



## Opioid Abuse Advisory Committee

**Meeting #13 Minutes**  
**Tuesday, July 13, 2021**

**Zoom Video Conference**

The 13<sup>th</sup> meeting of the Opioid Abuse Advisory Committee was called to order by Advisory Committee Chair Laura Streich at 9:00 am CT. The following members of the Advisory Committee were in attendance: Laura Streich, Sara DeCoteau, Amy Hartman, Maureen Deutscher, Margaret Hansen, Tiffany Wolfgang, Kristen Carter, Kari Shanard-Koenders, and Brian Zeeb.

New advisory committee members were introduced and welcomed, including:

- Becky Heisinger (South Dakota Association of Healthcare Organizations, SDAHO)
- Tosa Two Heart (Great Plains Tribal Leaders Health Board, GPTLHB)
- Mark East (South Dakota State Medical Association, SDSMA)
- Representative Taylor Rehfeldt (District 14, South Dakota Legislature)
- Dr. Jennifer Ball, Pharm D (South Dakota State University / Center for Family Medicine)
- Dr. John Rounds, PT (Past President South Dakota Physical Therapy Association)
- Dr. Melanie Weiss, OD (Weiss Eyecare Clinic)
- Dr. Aaron Hunt, PhD, MPH (South Dakota State University)

State and program staff in attendance included: Kaitlyn Broesder, Melissa DeNoon, Katelyn Strasser, Kiley Hump, Amanda Nelson, Laura Ringling, Alex Mayer, Kylie Light, and Rachel Oelmann and Madden Pikula (contracted project supports from Sage Project Consultants, LLC).

Guests included: Erin Miller (South Dakota State University, or SDSU); Amber Letcher (SDSU); Josie Deutsch and Robin Veflin (Sisseton Wahpeton Oyate); Staci Eagle Elk (Great Plains Tribal Leader's Health Board); Aly Becker (Sanford Research OD2A Evaluation Team); Susan Strobel, Chelsea Wesner, Susan Puumala (University of South Dakota); Loretta Bryan (RN Clinical Improvement Consultant with SDAHO); Michaela Johnson (Coteau des Prairies Health Care System); Anne Pithan (Chair of Nursing at USD); and Sandra Melstad (SLM Consulting).

### **Minutes Approval.**

The prior meeting minutes were approved via e-mail in January 2021.

### **Welcome & Initial Comments**

Laura Streich welcomed the Advisory Committee members and guests. The outcome of the meeting was set to a) provide updates on several key initiatives supported by opioid funding managed by the Department of Social Services (DSS) and Department of Health (DOH), b) review key data and assessment-driven projects launched in the last year, c) share updates to the proposed state opioid strategic plan and d) provide opportunity for sharing of project information and networking across state and non-state agencies working in the area of opioid prevention, treatment, or response.

## **Funding Updates.**

Streich relayed that the Department of Health has now been approved for a one-year extension of the previously three-year agreement through Overdose Data to Action (OD2A). In addition, Streich shared that activities in the prevention and response of stimulant and other drug use are now allowable in the grant, in addition to opioid-related activities.

Department of Social Services as reported by Tiffany Wolfgang, Division Director for Behavioral Health, has maintained consistent grant funding which began with the grant in 2019, one current grant through September of 2021, and an additional grant, SOR2, which is active from September of 2020-September 2022. Wolfgang reported that stimulants can also be addressed in this rendition of the funding.

## **Presentations**

Meeting slides presented are included in these meeting minutes.

### ***South Dakota's Opioid Road Map – Data & Surveillance.***

#### Presentation #1: Prescription Drug Monitoring Program (PDMP) Update

Melissa DeNoon, SD PDMP Director with the Board of Pharmacy, Department of Health, reported on the latest activities associated with the program. DeNoon relayed that Maryland and Nebraska are new state connections that will be used to assist with progress in South Dakota. DeNoon also explained the License Integration project that allows for auto-approval. Auto-approval was explained in addition to the clinical alerts. Data was presented that in the last three years all measured parameters have decreased for clinical alerts.

DeNoon also shared on the status of the Takeback Program. DeNoon reported that since January 2021 one additional receptacle has been placed. Data was shared that showed an increase in both receptacle placement every year as well as the total weight of received drugs in the receptacles. DeNoon noted the effectiveness of the program and included that over 17,000 pounds of drugs have been returned since the start of the program. DeNoon then showed data of the top dispensed controlled substances in the state the past three years. The data showed a decrease in all controlled substances dispensed every year. DeNoon noted that the top two spots, Hydrocodone and Tramadol, have not changed but that units of stimulants dispensed are on the rise.

Following the presentation, Brian Zeeb asked about the health of the program in terms of financial stability. DeNoon explained that since inception, grants have funded the PDMP and securing funding is a constant conversation within the program.

#### Presentation #2: Data Updates

Presentation was provided by Amanda Nelson, Chronic Disease Epidemiologist from the SD Department of Health. Nelson showed data that ranked South Dakota as a top three state in terms of opioid deaths per population. However, she noted that both fentanyl and meth are increasing and ought to be watched closely. Nelson reported on the State Unintentional Drug Overdose Reporting Systems (SUDORS) from January 2020 to June 2020. See enclosed slides for information presented.

Nelson gave an update on AvoidOpioid.com's updated data dashboard. The updates are now live and all were encouraged to look at the data to help understand exactly where we are in our state with opioid use.

Sara DeCoteau asked which emergency departments are currently reporting into the data dashboard. Nelson answered that it does not include IHS, Veterans Affairs, and two other hospitals, but other than that all emergency departments are participating.

#### Presentation #3: Pregnancy Risk Assessment Monitoring System (PRAMS)

Katelyn Strasser reported on the results of a population-based survey that contacts mothers before and after pregnancy regarding a variety of factors. Strasser shared that the survey results help the Department of Health assess needs and make decisions. See enclosed slides for information presented.

After the presentation, Aaron Hunt asked if the state is collecting neonatal abstinence syndrome prevalence data. Strasser reported that they have looked into the hospital data but have not found it coded very frequently. Hunt then asked if survey participants are asked about mental health issues when answering the supplemental questions. Strasser answered that they are not asked.

Melanie Weiss asked if Strasser presents this data to any continuing education courses or presents to doctors directly. Strasser reported that they do share the data at conferences and send out PRAMS data where they see fit but would be willing to send it anywhere people may see it to be beneficial.

#### Presentation #4 PDMP Assessment Overview

Susan Puumala, University of South Dakota OD2A Evaluation Team, gave a presentation on the PDMP User Survey Results for both prescribers and pharmacists and compared the results. See enclosed slides for information presented.

Puumala showed that both the prescribers and pharmacists found the PDMP useful with a variety of tasks including patient management and communication.

Mark East asked about a possible deeper dive into the data itself and wanted to ensure that underlying factors would be looked into such as the community, resource availability, accessibility to prescriptions, and whether or not the prescriptions were specialty based. Puumala reported that a deeper dive into underlying factors has already begun.

#### Presentation #5 Emergency Department Toolkit

Sandra Melstad presented on the Emergency Department (ED) Toolkit and reported that the purpose of the toolkit was to assist EDs in promoting best practices, clinical guidelines, and linkages to care. Melstad updated on the project activities including some lessons learned in the process that were outlined on the slides attached.

Chelsea Wesner continued the presentation and reported that suggestions from the committee have been taken into consideration and the toolkit is in revision with the media contractor. Wesner explained that the toolkit is currently being formatted by the media contractor before implementation. One upcoming challenge Wesner mentioned was finding a champion to lead quality improvement within each emergency department. Wesner then discussed other models that have been used in other states, like Colorado, that simplified the process and toolkit.

Susan Strobel continued on the ED Toolkit by stressing the utility of the tool and how it helps ensure that patients do not fall through the cracks. Strobel emphasized the importance of the toolkit in rural communities where adequately trained staff may not always be present. Through the toolkit, she

reported, the hope is that other, non-opioid options, are available to patients through the use of various screenings and patient monitoring.

### **State Opioid Strategic Plan Review & Discussion**

Streich emphasized the effectiveness of the committee thus far in planful development of the initial state opioid strategic plan and stressed several accomplishments that have been achieved since the beginning. Streich provided an update to the committee on the proposed changes to the previous version of the strategic plan, noting that the new plan by design does not spell out specific action steps so as to allow contributing partners to the work the latitude to adjust goal execution based on resources available and/or funding limitations if applicable.

Sandra Melstad asked how the plan would address health equity. Streich outlined the guiding principles that help guide the collaborative work of partners in addressing geographical and cultural considerations for health equity.

The plan was outlined as explained below including the suggested changes from the committee:

Strategy 1: Consider changing “opioid use prevention” to “opioid use disorder prevention” or “opioid misuse prevention” to ensure readers know this strategy speaks to illicit opioid use and prescription drug misuse only, not all opioid use.

Strategy 2: Noted to verify PDMP outcomes, and some concern expressed about what happens in the stated indicators and goals are not met. Streich advised we should align with outcomes reported to the South Dakota Legislature, and recognize that those values can and do shift as data clean-up / entry occurs. Streich and DeNoon to discuss further offline.

Question posed related to opioid death reporting accuracy, and if those values are underreported. Streich to follow-up with within the Department of Health to document any limitations in data collected and reported through vital statistics.

Second question on if we should break out illicit drug-related overdose deaths from prescription drug-related overdose deaths.

Strategy 3: No changes.

Strategy 4: No changes.

Strategy 5: Consider adding “providers” per suggestion from M. East, with follow-up discussion from E. Miller and several others regarding keeping it more generic to broadly address professionals beyond medical providers.

Strategy 6: No changes.

Strategy 7: No changes.

Strategy 8: Clarify to “dispensed”.

## **Advisory Committee & Grant Updates**

Streich called for round-table updates from committee members and partners:

- Erin Miller, SDSU, gave updates on the various actions they are taking in Brookings to help people in the community through their Rural Communities Opioid Program Grant funded by the Health Resources and Services Administration, U.S. Department of Health and Human Services. The program, referred to as START-SD (Stigma, Treatment, Avoidance, and Recovery in Time) addresses prevention, treatment and recovery in Brookings County, with projected expansion to Codington and Hughes counties in years 2 and 3 of the grant.
- Sara DeCoteau updated the committee on their Tribal Opioid Response (TOR)-related efforts at Sisseton Wahpeton Oyate. Noted that Josie Deutsch is transitioning out of her role as the Nurse Care Coordinator for the TOR-related efforts, with Robin Veflin moving into that role. Sara also shared a recent story of a life saved following Narcan training conducted through their grant-related efforts.
- Brian Zeeb, Division of Criminal Investigation (DCI), commented that opioid seizures by law enforcement have increased; 16,742 more grams of heroin were seized this May compared to May 2020. In similar fashion, 80 more grams of fentanyl and 4,175 more prescription pills were seized in comparison year over year (same time frame).
- Mary Link, DOH, provided an update on expansion of the ePCR to ODMAP project. Information is now successfully being shared between the electronic patient care record (ePCR) system used by EMS professionals statewide to the ODMAP tool available to law enforcement. Next steps will involve local community education on the utilization of this tool and information.
- Mark East, SDSMA, reported that the ad hoc committee updated its Acute Pain Care Guidelines in early 2021, and that those guidelines have most recently been adopted by the Board of Dentistry as well as the South Dakota Dental Association.
- Michaela Johnson, Coteau des Prairies, reported that they are 12 months into their MAT-related grant funding supported by the Rural Communities Opioid Response Program (RCORP). They received additional funding through RCORP targeting neonatal abstinence syndrome. Partnering with Indian Health Services and focusing first on standardizing screening protocols to support identification of women who may benefit from additional services or treatment.

## **Public Testimony**

Streich called for public testimony; none was provided.

## **Closing Remarks**

The next meeting will be set for winter of 2021/2022. Meeting was adjourned.