

Wicomico County Health Department  
Prescription Drug Task Force

**Wicomico County Prescription Drug Task Force**

**Data Analysis:**

*Data will be submitted to the Wicomico County Health Department on a monthly basis to upload into their data system. Dash boards and reports will be generated to show trends, concerns, and improvement in the reduction of overdose, deaths, and use of illegal substances.*

Data Collection	Responsible Person	Data Collection	Responsible Person
Essence Data	Heather Brown	SBIRT: Referrals, interventions, and linkages to mental health and substance abuse treatment. Also monitor demographic information.	Heather Brown/Babies Born Healthy
Data Provided by DHMH as it relates to Wicomico County	Heather Brown	Naloxone: The number of individuals who have become certified.	Heather Brown/Cindy Shifler
Track data for prescription drop off boxes	Cindy Shifler	Collect poundage of prescription drugs. Contact enforcement and the Disposal Company on a monthly basis.	Cindy Shifler
Data submitted by the medical examiner related to vital statics of individuals who have died from an overdose.	Heather Brown/Lori Brewster	Develop and implement collection of overdose data from enforcement on a monthly basis.	Cindy Shifler and Enforcement Agencies
Prescription and other overdose related crime data	Local Police Departments	Focus groups with the following: physicians, dentists, and veterinarians; pharmacists; PRMC ER; community members. Implement surveys through Survey Monkey with the same populations.	Heather Brown and Cindy Shifler
Collect information from community providers through observations, surveys, and focus groups.	Heather Brown and Cindy Shifler	Develop a chart and/or survey to obtain monthly updates from all individuals certified to provide naloxone. A monthly deadline date will be established.	Cindy Shifler

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Data Collection	Responsible Person	Data Collection	Responsible Person
Track the number of individuals who have been certified to provide nalaxone	Cindy Shifler	Overdose data and other drug related data for Wicomico County. Contact the Maryland Poison Control Center to find out whether they could be a viable venue to collect local data.	Cindy Shifler, Maryland Poison Control
Treatment Admission Data	Heather Brown/ADAA (SMART)	Home invasions, street robberies, pharmacy robberies, and non-criminal activity.	Local Police Departments
Overdose Data	Cindy Shifler/State Prevention Coordinators/Staff, ADAA, etc.	Define suspicious; develop a collection tool to assist Pharmacies to share information on suspicious users.	Cindy Shifler, Local Police, Pharmacists
Work with PRMC to obtain hospital data related to opiate use from patient's seeking care.	Heather Brown/Lori Brewster	SMART data (Opioid use in admission data, #'s reporting buprenorphine, #'s reporting methadone, OMT admissions) Request data via email to Bill Rusinko <a href="mailto:William.rusinko@maryland.gov">William.rusinko@maryland.gov</a>	Heather Brown
Maryland Statewide Epidemiological Outcomes Workgroup (SEOW) <a href="http://www.pharmacy.umaryland.edu/programs/seow/">http://www.pharmacy.umaryland.edu/programs/seow/</a>	Heather Brown	HSCRC Data: <a href="http://www.hsarc.state.md.us/">http://www.hsarc.state.md.us/</a>	Heather Brown

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***Education of the clinical community:***

*Strategies for engaging with the medical community and other behavioral health providers to collaborate and develop effective interventions to prevent opiate overdoses.*

	<b>Local Conditions &amp; Data (Specific, identifiable, actionable) But Why Here?</b>	<b>Strategies/Activities</b>	<b>Short Term Outcomes</b>	<b>Intermediate Outcomes</b>	<b>Long Term Outcomes</b>
<b>Availability and Access to Prescription Medication</b>	Ease of obtaining prescriptions by doctors. (Data obtained from CESAR, treatment admissions, etc.).	<b>Enhance Skills</b> – Implement training for physicians, dentists, and veterinarians on prescription drugs. (Purdue Pharma)	Contact Local/National CME, Purdue Pharma in relation to potential training on prescription drugs; survey physicians on interests through Survey Monkey	Establish a date, time, speakers, etc., for training	Implementation of Training/Training Results
	Lack of knowledge of pain contracts on patients which means they cannot be monitored by the Pharmacy, and other Health Care	<b>Modify/change policies</b> – When a pain contract is written on a patient, it needs to be shared with the ER, the pharmacy, and it needs to be written on the prescription as well.	Develop a plan, research potential resources/proper use of resources, and educate physicians.	Review the State Opioid Overdose Prevention Plan  Assist ADAA to bring Risk Evaluation and Mitigation strategy (REMS) continuing education programs to prescribers within Wicomico County.	Policy change is selected, implemented, and followed.
	Inconsistency of how prescriptions are written/quantity provided to patients who doctor/pharmacy shop.	<b>Modify/change policies</b> – Develop and implement a policy for writing prescriptions for opioids for those who doctor/pharmacy shop.	Implement focus groups for pharmacists and physicians and/or utilize Survey Monkey to determine what physicians are seeing in terms of drug seeking behaviors.  Review present policies for prescribing opioids.	Begin planning educational sessions based on the data received through the survey and/or focus groups.  Develop a policy that will cover this issue.  Explore further ways to implement prescription	Provide training in the areas where the survey indicates the greatest need.  Policy Change.

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				guidance into an EMR.	
	<b>Local Conditions &amp; Data (Specific, identifiable, actionable) But Why Here?</b>	<b>Strategies/Activities</b>	<b>Short Term Outcomes</b>	<b>Intermediate Outcomes</b>	<b>Long Term Outcomes</b>
<b>Availability and Access to Prescription Medication</b>	Prescription medication policies are different from one pharmacy to another.	<b>Modify/Change Policies:</b> Develop and implement a policy that requires a photo ID and/or signature from the individual picking up medication for self or others and phone owner of policy, in all pharmacies in Wicomico County.	Survey/offer focus groups to pharmacies to determine their present/prior policies and procedures, and reasons for prior policy changes.	Utilize collected information to develop potential tracking mechanisms as well as policy changes and practices.	Change pharmacy policies to address local and corporate needs.
	Lack of a formal tracking system for prescription drugs: where they are purchased, how they are purchased, script used to purchase, etc.	<b>Changing the physical design:</b> Maryland's Prescription Drug Monitoring Program will be up and running.	Educate providers on PDMP.  Determine how the PDMP will track doctors who have and have not registered on the system.	Wicomico Physicians and pharmacies will utilize the PDMP and enter real time data.	Prescription drug use will be tracked and monitored in Wicomico County, Maryland.
	Lack of a formal system to track medical issues and doctor shopping for narcotic medication.	Maryland's CRISP is being developed for health care providers to obtain information regarding a patient's medical history.	Educate providers to enroll and enter information into CRISP	Physicians will have information needed in determining which patients are abusing and/or doctor shopping.	Decrease the number of patients abusing prescription drugs and/or doctor shopping.

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<b><i>Outreach to high-risk individuals and communities:</i></b> <i>Identifying high-risk individuals and situations within our community. Plans should be developed to intervene with addiction, referrals, and other necessary actions for the safety of the individual.</i>					
	Local Conditions & Data (Specific, identifiable, actionable) But Why Here?	Strategies/Activities	Short Term Outcomes	Intermediate Outcomes	Long Term Outcomes
<b>Low Perception of Harm</b>	The community believes that it is legal for individuals to share and/or sell their prescriptions to others. For that reason, Jurists are not providing sanctions to those who share and/or sell their prescriptions to others.	<b>Provide information</b> by educating the public about the consequences of sharing and/or selling prescription drugs to others	Develop a public service announcement and materials to educate the public that it is against the law to sell/share prescribed medication.  Contact Jury Commissioner about providing prescription law information to jurists	Implement training to medical/clerical staff on developing a preventative protocol for scripts through surveillance, tying it to the accreditation when possible, developing script # with patient id #, and not keeping original scripts in the medical record.	Internal policies and practices change to ensure the prevention of prescription drug use.
	Educate the public about the dangers of prescription drug abuse. Many are not aware of how easy it is to overdose on opioids and the dangers of combining different medications.	<b>Provide information</b> through pharmacies, posters, local cable segments.	Develop prescription drug materials that focus on localized needs.  Educate the public about the harm that prescription drugs cause.	Disperse newly developed materials/information to targeted populations.	The public will increase their knowledge of the dangers of prescription drug abuse.
<b>Naloxone</b>	Family members and first responders are not able to utilize naloxone to protect those who are at risk for overdose.	Begin to educate and certify individuals who are able to administer naloxone due to the changes in Maryland Law	Identify who will conduct the training to certify individuals to administer the medication.  Educate the medical community to prescribe naloxone to family members.	Work with EMS and Law Enforcement to ensure all individuals are certified to administer naloxone.  Purchase kits to be available for 1 <sup>st</sup> responders.	The majority of family members will be trained to administer naloxone to those that are prescribed an opiate.  All Law Enforcement and EMS will be trained and will continue to train those that are new.

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*Other Interventions/Initiatives:  
Information on interventions or initiatives Wicomico County plans to implement.*

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<b>PDMP</b>	Lack of a formal tracking system for prescription drugs: where they are purchased, how	<b>Changing the physical design:</b> Maryland's Prescription Drug Monitoring Program will be up and running	Determine how the PDMP will track doctors who have and have not registered on the system	Wicomico Physicians and pharmacies will utilize the PDMP and enter real time data.	Prescription drug use will be tracked and monitored in Wicomico County, Maryland.
<b>Local Overdose Fatality Review Team</b>	Lack of a formal process to review deaths that are related to an overdose.	Develop a committee to formally review the deaths of individuals who have died due to an overdose.	Identify agencies that can participate and provide input related to the death of the individual.  Develop an MOU to ensure confidentiality of the reports and outcomes.  Develop baseline data to help show the impact of recommended activities.  Work with ADAA for technical assistance in the development and implementation of the committee.	Develop strategic activities to address concerns identified during the reviews.  Submit data and reports to the State to show activities.	Decrease in the deaths related to overdose.
<b>Crisis Support for 1<sup>st</sup> Responders</b>	Lack of crisis support for first responders.	Educate and develop a crisis support system that can assist first responders with individuals struggling with behavioral health issues.	Evaluate the current crisis system to look for gaps in services.  Identify the needs of the first responders to provide them support.	Provide education to first responders regarding behavioral health and appropriate responses.  Look for funding to assist in the development of crisis support for the first responders.	Have a crisis support system that allows the first responders to have assistance when dealing with the individual who is having a crisis.  Decrease ED admissions with the support of further linkages to treatment due to the crisis support system.

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<b>SBIRT</b>	Lack of ability to directly link individuals with interventions or referrals from medical offices.	Develop and implement SBIRT within the medical community	Identify potential offices to pilot the project.  Provide education to office staff regarding tools, interventions, and methods to engage individuals in further help.	Work with Babies Born Healthy to pilot the project  Staff will become trained in motivational interviewing.  Begin providing the services and linking individuals with the appropriate interventions and treatment.	Expand SBIRT within the medical community (pain management, ED, primary care offices)
<b>Prescription Drop Off Locations</b>	Residents were not aware of how to dispose of their medications safely.	Develop and implement stationary prescription drop off boxes to be located at the local police departments	Continue to advertise the prescription drop off locations and times.	Resolve issues that may arise with the collection of the medications.  Track the pounds that are collected from each location.  Look for additional sites that are able to comply with the regulations surrounding the collection of medications.	Implement solution to problems that occur with the stationary prescription drop off boxes.

**Performance Metrics:**  
*Five performance metrics to assess the implementation and effectiveness of the actions.*

Problem Statement	Strategies	Activities	Measurable Outcomes/Timeline
There is a lack of early screening for women of childbearing age related to substance use.	Train appropriate staff to implement SBIRT within Babies Born Healthy	<ol style="list-style-type: none"> <li>1. Identify key participants to assist with the development of SBIRT.</li> <li>2. Complete a Charter to outline each agency/program role within SBIRT</li> <li>3. Train staff to utilize motivational interviewing.</li> </ol>	At least one provider will implement SBIRT within daily practices by Fall of 2013, as recorded through the completion of the screening tool.

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Problem Statement	Strategies	Activities	Measurable Outcomes/Timeline
Wicomico County has seen a rise in crime that is related to prescription drug abuse.	Compile the most recent Opiate related crime data for Wicomico County.	<ol style="list-style-type: none"> <li>1) Compile opiate related data, including crime.</li> <li>2) Determine baseline.</li> <li>3) Determine what additional data needs to be collected.</li> <li>4) Design mechanism to collect new opiate related data.</li> </ol>	Wicomico County Enforcement agencies will achieve at least a 5% reduction in prescription drug crimes one year after the implementation. Evaluated by the collection of data on pharmacy robberies, home invasions, street robberies, and other related crimes.
First responders are not able to utilize Naloxone to protect those who are at risk for overdose.	Educate and certify individuals who are able to appropriate to administer naloxone.	<ol style="list-style-type: none"> <li>1. Identify who will conduct the training to certify individuals to administer the medication.</li> <li>2. Identify individuals within the police and EMS departments that will participate in the certification process.</li> </ol>	Ninety percent of First Responders will be educated and certified to administer Naloxone by July 1, 2014, as recorded by the completion of the certification course.
Wicomico County has a high rate of fatalities related to overdoses from opiates and other drugs.	Develop a committee to formally review the deaths of individuals who have died due to an overdose.	<ol style="list-style-type: none"> <li>1) Identify potential member for Overdose Fatality Review Team.</li> <li>2) Determine protocols.</li> <li>3) Develop an MOU.</li> <li>4) Develop baseline.</li> </ol>	An Overdose Fatality Review Team will be established and begin reviewing cases by January 1, 2013.
There is a lack of understanding among the medical community and county residents regarding the impact illegal use of opiates has on Wicomico County.	Educate residents and medical providers about the increase in the use of illegal opiates/heroin.	<ol style="list-style-type: none"> <li>1. Apply for a BJAG grant to assist in a Gap Analysis to fully identify areas of concern within the county related to crime and opiate/heroin abuse.</li> <li>2. Conduct focus groups to gather information from the community regarding their concerns and gaps in resources as it relates to opiates and heroin.</li> <li>3. Complete a Community Assessment among behavioral health providers for further feedback and gaps regarding opiate and heroin abuse.</li> <li>4. Develop tool kits for the medical community and behavioral health providers to assist in the development of overdose prevention plans with their patients.</li> </ol>	<p>A minimum of 4 focus groups will be held within the community by July 1, 2014.</p> <p>Tool Kits will be distributed to all Behavioral Health and Medical Providers within Wicomico County by January 1, 2014.</p> <p>Community Assessment will be submitted to Behavioral Health Providers during June 2013 and June 2014.</p>