THE EFFECTS OF A ROBUST RURAL OPIOID USE DISORDER TRAINING PROGRAM GEARED TOWARD INTER-DISCIPLINARY AND INTER-PROFESSIONAL COLLABORATION

Bob Dannenhoffer MD-Public Health Officer
Christin Rutledge MPH-Program Manager
DISCLOSURES

• The presenters, Dr. Dannenhoffer and Christin Rutledge have declared that they do not have any relevant financial disclosures
JESSICA IN THE WELL

- https://www.youtube.com/watch?v=Cv8VxlUeyxM
The rescue of Baby Jessica in 1987
Lessons learned

When you are in a hole, stop digging

Figure out how you got there

Use the community to keep the hole from getting deeper

Figure out how to stop others from falling in

Figure out how to fill the hole
CLIMBING OUT OF THE OPIOID HOLE

Local strategies

Prescription Drug Overdose Prevention Project

Use of up to date data - data dashboard

Opioid task force

Provider education/Prescriber guidelines

Access to medication assisted treatment

Use of the PDMP

Community forums

Naloxone

Drug take back

Pharmacy training
http://lab.express-scripts.com/data/video/express-scripts-strange-holes
2015, the OHA Injury and Violence Prevention Section received CDC Prevention for States funding to

- Enhance and maximize Oregon’s Prescription Drug Monitoring Program
- Implement community interventions and prevention policies in high-burden regions
- Drive policy changes that reduce Prescription Drug Overdose (PDO) and problematic prescribing

2017 OHA received SAMHSA State Targeted Response funding to expand the previous work created by the CDC funding
PDO PROGRAM

<table>
<thead>
<tr>
<th>High burden regions</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Mortality</td>
</tr>
<tr>
<td>• Hospitalizations</td>
</tr>
<tr>
<td>• Opioid prescribing rate</td>
</tr>
<tr>
<td>• Population</td>
</tr>
<tr>
<td>• Average patients per month with greater than 100 mg morphine equivalent dose</td>
</tr>
<tr>
<td>PDO PROGRAM STRATEGIES</td>
</tr>
<tr>
<td>------------------------</td>
</tr>
</tbody>
</table>

### Facilitate Community Partnerships
- Disseminate local data
- Promote activities on harm reduction - Naloxone training and distribution, medication take back programs, syringe exchange programs

### Facilitate Development of Prevention Networks and Systems
- Interdisciplinary action team-purpose to plan and coordinate activities in the region - Opiate Task Force
- Partner with Emergency Preparedness to establish Opioid Emergency Response Plans

### Promote Community Clinical Linkages
- Summit
- Strengthen pain guidance group - Promote PDMP and prescribing guidelines
• Opioid Data Dashboard
• Interactive tool from the Oregon Health Authority that contains state and county level data on controlled substance prescribing and drug overdose health outcomes (hospitalizations and deaths).
NALOXONE PRESCRIBING

PRESCRIPTIONS

BY AGE
BUPRENORPHINE PRESCRIBING

BY COUNTY

Prescribing by County

Drug Class
- Buprenorphine

Prescribing Measure
- Prescription Fills per 1,000 Residents

County
- (Multiple values)

County Legend
- OREGON STATEWIDE
- DOUGLAS
- JOSEPHINE
- LANE

BY AGE

Prescribing by Age

Drug Class
- Buprenorphine

Prescribing Measure
- Prescription Fills per 1,000 Residents

County
- DOUGLAS

Age Group
- Less than 18
- 18-29
- 30-44
- 45-64
- 65-74
- 75+
DEATH RATES

ALL OPIOIDS

FENTANYL

* Technical Note: Due to delays in toxicology, data from at least the last two quarters will be incomplete.

Some counties may not report complete death investigations to the state medical examiner.
DOUGLAS COUNTY OPIOID TASK FORCE
OTF

Began in 2003 as a task force of the larger Up2Us Now Child Abuse Prevention Coalition

Previously chaired by Douglas Interagency Narcotics Team officer

DPHN took over chair and task force in 2017

Meet once a month and collaborate on activities

Agencies from multiple sectors on task force

Vital to success of any opioid prevention and awareness in our community

Opiate Task Force goals focus on treatment, aftercare, provider education, and increasing community awareness through consistent messaging
Participated in now disbanded Pain Management group through local CCO

- Invited to participate in pain management group at Mercy Medical Center
- 3 lunch and learns scheduled for home visitors
  - First was attended by 25 home visitors
- Presentations to Lower Umpqua Hospital staff scheduled
- Will be joining Oregon Pain Guidance group as a satellite site
- Plan to start quarterly newsletter for providers and community
Changes:

- January 2018 - Medical and pharmacy directors are allowed access to the PDMP for overseeing the operations of their respective entities.
- July 2018 - All prescribers in Oregon must be registered.
- Track naloxone dispensed by pharmacies.
Treatment for substance use disorder should be as easy to access as it was to get opioids in the first place.

SAMSHA grant allows for opening of both methadone and buprenorphine treatment in the county.

Now with open access to MAT/OTP.

25 local providers with buprenorphine prescribing waiver.

- Another 9 attended a training in Douglas County in February.
COMMUNITY FORUMS

Spring 2017
Winston Community meeting spring 2017

Sep. 2017
Community meeting Roseburg September 2017 with Max’s Mission

May 2018
Winston Community meeting spring 2018
NALOXONE

- **Syringe Exchange at HIV Alliance**
- **Public Safety**
  - All law enforcement in Douglas County
  - 148 doses given
  - Exception state police
  - Reached out to fire departments, still working on

*Eleven overdoses reported as reversed using previous Naloxone kit in Douglas County.*
NALOXONE CONT.

Community forums
148 doses

School districts
• Winston School District
• 20 doses

Will be distributing after jail release

HOPE SUMMIT
60 doses

Community agencies
• Adapt, SouthRiver, WIC
• 425 doses

2017 and 2018 at Douglas County Fair
over 80 doses

Participate in Southern Oregon Naloxone workgroup
860 doses given to community, law enforcement, school districts and local community service agencies

Only possible through partnership with the HIV alliance
PRESCRIPTION DRUG TAKE-BACK

Collaboration with:
- Law Enforcement
- Douglas County Senior Services
- Mercy Medical Center
- Compass Behavioral Health
- Opiate Task Force

Participate with National Drug Take Back days with law enforcement

Hand out flyers with take back locations at health events

Mail medication return bags
- Education at senior dining sites “lunch and learns”
- Dispersed at Douglas County Fair
- Aim Therapy handing out to patients
- Surgery Center getting set up to dispense bags
Initial outreach

• Discuss rx takeback
• Research Narcan coverage

Training 2/2018

• Collaboration with Board of Pharmacy and HIV Alliance
• Understand how pharmacists prescribe the various formulations of naloxone consistent with Oregon Board of Pharmacy regulations
• Understand the Good Samaritan Law
• Learn how to educate the patient on proper administration of naloxone
• Understand the importance of utilizing the Prescription Drug Monitoring Program
• Understand new rules for pharmacy collection of unused medications and safe drug disposal
**WHAT’S LEFT TO DO**

<table>
<thead>
<tr>
<th>Better usage of the PDMP</th>
<th>Better way to deal with chronic users</th>
<th>Co-prescribing of Narcan</th>
<th>Be on the lookout for fentanyl</th>
</tr>
</thead>
</table>
| • Toolkit to help with clinic flow | • Especially those involved in justice system  
• Rural areas | • Rx for opioid always with an rx for Narcan | • Create emergency response plan  
• Program with HIV Alliance  
• Handing out 3 test strips to their clients  
• 672 given out since October  
• 110 reported back positive  
• 79 in meth |