## **Fentanyl Patch for Patch Return Program**

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#### Introduction

In 2014, noting an increase in the rise of fentanyl related overdoses in St. Thomas, as well as the misuse of fentanyl on the street, a member of the St.Thomas Police Services (STPS) Drug Enforcement Unit contacted Elgin St. Thomas Public Health (ESTPH) about the possibility of working together to reduce and prevent fentanyl diversion in this community. STPS also connected with a local physician and pharmacist about collaborating on this initiative.

Fentanyl is a narcotic medication that may be prescribed for patients with severe chronic pain or during palliative care. In the form of a patch, fentanyl can provide continuous pain relief as it is slowly absorbed through the skin over multiple days. However, when a patch is smoked or the medication inside diverted in another manner, a lethal dose of the narcotic can be received resulting in overdose and death.

In a report by the Chief Coroner of Ontario on the impacts of opiate use<sup>1</sup>, it was noted that of all deaths due to opiate toxicity, fentanyl was the second leading cause of death. The St. Thomas Police indicated that of the 13 opioid related deaths since 2010, five were directly related to fentanyl.

STPS in partnership with ESTPH set out to implement a voluntary fentanyl patch return program that was already proven to be very successful at decreasing deaths from fentanyl overdoses in the North Bay area.

The program, called the Fentanyl Patch for Patch Return program began in Elgin St. Thomas with a three month education period from July to September 2014 with full implementation in October 2014. The program has been very successful at reducing opioid diversion, creating awareness, increasing pharmacy and physician communication and increasing the safe disposal of used fentanyl patches.

#### What We Did

# Community Safety Initiative Preventing Fentanyl Patch Diversion Information Session –June 2014

STPS initially connected with North Bay Police Services who were invited to share their experience with the creation and implementation of the Fentanyl Patch for Patch (P4P) return program. A local pharmacist and physician were also invited to speak from their perspectives on the issue.

ESTPH created and adapted background information, resources and fact sheets on the proposed Fentanyl P4P Return Program. Examples of physician prescriptions were included in the package along with a listing of local addiction treatment services available in our community.

<sup>&</sup>lt;sup>1</sup> "A Review of the Impacts of Opiate Use in Ontario Summer Report"- December 2013, information from the Office of the Chief Coroner of Ontario (OCC)

Invitations to the education session were sent to all physician offices and pharmacies in Elgin St. Thomas. STPS and ESTPH also visited every pharmacy and physician office in St. Thomas and Elgin County to extend personal invitations to the education session and to share information on the need for the program in the local community.

On June 25, 2014 the education session was held for local physicians, pharmacies and other local and regional police services to learn more about the success of the Fentanyl P4P program in North Bay, as well as to discuss the opportunity for implementation in Elgin St.Thomas Approximately 34 people attended and representation included 10 physicians/NP/nursing staff, 7 pharmacists/staff, 15 police officers (representing 5 different police services from Windsor to London), 2 employees from public health and 2 local news agencies.

Attendees were provided with an information package containing:

- An outline of the Fentanyl P4P Return Program and the proposed responsibilities of physicians, pharmacies, and patients
- Frequently asked questions about the program
- A patient education sheet
- Fentanyl patch return sheet
- Examples of an electronic prescription and documentation in a physicians electronic medical record
- Local contact information on addiction treatment including hours of service and locations

Following the presentation by North Bay Police Services, STPS shared information on deaths in St.Thomas from the misuse of fentanyl. STPS and ESTPH reviewed the outline of the Fentanyl P4P Return Program and the proposed responsibilities of physicians, pharmacies, and patients. A local pharmacist and physician shared their roles as well as and how all could work together.

There was a discussion session and a question and answer period that generated a lot of important dialogue to help organizers and attendees understand possible barriers to program implementation.

Attendees indicated a perceived lack of communication between pharmacy employees and physicians, as well as a concern for safety when patients are waiting for their prescriptions and being very insistent and/or exhibiting more aggressive behaviours when needing their narcotics. There was also a worry that the program would potentially upset patients. Physicians noted that they may not be aware of how a patient is acting when out in public, but felt it would be very useful to have the pharmacy call to share this information. STPS stated that they are available to support the pharmacies and encouraged staff to call if they are feeling threatened or scared in any manner. Physicians were also encouraged to contact the local police if they had concerns about a patient or concerns about possible narcotic diversion. Concerns were also raised that the program would create more work by requiring physicians to write additional prescriptions, but our partner physician shared an example of how to write a prescription in a manner that included no extra steps or work.

Increased communication was seen as an area that all disciplines could build upon. Our partner pharmacist emphasized that all local pharmacies need to support this initiative because although

all businesses need to make a profit, community safety is a top priority. Our partner physician echoed this sentiment about safety, noting that everyone has children in this community and that all should want to contribute to a safer environment for all and this program would be a small step that everyone could take that would make an impact.

After the open discussion all participants agreed that the program was something that could be trialed. It was determined that a three month education period would be useful to give patients, pharmacies and physicians enough time to have the necessary preliminary conversations before starting the program. The goal of full implementation was set for October 2014.

Following the completion of the session, the education package materials were disseminated electronically to all Elgin St.Thomas physicians via our physician partner and all materials and resources were placed on the ESTPH website for access.

#### **July 2014**

STPS and ESTPH dropped in at all physicians and pharmacies again to provide packages to those who did not attend the information session, to answer any questions and to encourage participation in the pilot program.

ESTPH also provided information in the ESTPH Health Care Provider Newsletter about the Fentanyl P4P Program. The newsletter included a link to the website resources and the contact information for the ESTPH representative who could answer further questions.

In addition, two outreach office visits were conducted with the Family Health Teams (FHT) who were unable to participate in the information session. Both FHTs indicated interest in the program and agree to support the pilot initiative.

#### October 2014

Follow up visits with every pharmacy were conducted in October to assess implementation and to continue to gather any feedback and suggestions for improving the program.

Additional Fentanyl P4P packages were provided to any pharmacy that was in need.

Based on pharmacy feedback additional materials were created to support the project. These materials included:

- Counter signs indicating the pharmacy was participating in the Fentanyl P4P program
- Examples of correspondence that pharmacies used to solicit support by physicians who may not have been participating in the program yet

Information from STPS on current prescription drug related charges was also shared with physicians and pharmacies. The goal was to increase awareness and encourage more communication between all partners in the program.

#### December 2014

Follow up visits were again conducted with all pharmacies in December of 2014 (6 months from the start of the project) and positive feedback was noted from the majority of pharmacies. Many of the pharmacies felt the program was progressing very well, although some did note that they lost one or two customers. Some of the comments provided in a feedback survey by pharmacists included "program going very well", "all scripts they are receiving from local family health team are asking for the patches to be returned".

There were some concerns noted that not all of the physicians who are writing fentanyl prescriptions are requesting the patches be returned. The pharmacists expressed a desire for all physicians to participate in the program; however they also recognized that physicians from other areas outside of Elgin St. Thomas may not be aware of this program yet.

One pharmacy employee stated "it [has] made our job so easy, it [has] made our job so much better, I wish we would have thought of this years ago". In the past, this staff member would have had a difficult time with some customers demanding their fentanyl patches sooner than intended and this is no longer an issue. Other pharmacists shared that there had been more communication with physicians such as when patients are not returning their patches. In one instance this resulted in a narcotics issue being identified and the physician was then able to better support the patient. Others noted that the "program was fully implemented and seems like it's working well". One pharmacy staff member has noted that now she calls the police with any concerns, and has also called physicians, which has resulted in changes of medication for the patients.

#### **June 2015**

A twelve month follow up survey with pharmacies and physicians was conducted via an e-mail with a link to an online survey. The survey results were positive along with great comments and feedback about the program. Feedback was also provided on areas that could be improved and that require further work. The survey noted that although there was not a significant change to the number of fentanyl prescriptions written since the program was implemented, there were positive changes in the way the prescriptions were dispensed (i.e. requiring a return of used patches, the quantity to be filled is limited to a one month supply).

Better communication between pharmacies and physicians has resulted in changes to the medication plan for patients. Several pharmacies and physicians noted that it would be beneficial if all physicians were participating in the program. It was also noted that partners were pleased to see more than one sector working together on a project. One participant mentioned that it was "Nice to get feedback as to the results or impact of this new initiative" and another was "Quite pleased that different sectors have joined together".

Concerns brought forward by patients were typically managed by the pharmacy. One respondent said that "a few patients were concerned about the amount of work they had to do. Once we explained the goals and objectives of the initiative, most patients understood". Concern was also

noted about the physicians who prescribe narcotics to residents, but who do not reside in our area themselves and therefore would not know about the Fentanyl P4P return program. As one respondent said, "all of the doctors in Ontario should comply with that procedure especially if the prescriber is out of the district" and another said "We only see local physician [prescriptions] with this protocol- many of our patients use London physicians".

### **Survey Results**

#### **Pharmacy Feedback**

The feedback survey was sent to the 11 pharmacies in Elgin St. Thomas. 6 pharmacies participated which is a 55% response rate.

- Five of the six (83.3%) respondents said they are receiving prescriptions indicating that used patches need to be returned
- All of the respondents felt that the resource packages they had received from STPS/ESTPH were helpful
- There was not a noticeable change in the number of fentanyl patches dispensed since the implementation of the program

# Question: Are you receiving fentanyl prescriptions that require used patches to be returned?

	Percentage	Count
Yes	83.3%	5
No	16.7%	1

Question: Are you receiving fentanyl prescriptions written to indicate one month (10) patches only to be dispensed?

	 Percentage	Count
Yes	83.3%	5
No	16.7%	1

Question: Has the number of fentanyl patches dispensed changed since the Patch 4 Patch policy program has been implemented?

	Percentage	Count
Increased	16.7%	1
Decreased	0.0%	0
Stayed the same	83.3%	5

#### **Pharmacist comments:**

- "A couple of patients have voiced their concerns, they had the same feedback---- "it's too time consuming"... It's just a matter of explaining like saying "you are a part of a big community incentive now, it lessens aversion and also prevents improper disposal of medicated patches"
- "We have some who forget to bring them or lose them (legitimately). Some have found it to be embarrassing"
- "all of the doctors in Ontario should comply with that procedure especially if the prescriber is out of the district"
- "Nice to get feedback as to the results or impact of this new initiative"
- "Quite pleased that different sectors have joined together."

#### **Physician Feedback**

The feedback survey was sent to the 33 family physicians in Elgin St. Thomas. 11 physicians responded which is a 33% response rate.

- All of the physicians who responded indicated that they are writing fentanyl prescriptions that require used patches to be returned
- All of the physicians who responded said they are writing fentanyl prescriptions that indicate one month (10) patches only to be dispensed
- Two out of the 11 (18.2%) physicians shared that the number of prescriptions for fentanyl patches had decreased since the Patch 4 Patch policy program has been implemented

Question: Are you writing fentanyl prescriptions that require used patches to be returned?

	Percentage	Count
Yes	100.0%	11
No	0.0%	0

Question: Are you writing fentanyl prescriptions written to indicate one month (10) patches only to be dispensed?

patene	Percentage	Count
Yes	100.0%	11
No	0.0%	0

Question: Has the number of prescriptions for fentanyl patches changed since the Patch 4 Patch policy program has been implemented?

	Percentage	Count
Increased	0.0%	0
Decreased	18.2%	2
Stayed the same	81.8%	9

#### Physician comments:

- "great program"
- "Some patients have complained about the inconvenience"
- "Encourage adoption of program elsewhere"
- "no problems"
- "my 95 year old patient has trouble sticking the patches on the sheet"

### **Next steps**

STPS have noted a substantial drop in the amount of diverted fentanyl patches on the streets in St. Thomas since this program was implemented.

As a result of the success of this program there have been a number of surrounding communities that have contacted STPS/ESTPH to implement the program in their areas.

ESTPH will continue to ensure that the support materials for the Fentanyl Patch for Patch return program are available on the ESTPH website for easy access.

STPS and ESTPH will continue with periodic visits to follow up with partners and continue to monitor for any suggestions or challenges with the program.

ESTPH and STPS are committed to continuing to support all local pharmacies and physicians as well as those in the surrounding jurisdictions who are interested in implementing the Fentanyl P4P program in their areas. Together we can make our community safer.