

12/11/17

Double Check the Numbers

First, Thank you for making a more transparent way to communicate so everyone's voice can be heard.

I have read many studies that have been conducted throughout this state. Many of the readings include studies on housing, beds, the DOC and underutilized beds and services. The research I have read seems influenced by certain parties. I am very supportive of work that helps the vulnerable and feel that the vulnerable are being taken advantage of. I have read data that totally contradicts itself.

One claiming that this particular program serves every person that has opioid use disorder but also has no real documentation to prove they are treating this 40- sum percent of population. We have a 70% recidivism rate in our prisons and men who can't seem to get any attention for their substance use disorder. Yet, this particular group has served every one. This just doesn't make sense

10,000 people have been affected by OUD or SUD costing \$111,000,000. Has this mostly been spent at the incarceration level? I think we need to double check the numbers and the groups we hire to do our audits. The Audit that was released in August of 2017 was very well done, but also misses key point and mentions programs that we haven't even had in place for more than a year.

The true success rate of these programs is skewed because again there is no uniform data to prove.

I ask that the numbers be double checked by an objective party. I commend the work that has been done, but when I read the data... It is befuddling to know people rather smudge the numbers than tell the truth about success rates.

If there is no uniform accountable way to check numbers, people will not be completely honest and they will not want to let the public know they have failed or not done their best.

It is ok to make mistakes, especially with this epidemic that has been unpredicted and is unprecedented. I just do not want our men and women returning from prison to feel more alone than they already do and I do not want them to feel that they are just a number.

The fact that we have not provided MAT to our inmates seems horrible. Even though someone has committed a crime, they need to be treated with care if they have addiction to a strong drug like heroin. When someone enters the prison system they become dependent on the care we provide with no choice how that is provided. I hope we can really take a look at the numbers and make sure agencies are providing what they say they are providing and make sure the gaps in treatment are closed to provide a more seamless care system. Treating people with dignity and respect is key and also could potentially save 100's of thousands of dollars.

To touch on and treat trauma needs to be implemented at all levels of care, particularly in management. Employees take on a lot of hard work in this state and having qualified management is crucial to a healthy environment for growth and recovery. Management training and employee retention will help save on health costs at all levels.

Delaware is doing a good thing by being more transparent in decision making. We also need to be careful in who we are choosing to review our work and make sure it is done with integrity.

Thank you for allowing this dialogue.

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