

# Colorado Consortium for Prescription Drug Abuse Prevention: Quarterly Update to the SATF

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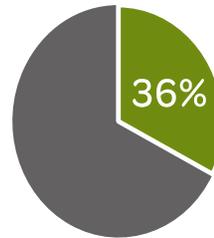
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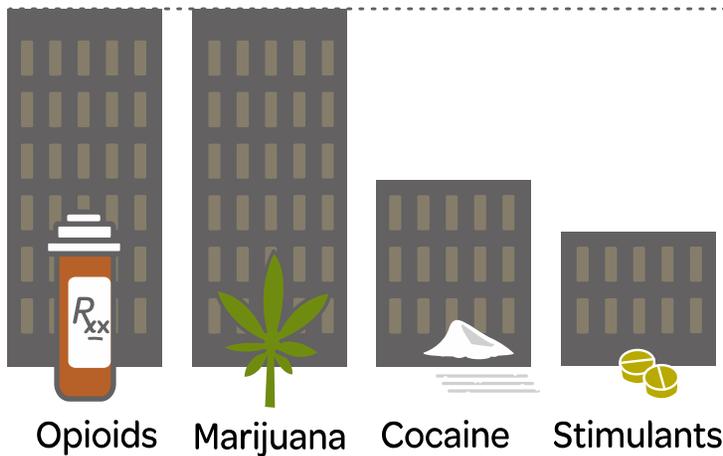




# Misuse of Prescription Opioids

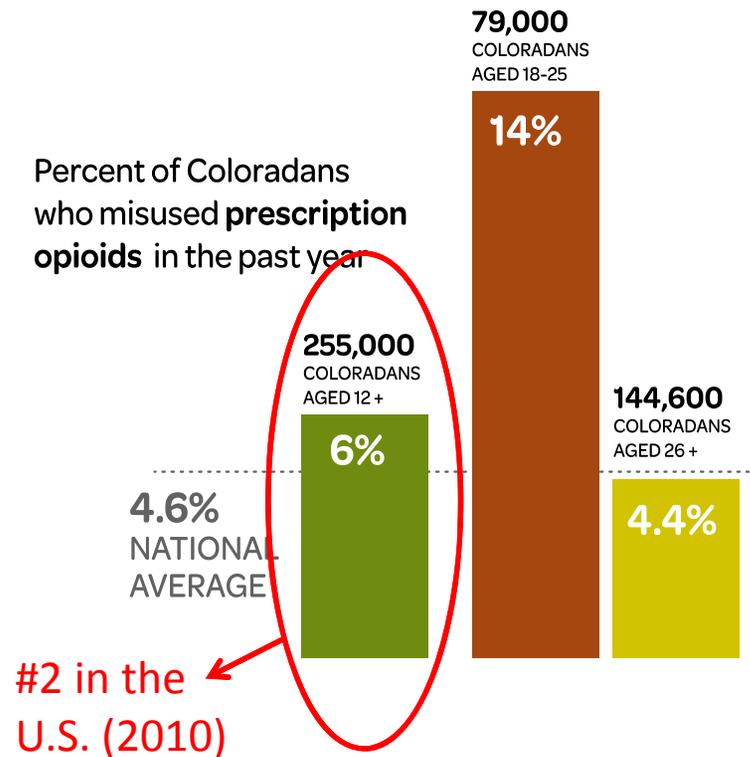


**304** of the 838 drug poisoning deaths in Colorado involved prescription opioids



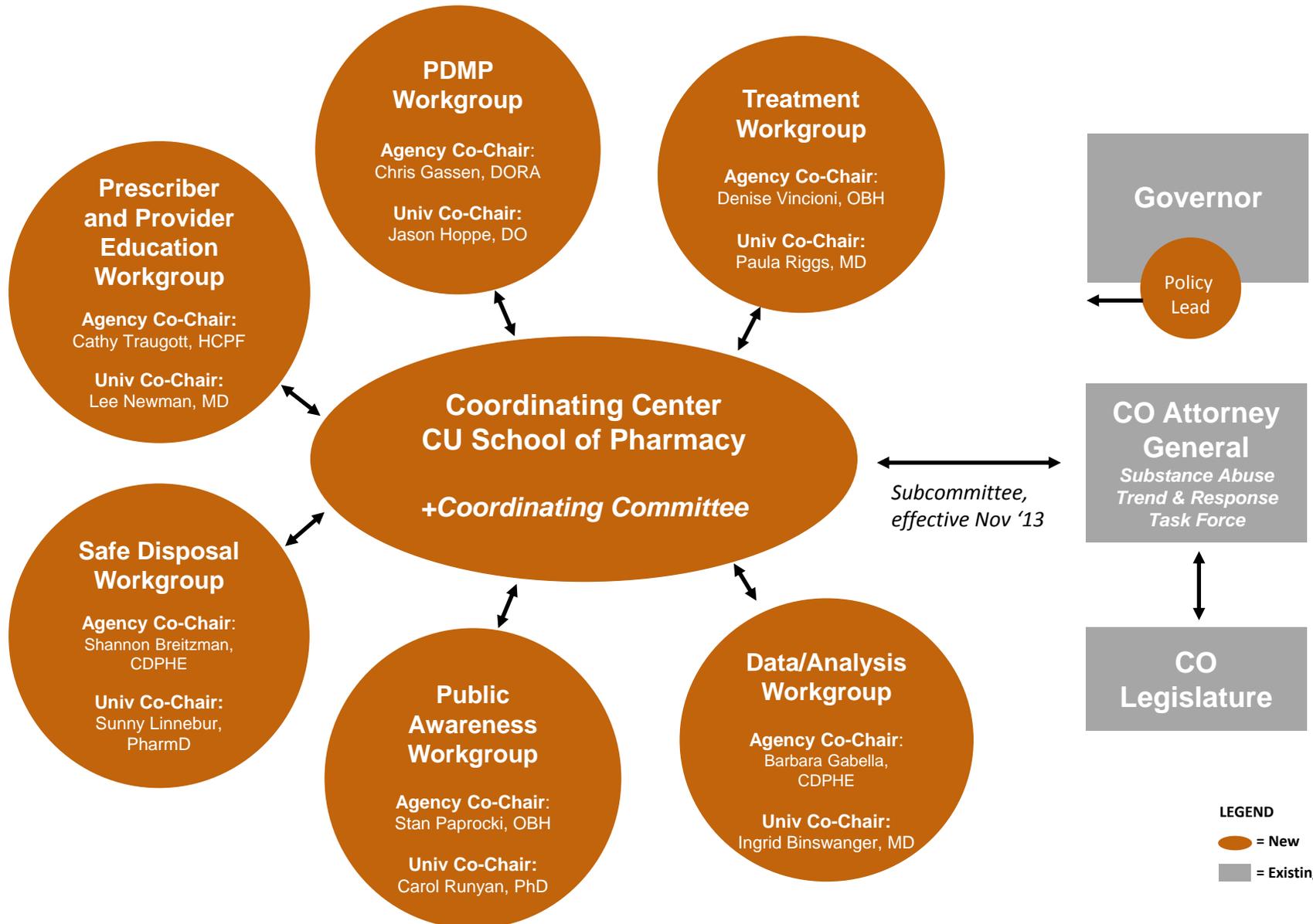
Hospitalization rate for **opioids** compared to other drug-related hospitalizations

Percent of Coloradans who misused **prescription opioids** in the past year



# Colorado Consortium for Prescription Drug Abuse Prevention

*A coordinated, statewide, interuniversity/interagency network*



# Public Awareness WG Activities

- Reviewed existing PA campaigns and websites from other states, for evidence of what works best
- Creating (finalizing) the RFA for our own Public Awareness Campaign
  - Primary messages: *Safe Use, Safe Storage, Safe Disposal*
  - Mixed media PA campaign, website, pre/post surveys of knowledge, awareness, and behavior (storage, takeback)
  - Estimated timeline: Issue RFA March 1; proposals due April 15; selection by April 30; contracting by May 30; complete work (6 month work period) by November 30



# Provider Education WG Activities

- Reviewing health professional school curricula
  - Determine what is being taught w.r.t. safe opioid use
  - Compare against model curriculum from NIDA
  - Gap analysis, recommendations for improvement
- Expanding Safe Opioid Prescribing C.E. program
  - Initially focused on physicians, offered by Pinnacol/CSPH
  - DORA interested in expansion to all HC professions, including dentists, pharmacists, veterinarians
  - Exploring tutorial on PDMP program (how to register/use)



# PDMP WG Activities

- Supporting PDMP Enhancement bill
  - Studied national best practices for PDMPs
  - Achieved consensus set of recommendations for improving the Colorado PDMP
  - Presented them to DORA, legislative sponsors
  - Preparing legislative briefing document
- Co-Hosting (with DORA) PDMP User Meeting
  - PDMP Vendor coming to Colorado
    - Presenting state of the art and possible enhancements
    - Collecting user feedback to improve interface
    - DORA will allocate federal PDMP enhancement funds accordingly



# PDMP Enhancement Bill (pending)

- **Sponsors:** Reps McCann, Becker, and Fields; Sens Newell, Kefalas, Guzman, Heath, and Roberts
- **Bill Summary:** The bill makes the following modifications to the PDMP:
  - Unsolicited Reporting (also called Prospective Reporting)
  - Delegated Access (prescriber or pharmacist may have up to 3 registered delegates)
  - Mandatory Registration (for all prescribers and pharmacists by Jan 1, 2015)
  - Allows CDPHE and HCPF to access PMDP data (for public health surveillance and care coordination purposes, respectively)
  - Allows out of state pharmacists to access Colorado PDMP data (patient specific)
  - Allows federally owned/operated pharmacies to submit data to the database
  - Adds pharmacies as eligible subjects for information requests by law enforcement (by subpoena or court order); this in addition to prescribers, pharmacists (already)
  - Authorizes DORA executive director to create PDMP task force or use consortium's PDMP work group, to advise on program and recommend improvements



# Safe Disposal WG Activities

- Cataloguing and Expanding existing dropbox sites
  - Map of permanent dropbox locations in Colorado
  - Installing additional dropboxes
  - Taking applications (waitlist) for additional sites
  - May use small amount of consortium funding to purchase a few more dropboxes, seeking additional funding for Safe Disposal WG activities
- Supporting Household Medication Takeback bill
  - CDPHE bill stemming from NGA Policy Academy, Safe Disposal WG



# Household Medication Takeback Bill (HB-14-1207)

- **Sponsors:** Reps Young and McCann; Sens Aguilar, Newell, Schwartz, and Nicholson
- **Bill Summary:**
  - The bill requires the executive director of the department of public health and environment (department) to establish a household medication take-back program (program) to collect and dispose of unused household medications.
  - The program allows individuals to dispose of unused household medications at approved collection sites, and for carriers to transport unused household medications from approved collection sites to disposal locations.
  - The bill specifies that collection sites, carriers, and disposal locations that act in good faith are not subject to liability for incidents arising from the collection, transport, or disposal of household medications.
  - The bill creates the household medication take-back cash fund for the implementation of the program.



# Data/Research WG Activities

- Identifying and Cataloguing existing data sources
- Producing document, simple portal (static web page) to direct people to available data sources
- Exploring creation of dynamic web “dashboard” of data on prescription drug abuse
  - Sources
  - Indicators
  - Format
  - Access



# Treatment WG Activities

- Reviewing current treatment systems in Colorado
  - What resources are available to patients and providers?
  - How to make these known?
  - What gaps exist?
  - Recommendations for other consortium work groups, SATF, legislators, insurance companies, etc.
- Reality check for activities of other work groups



# Student WG: GenerationRx

- Organizing Colorado chapter of organization
  - Starting with pharmacy students
  - Will expand to medical, dental, nursing, public health students
  - Will then expand to other HP schools/colleges in Colorado
  - Focus is: train-the-trainer, peer-to-peer education for middle school, high school, college age students (key 12-24yo demographic)
- Meeting with Cardinal Health on Feb 10 re: funding, campus wide general interest meeting on Feb 25



# Where are we...and where do we go from here?

- The good news: Colorado has gone from #2 to #14 in self-reported nonmedical opioid use among age 12-25 (NSDUH, 2011 vs. 2010)
  - Our approach is unique, inclusive of many diverse stakeholder groups, willing to not get exactly what they each want
  - Squeezing the balloon from many angles
  - Progress we have made has come from three things: knowledgeable, caring people; effective leadership; and collective action
- The less good news: Still need improvement in self-reported nonmedical use, overdose deaths and ER visits are still very high, treatment capacity is low and hard to find and access, and heroin use is rising (this is a big ship, turning it is hard work)
  - Need funding to create infrastructure/support for this work to be sustainable and have maximum impact (good policy)
    - Attorney General funding
    - NGA and Pinnacol seed funding
    - Foundation matching funds



# Questions?



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