitional housing units, and housing facilities- don't want inmates going back to streets, or detrimental place they came from.

-Offer some forms of transportation

-Referrals to aftercare programming, AdCare, etc.

-Revisit with them 10 days out, 30 days out

\*Inmates often are re-incarcerated because they do not follow the plan, don't take their medications etc.

Re-entry rate is high because they end up going back to the situation that got them in trouble in the first place.

### **New Initiatives:**

#### **Vivitrol –**

Medication Assisted Treatment

65 guys are currently on the Vivitrol treatment program

Education piece, follow-up process'

Starts 60 days prior to release and 30 days thereafter

Spectrum is the biggest provider of this program

6months to 1 year of treatment, usually on it for 8 months

Has higher/longest success rate than other medications/ least restrictive

A shot is administered every 28 days, get first shot day before discharged

Downside- many people do not show up for the second shot

#### **Navigators/Hand Holders**

Working with Worcester and other city Police departments whereas mental health clinicians are embedded into the system, clinicians are working on duty with police officers at least two days a week – ability to talk to a clinician rather than just arrest person.

Case Management and wrap services are being provided

Sharing of information – HOC is sharing the release plan with police departments

Rather than arrest people – get them the service they need to keep them on track and keep them out of jail – usually the same people

Following up with released inmates to ensure they are following their plans and assisting them if they are not.

Committed to release people, get them re-entered into community and provide support. Court system/Police Departments have a Mastercard for each person arrested, HOC links and ties the release plan to the individual mastercard so police have access to release plan should they once again apprehend a released inmate.

**Miscellaneous Information:**

-Prevention still remains the key – to stop it before it happens is the best way to prevent it from happening.

-When asked what can we as a committee do on our end to help the HOC on their end? – HOC is the end product – The task force can continue to advocate for more funding for more services; educate for prevention and inform people of resources.

-Heroin is and continues to be the number drug abuse problem.

-Pre-trial time counts as part of sentenced time

- will know if someone is a threat to themselves within the first 72 hours of jail time.

- Drugs do get into the jail, as much as the HOC does everything possible to prevent and stop it – people come up with many creative ways to smuggle them in.

-HOC purchase an airport scanner to check for drugs and sometimes, drugs get undetected because men have swallowed them but they haven't yet passed into the esophagus, thus they go undetected.

-inmates often enroll in substance abuse classes only to get time deducted from their sentence time

-HOC needs to be very careful how they house inmates: can't have too many of the same gang members together in one area; can't have certain/different gangs in the same areas.

Meeting adjourned at 7:35pm.

Amy George

Beth Weidman

Brian Ashmankas

Danielle Juairé

Doreen Thornburg

Robert Giannette

Carrie Prest

