Guidelines for Managing Substance Withdrawal in Jails

A Tool for Local Government Officials, Jail Administrators, Correctional Officers, and Health Care Professionals

Did You Know?

>60%

More than 60 percent of individuals sentenced to jail have a substance use disorder (SUD),¹ as compared to 5 percent in the general population.



Individuals who suddenly stop using substances or taking certain prescribed medications may experience withdrawal symptoms, particularly when there has been heavy or long-term use.



Failing to recognize and manage substance withdrawal can lead to serious health complications and even death.



Jails, local governments, and health care providers are increasingly being held liable for inadequate medical care, often resulting in millions of dollars in financial settlements or judgment and courtenforced remediation.

What You Can Do

Local government officials, jail administrators, correctional officers, and health care professionals all play a key role in developing policies and procedures to detect and properly manage acute withdrawal from substances among individuals in jails.

Effective policy and procedures reflect legal and regulatory requirements while supporting delivery of clinical best practices for screening, monitoring, and caring for people who are detained and experiencing or at risk of withdrawal. This includes continuation or initiation of medications prescribed for SUD treatment.

Where to Start

Guidelines for Managing Substance Withdrawal in Jails presents recommendations for effective withdrawal management to save lives and promote the well-being of adults (18 years of age and older) who are at risk for substance withdrawal and who are:

- Sentenced or awaiting sentencing.
- Awaiting court action on a current charge.
- Being held in custody for other reasons (e.g., violation of terms of probation or parole).

Intended for jails (including detention, holding, and lockup facilities) and their partners in the community, this resource is designed to:

 Provide information on the withdrawal management process, including withdrawal symptoms, evidence-based responses to individuals at risk for or experiencing withdrawal, and thresholds for when individuals need to be transferred to an external medical facility.

¹Bronson, Jennifer, Jessica Stroop, Stephanie Zimmer, and Marcus Berzofsky, 2017, *Drug Use, Dependence, and Abuse Among State Prisoners and Jail Confined Persons, 2007–2009*, Washington, DC: U.S. Department of Justice, Bureau of Justice Statistics: 3, retrieved February 9, 2022 from https://bjs.oip.gov/content/pub/pdf/dudaspji0709.pdf.











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- Inform development of or revisions to existing withdrawal management policies and practices responsive to specific substances (or combinations of substances) and reflecting the resources and capacity of jails.
- Support needed conversations among local government officials, sheriffs and jail administrators, hospital administrators, correctional health care providers, and representatives from communitybased organizations on matters related to:
 - o Screening.
 - o Assessment.
 - The potential need to transfer to a higher level of care.
 - o Monitoring those who remain at the jail.
 - o Managing reentry.

The guidelines are divided into five sections: General Guidance (issues universal to substance withdrawal management in jails), Alcohol Withdrawal, Sedative Withdrawal, Opioid Withdrawal, and Stimulant Withdrawal. Each section includes recommendation statements developed by an expert committee of clinicians, addictions specialists, and experts in jail administration, as well as supporting narratives.

All recommendation statements were considered for feasibility in diverse jail settings.

The appendices of *Guidelines for Managing Substance* Withdrawal in Jails provide supplemental information on a variety of matters, such as indicators of dehydration.

For Training and Technical Assistance

Go to <u>Jail Resources</u> of the Comprehensive Opioid, Stimulant, and Substance Use Program Resource Center to find resources, ask a question, or request training and technical assistance on instituting and refining appropriate and effective withdrawal management in jails.

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