BJA COAP Category 6 Quarterly Webinar November 29, 2018

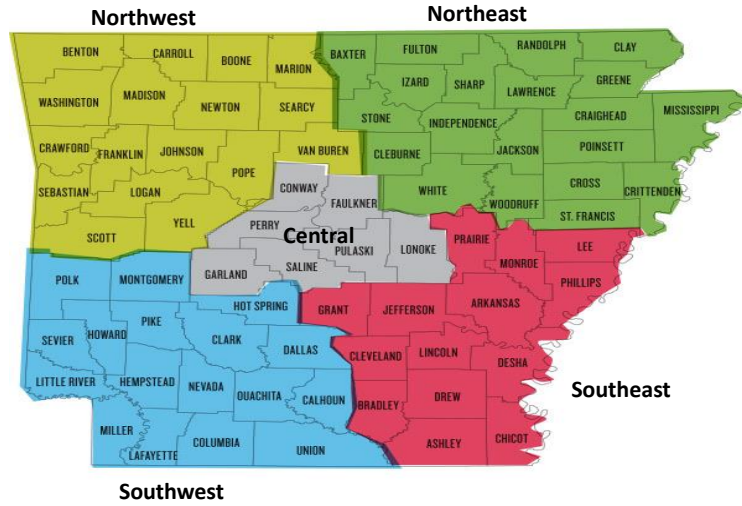Tara Kunkel
Senior Drug Policy Advisor
Bureau of Justice
Assistance

Select BJA Grant Project Updates

- Arkansas: Tafarra Haney
- Illinois: Sarah Ross
- Nebraska: Ashley Newmyer and
  Felicia Quintana-Zinn

PDMP TTAC
Prescription Drug Monitoring Program Training and Technical Assistance Center

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Arkansas

Comprehensive Opioid Site-Based Program

Category 6: Data-Driven Responses to Opioid Abuse

DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS

ARKANSAS DEPARTMENT OF HEALTH | **ARKANSAS** DEPARTMENT OF HUMAN SERVICES

Slide 5

Northwest | Northeast

Central

Southeast

Southwest

ARKANSAS
DEPARTMENT OF HEALTH

ARKANSAS
DEPARTMENT OF HUMAN SERVICES

Counties shown: BENTON, CARROLL, BOONE, MARION, BAXTER, FULTON, RANDOLPH, CLAY, WASHINGTON, MADISON, NEWTON, SEARCY, IZARD, SHARP, LAWRENCE, GREENE, STONE, INDEPENDENCE, CRAIGHEAD, MISSISSIPPI, CRAWFORD, FRANKLIN, JOHNSON, VAN BUREN, CLEBURNE, JACKSON, POINSETT, SEBASTIAN, LOGAN, POPE, CONWAY, FAULKNER, WHITE, WOODRUFF, CROSS, CRITTENDEN, SCOTT, YELL, PERRY, PULASKI, LONOKE, ST. FRANCIS, PRAIRIE, LEE, POLK, MONTGOMERY, GARLAND, SALINE, MONROE, PHILLIPS, HOT SPRING, GRANT, JEFFERSON, ARKANSAS, SEVIER, HOWARD, PIKE, CLARK, DALLAS, CLEVELAND, LINCOLN, DESHA, LITTLE RIVER, HEMPSTEAD, NEVADA, OUACHITA, CALHOUN, BRADLEY, DREW, MILLER, COLUMBIA, UNION, ASHLEY, CHICOT, LAFAYETTE

DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

Slide 6

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Arkansas #2 in Opioid Prescribing

Opioid Rx per 100 People

- < 64.1
- 64.1 – 82.9
- 83.0 – 107.1
- > 107.1
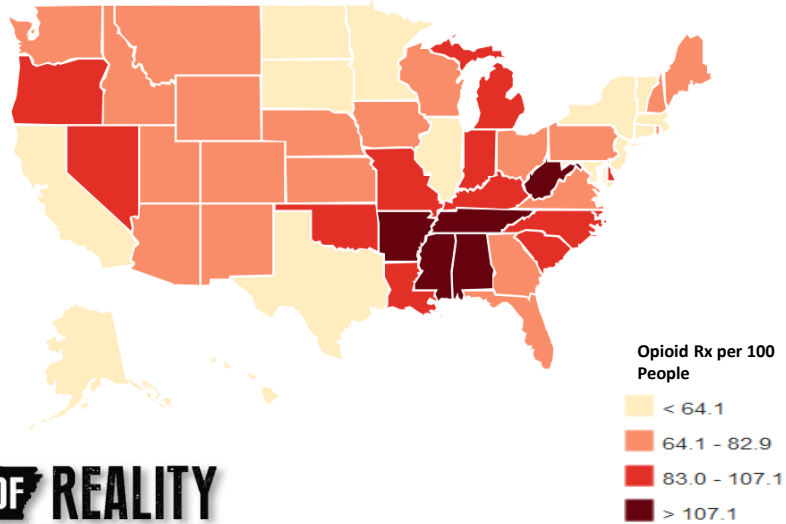
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Arkansas Prescription Drug Monitoring Program

- Each time a CII opioid is prescribed

- Each time a CIII opioid is prescribed

- The first time a benzodiazepine is prescribed

Top Prescription Drugs
Dispensed – Arkansas* 2017

Drug	No. Rx	Qty.	Avrg. per Rx
Hydrocodone**	1,521,564	94,033,249	61.8
Tramadol**	712,349	54,156,328	76.0
Alprazolam	631,709	39,355,560	62.3
Oxycodone**	588,911	43,597,818	74.0
Zolpidem	510,214	16,178,026	31.7

https://www.healthy.arkansas.gov/programs-services/topics/prescription-monitoring-program

**Prescription Drug Monitoring Program
PDMP Prescriber Comparison Reports**

- Quarterly Prescriber Comparison Reports for all prescribers in the state who have prescribed an opioid, showing how they compare to their specialty-based peers and other prescribers in the state

- The reports tells how many of your patients are receiving opioids and the number of prescriptions you have written and compares them to other providers within your specialty

- In Arkansas for July 2018, total 5,595 reports; for October 2018, total reports 6,753

- The law requiring these reports allows for Arkansas Medical Board review after a year of concerning prescribing behaviors


- Arkansas IMPACT: Multidisciplinary Pain Care and Treatment Program for Arkansas physicians to better manage chronic pain patients and those who need their opioid dosage reduced. This is a free weekly interactive televideo program offering free CME credit, broadcast every Wednesday, 12:00 Noon – 1:00 p.m., ET

- **To join us each Wednesday at Noon, follow the link on our website, www.arimpact.uams.edu**

Participants and CE Credits Issued per Week for AR IMPACT
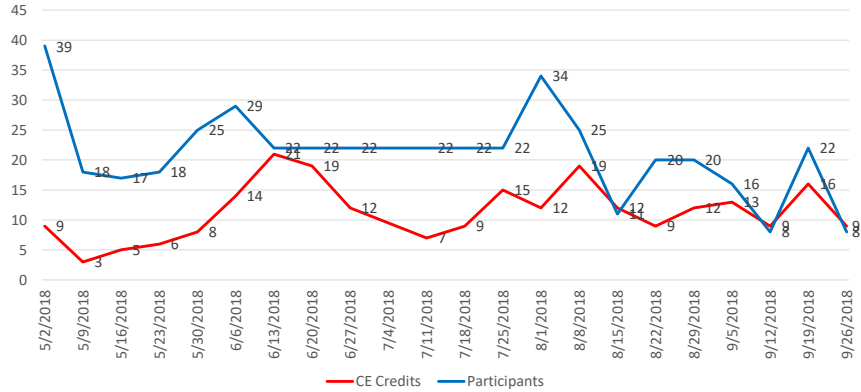
CE Credit Summary

Total of 239 hours issued (308 if hours towards specific certifications are counted, such as ACPE, ANCC, etc.)
  MDs: 108 hours
  Pharm Ds: 52 hours
  APNs: 9 hours
  RNs: 22 hours
  Occupational therapists: 5 hours
  PAs: 4 hours
  Physical therapists: 18 hours
  Psychologist: 1 hour
  Toxicologist: 1 hour
  LCSW: 19 hours

A Dose of Reality for Students, Parents, and Educators
How to help and avoid addiction to prescription painkillers

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PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS

ARKANSAS DEPARTMENT OF HEALTH | ARKANSAS DEPARTMENT OF **HUMAN** SERVICES

ARKANSAS DEPARTMENT OF HEALTH | ARKANSAS DEPARTMENT OF **HUMAN** SERVICES

What Is DOSE OF REALITY?

- Preventative educational tool for ages 12–25 to help educate on the dangers of prescription painkillers
- What is prescription misuse, abuse, and addiction?
- What are the names of prescription painkillers?
- Arkansas facts and statistics on opioid overdose
- Signs and symptoms of addiction
- When to call 9-1-1
- Rescue overdose drug–naloxone
- How to dispose of medications
- Resources for treatment options

DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

The Arkansas Good Samaritan Law

- Good Samaritan Law provides immunity from arrest, charge, and prosecution for possession of a controlled substance for those who seek medical assistance for themselves or others who are overdosing[9]

- Collaborative effort with multiple agencies created the Don't Run. Call 911 campaign

HELP SOMEONE WHO **IS OVERDOSING.**
DON'T RUN. CALL 911.

Arkansas Department of Health | Arkansas Department of Human Service   **15**

Opioid Overdose Reversal

- Arkansas Governor Hutchinson announced a standing order allowing Arkansas-licensed pharmacists to dispense naloxone to eligible persons who are at risk of experiencing an opioid-related overdose, or who are family members, friends, or others who are in a position to assist a person at risk of experiencing an opioid-related overdose

https://www.narcan.com/

Arkansas Department of Health | Arkansas Department of Human Service   **16**

Other Resources

ARKANSAS DEPARTMENT OF HEALTH | ARKANSAS DEPARTMENT OF HUMAN SERVICES

– Treatment Referral Helpline: (800) 662-HELP (4357)
or TTY: (800) 487-4889

– Prescription for Life: A new digital course that empowers high school students with the skills and knowledge to make healthy decisions about prescription drugs, using an evidence-based, public health approach. Attorney General, ArkansasAG.gov

– Chasing the Dragon: A documentary produced by the Federal Bureau of Investigation and the Drug Enforcement Administration, which exposes the truth behind the opioid epidemic devastating communities in the state of Arkansas and across the United States, https://www.youtube.com/watch?v=ubvXnz1xx8g

– Saving a Generation: Local news Anchor THV11: Laura Monteverdi, https://www.thv11.com/saving-a-generation

– Visit DoseOfReality.adh.Arkansas.gov for more information

DOSE OF REALITY
PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

Always Remember

ARKANSAS DEPARTMENT OF HEALTH | ARKANSAS DEPARTMENT OF HUMAN SERVICES

• NEVER share your opioid or narcotic painkillers

• LOCK up your prescription medications

• SAFELY dispose of unused or unwanted prescription painkillers at drug takeback events

• DO NOT flush or throw your medications in the trash

Monitor Secure Dispose

For more information about a prescription drug takeback location near you, visit ARtakeback.org

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PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

DOSE OF REALITY
Pre-/Post-Test

1. I believe taking someone's else's prescription painkillers is okay in some situations, like when I'm not able to see a doctor right away

2. Death due to misuse or abuse of prescription painkillers is a major problem in the United States

3. If I call 9-1-1 because of a drug overdose and the drugs are there when help arrives, I will be arrested

4. Prescription painkillers work better than nonprescription painkillers

5. Flushing or throwing away unused medications is a safe way to dispose of them

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PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

DOSE OF REALITY
Change of Attitude

Question	Mean Pre	Mean Post	Difference	p-value
1	1.92	1.46	-0.46	<0.0001
2	4.2	4.3	0.1	0.01
3	2.83	1.61	-1.22	<0.0001
4	3.07	2.59	-0.48	<0.0001
5	2.33	1.44	-0.89	<0.0001

All of these numbers are significant, meaning that the differences noted are real and not by chance

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PREVENT PRESCRIPTION PAINKILLER ABUSE IN ARKANSAS.

IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Comprehensive Opioid Abuse Site-Based
Program
COAP

Office of Policy Planning and Statistics
Division of Patient Safety & Quality
Sarah Ross, MBA, BSN
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IDPH
ILLINOIS DEPARTMENT OF PUBLIC HEALTH

Background

The Illinois Department of Public Health is one
of the recipients of the Category 6 Data-Driven
Responses to Opioid Misuse BJA grant. The
Comprehensive Opioid Abuse Site-Based
Program (COAP) is focused on enhancing
monitoring and surveillance of opioid misuse
and overdose and increasing engagement of
state and local partners in prevention and
treatment initiatives targeting high-risk, high-
need populations statewide

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COAP Reinforcement

- 48-hour reporting of ED visits
  http://dph.illinois.gov/opioids/48hr-hospitalod-report
- State Health Improvement Plan (SHIP)
- Illinois Opioid Crisis Response Advisory Council

IDPH
Illinois Department of Public Health

Implementation

1. Build an informatics infrastructure
- The IDPH Opioid Hub & Data Dashboard includes five dashboards
  – Mortality and morbidity
  – Trend
  – Prescription
  – Mortality
  – Naloxone
- http://idph.illinois.gov/OpioidDataDashboard/

IDPH
Illinois Department of Public Health

Opioid Data Dashboard
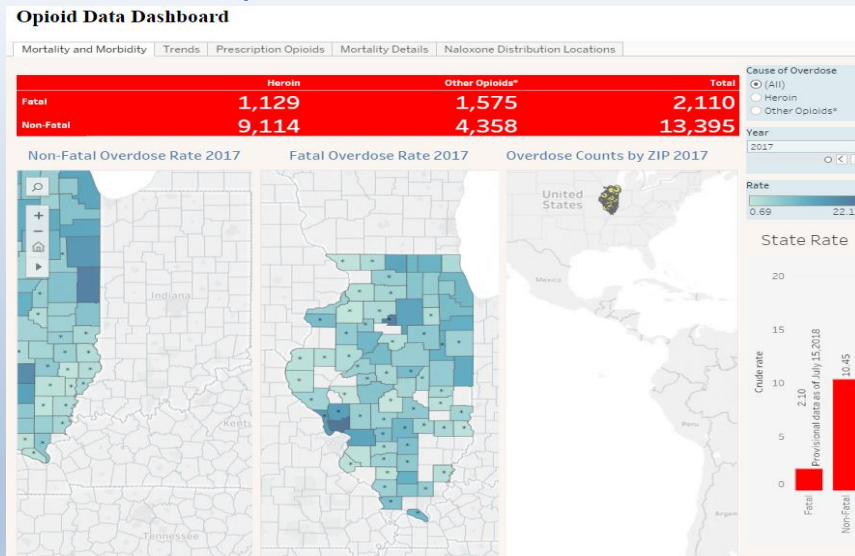
Implementation

2. Data workgroup needs assessment

* A data workgroup meeting was convened including cross-sector partners from the following organizations: criminal justice, behavioral health, drug seizure, public health, substance abuse, hospital, pharmacy, quality improvement, drug prevention, and recovery

* A needs assessment was conducted among stakeholders to establish opioid-related data needs and capabilities

Implementation

Based on RedCap survey responses, a Data Needs Matrix was developed to illustrate the data needs and capabilities of each partner

Data Needs Matrix

	A	B	C	D	E	F	G	H	I	J	L	M
Organization		Criminal Justice[1]	Drug Seizure	Emergency Department (Claims or Syndromic Surveillance)	First Responder Naloxone Administration	First Responder Overdose	Hospitalization	Incarcerated Population[2]	Mortality	Neonatal[3]	Prescription Drug Data	Substance Abuse Treatment Services
Ann & Robert H. Lurie Children's Hospital of Chicago		■		■				■	■		■	■
Chicago Dept of Public Health			■	■				■			■	■
IL Dept of Corrections (Behavioral Health)				■							■	■
IL Dept of Human Services Substance Use Prevention & Recovery(SUPR)		■	■	■	■	■	■	■	■	■	■	■
IL Dept of Public Health (Patient Safety & Quality)		■		■	■	■	■		■	■	■	■
IL Dept of Public Health (Preparedness & Response_EMS)				■	■	■	■		■		■	
IL Dept of Public Health (Vital Records)									■	■		
IL Health and Hospital Association			■	■	■	■			■		■	
IL State Police		■				4						
Northwestern Medicine Value Based Care Pharmacy				■				■	■		■	■
Telligen				■	■	■			■		■	■

■ Data Needed
■ Data Available

[1] Arrests, court cases
[2] Admissions, exits
[3] Abstinence syndrome, mortality
4 Police

Implementation

3. Develop, execute, and evaluate a multipronged data dissemination and communication plan targeting a wide spectrum of stakeholders
   – Currently, we are in the process of developing the data dissemination and communication plan

Timeline

- Year 2 objectives
  – Identify best practices for data dissemination and communication
  – Promote data dissemination best practices
  – Inform planning and strategic action for opioid crisis response

THANK YOU

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PROJECT DIRECTOR

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HTTP://WWW.DPH.ILLINOIS.GOV/

DOJ BJA COAP-Category 6
Nebraska Update

November 29, 2018

Helping People Live Better Lives.

Nebraska COAP Cat. 6 Project Overview

1. Improve efficiency and timeliness of drug overdose surveillance data dissemination through development and implementation of a data dashboard
2. Improved death certificate data quality among drug overdose cases through toxicology project

Outcome

Efficient and improved targeting of drug overdose prevention efforts prevention efforts through timely information obtained by prevention and evaluation groups

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DEPT OF HEALTH AND HUMAN SERVICES
DRUG
OVERDOSE
PREVENTION

Helping People Live Better Lives.

Nebraska COAP Cat. 6 Project Goals

1. Form a **multi-disciplinary action group** to advise on the development of public data dashboard

2. **Develop the data dashboard**—Data from vital records, hospital discharge, PDMP, and treatment services geographic information

3. **Increase number of toxicology trainings and reports** on suspected drug-related overdose fatalities to improve accuracy of information collected on fatal drug overdose cases

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Nebraska COAP Cat. 6 Goals - Progress

1. **Multi-disciplinary action group**
    i.   **In process**—Interviewing for program coordinator position: the coordinator will contact, form and facilitate group and meetings

2. **Develop the data dashboard**
    i.   **Complete**—Staging and production software licenses have been purchased
    ii. **Staging complete**—Set-up server , firewall and other IT security for the staging environment is complete. For the production (public facing) this will go-live after staging testing is complete
    iii. **In process**—Development of code for data dashboard and dataset linkage

3. **Increase number of toxicology trainings and reports**
    i.   **In process**—Hiring program coordinator (from goal 1) to facilitate and build relationships with county attorneys, coroners, and pathologists around state
    ii. **In process**—13/93 counties have now signed up (2nd largest county represented as of April 2018)
         a. 4 of the 5 high-burden areas have at least 1 county represented
         b. Support of governor, attorney general, law enforcement and UNMC as well as many others
         c. Collaborating with other programs that work with coroners/county attorneys (NeVDRS) to increase counties signed up

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DRUG OVERDOSE PREVENTION

Helping People Live Better Lives.

Contact Information

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DRUG OVERDOSE PREVENTION

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Grantee Discussion Forum

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Thank You

Email: info@pdmpassist.org
Telephone: (781) 609-7741
Website: www.pdmpassist.org

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