



California Health Care Foundation

HEALTH CARE THAT WORKS FOR ALL CALIFORNIANS

Evolving Your Goals: Coalition Strategy for Impact

Opioid Safety Coalitions Network

December 13, 2016



Welcome!

OSCN communications support team

Laurie Kappe, President

Elizabeth Galicia, Vice President



i.e. communications, LLC
strategy, partnerships, results

Housekeeping

- This session will be recorded and will be posted within a week at www.chcf.org/oscn
- All attendees will be muted
- To ask a question:
 - o Logistical questions: Use CHAT to the Host
 - o Questions for speakers: Use CHAT to ALL
- Evaluation: Please take a moment at the end of the webinar to offer feedback

Today's Objectives

Review trends in coalition progress

Highlight coalition successes

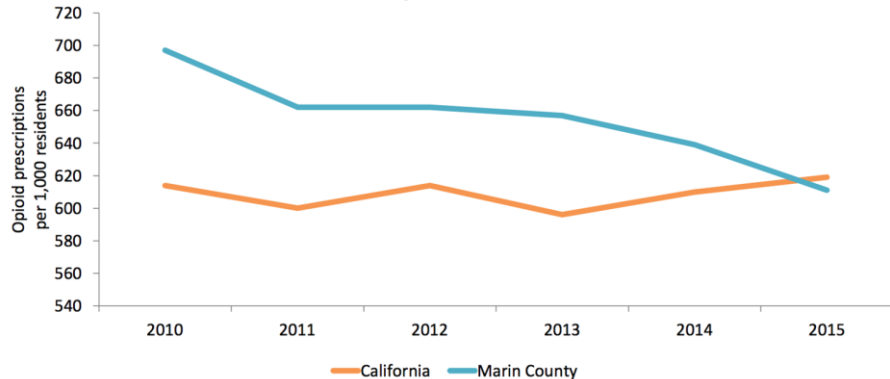
Outline tools for evolving goals and strategies

Tips for enhancing the strength of your coalition

Impact in Action

The number of opioid prescriptions in Marin County is **decreasing**, and is now **lower** than the state average.

**Opioid Prescriptions (excluding Buprenorphine) per 1,000 Residents
Marin County and California, 2010-2015**



Source: California Controlled Substance Utilization Review and Evaluation System (CURES)
Prepared by: Brandeis University PDMP Center of Excellence



Nic Coury

Dr. Reb Close, left, and Dr. Casey Grover, right, have spent countless hours of volunteer time to launch Prescribe Safe, and have published scholarly articles about the initiative.



In the two years since Prescribe Safe launched, the numbers have been turning around. In the year before Prescribe Safe, 2,856 recurrent emergency room visits were documented in Monterey County, meaning the same patient returned to be treated for the same condition within a 12-month period (ranging anywhere from a few to a few hundred times). The year after implementation, that number dropped to 1,185, more than a 50-percent decrease, estimated to have saved county hospitals close to \$1 million, according to CHOMP.

The amount of narcotic pills prescribed during that year also dropped, according to Doctors on Duty, from 60,740 in the year prior to 27,948 – a 54-percent decrease. And between 2013 and 2015, Monterey County's deadly prescription overdose rate decreased by 28 percent, to 34 deaths in 2015.



Goal → Strategies

Goal: Reduce overdose deaths by at least 10% by 2020, via the following strategies:

- Instituting safer prescribing practices

- Increasing access to medication-assisted treatment

- Increasing access to naloxone

Progress

Overall goal (reduce deaths)

Milestones along the way

Following charts note coalition progress on these milestones

Red: limited progress

Yellow: some progress

Green: achieved milestone

Safe Prescribing (Fall 2016)

Milestone	Alameda Contra Costa	Humboldt	Lake	Los Angeles	Mendocino	Napa	Northern Sierra	Orange	Placer Nevada	San Luis Obispo	Santa Clara	Santa Cruz	Shasta	Siskiyou	Tuolumne	Napa, Marin, Sonoma, Yolo
Adoption of ED guidelines	Green	Yellow	Red	Green	Red	Red	Yellow	Yellow	Yellow	Green	Yellow	Green	Green	Yellow	Green	Yellow
Adoption of Primary Care guidelines	Red	Yellow	Yellow	Yellow	Red	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Yellow	Red	Red	Yellow
Adoption of Urgent Care guidelines	Yellow	Red	Red	Yellow	Red	Red	Yellow	Red	Red	Yellow	Yellow	Red	Yellow	Red	Green	Red
Guidelines in other settings	Red	Red	Red	Yellow	Red	Red	Yellow	Red	Yellow	Yellow	Red	Red	Yellow	Red	Red	Red
System to monitor if guidelines are implemented	Red	Red	Red	Yellow	Red	Red	Red	Yellow	Red	Red	Red	Red	Yellow	Red	Yellow	Red

Evolving Safe Prescribing Goals

- Moving from adopting to implementing/monitoring
- Target new practice areas: dental, others
- Alternative pain management options and coverage
- Influence patient behavior to “bend the demand curve”

Safe Prescribing in Los Angeles

→ All 76 EDs

→ 1 in 3 urgent care clinics

→ LA Dental society guidelines adoption

→ Kaiser Southern California, prescribing down 30% since 2010

→ For 2017: Launching primary care effort

SafeMedLA Key Strategies

Outreach to each ED; letter from County DPH

Health Systems Roundtable, follow-up survey

Pharmacist pain management conference

Engage dental community --->

Jan 1: announcing county as an "Opioid Safe Zone"



From: LA Dental Society and Safe Med LA Prescription Drug Abuse Coalition of Los Angeles County

To: All Dentists in LA County

Subject: Advisory for Dental Practice on Safe Opioid Prescribing

The Los Angeles Dental Society has joined with the Safe Med LA Prescription Drug Abuse Coalition of Los Angeles County to promote safe and appropriate opioid prescribing. We are following the lead of ADA President Carol Gomez Summerhays, who recently urged dentists everywhere to take steps to help prevent the widespread abuse of opioid pain medications (letter published in ADA News, July 5, 2016). The ADA recognizes that the misuse and abuse of opioid pain relievers—such as hydrocodone (Vicodin® and Lortab®) and oxycodone (OxyContin® and Percocet®)—have reached epidemic proportions in the United States. As prescribers of immediate-release and short-acting (IR/SA) opioid pain medications, dentists are well positioned to help keep these drugs from becoming a source of harm.

The new CDC Guideline on Safe Opioid Prescribing (3/15/2016) warns that long-term opioid use often begins with treatment of acute pain. <https://www.cdc.gov/mmwr/volumes/65/wr/r6501e1.html>

- When opioids are used for acute pain, clinicians should prescribe the lowest effective dose of immediate-release opioids and should prescribe no greater quantity than needed for the expected duration of pain severe enough to require opioids.
- Three days or less will often be sufficient; more than seven days will rarely be needed.

We bring your attention to the following key recent clinical practice guideline statements affecting dental practice and urge you to incorporate into your dental practice, as appropriate.

Safe Prescribing: Coalition tools

Placer/Nevada: Hand deliver safe prescribing guidelines to providers: office visit, and pain flyer -->

Sonoma: Medical Association package ↓



Got Pain?

Alternatives:
Diet and Exercise
Try Physical Therapy
Consider Getting a Pet
Manage Chronic Medical Conditions
Get Help with Drug/Alcohol Problems
Talk To Your Doctor About Non-Addictive Medications

Alternatives:
Quit Smoking
Manage Your Stress
Practice Relaxation & Meditation
Get Help with Depression & Anxiety
Try Gentle Stretching, Yoga, or Tai Chi
Pursue a Hobby or Volunteer Your Time
Try Acupuncture, Massage or Hydrotherapy

pncms.org/ RXDrugSafety

Drug Safety
A program of the
Placer Nevada County Medical Society

There Is No Magic Pill

“Opioid Failure in Palliative Care”

Santa Cruz: “opioid failure series” roadshow -->

William Morris, MD, MPH
Palliative Care and Supportive Services
PAMF, Santa Cruz
Inpatient Palliative Care Consult Service
Dominican Hospital, Santa Cruz

Medication-Assisted Treatment (Fall 2016)

Milestone	Alameda Contra Costa	Humboldt	Lake	Los Angeles	Mendocino	Napa	Northern Sierra	Orange	Placer Nevada	San Luis Obispo	Santa Clara	Santa Cruz	Shasta	Siskiyou	Tuolumne	Napa, Marin, Sonoma, Yolo
Plan for expanded MAT access	Yellow	Yellow	Yellow	Green	Red	Red	Yellow	Red	Yellow	Yellow	Green	Yellow	Green	Red	Yellow	Yellow
Access to MAT	Red	Yellow	Red	Green	Red	Red	Yellow	Red	Green	Red	Yellow	Yellow	Yellow	Red	Yellow	Red

Evolving MAT goals

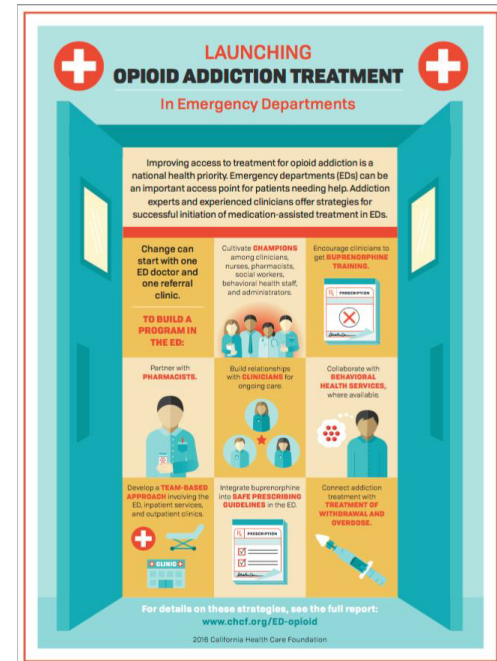
MAT in specific settings: e.g., EDs, primary care, FQHCs, residential clinics, jail settings

MAT access via existing health plans

“From X to Rx”: Activating x-license clinicians

Working with clinics on MAT implementation

De-stigmatize addiction treatment



Alameda County: MAT in the ED

MAT induction clinic in the ED at Highland Hospital

“Opportunity for addiction treatment”



Alameda County Clinic Strategies

Buprenorphine treatment at FQHCs

- Work with county behavioral health to institute changes at contract level
- Distribute workload, gradual increase

MAT in Rural Counties: Start Small

Northern Sierra:

“One patient at a time” approach: Plumas, Modoc, Lassen, Sierra all with at least one providing doc.

Shasta: MAT x-license training next month for 50-60 MDs
ID'd 10 docs, 1:1 meetings

Tuolumne: Medi-Cal clinic, 2 half days/week MAT

Naloxone Access (Fall 2016)

Milestone	Alameda Contra Costa	Humboldt	Lake	Los Angeles	Mendocino	Napa	Northern Sierra	Orange	Placer Nevada	San Luis Obispo	Santa Clara	Santa Cruz	Shasta	Siskiyou	Tuolumne	Napa, Marin, Sonoma, Yolo
Plan for naloxone distribution	Red	Red	Yellow	Green	Red	Yellow	Green	Yellow	Green	Green	Green	Green	Green	Red	Yellow	Yellow
Access to naloxone	Red	Green	Yellow	Green	Red	Red	Yellow	Red	Yellow	Green	Green	Yellow	Yellow	Yellow	Red	Red
Tapering guidelines for chronically opioid dependent	Red	Red	Red	Yellow	Red	Red	Yellow	Red	Yellow	Green	Green	Yellow	Green	Red	Red	Yellow

Evolving Naloxone Goals

Pharmacist training/certification for furnishing

Co-prescribing naloxone in the ED (happening in Monterey)

De-stigmatizing naloxone

Addressing high cost of sustaining naloxone access

Naloxone in Santa Clara

- Trainings and kits for addiction clinics, residential clinics, and needle exchanges.
- Local universities training RAs and campus police
- Law enforcement commitments in 4 of 15 cities (2 kits per car)

Santa Clara Strategies

-Letter to residential clinics, needle exchange programs, law enforcement

-Joint meeting of residential clinic providers

-In-house trainer

-Newspaper ads promoting free kits


-Trial kits: Coalition supplies first kits, then you come up with the budget

-Youth-produced video


How to use Naloxone nasal spray (Narcan®)

Step 1. Lay the person on their back.


Step 2. Remove Narcan® from the box. Peel back the tab with the circle to open.




Step 3. Hold Narcan® with your thumb on the bottom of the plunger and your first and middle fingers on either side of the nozzle.




Step 4. Tilt the head back and provide support under the neck. Insert the tip into one nostril until your fingers on either side of the nozzle are against the bottom of the nose.



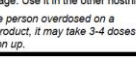
Step 5. Press the plunger firmly to give dose of Narcan®



Step 6. Remove the spray from nostril after giving dose.



Step 7. Ensure medical help is on the way. Move person on their side. If they are not waking up or breathing normally within 2-3 minutes, use the second nasal spray in the package. Use it in the other nostril.



Please note: If the person overdosed on a fentanyl/related product, it may take 3-4 doses to wake the person up.

ASCOOPX
Santa Clara County Opioid Overdose Prevention Project

Ask your doctor for a Naloxone prescription, or Santa Clara County Residents can obtain free Naloxone kits at the following locations:

- Central Valley Clinic - tel: 408-885-5400
2425 Enborg Lane, San Jose ca 95128
- Alexian Health Clinic - tel: 408-272-6577
2101 Alexian Drive, Suite A
San Jose ca 95112
- South county clinic - tel: 408.852.2420
90 Highland Ave, San Martin Ca 95046

A note about the California Good Samaritan law:
In order to encourage people at the scene of an overdose to call for help, the law provides limited immunity from arrest or prosecution for minor drug law violations for people who summon help at the scene of an overdose.
Good Samaritan laws do not protect people from arrest for other offenses, such as selling or trafficking drugs, or driving while drugged. These policies protect only the caller and overdose victim from arrest and/or prosecution for simple drug possession, possession of paraphernalia, and/or being under the influence.

If you need help with confidential referral for treatment for substance use disorder, call:

Gateway 1-800-488-9919 or
National help line 1-800-662-HELP (4357)





Video courtesy of Santa Clara County Opioid Overdose Prevention Project

Coalition Stakeholder Engagement

Region	Medical association	County public health and/or county health care delivery system	Community clinics	Health plans (especially local Medi-Cal plans)	Hospitals	Hospital association	Emergency physician groups	Medical groups and IPAs	Pharmacists	Urgent Care	Dentists
Alameda-Contra Costa	X	x	X	X	X	X	X	X	X	X	X
Humboldt		x	X	X	X		X	X	X		
Lake		x	X	X	X			X	X		X
Los Angeles	X	x	X	X	X		X	X		X	
Mendocino	X	x	X	X	X		X	X			
Napa	X	x	X	X	X		X	X	X		X
Northern Sierra		x	X	X	X						
Orange-UCI	X	x	X	X	X	X	X	X	X		
Placer-Nevada	X	x	X	X	X	X	X	X	X		
San Luis Obispo		x	X	X	X		X		X		
Santa Clara		x		X	X						
Santa Cruz		x	X	X	X		X	X	X		
Shasta (also Trinity, Siskiyou, Modoc, Lassen, Plumas, Tehama)	X	x	X	X	X	we do have MDS who prac in hosp	X	X	X	X	X
Tuolumne	X	x	X	X	X		X		X	X	
Yolo-Napa-Marin-Sonoma	X	x	X	X	X			X			
	60%	100%	93%	100%	87%	20%	73%	73%	67%	27%	27%

Coalition Stakeholder Engagement

Region	County Alcohol and other drug dept	Methadone clinics	Other Addiction treatment/ harm reduction	Patient and family advocates	Law enforcement	DEA	Corrections	Medical examiner	Pharmacies	Urgent care or retail clinics	Education/ schools	Politicians and supervisors
Alameda-Contra Costa			X	X	X	X		X	X	X		X
Humboldt	X		X		X		X	X	X			X
Lake	X		X	X	X		X	X	X	X	X	
Los Angeles									X	X		
Mendocino	X	na	X		X	na	X				X	
Napa	X				X				no rep from big chains			X
Northern Sierra	X				X		X					X
Orange-UCI				X	X	X	X	X			X	X
Placer-Nevada		X	X	X	X	X			X		X	
San Luis Obispo	X	X	X		X		X	X	X	X	X	
Santa Clara												
Santa Cruz	X	X	X					X			X	
Shasta (also Trinity, Siskiyou, Modoc, Lassen, Plumas, Tehama)	X	na	X		X		X		X	na	soon	X
Tuolumne					X				X		X	
Yolo-Napa-Marin-Sonoma	X									X		
	60%	20%	53%	27%	73%	20%	47%	33%	47%	33%	47%	40%

Engaging Stakeholders: Cross-Coalition Trends



Public health, Health plans: 100%

Community clinics: 93%

Law enforcement 73%

Pharmacists: 67%



Schools: 47%

Public officials: 40%

Urgent care/Dentists: 27%

Consumers, family advocates: 27%

Strengthening Your Coalition

Identifying champions for each goal to influence adoption, e.g., Dental Society lead to persuade peers

Collective impact approach: united around one goal, range of perspectives; coalitions together a statewide force

Community voices to change hearts, help de-stigmatize

Engaging Community

RxSafe Humboldt --->

RxSafe Marin annual meeting ↓

PROCLAMATION OF THE BOARD OF SUPERVISORS

OF THE COUNTY OF HUMBOLDT

MARCH AS PRESCRIPTION DRUG ABUSE AWARENESS MONTH

WHEREAS, prescription drug abuse is the nation's fastest growing drug problem and Humboldt County is deeply affected, losing many residents each year to unintentional drug overdoses

WHEREAS, in 2013, drug overdoses in the United States caused 42,982 unintentional deaths with 22,767 attributed to prescription drugs; and

WHEREAS, more people died from unintentional drug overdoses than car crashes in 2015 in Humboldt County.

WHEREAS, in Humboldt County, opioid overdose deaths are 3.6 times the state average and non-fatal opioid overdose hospitalizations are 5.4 times the state average.

R.S.V.P NOW FOR **12.09.16**

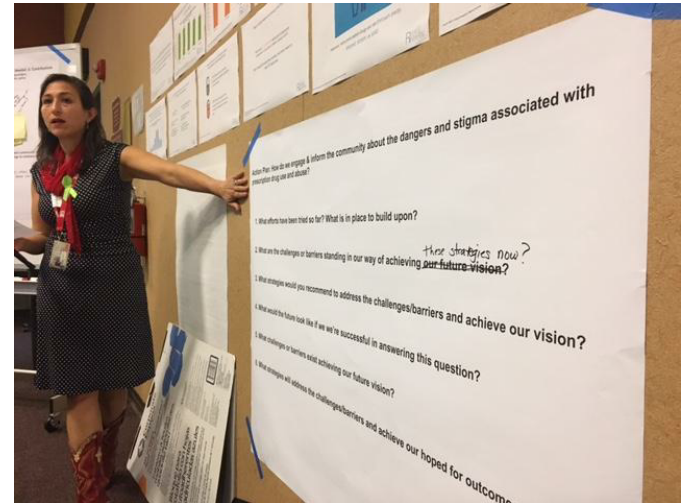
OUR COMMUNITY IN ACTION: AGAINST PRESCRIPTION DRUG ABUSE

BE HEARD. MAKE A DIFFERENCE. JOIN US.

RxSafe Marin will share an update of the work this past year & work with **YOU** to develop solutions for the year ahead. Youth are eligible for community service hours! Food provided.



www.RxSafeMarin.org



“Adapt and Adopt” Sessions

Upcoming peer-sharing calls and video hangouts for support and TA.

Potential topics:

- Large-system coordination

- Consumer coalition engagement

- Rural strategies for patient education

- Engaging pharmacies for furnishing

Signups/requests through mentors and coaches.

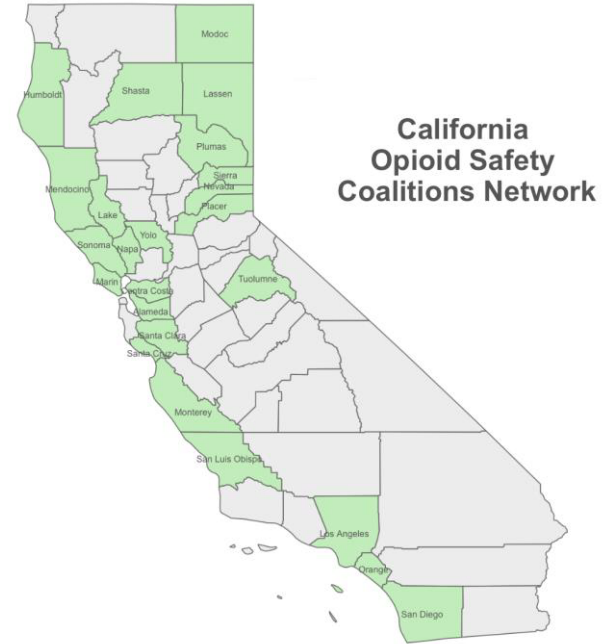
Panelist Contact Information

- If you have any additional comments or questions, please contact:
- Liz Galicia: egalicia@iecomm.org
- Laurie Kappe: lkappe@iecomm.org

These and other coalition tools are on the OSCN google drive in the communications folder, link at chcf.org/oscn.

Upcoming Webinars

- January 11, 2017: 12:30-1:30 pm Coalition Core Funding: Creating a Sustainability Plan
- February 8, 2017: 12:30-1:30 Topic: TBD



Please offer feedback via the evaluation, thank you for attending