

Opioid Abuse Advisory Committee Meeting

January 6, 2023 9 – Noon CT

Hosted by South Dakota Dept. of Health





Welcome & Introductions



Prescription Opioid Abuse Advisory Committee

Lori Martinec, South Dakota Department of Health, Chair

Becky Heisinger, South Dakota Association of Healthcare Organizations

Sara DeCoteau, Sisseton-Wahpeton Oyate of the Lake Traverse Reservation

Margaret Hansen, South Dakota Board of Medical & Osteopathic Examiners

Amy Hartman, Volunteers of America - Dakotas

Tiffany Wolfgang, South Dakota Department of Social Services

Tom Deadrick, Attorney General's Office Representative

Kristen Carter, South Dakota Pharmacists Association

Dayle Knutson, Great Plains Indian Health Services

Kari Shanard-Koenders, South Dakota Board of Pharmacy

Rep. Taylor Rehfeldt, South Dakota Legislature

Dr. Erin Miller, South Dakota State University, College of Pharmacy & Allied Health Professions Tosa Two Heart. Great Plains Tribal Leaders Health Board Dr. Jennifer Ball, PharmD, Center for Family Medicine Brian Mueller, Pennington Co. Sheriff's Office Jill Franken, Sioux Falls Susan Kornder, Northeastern Mental Health Center Mary Beth Fishback, Brookings Behavioral Health & Wellness Jason Jones, Pierre Police Department Jason Foote, Yankton Police Department Dr. John Rounds, PT, Pierre Physical Therapy & Rehabilitation

Dr. Melanie Weiss, OD, Weiss Eyecare Clinic





Funding Updates

- DOH Grants
- DSS Grants





Overview of the 2022 Annual Report





South Dakota's Opioid Road Map: Data & Surveillance

- Prescription Drug Monitoring
 Program Updates
- Prevalence Data & Enhanced Surveillance Activities



SD PDMP Update

Opioid Abuse Advisory Committee

January 6, 2023

Melissa DeNoon, R.Ph., SD PDMP Director

What's New at the PDMP?

- Interstate Data Sharing active with 39 other PDMPs including all our neighboring states and recently added St. Louis County, MO, Alaska, and Florida
- Current Program focus:
 - Data Submission Compliance
 - Data Integrity Inspection Audit Project
- 2021 BJA Harold Rogers PDMP Enhancement Grant

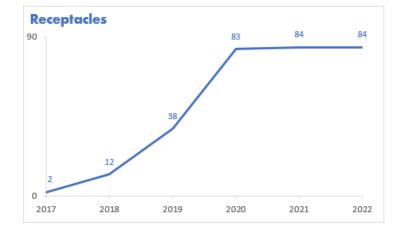
Clinical Alerts

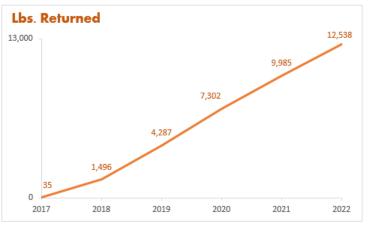
- 2018 enhancement to SD's PMP AWARxE platform
- Provide notifications on patients that meet or exceed one or more of three thresholds:
 - Multiple provider episodes within a specified time period
 - Daily active morphine milligram equivalents (MME)
 - Concurrent opioid and benzodiazepine prescribing
- Goal is to inform practitioners of patients at risk and aid in clinical decisions for best patient care

Clinical Alert Trends

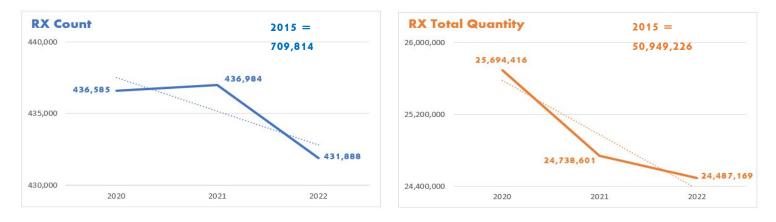
Clinical Alerts Measures	2018	2019	2020	2021	2022
Total Alerts for All Prescribers	90,879	72,963	66,931	65,176	56,871
Total Prescribers Received Alerts	13,029	12,350	11,579	11,570	9,984
Multiple Provider Threshold Alerts	515	407	229	263	220
Daily Active MME Threshold Alerts	34,592	25,949	22,389	21,153	18,861
Opioid & Benzo Threshold Alerts	55,772	46,607	44,313	43,760	37,790

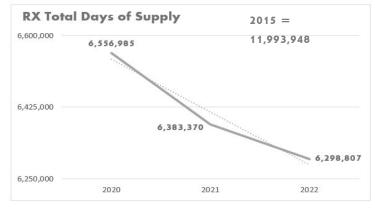
PharmaDrop Drug Take-Back Program



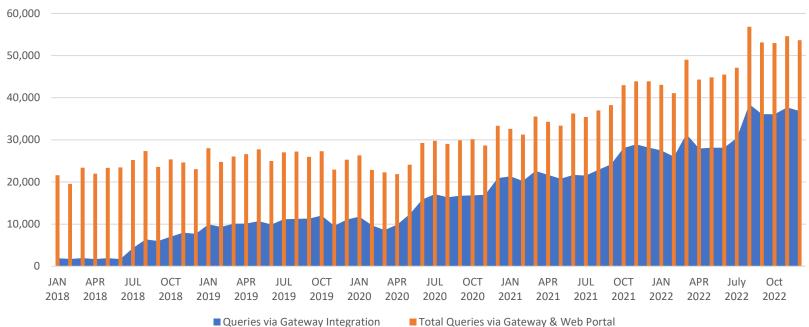


Trending SD Patients' Opioid Prescriptions





Trending PDMP Utilization by SD Drs & RPhs

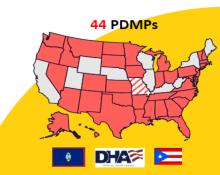


Total Queries via Gateway & Web Portal

PDMP Platforms and Interoperability

PDMP Platform **350 million** controlled substance prescriptions per year

PMP AWAR_xE



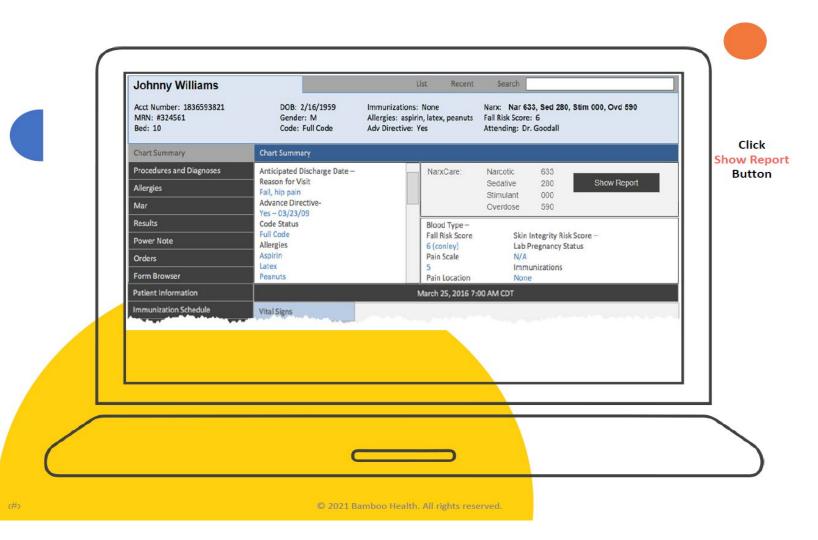
PMP Interstate Sharing Hub NO COST to the states Now 400 million transactions per month PMP Gateway* PDMP Clinical Workflow Integration

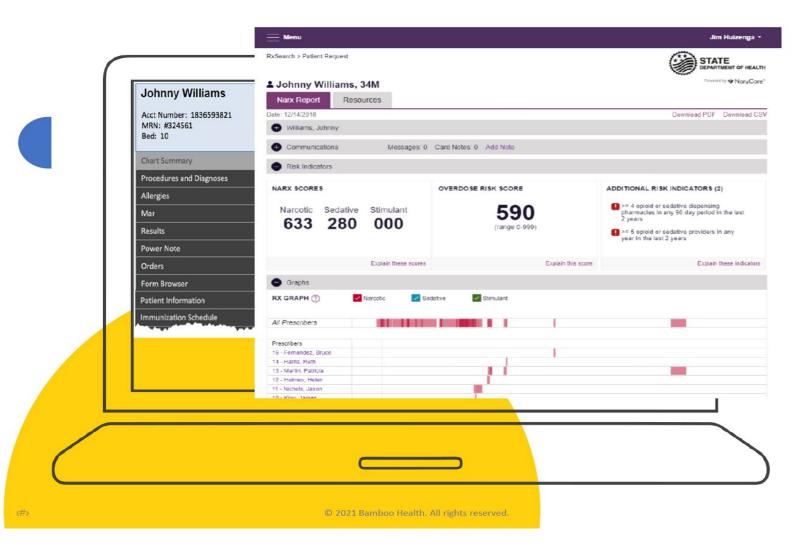
Now 90 million patient encounters per month

43 PDMPs



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NarxCare: It's All in the Details 🗸 🖥

NARXSCORES AND RISK INDICATORS

NARX SCORES	OVERDOSE RISK SCORE	STATE CLINICAL ALERTS (3)
Narcotic Sedative Stimulant	500 (Range 000-999)	Overlapping Opioid & Benzodiazepine Below Daily Active MME Threshold Below Prescriber & Dispensary Threshold

3rd digit = number of current dispensations

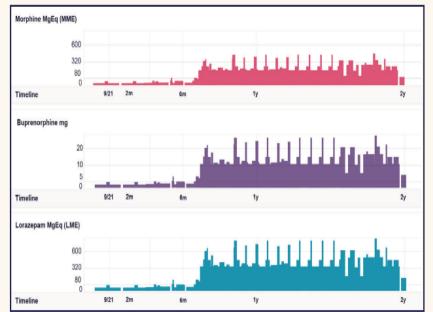
SCORE RANGE	RISK/COMPLEXITY	PATIENT POPULATION		
0 - 199	Low exposure, low risk	75%		
200 - 499	Moderate complexity	20%		
> 500	Multiple prescribers, pharmacies, overlaps	5%		

- Filter-able display of controlled substance history
- Two-year timeline view by drug category and provider
- Chart offers specific Rx details
- Shows changes in prescription history
- Offers visibility to medications prescribed by other providers
- Identifies acute, episodic, and chronic treatment history
- Differentiates between single encounters and longitudinal continuity of care

- Scores reflect past exposure to opioids, sedatives, and stimulants
- Scores help differentiate those patients with low to high risk based on multiple prescribers, pharmacies, and overlaps
- Shows number of current prescriptions dispensed
- Provides essential clinical alerts in the prescriber workflow
- Notifies prescribers when further investigation may be warranted

NARXCARE PDMP REPORT: DYNAMIC GRAPHICAL DISPLAY OF DISPENSATION HISTORY





TREATMENT INTENSITY

- Total Morphine Milligram Equivalents (MME) and Lorazepam Milligram Equivalents (LME) by day over a two-year timeline
- Helps identify needs for frequent monitoring, dose taper, and/or naloxone, to reduce risk of opioid-related harm
- Provides data to help determine needs for medication changes

- Summary table of current and 30-day average
- Comparison between current MME and 30-day MME/day average

CURRENT AND 30-DAY AVERAGE

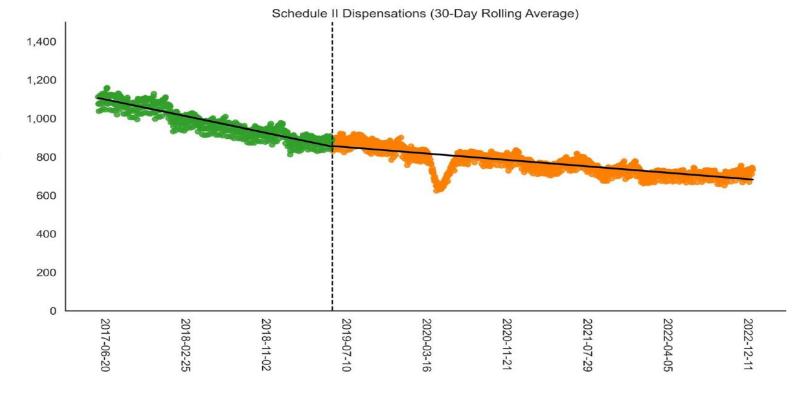
Summary							
Summary		Narcotics* (excluding t		Sedatives*		Buprenorphine*	
Total Prescriptions:	7	Current Qty:	108	Current Qty:	104	Current Qty:	320
Total Prescribers:	2	Current MME/day:	60.00	Current LME/day:	2.00	Current mg/day:	96.00
Total Pharmacles:	2	30 Day Avg MME/day:	8.00	30 Day Avg LME/day:	0.20	30 Day Avg mg/day:	7.47

PMP Gateway Effectiveness

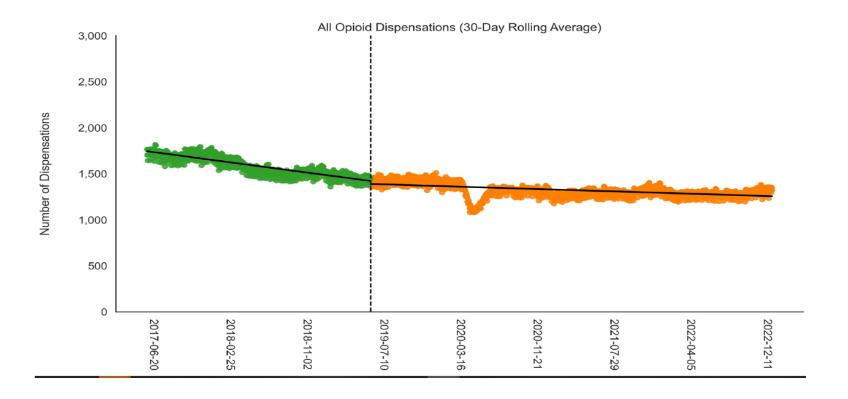
Trends observed in SD



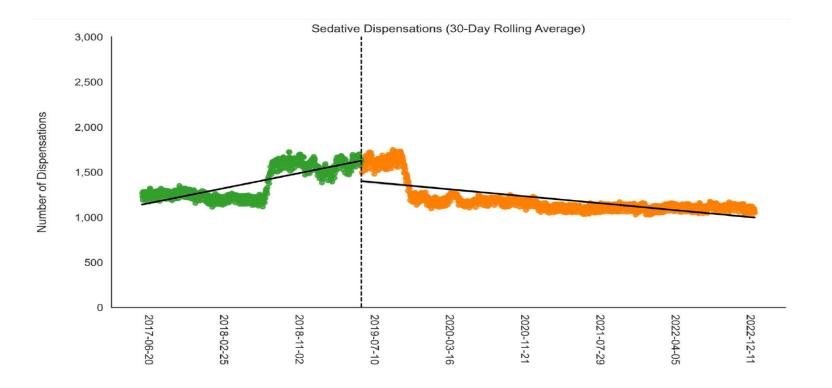
Opioid Dispensation Trends: Schedule 2 Only



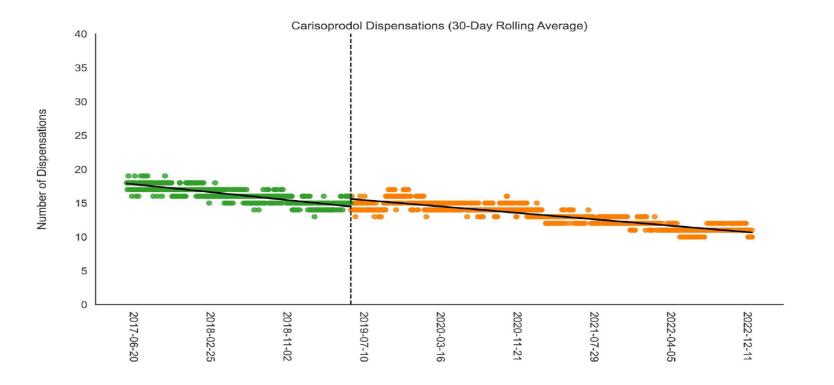
Opioid Dispensation Trends: All Schedules



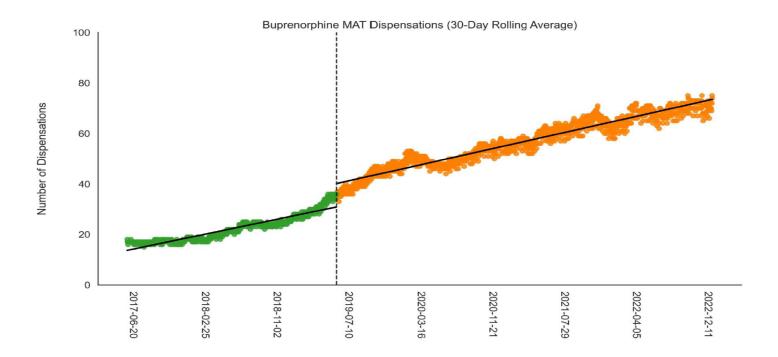
Sedative Dispensation Trends



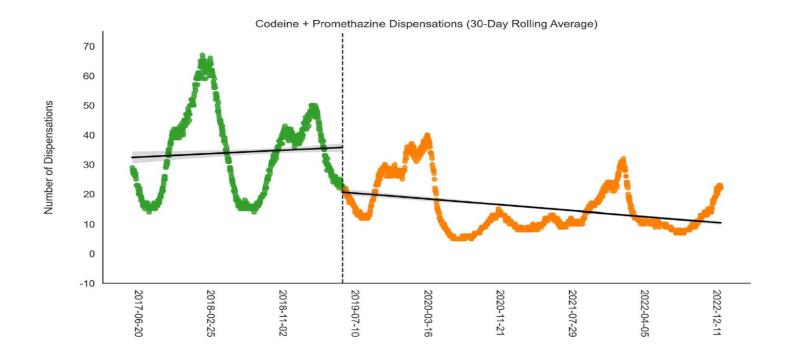
Carisoprodol Dispensation Trends



MAT Dispensation Trends



Codeine + Promethazine Dispensation Trends

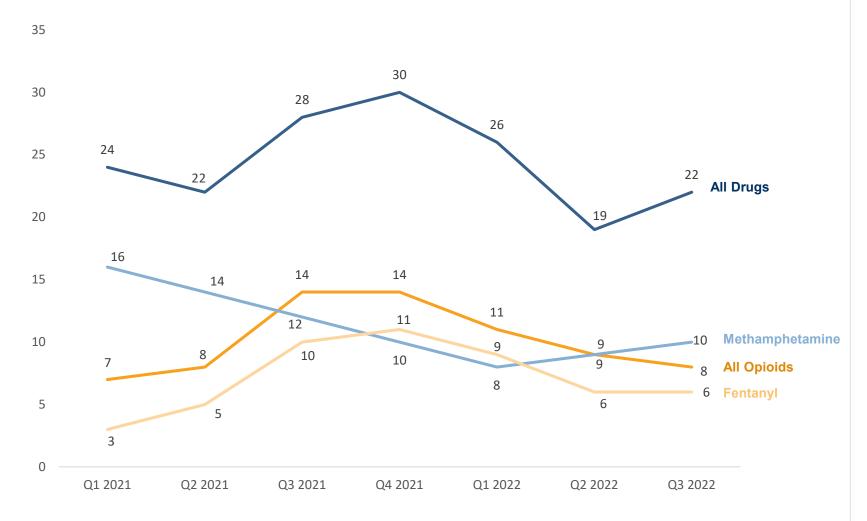


SOUTH DAKOTA HEALTH

Data Updates

Amanda Weinzetl, MPH Injury Prevention Epidemiologist South Dakota Department of Health SOUTH DAKOTA DEPARTMENT OF HEALTH

Provisional* Drug Related Deaths by Drug Type, South Dakota



*2022 data is provisional, subject to change, and reflects death records filed with the South Dakota Department of Health as of 12/01/2022

State Unintentional Drug Overdose Reporting System (SUDORS)

What is SUDORS?

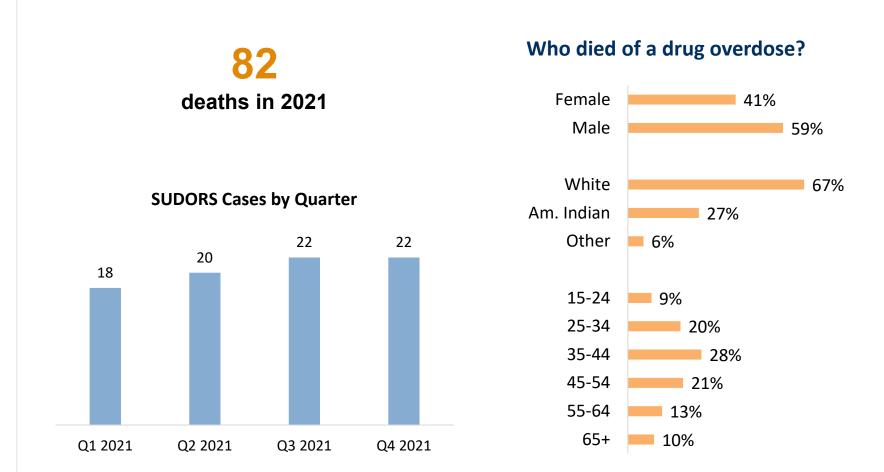
- Surveillance strategy of the OD2A funding
- Collects information on unintentional and undetermined overdose deaths
 - Death certificates
 - Coroner reports
 - Toxicology reports
- No personally identifiable information is entered into the web-based data system (NVDRS)

SUDORS Case Inclusion:

- Presence of any of the following underlying cause-of-death codes: X40-X44, Y10-Y14
- Substance types include illicit drugs, prescription and over-the-counter drugs, and dietary supplements
- Deaths that occurred in South Dakota

Data in the next couple slides reflects numbers and information based on the point in time the data was pulled from the system. Changes in data could occur after initial analysis.

2021 SUDORS Data Summary



Data Source: National Violent Death Reporting System (NVDRS)



What circumstances were documented?

58%

of drug overdose deaths had at least one opportunity for intervention

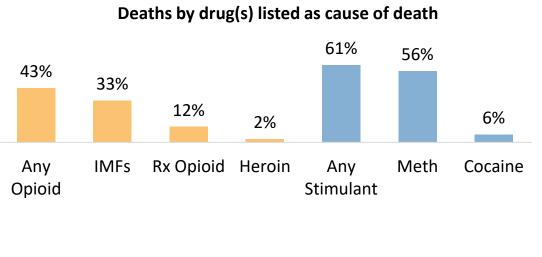
4% Recent release from institutional setting
 7% Prior overdose
 7% Fatal drug use witnessed
 17% Mental health diagnosis
 40% Potential bystander present

A potential bystander was present in 40% of deaths, indicating there may have been an opportunity to provide life-saving actions at the time of the overdose.

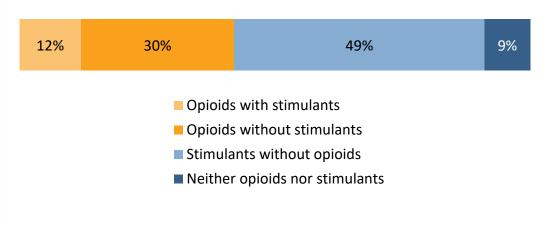
Note: Circumstances surrounding overdose deaths were documented in reports by coroners. Persons who died by overdose may have had multiple circumstances. It is possible that other circumstances could have been present and not diagnosed, known, or reported.

2021 SUDORS Data Summary

What drugs were involved?



Deaths by opioid and stimulant involvement



Data available online! Thanks to our partners and contributing staff for making this work possible!

Top 5 opioid and stimulant combinations

46% Methamphetamine with no other stimulants or opioids

21% Illicitly Manufactured Fentanyl with no other opioids or stimulants

9% Rx Opioids with no other opioids or stimulants

7% Illicitly Manufactured Fentanyl and Methamphetamine

2% Cocaine with no other opioids or stimulants



SOUTH DAKOTA DEPARTMENT OF HEALTH

Data Resources

Data Dashboard - avoidopioidsd.com/key-data

SUDORS Data - avoidopioidsd.com/key-data OR doh.sd.gov/statistics/sd-vdrs

National SUDORS Data - cdc.gov/drugoverdose/fatal/dashboard



Project Updates

- Medications for Opioid Use Disorder Partners, Access & Integrated Services
- Overdose Response Naloxone Access
- Support Services Recovery Housing Update
- Avoid Opioid Campaign Updates



Treatment Services funded by SOR



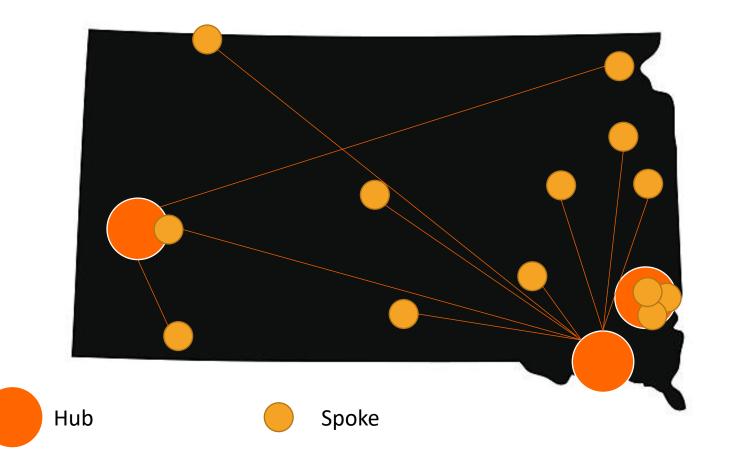






Medications for Opioid Use Disorder

Partners | Hub & Spoke Delivery of Care supported by SOR Funding





Overdose Response – Naloxone Access

- Medication is available upon request and quickly distributed by DOH to first responders and organizations statewide.
- Medication is readily available among partnering pharmacies through the statewide standing order.
- Additional organizationlevel distribution may occur in 2023 based on county-level needs identified.

- Shared priority among DSS, DOH, and national partners
 - Office of National Drug Control Policy letter to State Governors mid-November on unprecedented overdose crisis facing the nation.
 - SAMHSA is actively working with all states to provide technical assistance.
 - SAMHSA and NASADAD (National Association of State Alcohol and Drug Abuse Directors) are hosting a Virtual Learning Community in January 2023 for the Saturation Plan.
- South Dakota's Naloxone Saturation Plan (NSP) is a key component of the new SOR 3 Grant Funding
 - Drafted NSP June 2022 in partnership with DOH and DSS.
 - South Dakota's plan will continue to evolve as more is learned with national partners and other states.

How to Access Naloxone in South Dakota

First Responders

- Training provided by DOH
- Refresher training available from DOH and online (on demand)
- Ordered by contacting DOH, who ships directly to requesting agency
- Administration data recorded by EMS, which is then auto-reported to ODMAP

Schools, Treatment Agencies, and Similar Organizations

- Training provided by DOH
- Stored in a commonly accessible place, and used in emergency response situations, similar to an AED
- Refresher training available from DOH and online (on demand, with CEUs available)
- Ordered by contacting DOH, who ships directly requesting organization

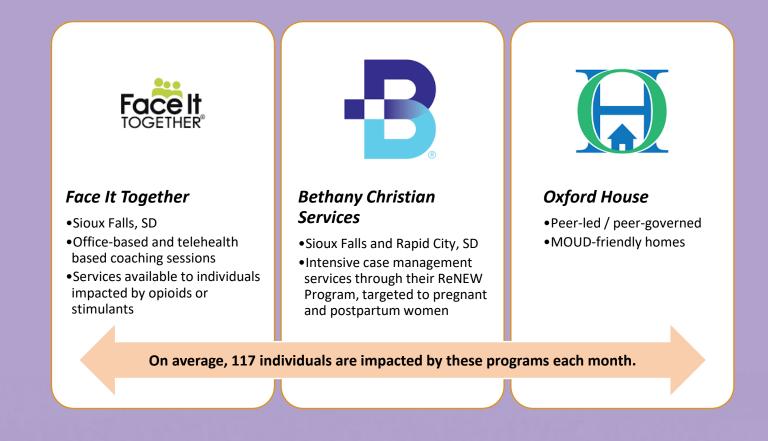
Individuals at Risk, or in a Position to Assist

- Available at participating pharmacies statewide
- Prescription issued using standing order
- Training provided by pharmacist
- Dispensed by pharmacist



Recovery Support Services funded by SOR *Current State Fiscal Year*









Oxford House – Expanded Capacity Continues

META (Sioux Falls)

DEACON (Sioux Falls)

EMILY (Sioux Falls)

CAROLINE (Sioux Falls)

FALLS PARK (Sioux Falls)

Silver Valley (Sioux Falls)

Coyote (Sioux Falls)

BLACK HILLS (Rapid City)

RUSHMORE (Rapid City)

NEW DREAMS (Rapid City)

DACOTAH (Aberdeen)

GREAT PLAINS II (Aberdeen)

11 houses across South Dakota 103 total beds available

- 7 men's
- 3 women's
- 2 women & children

Capacity Statewide – 103 beds





Communities under development



State	All -	All •	
Search	Search	Enter a location	Search by Zip

House Name	Gender	City	House #	County	Contact	Contact #	Interviews	Capacity	Vacancies	Distance	Last Updated
Black Hills	W	Rapid City	(605) 791-1188	Pennington	Lora	(605) 569-2111	Mon 6:30pm	10	3	Search by Zip	08/22/2022 3:02PM
Caroline	М	Sioux Falls	(605) 271-0925	Minnehaha	Matt	(605) 403-6978	Sun 7:00pm	9	3	Search by Zip	08/07/2022 6:32PM
Dacotah	W	Aberdeen	(605) 262-0455	Brown	Stephanie	(605) 228-0857	Daily 7:00pm	8	2	Search by Zip	08/22/2022 3:03PM
Deacon	W	Sioux Falls	(605) 27 <mark>4</mark> -0619	Minnehaha	Rochelle	(605) 595-0195	Sun 6:00pm	10	1	Search by Zip	08/22/2022 3:03PM
Emily	WC	Sioux Falls	(605) 271-1810	Minnehaha	Maggie	(605) 359-7406	Sun 8:00pm	10	1W 0WC	Search by Zip	08/22/2022 3:31PM
Falls Park	М	Sioux Falls	(605) 271-0631	Minnehaha	David	(605) 228-2505	Sun 5:30pm	8	3	Search by Zip	08/15/2022 3:40PM
Great Plains	М	Aberdeen	(605) 262-0249	Brown	Joshua	(605) 971-0493	Sun 1:00pm	8	0	Search by Zip	08/22/2022 3:03PM
Meta	М	Sioux Falls	(605) 271-1889	Minnehaha	Tyler	(605) 760-1216	Sun 1:00pm	9	1	Search by Zip	08/22/2022 3:02PM
Pushmore	М	Rapid City	(605) 7 <mark>91-0177</mark>	Pennington	Mike	(605) 786-6583	Sun 7:00pm	9	1	Search by Zip	08/21/2022 7:38PM

Show Map

Real-time look-up for house availability https://oxfordvacancies.com/

Avoid Opioid Campaign Updates



() COVID-19: Be aware of increased risk for people with Opioid Use Disorder

WHAT ARE OPIOIDS? FIND HELP TAKE ACTION PROVIDERS PHARMACY KEY DATA ABOUT

IMPORTANT: Be sure to dispose of your

Be sure to dispose of your *unused* medications **properly.**

Find a take back location near you





Advisory Committee

January 6, 2023



AvoidOpioidSD.com

What's On the Agenda & What's New?

1. Marketing Objectives

- Brief review: awareness to action
- Emphasis on prevention

2. Law Enforcement Outreach

- Outreach packets
- New print materials
- Local PSA radio support

3. Website

- Navigation updates
- New content





Marketing Objectives

- 1. Inform
- 2. Educate
- 3. Build Awareness



Messaging Categories

- 1. Build awareness: what are opioids?
 - Risk factors
 - Who's at risk
 - Increased risk related to COVID
 - Dangers of counterfeit pills

2. Promote treatment & related services

- Resource Hotline
- Care Coordination
- MAT
- Alternate ways to manage pain

- 3. Destigmatize opioid misuse & addiction
 - Encourage friends & family to reach out
 - Reframe addiction as a disease
 - Promote data (i.e. accidental overdose)

4. Promote safety & pro-active measures

- Naloxone
- Dispose Rx
- Medication Lockboxes
- Take Back locations



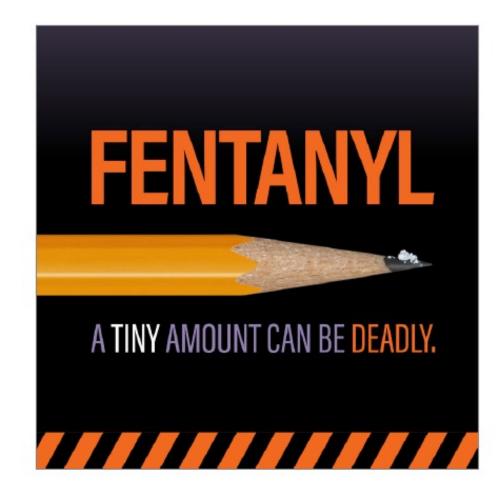
Law Enforcement Outreach

How it started

- Police officers told us they are worried
- Illegal fentanyl is pouring into our communities
- Counterfeit pills are easy to get & deadly
- Drug dealers are targeting kids online

What they needed

- Prevention & education materials
- A way to sound the alarm



Law Enforcement Outreach

How can we help?

- Took inventory
- Identified information gaps and created a list of new topics to cover
- Develop a practical means of distribution to make it easy for officers to share statewide resources



New Law Enforcement Materials

Print Materials

- Infographic
- Pieces for parents
- Magnets, stickers

Radio

- Address counterfeit pills & overdose
- Help & hope



Counterfeit pills are becoming more common in South Dakota. These fake pills have caused the number of overdoses and deaths to skyrocket, especially among young people age 15-24. Fake pills can be easy to get on the street, and buying drugs online, through social media, and payment apps has become a popular new way for drug dealers to target kids.

Common Counterfeits:

REAL XANAX

REAL ADDERALL

REAL OXYCODONE

 Fake pills are often laced with lethal amounts of FENTANYL.

 FENTANYL IS A SYNTHETIC OPIOID THAT IS UP TO

 Stansa

 DODS

 STRONGER

 THAN HERON

 Stansa

 Stansa

 Stansa

 Stansa

 Stansa

 Stansa

 Stansa

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 Stansa

Many overdoses are linked to **illicity manufactured** fentamy (IMF) which is distributed through illegal drug markets. It is added to other drugs because of its extreme potency, which makes drugs cheaper, more **powerful**, more addictive, and more dangerous. IMF can come in liquid or powder form. Powdered fentanyl looks just like many other drugs. It is commonly mixed with drugs like heroin, cocaine, and methamphetamine,



can be FATAL





You may think someone you love "would never" BUT the fact is kids take risks—smart kids, athletic kids, reserved and quiet kids—all types of kids.



Young people in South Dakota from ALL backgrounds are misusing prescription drugs at alarmingly increased rates. And, counterfeit pills are making the situation even more deadly.

Young people experiment or use drugs for a variety of reasons including: • Self-medicating for anxiety or depression

Boredom
 Feeling isolated or alone
 To help fall asleep or stay awake

- As a study aid
 For weight loss
- To improve sports performance











Drug Overdose Resources

Pre-assembled Packets

- Large reusable/refillable plastic zip top envelope
- Smaller envelopes contain resources for easy distribution to the public

Radio

- 3 spots featuring local law enforcement
- Paid media schedules for each community





Website Updates

- Misuse
- Counterfeit Drugs
- Safe Disposal
- Reverse Overdose
- Prevention

Counterfeit Drugs

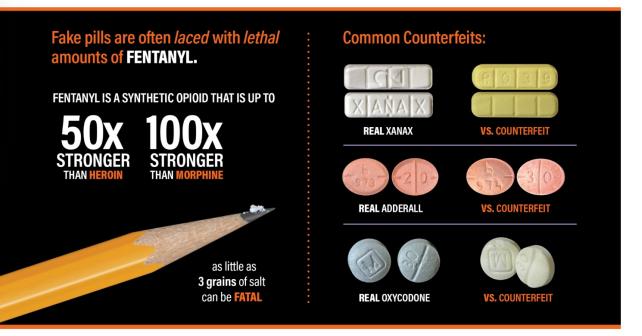
South Dakota Resource Hotline 1-800-920-4343

What are Opioids? > Counterfeit Drugs



Counterfeit drugs are widely available, increasingly deadly and becoming more common in South Dakota. Fake pills have caused the number of overdoses and deaths to skyrocket, especially among young people 15-24.

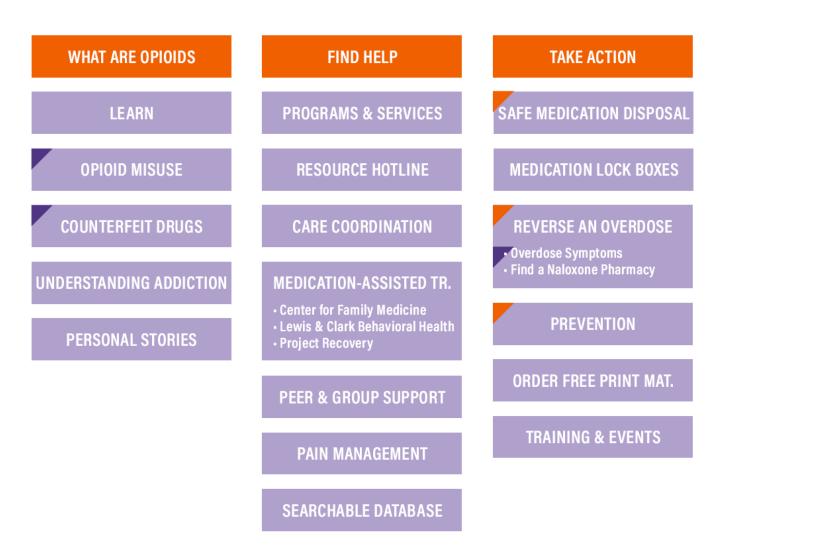
Fake pills can be easy to get on the street. Buying drugs online, through social media, and payment apps has become a popular new way for drug dealers to target kids.



Many overdoses are linked to **illicitly manufactured fentanyl (IMF)** which is distributed through illegal drug markets. It is added to other drugs because of its extreme potency, which makes drugs cheaper, **more powerful, more addictive, and more dangerous**.

IMF can come in liquid or powder form. Powdered fentanyl looks like many other drugs. It is often mixed with drugs like heroin, cocaine, and methamphetamine. This dangerous combination is then made into pills that look like other prescription opioids. In liquid

Website Navigation Updates: Oct. 2022



AvoidOpioidSD.com



Page has been updated/expanded

What Are Opioids > Opioid Misuse

- Not prescribed to you not safe
- Commonly misused prescriptions
- Mixing Drugs with alcohol +/or other drugs
- If you aren't sure treat it like an overdose
- Links to signs of overdose



WHAT ARE OPIOIDS? FIND HELP TAKE ACTION PROVIDERS PHARMACY KEY DATA ABOUT

Opioid Misuse

South Dakota Resource Hotline 1-800-920-4343

What are Opioids? > Opioid Misuse

Prescription drugs are only safe when used correctly by the person they were prescribed to. Taking medication that is not prescribed to you is very dangerous. Taking medication that didn't come from a pharmacy can be deadly.

If it's not prescribed to you, and you don't know the source—IT'S NOT SAFE.

Young people are taking prescription drugs that weren't prescribed to them at alarming rates. Non-medical use is most common among 18-25 year-olds, but even occurs among kids under 15.

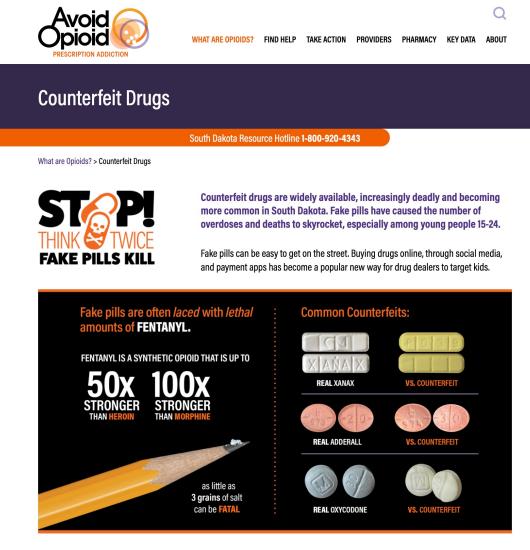
Young people may be aware of basic drug dangers. They may not be aware of how deadly drugs can be when mixed with alcohol or other drugs. Or, how common it is for counterfeit pills to be laced with fatal amounts of fentanyl. For tips on how to talk to your kids about drugs go to the prevention page.

Commonly Misused Prescription Medications

Depressants	Stimulants	Painkillers
Prescribed to treat: anxiety, panic attacks, seizures, and insomnia	Prescribed to treat: attention-deficit hyperactivity disorder (ADHD), narcolepsy, and for short-term treatment of obesity	Prescribed to treat: severe pain; they are highly addictive and should only be used as directed by a licensed healthcare professional
Brand names : Xanax, Ativan, Valium, Ambient, Lunesta, Sonata	Brand names: Adderall, Dexedrine, Paxil, Prozac, Zoloft <i>Illegal Stimulants include:</i> Methamphetamine (meth), Heroin, Cocaine, and Crack	Brand names: 0xyContin, Percocet, Vicodin, Fentanyl
Misuse: can happen when someone	Misuse: can happen when people take	

What Are Opioids > Counterfeit Drugs

- Dangers & prevalence
- Trends: Rainbow fentanyl
- Common counterfeits
- Drugs Decoded
 - Types & purpose
 - Emojis & street names
 - Reasons kids experiment
- How to keep your family safe



Many overdoses are linked to **illicitly manufactured fentanyl (IMF)** which is distributed through illegal drug markets. It is added to other drugs because of its extreme potency, which makes drugs cheaper, **more powerful, more addictive, and more dangerous**.

IMF can come in liquid or powder form. Powdered fentanyl looks like many other drugs. It is often mixed with drugs like heroin,

Take Action > Safe Medication Disposal

- Take Back Day
- Dispose Rx
- Flush (or Not)
- Links to Lockbox page

WHAT ARE OPIOIDS? FIND HELP TAKE ACTION PROVIDERS PHARMACY KEY DATA ABOUT

Safe Medication Disposal

South Dakota Resource Hotline 1-800-920-4343

Take Action > Safe Medication Disposal

Prescription drugs are only safe when used correctly by the person they were prescribed to. Taking medication that is not prescribed to you is very dangerous. Taking medication that didn't come from a pharmacy can be deadly. If it's not prescribed to you, and you don't know the source–IT'S NOT SAFE.

Unused or expired prescription drugs can be dangerous, especially for children, teens, and even pets. Misused medication can lead to accidental overdose or addiction. Here are some ways to safely dispose of medication:



The DEA hosts National Prescription Drug Take Back Day twice per year, in April and October. The next DEA Prescription Drug Take Back Day is April 29, 2023.

How to Safely Dispose Medication

Letting your unused or expired medication lay around the house can be dangerous. When you're done using a medication, dispose it safely using one of the methods below.

1. Drop Off at a Take-Back Location

Many take back locations like pharmacies and police stations accept unused or expired medications year-round. If you can't find a take back location near you, request a FREE DisposeRx packet.

Take Action > Reverse an Opioid Overdose

- Call 911
- Links to safety measures

Naloxone

- What is it
- Where to get it
- How to use it
- Free online training
- Find a Naloxone Pharmacy



WHAT ARE OPIOIDS? FIND HELP TAKE ACTION PROVIDERS PHARMACY KEY DATA ABOUT

Reverse an Opioid Overdose

South Dakota Resource Hotline 1-800-920-4343

Take Action > Reverse an Opioid Overdose

Anyone taking a prescription opioid is at risk for an overdose, whether unintentional or not. If you have opioids in your home (like fentanyl, hydrocodone, morphine, or codeine), there are things you can do to keep loved ones safe:

- Know the signs of an overdose
- Get NARCAN® Nasal Spray from your pharmacy
- Order a medication lock box for safe storage
- Dispose of unused medications



IF YOU SUSPECT AN OVERDOSE, CALL 911 IMMEDIATELY! Good Samaritan laws are in place to protect people helping others in distress.

In case of OVERDOSE: Naloxone SAVES LIVES!

Anyone at risk of an opioid-related overdose or those who could assist a person in an emergency situation can get naloxone from a South Dakota pharmacy without a prescription.

Naloxone is a safe medication used to reverse opioid overdose. It quickly restores normal respiration to a person whose breathing has slowed or stopped as a result of overdosing with heroin or prescription opioid pain medications.

In an emergency, you could save someone's life with naloxone.

Naloxone is not a substitute for medical care. Call 911 for emergency medical help immediately after giving the first dose of naloxone, even if the person wakes up.

What is NARCAN[®] Nasal Sprav?

Take Action > **Prevention**

- Risk Factors
- Common Signs
 - misuse, abuse & addiction
- Why talk about drugs with kids
- How to talk about
 - prescriptions & illicit
- Talking Points
 - Dispelling myths
 - Tips & resources
- Destigmatizing Addiction
- What you can do to prevent



WHAT ARE OPIOIDS? FIND HELP TAKE ACTION PROVIDERS PHARMACY KEY DATA ABOUT

Prevention

South Dakota Resource Hotline 1-800-920-4343

Anyone taking opioids can become addicted to them. Learn about the risks.

Prescription opioids should be taken exactly as directed and always used with extreme caution. Taking medication that was not prescribed to you is very dangerous. This type of **misuse** is a leading cause of unintentional overdose—especially among young people. Studies show that the earlier in life a young person starts using alcohol or other drugs, the greater their lifetime risk of misuse or addiction.

There are many factors that can increase the risk for substance use including:

- Family history of substance use*
- Past or current substance use disorder
- Mental health issues
- Social or family environments that encourage misuse
- Association with substance-using peers
- Lack of parental monitoring
- Lack of school involvement with friends, social activities, or sports
- Childhood trauma or sexual abuse

Look for opportunities to involve other trusted adults in these conversations. Family physicians, school nurses, spiritual leaders, grandparents, teachers, and coaches can help support your anti-drug message and will be more likely to reach out if they notice warning signs or have concerns.

*Make it clear to children from an early age that a family history of substance use increases their risk for addiction. Repeat your message regularly. Remind them that drug or alcohol use can quickly lead to addiction and some drugs can harm the brain or cause life-threatening overdoses.

Common Signs of Misuse, Abuse, or Addiction

Drug misuse and abuse affect people from all walks of life. Drug tolerance or dependence can develop before you realize it. It can



Coming Soon... Take Action > Media Library

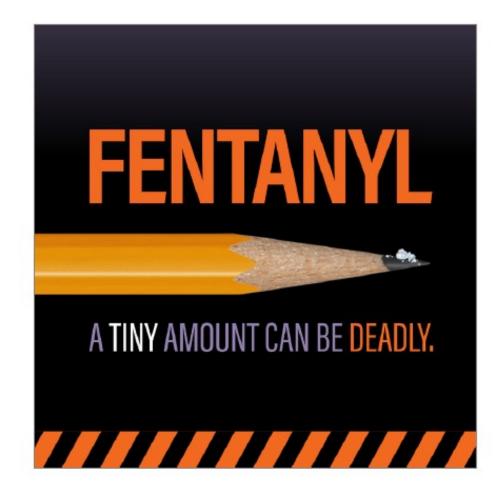
- Media best practices
- Social media how to share
- Shopping cart for print materials
- Newspaper templates
- TV inventory & how to share



Counterfeit Pills Campaign

Results so far...

- Series of social media posts launched statewide mid-December
- 5 posts running on Facebook and Instagram have generated 1,300+ link clicks to the new website content
- 5 Snapchat posts have resulted in 3,000+ swipe-ups
- Website traffic overall in December was up 215% over November





Stay tuned...

Thank You!



AvoidOpioidSD.com



Legislative Updates

 Harm Reduction – Fentanyl Test Strips (Rep. Rehfeldt)





Opioid Settlement Fund Overview & Status Update

 Presented by Tiffany Wolfgang, Chief of Behavioral Health, SD DSS



Funding Overview

• Funding Available

- Approximately \$54M over 18 years
- Distributor settlement:
 - Year 1 <u>State</u> Share- est \$1,203,948.92
 - Year 1 Localized Share Budget est \$515,978
 - 68 partnering counties/cities
- Janssen settlement:
 - Year 1 combined est \$2,063,317
 - No timeline yet on when funds will be available

Status Update

- Execution of the Memorandum of Agreement
- HB 1038 Establishment of the Opioid Abatement and Remediation Fund
 - Appropriated through normal budget process
 - Expenditures of the state must be assigned to Department of Social Services

Role of the Committee

- Ensure the State and Participating Local Governments have equal input into the distribution of the Statewide Share for Approved Uses across SD
- Shall meet twice annually
- Shall establish a process for receiving input from South Dakota communities, provider organizations, and cities and counties regarding how the opioid crisis is affecting their communities, understanding their abatement needs, and considering proposals for opioid abatement strategies and responses.
- Shall (at least annually) make formal recommendations to the Secretary of DSS on the use of the Statewide Share

Support the PDMP, Controlled Substance Registry, and Take Back Programs

- Critical supports for prescribers in monitoring patient opioid access.
- Provides accountability for prescribing practices.
- Est \$219,586

Implement an Opioid Overdose Follow-Up Program

- Increase linkages between survivors of an opioid overdose and their loved ones to appropriate care in the community.
- RFP process could be leveraged to solicit direct service providers for a pilot demonstration.
- Est \$300,987

Year 1 – Four Point Strategy for Consideration

Make funding available for Communities and Providers

- Application process and timeline would be established following guidance provided in the MOA and parameters the Advisory Committee may recommend.
- Est \$300,987

Establish a fund for continuation of key state level efforts.

- Federal funding (FY23) \$6.4 million.
- Allows for continuation of key strategies in all areas of prevention, recovery, and treatment should federal funding end.
- Est \$382,388



Committee & Partner Updates

- Roundtable updates from Committee members
- Updates from other partners on shared strategies

Facilitated by Lori Martinec





Public Input





Closing Remarks

