

Madison-Dane County, Wisconsin: A Coordinated Response to Stop the Drug Overdose Epidemic

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In 2009, Madison-Dane County, Wisconsin, became an accredited Safe Community, a program that brings key stakeholders together to promote community safety and reduce injury. Prescription drug poisoning was identified as the leading cause of injury death in the community. Those involved in the Safe Community program coordinated a multi-strategy response to stop the drug overdose epidemic. This case study examines how the Madison-Dane County Safe Community program executed four of its strategies:

- 1) MedDrop Reducing Access to Drugs
- 2) Prescriber Education and Outreach Reducing Inappropriate Prescription Use
- 3) Don't Run Call 911 Improving Overdose Intervention
- 4) Parent Addiction Network Supporting Early Intervention, Drug Treatment and Recovery

The Drug Poisoning Problem

During a 2009 review of community injury data, Safe Communities Madison-Dane County was shocked to find poisoning deaths had significantly increased. In fact, they exceeded the previous top causes of injury fatalities – motor vehicle crashes, suicide and older adult falls.

"It hit us between the eyes" said Cheryl Wittke, executive director of Madison-Dane County Safe Community program. "We had noticed a small uptick a few years earlier but at that time we did not dig deeply into what was causing the slight increase."

In less than a decade, opioid death rates had almost quadrupled (Bullard-Cawthorne & Ndiaye, 2015). The dramatic increase in poisoning fatalities was from drug overdoses – specifically from prescription painkillers, not from cocaine or heroin. Also surprising was the age of the people dying. With Madison being home to the University of Wisconsin (UW), people initially thought "drug overdose" equals college student; however, the data showed the greatest number of deaths were among those 25-30 and those 40-45 years of age. In addition, drug poisoning hospital visits occurred across Dane County and not centered in the city of Madison near the UW campus (Bullard-Cawthorne & Ndiaye, 2015). It became clear drug overdose was a community-wide problem. Dane County, like so much of the U.S., was experiencing what the Centers for Disease Control and Prevention describes as a prescription drug overdose epidemic.

"For our Safe Community program, it is now the issue that we spend the most of our time addressing;" said Wittke.

Safe Communities Approach

Accredited Safe Communities such as Madison-Dane County demonstrate competency in four key areas identified as critical for effective injury prevention: sustained collaboration, community data, programs and evaluation. Madison-Dane County uses a thoughtful and consistent approach to build a coordinated response to the most critical injury issues in the community: prescription drug overdose, car crashes, suicide and elder falls.

This approach includes regular examination of injury data and trends to identify the most critical injury and safety issues impacting the community. Once an injury issue is identified, the Safe Community program works to better understand the problem. Using the data, the community begins to determine the circumstances or the "who, what, when, where and how" leading to drug overdose and death. A scan of the scientific literature revealed that other communities and states are also experiencing an increase in drug overdose. As a member of Safe Communities America, Madison-Dane County has a network of hundreds of national and international Safe Communities that are willing to share their experiences in tackling drug overdose.

Madison-Dane County also recruits community champions and local experts who are willing to volunteer and advise the community on identifying evidence-based programs and promising solutions. These community champions along with other volunteers form a steering committee responsible for developing a coordinated response. The steering committee sets initiative goals, monitors injury trends and reviews marketing and outcome measurements.

Community stakeholders gather to learn about the problem, share their perspectives and build consensus around the proposed strategies. Workgroups are formed to develop and implement each strategy. Measurement and outcomes are built into each strategy and monitored by both the workgroup members and the steering committee.



Safe Communities America is an accreditation program of the National Safety Council that recognizes communities committed to reducing injuries and deaths in an effort to make their community safer.

The Safe Communities model is a community-driven approach that prioritizes safety by bringing all sectors of the community together, including local business, government, and nonprofits and working in a coordinated way to identify local injury priorities and mobilize the community to take action.

Four Criteria:

- 1. Sustained collaboration community leaders and advocates working together to improve the quality of life in the community
- Data collection and application collection and thorough examination of community injury data to set injury prevention priorities
- 3. Effective strategies that address intentional and unintentional injuries proactively and strategically addressing high injury areas in the community
- 4. Evaluation methods implementing evaluation methods and measuring progress of coalition led initiatives

Designation 2009, 6th U.S. Safe Community, 160th International Safe Community



One of the most difficult challenges for small and medium-sized communities such as Madison-Dane County is securing the funding and other resources to implement a coordinated response. The economic recession severely impacted the Safe Community program's revenue, limiting its operations. Wittke reduced her hours to part-time in order to keep the doors open and continue working on other safety initiatives. During the economic downturn, the board of directors continued to meet, learn about the issue and identify potential solutions.

Meanwhile, prescription drug overdose steadily increased. In 2012, recognizing the serious loss of life from overdose, the city of Madison and Dane County jointly awarded approximately \$80,000 to the Safe Community program to launch a coordinated response.

Drug Poisoning Summit

On Jan. 30, 2012, Madison-Dane County Safe Community program convened the Drug Poisoning Summit: Stop the Overdose Epidemic. More than 130 professionals from health care, drug and alcohol rehabilitation, law enforcement, education, courts and public policy focused attention on understanding drug poisoning and potential solutions. A roadmap was presented outlining six strategies to stop the drug overdose epidemic. Community stakeholders helped refine the strategies with volunteers forming workgroups for each strategy.

Reducing Access to Drugs – MedDrop

The prescription painkiller epidemic differs from previous drug crises in the U.S. Prescription painkillers are legal, available by a doctor's prescription, casually stored and easily accessed in many home medicine cabinets. More than 70 percent of drug users report obtaining these drugs for free from family or friends (SAMHSA, 2013). Madison-Dane County's MedDrop program reduces the availability of prescription drugs by providing a convenient way to safely dispose of leftover medication.

MedDrop places drug collection boxes at police stations throughout the city of Madison and Dane County. The U.S. Drug Enforcement Agency (DEA) has strict rules regarding collection box sites and the handling, storage and disposal of the collected drugs. Under 2014 DEA rules, only law enforcement or certain DEA controlled substance license holders such as pharmacies, hospitals and long-term care facilities can modify their licenses in order to collect unwanted drugs. Collection sites have to maintain strict control of the collected drugs to ensure they are completely destroyed and not diverted into the wrong hands.

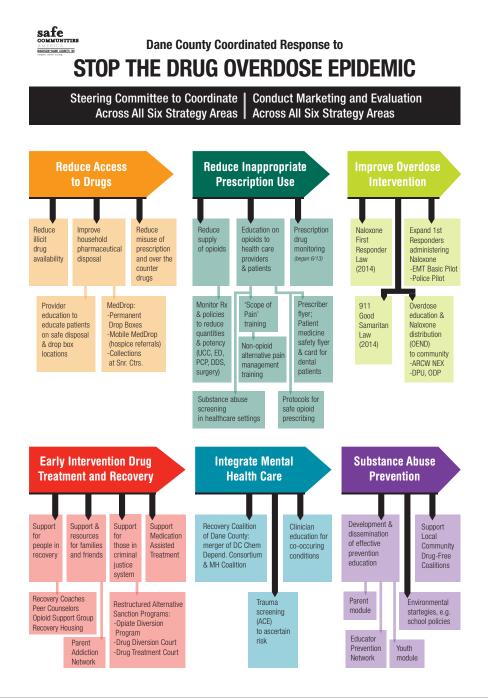
Two pilot sites, Madison East Police District Station and Middleton Police, launched in 2011.

MedDrop Outcomes

- 13 permanent MedDrop collection locations
- Since 2012, approximately 4.6 tons of unwanted medication is collected annually.
- More than 27 community partners contribute funds or help market the MedDrop program.



The Summit recommended expanding the number of permanent drug collection sites. In order to maximize the impact of MedDrop boxes, criteria placed sites in communities with the highest overdose rates and easily accessible to all Dane County residents. Madison-Dane County has 13 permanent MedDrop sites. Each box is highly visible and marked with signage explaining what medications can be safely disposed. MedDrop cannot collect IV bags, oxygen tanks, nebulizer machines, thermometers, sharps, EpiPens or anything with a needle or lancet.



Police officers move deposited drugs from collection boxes to locked evidence storage at their departments. At an annual roundup, participating police departments bring collected drugs to the Middleton Police Department. The drugs are weighed and repackaged for transport. The Safe Community program contracts with a pharmaceutical waste hauler to transport and incinerate the drugs. The Dane County Narcotics Taskforce, a collaboration of area law enforcement agencies, provide a police escort for waste hauler and supervise the incineration at the disposal facility as an in-kind contribution to the effort. Aside from the contribution of police time, it is approximately \$28,000 to transport and destroy the 4.6 tons of drugs collected annually.

MedDrop is funded by a Dane County grant and matching funds from the participating municipalities. More than 16 partners contribute fiscal support. Nineteen partners, hospitals, pharmacies, pharmacy school students and community recycling programs help make patients and the community aware of MedDrop collection sites and the need to dispose of unwanted medications.

Next steps include a public education campaign to increase awareness of safe storage and disposal. Safe Communities received permission from the state of Utah to utilize its successful "Use Only As Directed" educational campaign. Outdoor ads began appearing throughout Dane County in Spring 2015.

Reducing Inappropriate Prescription Use

According to CDC, the increase in opioid overdose parallels the increase in the sales of opioid medication (Paulozzi, Jones, Mack, & Rudd, 2011). Overprescribing of opioid painkillers can result in multiple adverse health outcomes, including fatal overdoses. Madison-Dane County began to partner with the Dane County medical community to address this problem locally.



Physician champions, Dr. Andy Kosseff, retired clinical improvement director from St. Mary's Hospital, and Dr. Geoff Priest, chief medical officer with Meriter-UnityPoint Health, helped the Safe Community program identify strategies and build support among the medical community. The Madison Patient Safety Collaborative was identified as a previously successful model that could be replicated to address the prescription drug problem.

Safe Community program formed a healthcare workgroup. Representing a variety of clinical practice settings, the healthcare workgroup includes pharmacists, physicians, nurses, Advanced Practice Nurses (APRNs), addictionologists and public health practitioners as appointed by CEOs of major hospital health systems. CEOs are included on the news updates and distribution of the minutes for all workgroup meetings.

With CEO support, the major health systems set aside market competition to collaborate and share resources to address the prescription drug problem. Examples of collaboration include:

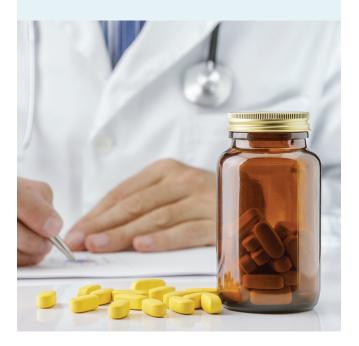
- UW Health System Chronic Pain kit
- Emergency Department Guidelines
- Webinar and conference calls

To build awareness about the initiative and get prescribers and patients on the same page, the workgroup developed two flyers – one for prescribers and another for patients. The flyers offered tips on safe opioid use, storage and disposal. The flyers were distributed to patients and prescribers by all major hospitals and health systems in Dane County. No matter which hospital or health system was used, all patients receive the same messages from their medical provider.

The next task was to educate prescribers about safer opioid prescribing practices. The workgroup took advantage of training offered through the Federal Drug Administration (FDA) Risk Evaluation

Inappropriate Prescription Use Outcomes

- Active engagement of medical providers and the major hospital and health systems in Madison-Dane County
- Established hospital emergency department practices for opioid prescribing
- Creation of patient and prescriber flyers with tips on how to safely use, store and dispose of opioid painkillers
- More than 200 prescribers educated about safer opioid prescribing and alternatives to opioids for the treatment of pain.



and Mitigation Strategies (REMS) program. Through this program, the FDA requires the makers of long acting and extended release opioid pain medications to provide clinician training in an effort to address the increase in opioid addiction and overdose deaths. The "Scope of Pain: Safe and Competent Opioid Prescribing Education" workshop was developed and provided by Boston University School of Medicine in collaboration with the Council of Medical Specialty Societies (CMSS) and the Federation of State Medical Boards (FSMB). The training included information on how to assess pain, function and patient risk factors, universal precautions in pain medicine and risks of high dose medications, treatment planning and monitoring, identification of potential problems such as addiction and when and how to discontinue opioid treatment. Speaker fees, travel costs and participant workshop materials are all provided at no charge to the community as part of the REMS program. More than 150 medical professionals attended the workshop held Nov. 1, 2013.

The healthcare workgroup also educated prescribers about alternatives to opioid medications for the treatment of pain. Dr. Don Teater, M.D., presented "Alternatives to Opioids for the Treatment of Pain" at grand rounds offered by Meriter-UnityPoint Health, St. Mary's and UW Health, Madison's three hospital systems. It was the first time the same topic was presented in the same week by all three organizations. More than 200 medical professionals participated in the three grand rounds offered in November 2014. Clinicians at one location indicated they would make changes to their practicing habits. Practice changes described were:

- Less likely to prescribe opioids, continue to encourage reduced opioid use, less use of narcotics
- More awareness of effectiveness of NSAIDs compared with opioids and will share with patients
- Lean more toward non-opioids
- Less prescribing of COT (Chronic Opioid Therapy) more counseling
- Use of acetaminophen and ibuprofen first for treatment of any pain

One challenge with Safe Communities datadriven approach has been the lack of real time prescription data. Wisconsin's Prescription Drug Monitoring Program (WI PDMP) started in June 2013 and is used to monitor trends in opioid prescribing in Madison-Dane County. This helps the Safe Community program measure the progress of its prescriber outreach efforts.

Next steps for the healthcare workgroup include increasing referrals to treatment and improving communication between addiction, pain management and primary care practitioners.

Improving Overdose Intervention – Don't Run, Call 911

Naloxone, a lifesaving antidote, reverses opioid drug overdose. The harm reduction workgroup determined that naloxone needed to be made readily available in the community in order to reduce opioid deaths. A 2013 survey of current and past drug users and first responders and focus groups with people in recovery and service providers found that more than 783 (75 percent) people witnessed an opioid overdose. (Public Health Madision and Dane County, 2013)

The survey also uncovered misinformation about opioid-related issues. Fifty-four percent of the time, current and past drug users said no one called 911 during an overdose because they either worried about police (50.7), they were afraid of arrest (36.3) or they administered naloxone and the victim woke up (40.7). (Public Health Madision and Dane County, 2013) However, law enforcement officers surveyed said they actually make an arrest less than 50 percent of the time at the scene of an overdose. (Public Health Madision and Dane County, 2013)

The Aids Resource Center of Wisconsin (ARCW), a harm reduction workgroup member, operates needle exchange programs and provides naloxone overdose kits to drug users. However, the survey revealed that expanding access to naloxone, especially by training police officers and providing Good Samaritan protection for witness and bystanders to an overdose, could potentially save more lives. At the time of the survey and focus groups, efforts were underway to introduce legislation on criminal immunity for drug possession for people who call 911. HOPE legislation was successfully introduced by Rep. John Nygren and became law in spring 2014.

"Our partnership with Safe Communities to increase access to naloxone and the need for Good Samaritan protection has improved relationships between the harm reduction community and law enforcement" said Scott Stokes, prevention director at ARCW.

After the laws passed, the harm reduction workgroup created a plan to conduct naloxone training and educate the public. ARCW continues to fund naloxone training and provide it to bystanders and family members. ARCW trained 252 Dane County residents in 2014. ARCW, NarAnon and the Parent Addiction Network have partnered to provide two very well-attended naloxone trainings with more planned in the Spring 2015.

The city of Madison Police Department became the first police agency in Dane County to train and equip police sergeants with naloxone. Training costs and naloxone purchases were funded through the police department budget. Madison's 39 sergeants were trained in November 2014. The first naloxone reversal by a Madison police officer occurred November 19, the day after the sergeant's training. Other Dane County police departments are exploring whether to train and equip officers with naloxone.

The Safe Community program quickly spread the word that people who witness an overdose and call 911 receive criminal immunity. A key target audience was drug users, who may be able to save the life of friend. They reached out to other states with Good Samaritan legislation and public education campaigns. New Jersey gave permission



Improving Overdose Intervention Outcomes

- Provided opportunities for partnership between harm reduction, recovery and law enforcement communities.
- Trained approximately 26 City of Madison police sergeants. The first overdose reversal occurred November 19th, the day after the sergeants training.
- ARCW, NarAnon and Parent Addiction Network partnered to provide two community naloxone trainings with more planned in 2015.
- Implemented the "Don't Run, Call 911" public education campaign.

to use its successful "Don't Run, Call 911" public education campaign. "Don't Run, Call 911" bus signs, bi-fold business card, posters and flyers hit the streets of Madison in December 2014. A grant from the Wisconsin Department of Justice funded the campaign.

Next steps include expanding the public education campaign, hosting a series of trainings for family members and bystanders, providing naloxone to attendees and offering naloxone training to other police departments in Dane County.

Parent Addiction Network – Supporting Early Intervention, Treatment and Recovery

The early intervention, treatment and recovery workgroup connects parents, friends and loved ones affected by substance abuse with Dane County service providers, law enforcement and criminal justice professionals to create the Parent Addiction Network of Dane County. The network's vision is to make Dane County, "a community that understands drug addiction as a disease, that is free of the stigma associated with drug addiction and that supports prevention, intervention, treatment and recovery for all."



Early Intervention, Treatment and Recovery Outcomes

- More than 40 parents, friends and service providers participate in the workgroup
- Parent Addiction Network of Dane County website launched March 2013
- More than 4.19 thousand unique visitors to the Parent Addiction Website

The workgroup's first task was to create a comprehensive, online information and educational center about identification, treatment and support of addiction with emphasis on Dane County issues, programs and services. The workgroup met for eight months to design the website. Substance abuse, law enforcement and criminal justice system professionals worked with parents to write easyto-understand guides about the Dane County legal system, answer questions about insurance, provide information about Dane County substance abuse treatment providers and other related topics. The website www.parentaddictionnetwork.org launched in March 2013 and is supported by the Safe Community program. Workgroup volunteers update and maintain the content.

"Members of the parent addiction network understand the anguish and frustration in trying to find help, figuring out what to do or who to talk with or even what questions to ask," said Ellen Taylor-Powell. "The Parent Addiction Network website is our way to help other parents so, no parent, friend or relative has to struggle finding answers to their questions."

Next steps include creation of a recovery guide that lists referral sources for recovery-friendly jobs and housing.

The Work Continues

Although Safe Communities is closely monitoring its data, drug overdose continues to increase. However, Madison-Dane County knows it can tackle problems like drug overdose and suicide because of the partnerships and trust it has built through Safe Community efforts.

"It's a constant challenge to keep the public and media focus on what is behind these overdose deaths – it's not heroin, it's prescription drugs," Wittke said. "Ten or 15 years ago, our community wouldn't have been able to rally the leadership and resources to effectively address this issue."

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