

## Prescription drug and opioid misuse prevention

### Program overview

Washington Health Care Authority's Division of Behavioral Health and Recovery (HCA/DBHR) and partnering agencies support opioid and prescription medication prevention strategies that align with the Washington State Opioid and Overdose Response Plan. [Plans addressing the opioid crisis in Washington State](#) were updated by HCA and partner agencies and organizations in 2021.

Prescription drug/opioid misuse is a critical health issue. Young adults ages 18-25 are the largest group misusing opioid pain relievers and other medications. Opioid misuse can lead to opioid use disorder and an increased risk of death from overdose. Most young people who misuse prescription drugs are taking medications prescribed to others, often friends or family members. Prescription medications continue to remain in private homes when they are no longer needed. Often these medications are not stored securely, which provides easy access to young people and others seeking medications.

HCA's Division of Behavioral Health and Recovery (DBHR) is leading efforts to address the risks misusing opioids, illicit opioids, and prescription drugs. DBHR is implementing a collaborative, strategic plan with prevention campaign messaging, evidence-based and culturally attuned prevention education, prescriber education, and promoting increased utilization of the Prescription Monitoring Program (PMP).

### Prevention projects

#### Strategic plan development and opioid prevention workgroup

Prevention campaigns begin with workgroups of experts who create and evaluate a coordinated strategic plan among state agency partners to prevent prescription drug and opioid use.

DBHR staff are key members and leads of the Opioid Prevention Workgroup implementing the following goals and strategies of the Washington State Opioid Response Plan:

- Engaging our community to implement strategies to prevent opioid misuse, especially among youth
- Training and supporting health care providers to use best practices when prescribing opioids
- Increasing the use of the Prescription Drug Monitoring Program among health care providers to coordinate care
- Educating the public about the risks of opioid use, including overdose, through public education campaigns, such as the Starts with One campaign: [www.getthefactsrx.com](http://www.getthefactsrx.com) and [www.watribalopioidsolutions.com](http://www.watribalopioidsolutions.com)
- Promoting safe home storage and implementing a statewide drug-take back system
- Collaborating with law enforcement and stakeholders to decrease supply of illegal opioids

#### Evidence-based prevention education

Evidence-based education is proven to prevent prescription drug and opioid misuse, particularly among youth and young adults. These education activities are targeted for communities with the highest risk for opioid use disorder. Intentional, relevant, and evidence-based learning should reduce the number of youth and young adults using prescription pain relievers recreationally or using prescription drugs not prescribed to them.

#### Safe storage and disposal of medications

Promoting safe home storage and appropriate disposal options of prescription medications is shown to prevent misuse. Through expanding prevention campaign messaging with a keen focus on awareness of prescription drug misuse issues, including disposal, health care settings and communities with higher risk for opioid use disorder can be safer and better informed. Objectives of this education campaign are to increase the number of adults who report safely

and securely storing medication in the home and know how to properly return unused medications.

### Prescriber education

Best practices among health care providers for prescribing opioids is promoted by expanding prescriber and public education in various healthcare settings and increasing the utilization of the PMP. Doing so will likely reduce the number of opioid prescriptions prescribed to youth and young adults and increase the utilization of the PMP.

### Community Prevention and Wellness Initiative (CPWI) coalitions and community-based organizations

With the award of the State Targeted Response (STR) to the Opioid Crisis grant in 2017, five new CPWI sites and four community-based organizations (CBOs) were funded to expand statewide opioid prevention efforts. These efforts involve implementing evidence-based direct service programs aimed at reducing opioid misuse, as well as finding participation in local, state, and national drug take-back events.

In 2018, DBHR expanded an additional 18 CPWI sites with funding from both the State Opioid Response (SOR) and the Partnerships for Success 2018 grants. With SOR, Washington funded nine community-based organizations to implement prevention services in high-need communities around the state.

In 2020, DBHR was awarded the SOR II grant to continue this work with 23 CPWI sites and 10 CBO grantees. In 2022, DBHR was awarded the SOR III grant to continue this work with 22 CPWI sites and eight CBO grantees.

Each CPWI community has a Student Assistance Professional through the Student Assistance Prevention and Intervention Services Program. These professionals help support students through prevention, intervention, and referral services.

### Eligibility requirements

CPWI coalitions, community-based organizations, and state agency partners who have demonstrated

needs are eligible. Key leaders in turn demonstrate readiness and support to implement a project.

### Authority

DBHR is authorized as the single state agency to receive and administer STR and SOR grants that focus on comprehensive opioid prevention strategies.

### Budget

The STR Grant provided \$2,355,768 per year from 2017-2019 for primary and secondary prevention.

The SOR grant provided more than \$6.3 million per year for two years for prevention activities for Washington State from 2018-2020.

The SOR II grant provided over \$5 million per year for two years from 2020-2022.

The SOR III grant provides close to \$5 million per year, 2022-2024, to continue this work.

The SPF Rx grant provides \$384k per year, and is grant funded from 2021-2026.

The SABG grant provides support to the opioid prevention campaigns at \$614,000 per year.

All other prevention education and awareness efforts are unfunded and implemented with existing staff and resources.

### People served

Between 2018 and 2020 of the SOR grant, the CPWI initiative served 4,894 participants through evidence-based programs, coalition activities, and trainings in Washington communities with a higher risk for opioid use disorder. Local coalitions served 59,198 duplicated participants through environmental (policy) and information dissemination strategies and reached a duplicated count of 94,861,162 individuals through public education campaigns. DBHR also served 1,351 program participants through evidence-based programs with our community-based organization (CBO) grants.

In both years of the SOR II Grant, 7,004 unduplicated participants were served through evidence-based programs, coalition activities, and

trainings through CPWI. Additionally, 449,486 were served through environmental strategies, and 118,567 students were services via school-based prevention and intervention services. Another 2,693 program participants were served through evidence-based programs with community-based organization (CBO) grants. DBHR's Starts With One opioid prevention campaign reached a duplicated count of over 28 million people. And through the TelePain program, 2,737 primary care providers attended case consultations.

During the first year of the SOR III grant, over 1.5 million people have been reached through information dissemination efforts, and nearly 95,000 youth and families have received prevention services.

During the first two years of the SPF Rx grant all Washington State hospitals and clinics have been reached. Prescribers have been provided guidance and materials on safe prescribing guidelines and information on safe storage and disposal of prescription medications that they can share with their patients.

## Partners

This coordinated opioid prevention work continues through ongoing partnerships with the Washington State Department of Health, Labor and Industries; University of Washington; Washington State University; Washington State Hospital Association; Washington State Medical Association; Washington State Poison Center; and several other state agencies and local community-based organizations and providers supporting the goals of the Washington State Opioid Response Plan.

## Oversight

Internal: Division of Behavioral Health and Recovery

External: Substance Abuse and Mental Health Services Administration/ Center for Substance Abuse Prevention

## For more information

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