# Med Take-Back Workshop

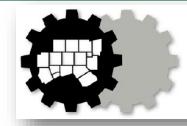
Ruthe Jackson Center Grand Prairie, TX June 7, 2017



# Welcome & Pharmaceuticals in Context



# Med Take-Back Workshop



North Central Texas Council of Governments Environment & Development

# Introduction

### Soria Adibi

Environmental Planner Dept. of Environment & Development North Central Texas Council of Governments



# **Thank You To Our Sponsors!**



Community Waste Disposal.com



Corporate Recycling Association



NORTH TEXAS **MUNICIPAL** WATER DISTRICT

Wastewater And Treatment Education Roundtable



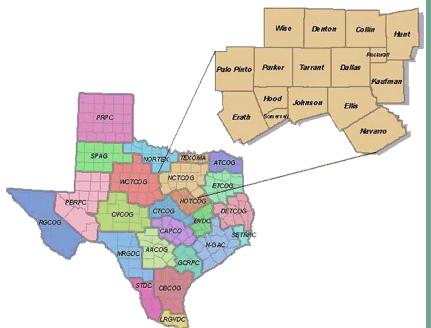
North Texas

SHARPS. Compliance, Inc.



# What is NCTCOG?

- Voluntary association of local governments
- Established in 1966
- Assists local governments in:
  - Planning for common needs
  - Cooperating for mutual benefit
  - Recognizing regional opportunities
  - Resolving regional problems
  - Making joint decisions
- One of 24 COGs in Texas





# **Regional solid waste planning**

- NCTCOG is the designated regional solid waste planning agency for North Central Texas.
  - Stores a Closed Landfill Inventory
  - Promotes education and outreach
  - Administers a pass-through grant program
  - Supports the solid waste advisory committee, the Resource Conservation Council
- Coordinates with partners to implement and advance materials management programs in North Central Texas.
- Maintains a regional plan for set new goals and define new metrics for materials management.



# Funding Solid Waste Programs in North Central Texas

# Where does solid waste funding come from?

- Each legislative session, the State Legislature allocates funds through the Texas Commission on Environmental Quality (TCEQ) to regional solid waste management agencies
- Funds are generated by solid waste disposal fees the TCEQ collects at the landfills

# Who decides what programs receive pass-through grants?

- The Resource Conservation Council (RCC) is the regional solid waste advisory council for North Central Texas
- The RCC provides input to develop and update the regional solid waste management plan, identifies regional solid waste priorities and implementation projects, reviews solid waste grant applications, and makes recommendations on projects to be funded to NCTCOG's Executive Board



# North Central Texas (NCT)

- Water contamination by pharmaceuticals in NCT
  - Cost and added work for water quality authorities
  - Risk to aquatic life
  - Threat to sources of drinking water
- Drug abuse and misuse in NCT
  - Tarrant County (population 1.9 million) in 2015:
    - 177 fatal overdoses caused by drugs
    - $\circ~$  86 of these caused by opioids
    - Does **not** include near overdoses or concurrent drug use



# **North Central Texas**

# Solution: Drug take-back strategy

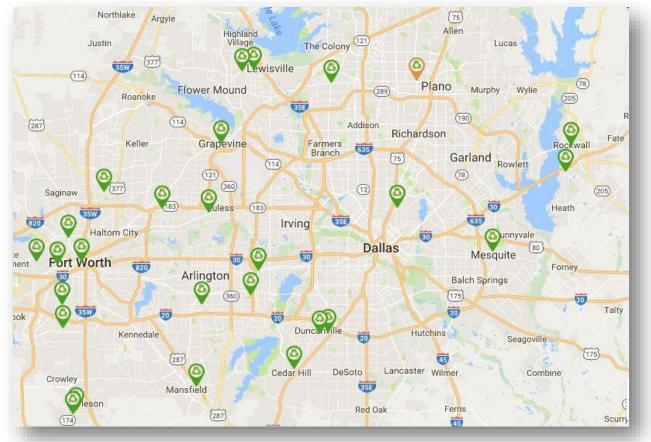
- Ex in NCT— Fort Worth, TX drug take-back program 2016:
  - 6,682 lbs from 9 permanent sites, 2 events, mail-back envelopes, and Walgreens program
  - > Collections nearly **tripled** in 2013 when permanent sites added
- Need strategy for NCT
- Other: source reduction and reuse opportunities

   Re-dispension legislation: TX <u>senate bill 1243</u>, passed in 2015 to allow for the donation of unused drugs to a "participating drug provider"



# **Existing drug take-back collection sites in NCT**

### Walgreens + Law enforcement locations: <a href="mailto:timetorecycle.com/medtakeback/">timetorecycle.com/medtakeback/</a>





# Why We Are Here







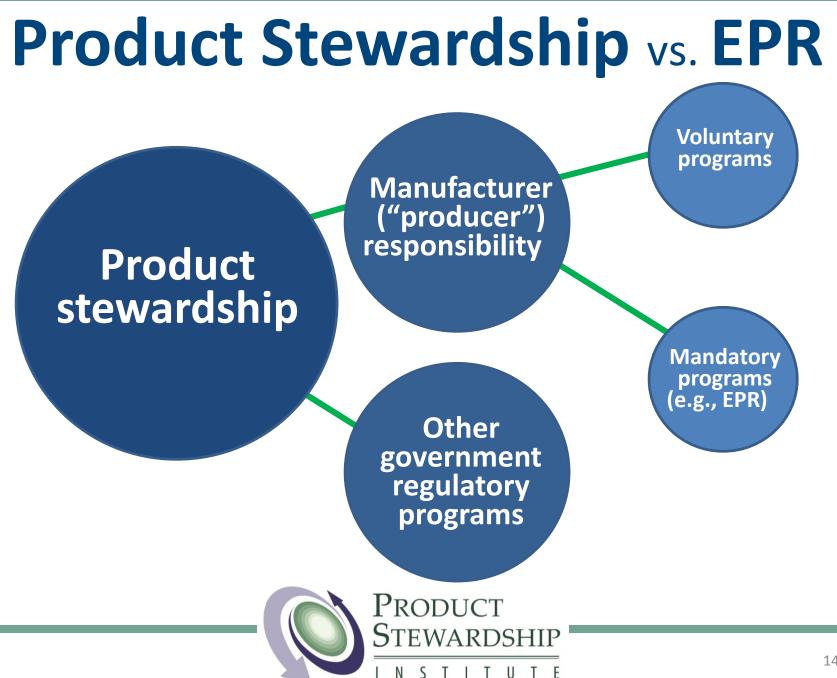
# Introduction to Pharmaceutical Stewardship

Scott Cassel Founder & CEO Product Stewardship Institute



# the Product Stewardship Institute





# PSI Product Categories



### Pharmaceuticals



Packaging



Paint



Electronics



**Batteries** 



ннพ



**Textiles** 

**Mattresses** 

-	-	-	-	
	*****	TTTT .		
10	No.	R.A.	A	15
1	BOrr		E.	
	-	64	A	
100	ann	Train		1
			1	

Thermostats



**Phone books** 



Fluorescent lamps



**Medical sharps** 



# PSI Product Categories cont'd



Appliances with refrigerants



Framework





Gas cylinders



Carpet



Radioactive devices



Pesticides



Auto switches

...and more!



# **Project Goals**

- Increase safe collection and disposal of unwanted pharmaceuticals
- Increase awareness about problems associated with improper drug storage/disposal, and benefits of drug takeback to residents and pharmacies
- Identify sustainable funding for drug takeback programs





# **Workshop Expectations**

- Learn about drug take-back challenges and solutions
- Understand current landscape in North Central Texas
- Consider drug take-back **best practices** around the country
- Begin to design a drug take-back **strategy** for North Central Texas





# **The Problem**





# Drug abuse Accidental poisonings Health & Safety



# Aquatic impacts Water quality Environmental Health





# **The Solution**



# US Support for **Drug Take-Back**

- Drug Enforcement Administration (DEA)
  - Eleven national prescription drug take-back days
- Office of National Drug Control Policy (ONDCP)
  - Part of its national drug control strategy
- Food and Drug Administration (FDA)
  - Developed guidelines with ONDCP for drug disposal
- Environmental Protection Agency (EPA)
  - Promotes consumer use of take-back programs
- States
  - Majority of state agency websites provide information either on their own state programs and/or federal DEA take-back days







VTAL PROTEC

# **Drug Take-Back** Collection System Options

### **1. On-site receptacles**



### 2. Mail-back envelopes



### 3. Take-back events





# **Drug Take-Back:** Challenges and Solutions



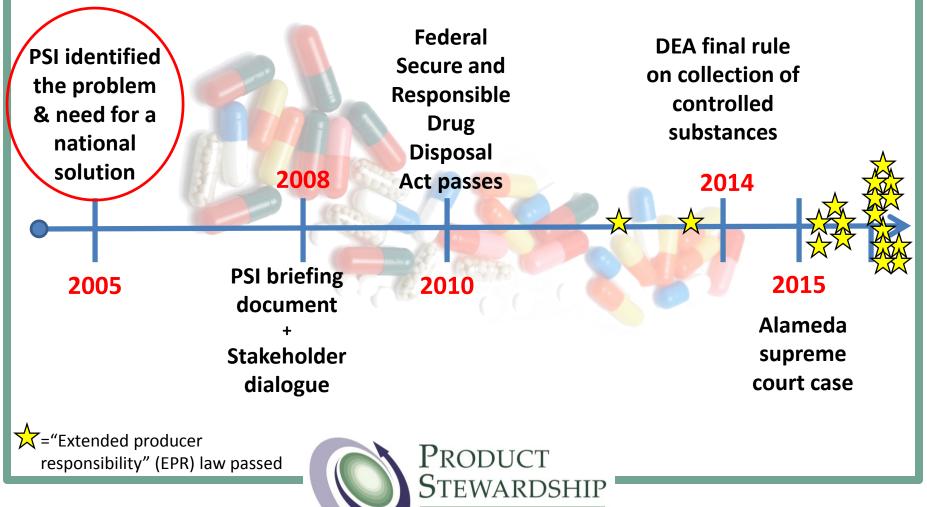


# Drug Take-Back Programs Challenges & Solutions

Dr. Vivian Fuhrman Sr. Associate for Policy & Programs Product Stewardship Institute

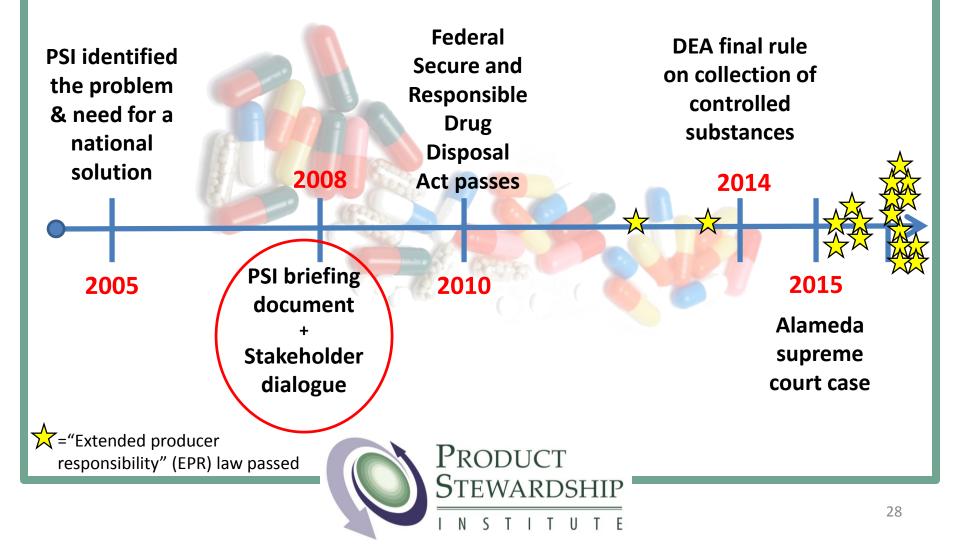


# Key Events in **Drug Stewardship**



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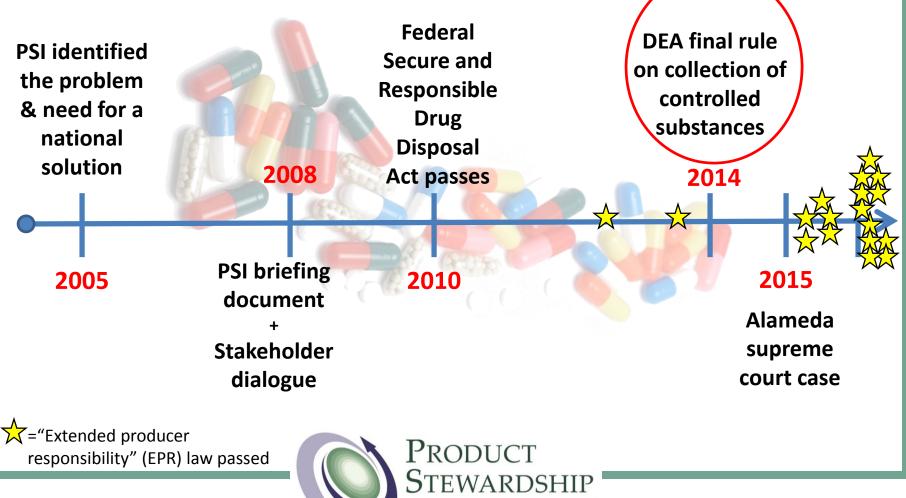
# Key Events in **Drug Stewardship**



# Challenge: Convenience



# Key Events in **Drug Stewardship**





- Final Rule: <u>www.deadiversion.usdoj.gov/21cfr/cfr/index.html</u>
- Final Rule Q&A: https://www.deadiversion.usdoj.gov/fed\_regs/rules/2014/2014-20926.pdf



# What is allowed by the **DEA's Final Rule** on the **Collection of Controlled Substances**?

- Flexibility in collection of controlled substances
- Mail-back programs by DEA-authorized entities
- Continues to allow take-back events by law enforcement
- Addition of **pharmacies** as authorized collection sites



Increase in potential collectors will lead to additional permanent collection sites



# **Drug Take-Back** Program Location Options

# **Pharmacies**

- Large chains
- Independent

# Law enforcement

- Police stations
- Sheriff departments

# **Clinics with on-site pharmacy**

- Hospitals
- Narcotic treatment programs
- Long-term care



# Challenge: Cost



# **Drug Take-Back** Approaches and Funding Sources

# **Voluntary Programs**

- Government funded
- Retail pharmacy
- Law enforcement



Mandatory Programs (legislation)

- Manufacturer funded
- Manufacturer managed
- Government oversight



# Mandatory "Extended Producer Responsibility"

# State + Local EPR Laws: 3 5 9 11 13 15 18 24 Image: State - Local EPR Laws: 3 5 9 11 13 15 18 24 Image: State - Local EPR Laws: Image: State - Local EPR Laws:

2 states, 2 cities 14 counties

# 104<sup>\*</sup> EPR laws in 33 states

\*not including 10 container deposit laws



# **Drug Take-Back**

How many collection sites needed?

• EPR convenience standards for collection sites:

✓ Range from 1/6,500 residents to 1/60,000 residents
 ✓ Most fall between 1/15,000 – 1/20,000

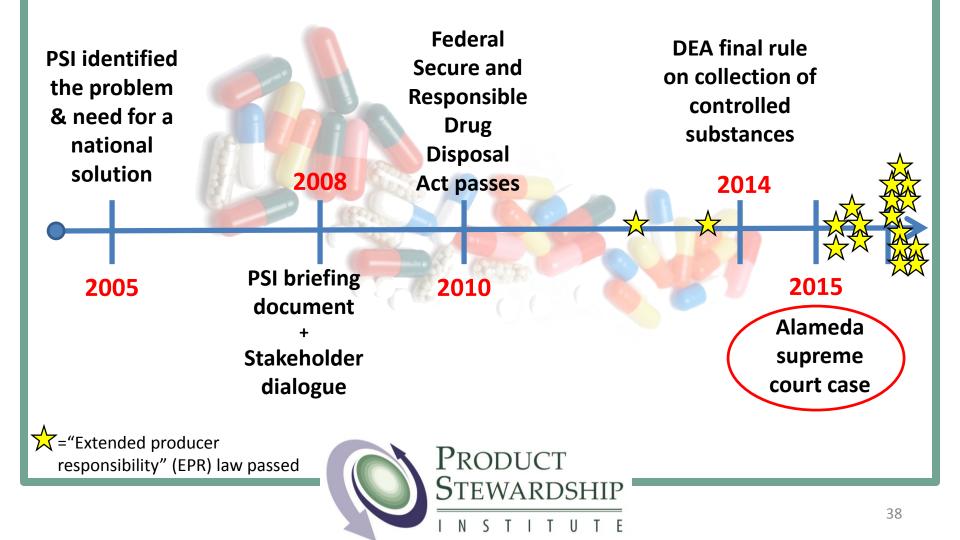
- Variation depends on:
  - ✓ Political feasibility

Availability of potential collection sites (# of local pharmacies)
 Urban vs. rural environments

Mandatory pharmacy participation in some EPR laws



# Key Events in **Drug Stewardship**



No.

IN THE Supreme Court of the United States

PHARMACEUTICAL RESEARCH AND MANUFACTURERS OF AMERICA; GENERIC PHARMACEUTICAL ASSOCIATION; BIOTECHNOLOGY INDUSTRY ORGANIZATION,

Petitioners,

VIED

v.

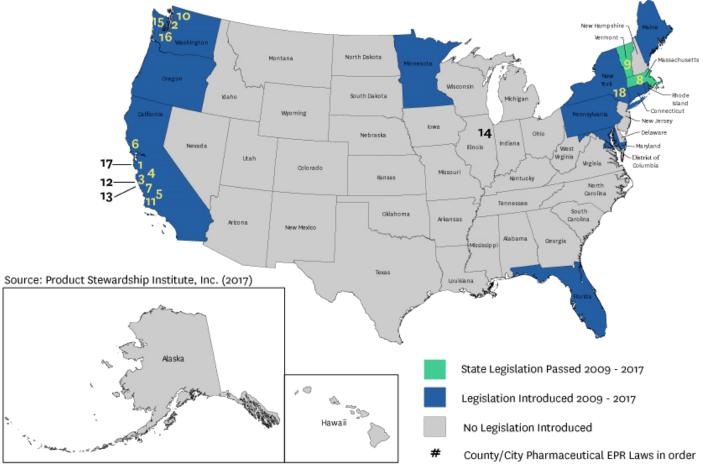
COUNTY OF ALAMEDA, CALIFORNIA; ALAMEDA COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

> On Petition for a Writ of Certion to the United States Court of Appears for the Ninth Circuit

PETITION FOR WRIT OF CERTIORARI



# U.S. EPR Laws for **Pharmaceuticals**





## Pharmaceuticals Stewardship in the United States

## Legislative activity at local, state, & federal levels



## Pharmaceuticals EPR Programs in Canada and Europe



**Source:** Health Products Stewardship Association, 2015; Health Care Without Harm Report, 2013



## **Voluntary** Drug Take-Back Program Examples

### **Government funded**

- State: <u>NE</u>, <u>CO</u>, <u>IA</u>, <u>NY</u>, <u>ID</u>, SD
- County: Lake County (IL)



### Pharmacy funded

- Independent pharmacies
- Walgreens







## **Pharmacy Participation**

Walgreens

at the corner of happy& healthy

#### February, 2016: Walgreens announced "Safe Medication Disposal Program"

- 500 retail store locations
- At least 40 states and Washington DC
- 24 hour locations





# **Pharmacy Participation**



For sale in stores



#### May 2014: CVS/pharmacy launched "Medication Disposal FOR Safer Communities" Program

- Mail-back envelopes in stores
- Raise awareness of collection programs
- Space for law enforcement take-back events



Provided free to police stations



# **PSI Drug Take-Back Pilots**

- 2016 USDA-funded pilot in rural NY counties
  - ✓ 4 independent pharmacies
  - ✓ 1 hospital pharmacy
- Pharmacy receptacles + mail-back envelopes
- Community outreach/education





- 2017 Oklahoma DEQ pilot across OK State
   ✓ 5 independent pharmacies
- Pharmacy receptacles
- Community outreach/education



## **PSI Pilot Coalition** Key Stakeholders

- 1. Pharmacies
- 2. Law enforcement
- 3. Public health agencies
- 4. Waste managers/recyclers
- 5. Wastewater treatment
- 6. Environmental advocates
- 7. Reverse distributors

- 8. Manufacturers
- 9. Medical community
- 10. Drug abuse/recovery centers
- 11. Poison control
- 12. Universities/ext. programs
- 13. Local drug abuse prevention/ safe med disposal coalitions, etc.



## **Proven Benefits** of Pharmacy-Based Drug Take-Back

- 1. High collection rates
- 2. Increased public awareness
- 3. Pharmacy experience
  - Community appreciation
  - Customer loyalty
  - Increased foot traffic

- No safety problems or misuse of receptacle
- High collection rates

Four out of five pharmacies paid to continue collections after the pilot!



## **Drug Take-Back Resources**

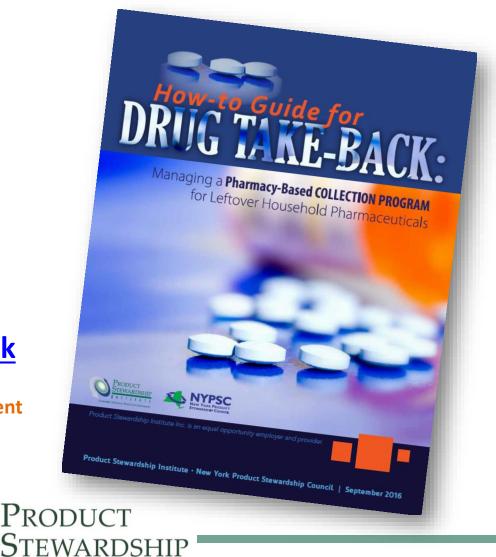


## **PSI's How-to Guide**

Lessons learned from implementing pharmacy-based drug take-back programs

### http://bit.ly/drug-take-back

To view properly we recommend <u>downloading</u> the document to your computer





# Pharmacy-Based Drug Take-Back Best Practices

- 1. Complying with federal regulations
- 2. Choosing the right collection system
- 3. Setting up the program
- 4. Operating the program
- 5. Spreading the word



## Lesson #1 Complying with Federal Regulations





#### DOT Special Permit: How to Comply<sup>\*</sup> Why was the U.S. Department of Transportation (DOT) special permit created?

Per the final DEA rule (see box on the right), pharmacies accepting controlled substances in their drug take-back receptacle are not allowed to inspect the collected material to determine whether it contained anything that would be considered hazardous materials. Baccause the hazardous nature of the content is unknown, the Pipeline and Hazardous Materials Safety Administration of the DOT would normally require specific protocol to be followed to ensure the safe transportation of these collected pharmaceuticals. The shipping container would have to adhere to DOT specifications for the hazardous materials that may be present in the container, and the container would have to be marked accordingly for transportation to the treatment facility. This is burdensome and was not the intention of the DEA.

In order to assure compliance with the DOT and DEA, the DOT approved a Special Permit, <u>SP 20255</u>, for shipment of materials collected through take-back programs using receptacles. The permit exempts collectors

on this special

permit, including a

recorded webinar and

presentation slides, a

full copy of SP 20255.

submission for party

status can be found

and the sample

(e.g., reverse distributors) and shippers (e.g., pharmacies) from having to ship the collected contents of a take-back program receptacle as if it was hazardous material.

Drug Enforcement Administration's (DEA's) Final

Substances

#### How long does the process take?

If not using a <u>vendor with its own DOT Special Permit</u>, pharmacies will need to apply for "party status" in order to be considered one of a group/class of business eligible for this exemption under an approved special permit 20255. This process takes just 5-10 minutes once you have all of the information you need. It can take anywhere from one day to three weeks for the DOT to process an application after you submit by email. Upon party status approval, DOT provides an authorization letter via email as proof of compliance under a special permit.

\* The information and process described here was put into place to help those participating in take-back programs comply with federal regulations, but the process may change. Contact the DOT at (202) 366-4535 or <u>special permits@dot.gov</u> with any questions.



## Lesson #2 Choosing the Right Collection System



## Lesson #3 Setting Up the Program

#### (4) set up the program

#### Receptacle Installation

- Determine an accessible place for the receptacle within sight of the pharmacy counter where it will not interfere with customers or fire exits;
- 2. Read receptacle installation and use instructions;
- 3. Secure the collection receptacle to wall, floor, or countertop;

#### Log, Liner, Signs, and Mail-back

- 4. If a record-keeping log comes with the receptacle, find a secure place to store it;
- 5. Follow instructions to position a liner within the receptacle to double lock it;
- 6. Lock the access slot until you are ready to begin collections;
- Display any signs or instructional materials that come with the receptacle so customers know what materials are permitted and what is not accepted; and
- If applicable, place mail-back envelopes in a prominent location so customers are aware of this option.



otecle effixed to floo





## Lesson #4 **Operating the Program**

Steps to Running Your Drug Take-Back Program

5) OPERATE THE PROGRAM



### Lesson #5 Spreading the Word

#### How to Promote the Program within Your Community

Community awareness is key to making your take-back program a success. Start outreach early and employ the following techniques often to achieve maximum effectiveness.

#### In-Pharmacy Advertising

Promoting the program within your store is a low-cost, targeted, effective method for reaching interested residents. Ensure branding is consistent across your program's promotional materials (i.e., use the same colors, fonts, and pictures) to help customers recognize and remember your program.

- POSTERS: Bright, large, attractive posters catch customers' eyes and direct them to your collection kiosk.
- FLYERS: Stuff flyers into shopping bags. You can also hang flyers in town halls, libraries, schools, physicians' offices, hospices, healthcare organizations, and other frequently visited locations.
- PILL BOTTLE STICKERS:
   Beturn your retrover a
   wur free, sofe collectio
   Small, bright stickers are
   effective on prescription bottles if space allows.

20

- PHARMACY BAG ADVERTISEMENTS: Easy for pharmacies to implement, these advertisements reach the right residents at the right time — when they are picking up prescriptions.
- PHONES: Train all pharmacy staff so they are prepared to answer customer questions about the program.
   Place the pharmacy FAQ

(see Appendix C) right behind a pharmacy counter or other prominent location to help employees relay important details quickly.



#### HAVE LEFTOVER MEDICINE?

USE THIS BAG to bring back your unwanted or expired meds to either these drug take-back locations in INSERT TOWN/COUN through INSERT PROGRAM END DATE, if applicable. It's FREE, ANONYMOUS, and NO QUESTIONS ASKEI

PHARMACY NAME PHARMACY ADDRESS phone number Vol on booth proper data. DON'T FLUSH! EMPTY YOUR MEDICINE CABINET IN A SAFE HEALTHIER, AND MORE ENVIRONMENTALLY RESPONSIBLE WAY.

This match is based upon work supported under a great by the Runal Ud Bies Banko, Us had Ruise Department of Agriculture, May ophican, Rollings, and canclustore or macromediations represent the matched are assign the segmentiality of the authors and to and reconsculy segment the orbit bit where of Barrad Ud Rise Service. PSI is an equal cancerturity consider and evadows: OUTREACH METHODS IN THE COMMUNITY are expanded upon below, and include: V Newsletter V Media Outreach Email V Redio Advertisement V Social media V Television Advertisement V Press Release V Billboards

#### Outreach in the Community

Wider community outreach is vital to increasing foot traffic, gaining new customers, and increasing collection quantities. Make a larger impact by recruiting local law enforcement agencies, the medical community, environmental organizations, drug abuse prevention/recovery organizations, government offices (public health, environment, solid waste, water, recycling, etc.), and other community groups to promote your program.

#### NEWSLETTER OR EMAIL

Newsletters are a great way to reach your loyal customers. Customize the sample language below to fit your purposes, or send it to your community partners and ask them to send it out to their databases. Forwarding your newsletter to community or neighborhood listserves is a great way to cast a wider net.

#### SAMPLE LANGUAGE FOR PHARMACY NEWSLETTERS

Do you have leftover medications hanging around in your medicine cabinet? Did you know that unwanted over-the-counter medications and prescription drugs <u>contaminate waterways and</u>. <u>potentially local drinking water</u> when flushed, put down the drian, or placed in the trash? Drugs left in the home are equally dangerous, as they can find their way into the hands of children or potential locales has become the <u>leading cause of finity</u> dashing left to be part of the solution!

Safely dispose of your unwanted and expired medications the right way by visiting our pharmacy today! We're collecting your leftover pharmaceuticals for free – no questions asked.

Visit us!





# Safe Drug Disposal Flier



# **Consumer messaging** on safest drug **disposal methods**

#### www.bit.ly/leftover-meds

PRODUCT STEWARDSHIP

# **Questions?**

### **Dr. Vivian Fuhrman** Senior Associate for Policy & Programs

vivian@productstewardship.us

## www.productstewardship.us



## Current Landscape in North Central Texas/Statewide







# Medication Take Back Tips for Success

Jeanie Jaramillo-Stametz

Director, Medication Cleanout

Managing Director, Texas Panhandle Poison Center

Assistant Professor, Tx Tech UHSC School of Pharmacy







## Medication Cleanout

- Started medication take back program with Tx Tech School of Pharmacy in fall 2009
- As of April 2017, conducted 50 events across Tx panhandle (primarily Amarillo, Abilene, Lubbock; on-campus)
- 13,434 participants (cars)









## What we've collected



## 36,647 pounds of controlled & non-controlled medications

Image credit:

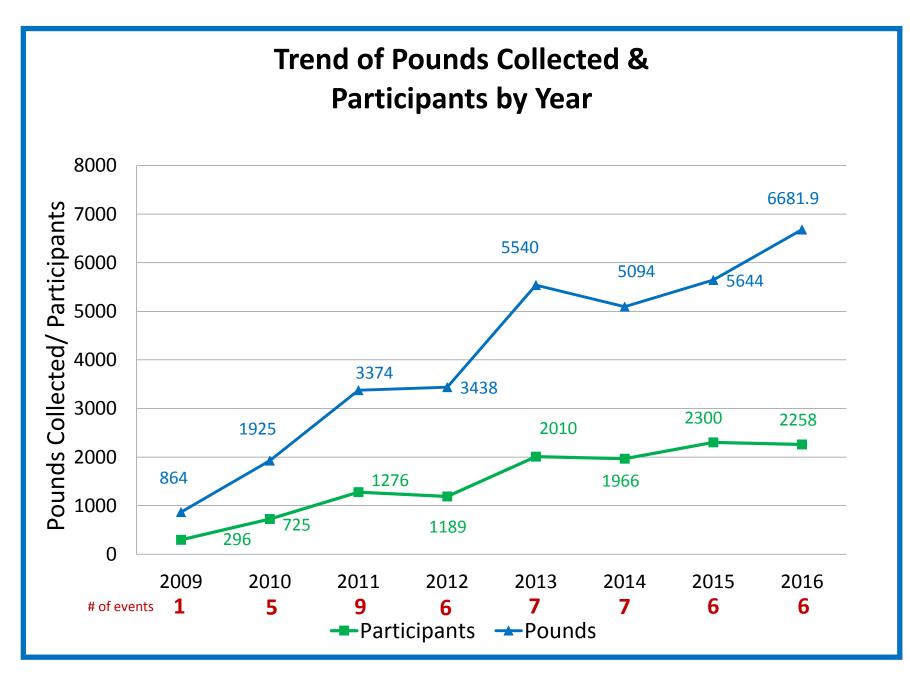
https://commons.wikimedia.org/wiki/File:Luxury\_Motorhomes\_Class\_A\_Diesel\_Pusher\_45\_F oot\_Tag\_Axle\_RV\_-\_2012\_Thor\_Motor\_Coach\_Tuscany.png

# 1,938 pounds of sharps



Image credit: https://biomedicalwastedisposalvirginia.wordpress.com/







## Secrets to success

- Supportive institution
- On-going funding source
  - As little as \$3,000/year, as much as \$100,0C
  - Poison center/ poison prevention funding
  - Xcel Energy grant
- Not reliant on DEA days
- Good relationship with law enforcement
- Effective advertising
- Consistent, on-going program







## Law enforcement

- We started our program before DEA days began
- Developed relationship with local law enforcement
- Presented organized plan
- Ask for two officers (+/-)
- May need to pay for officers (~\$35-\$50/hr)
- Will law enforcement need to store/destroy or deliver to DEA?







## Be safe

- Recognize that events may be target for theft
- Consider this when choosing site
- Drive-thru events keep level of separation between participants and staff
- Restricted indoor area for packaging of meds, weighing, etc.
- One officer inside, one outside (with patrol car visibility if possible)
- Choose event staffing wisely (background checks?) Medication Canout.com





## Be prepared

- Will your event accept all medications?
  - Dallas DEA restricts inhalers
  - Chemotherapy?
- Sharps
  - People will often bring sharps to a drug take-back event
  - Prepare employees: How to prevent needle sticks









# Structure of Medication Cleanout Events







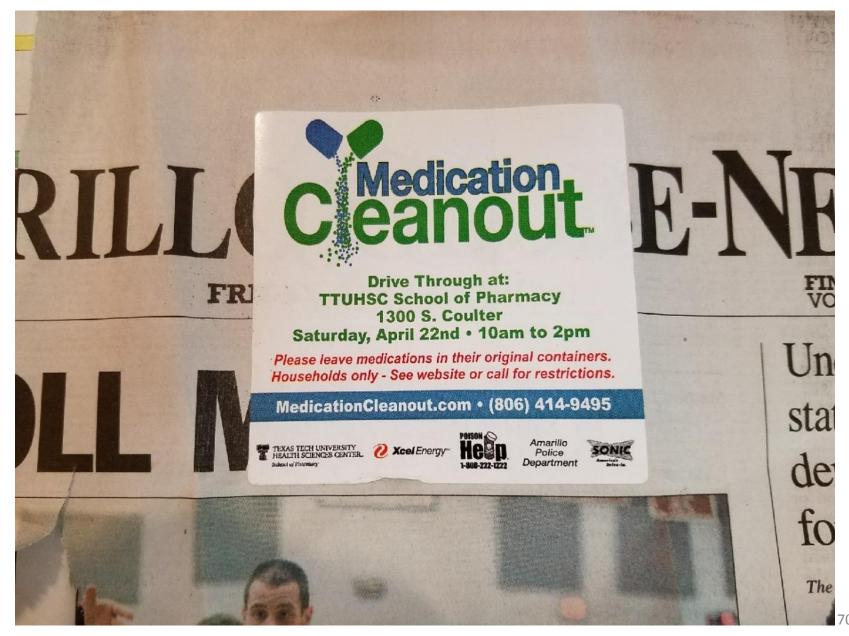


## Advertising

- Med Cleanout is usually low budget
- We print tear pads for all pharmacies in Amarillo and deliver these two weeks in advance of event
- Also deliver two flyers to each pharmacy
- Amarillo population = ~195,000
- Flyers and tear pads for all pharmacies



### Front Page Newspaper Sticky Ad ~\$2,000 in Amarillo



Prevent poisonings, abuse, and misuse. Protect the environment.

Bring unused, expired or no longer needed medications

\*Please leave medications in their original containers. Households Only -See website or call for restrictions.

Drive Through at: Texas Tech School of Pharmacy <sup>1718 Pine Street</sup> Saturday, March 25th 10:00am to 2:00pm



C Medication Ceanout

> MedicationCleanout.com (806) 414-9495



TEXAS TECH UNIVERSITY HEALTH SCIENCES CENTER. School of Pharmacy





Free, Safe, Confidential Disposal Of Expired, Leftover, Unneeded Medicines www.MedicationCleanout.com (806) 414-9495



Saturday • September 12th 10:00 a.m.—2:00 p.m. <sup>One day only</sup>

Texas Tech School of Pharmacy 1300 S. Coulter Take expired, leftover, unnecessary medicines to Medication Cleanout<sup>™</sup>. Join the Texas Panhandle Poison Center with Texas Tech University Health Sciences Center, Xcel Energy<sup>®</sup> and the Amarillo Police Department in making our communities safer. Please leave medications in their original containers to protect our volunteers. Identifying information will be obscured from all containers at Medication Cleanout<sup>™</sup>.

No clinic or pharmacy loads, please. Households only.









## Drive thru



# Curbside Surveys & Collection Mechanism



Surveys allow tracking participation; "what number are we on?" We staple one survey to each paper bag; pull apart as surveys are completed

Can number bags 1-300?

### Welcome to Ceanout Thank you for coming!

- Tailor survey to collect info that will help your organization
- Shorter is better
- If staff is limited and event is busy, may not be able to complete surveys, or may have to sample (i.e. every 5<sup>th</sup> car)
- Avoid identifying questions (name, address, phone, etc.)
- DEA does not like surveys, but they are not prohibited by Code of Federal Regulations

	Thank	Please consider helping us by taking our survey. you for coming today. May I ask a few questions to help with our research program?	
	1.	We DO accept sharps, needles, lancets, injections. Did you bring any of these items today?	
		YesNoI don't know	
	2.	What is your home zip code (postal code – where you receive your mail)?	
	3.	Have you participated in a Medication Cleanout event before?	
		Yes; How many?No	T
	4.	Do you receive any medications through a mail-order service?	
		YesNoI don't know	
	5.	You probably have several different reasons, but what would you say is <u>THE ONE</u> MAIN reason for disposing of these medications today?	
	OSE	Not sure what they're for No longer using/don't need	he
OI	NE	Patient died Medication expired	un
ANS	WER	Other (please specify:)	N
сно		Below are several good reasons for properly disposing of medications. Which <b>ONE</b> of the following do you feel is <b>THE MOST</b> important?	Collection Number:
ON ON ANSV	E	[prevent abuse] [protect the environment] [prevent poisonings]	Coll
	7.	What would you have done with the products if this event had not taken place?	
		thrown them in the trash kept them	
		flushed them down toilet other:	
	8.	Do you have the number to the Poison Center:	
		Somewhere in your home? Yes No	
		Saved in your cell phone?	
		YesNo 1-800-222-1222	

Thank you for your participation!



### Gloves

- I recommend everyone wear gloves
- Sticky stuff
- Potentially contagious stuff
- Leaking stuff









### Processing

- Bring bags to secure area
- DEA provided boxes if DEA event
- Weigh boxes
- Label boxes with number & weight
- Record outcome measures
- If collecting sharps, will need own containers







# Permanent Boxes vs. 1-Day Events

- Amarillo has installed two permanent collection boxes over last 18 months (Walgreens, Tx Tech Pharmacy)
- Both sheriffs' departments have permanent disposal bins
- Volume of meds collected at our take back events continues to increase







# Scaleability

- Take back events can be scaled based on amount of help
- For small community, handful of volunteers is sufficient
- Large events, lots of volunteers, add on data collection









### Questions?

Jeanie Jaramillo-Stametz Jeanie.Jaramillo@ttuhsc.edu (806) 414-9402 (poison center) (806) 376-0039 (mobile) (806) 414-9495 (Med Cleanout)





# CITY OF GEORGETOWN

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LITY SYS

NS

### EST. 1848 GEORGETOWN TEXAS

### **MEDICATION COLLECTION PROGRAM**

nedsafe

81

### **Take-Back Day Results**

Location	5ep.2012	APT-2013	Oct.2013	April 2018	5ep.201A	Sep.2015	APT-2016	0ct.2016	
Sun City	915	849	865	1,123	944	1,290	1,294	924	
Gtown - Downto	-	-	-	246	121	199	368	148	
Cedar Park	*	428	230	343	300	678	777	587	
Round Rock	*	372	276	445	550	703	665	608	
Taylor	*	114	122	148	142	293	337	100	
Leander	*	-	-	-	161	406	299	216	
Liberty Hill						35	-	22	
Total	915	1,763	1,493	2,305	2,218	3,604	3,740	2,605	
Trends		1.	th -	di.	<u>.</u>	.Աւ	dh		

April 2017 ~400

# **KEYS TO SUCCESS**

Buy-in from all stakeholders
 Buy-in from City Council
 Obtain grant
 Create ads / communication / training
 Implement





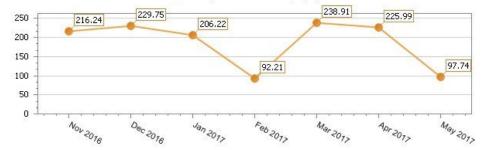
#### Received Monthly By Date Range

From 10/16/2015 to 5/17/2017

Date	Total Received	Total Received Weight (lbs)	Average Received Weight (lbs)
Nov 2016	4	216.24	54.06
Dec 2016	4	229.75	57.44
Jan 2017	4	206.22	51.56
Feb 2017	2	92.21	46.11
Mar 2017	5	238.91	47.78
Apr 2017	5	225.99	45.20
May 2017	2	97.74	48.87









### **Future Considerations:**

- Additional public/private partnerships
- Extended Producer Responsibility
- Encourage COG to form a funded program

Lime

Jordan Fengel, B.S.

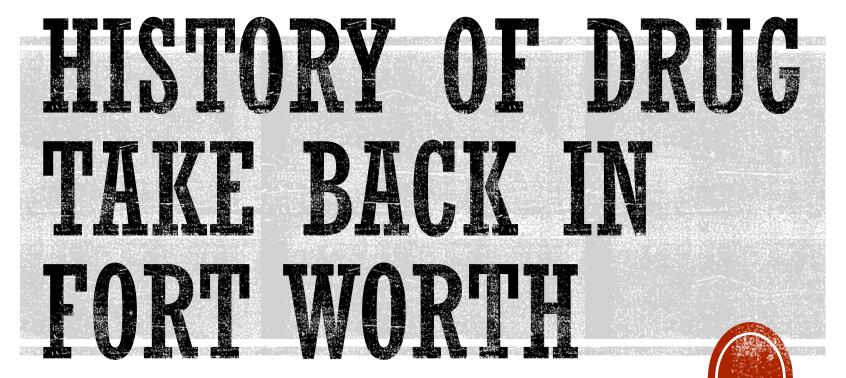
City of Georgetown Environmental Services Program Coordinator

Chair of Texas Product Stewardship Council

jordan.fengel@georgetown.org

Office: 512-819-3171

Thank you...



Presenter: Debbie Branch, City of Fort Worth, Superintendent with Solid Waste Services





### Predominant option in Fort Worth prior to 2010 was LANDFILL or FLUSH



### "ENVIRONME NTAL SIN"

"I buried my medicine in the backyard because I didn't know what else to do."

# FORT WORTH'S 1<sup>ST</sup> RX TAKE BACK DAY









### SEPARATED CONTROLS VS. NON-CONTROLLED

TCU Nursing Students sorted Meds:

47 lbs of controlled vs. 1200 lbs of noncontrolled

Police took the controlled Rx and the City of Fort Worth Environmental Collection Center took the remainder

# DRUG TAKE BACK PARTNERS

#### FIRST EVENT Partners

- City of Fort Worth
  - Police
  - Water Department
  - Environmental Management
    - Environmental Collection Center



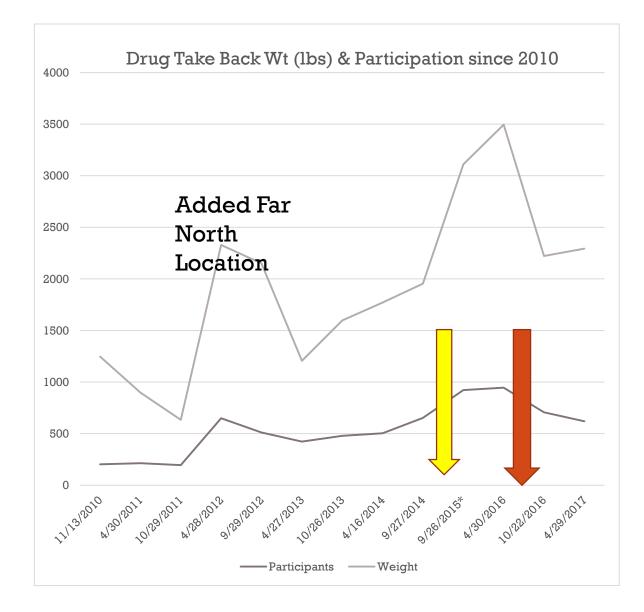
- Partners since 1<sup>st</sup> Event
- TCU School of Nursing (Fall 2010)
- DEA (Spring 2011)
- Poison Control Center (Sp 2011)
- Safe Kids of Tarrant County (Sp 2011)
- UNT Health Science Center School of Nursing
- JPS Hospital
- Walgreens (Spring 2014)
- Texas Health Harris Methodist Hospital
- Other Municipalities



Date	# of Sites	Attende es	Weight	Lbs/car
11/13/2010	1	202	1247	6.2
4/30/2011	2	213	898	4.2
10/29/2011	3	195	634	3.3
4/28/2012	4	650	2329	3.6
9/29/2012	5	511	2150	4.2
4/27/2013	3	423	1206	2.9
10/26/2013	6	478	1597	3.3
4/16/2014	8	504	1771	3.5
9/27/2014	8	653	1953	3.0
9/26/2015*	9	923	3110	3.4
4/30/2016	9	945	3495	3.7
10/22/2016	8	707	2222	3.1
4/29/2017	8	620	2293	3.7
AVG/EVENT		540	1916	3.5

13 DRUG TAKE BACK EVENTS SINCE 2010





### DRUG TAKE BACK DAYS WEIGHT & PARTICIPATION

#### Yellow Arrow -

No Spring DEA event & Fort Worth saw removal of drug take back kiosks

#### **Red Arrow** –

Fort Worth implemented Medicine Return Envelope Pilot Program



# DRUG TAKE BACK KIOSKS

### Brought to you by the Safe Community Coalition and Fort Worth Police



### 2012 – 3 KIOSKS CAME TO FORT WORTH

Spearheaded by Safe Community Coalition.

TCU nursing students petitioned funding by local hospitals.

Kiosks funded by:

\*Cook Children's Hospital

\*Safe Kids of Tarrant County

\*Fort Worth Emergency Services Collaboration (Texas Health FW) 97

- September 2014 Federal Ruling allows the following to accept medication:
  - Manufacturers
  - Distributors
  - Reverse distributors
  - Narcotic treatment programs
  - Retail pharmacies
  - Hospitals/clinics with onsite pharmacy
  - Long-term care facilities



KIOSKS SUCCESSFUL UNTIL OCT 2014

Fort Worth removed drug take back kiosks AND DEA stopped sponsoring the Drug Take Back Day. No drug take back event spring of 2015.

Back to square one.

	North	East	South	West	Centra 1	Total
Nov '16	0	0	0	0	0	0
Dec '16	0	0	0	32	0	32
Jan'17	0	0	0	14	0	14
Feb '17	0	0	0	54.5	29	83.5
Mar '17	0	56	0	30	0	86
Apr '17	14	32	42	59	0	147
	14	88	42	189.5	29	362.5

Challenge OF TARRANT COUNTY



KIOSKS REINSTALLE D FALL 2016

Improvements: 5 vs. 3

Average 72.5 lbs/month

# **OTHER FORT WORTH DRUG TAKE BACK KIOSKS**

#### UNT Health Science Center

Box installed 2013



### Walgreens

 Installed Fall 2016 – One in Fort Worth proper, one on the border in Haltom City





# DRUG RETURN ENVELOPES

### Fort Worth Pilot Program



### DRUG TAKE BACK ENVELOPES

Fort Worth implemented a pilot program during the fall of 2016.

Available by request.

Distributed 1166 to date.

Cost \$4.64/each

Return Rate = 25%





# **LESSONS LEARNED**

### 7 years worth of lessons

103

# SURVEY RESPONSE TO QUESTION:

# WHAT WOULD YOU DO WITH DRUGS WITHOUT TAKE BACK EVENT?

	EVENT DATE	EVENT DATE
	11/13/2010	4/29/17
Kept them	58%	65%
Flushed them	6%	3%
Thrown them in trash	25%	19%
Taken to HHW event	5%	N/A
Sent to manufacturer	0%	0%
Other	5%	11%



# SUMMARY

- Feel public awareness is increasing and efforts making a difference.
- Don't put all eggs in one basket.
- Involve many partners!
- Need to be as easy to safely dispose of medicine as it is to buy it.



# **QUESTIONS?**



Debbie Branch City of Fort Worth Code Compliance Superintendent Debbie.branch@FortWorthTexas.Gov 817-392-5151



# Other Drug Take-Back Programs



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North Texas



# San Francisco Safe Medicine Disposal Program

#### Eileen Leung



#### SF Department of the Environment





#### **Environmental Need**





#### Public Safety Need





#### Where Does Medicine Go?





#### San Francisco's Past Efforts





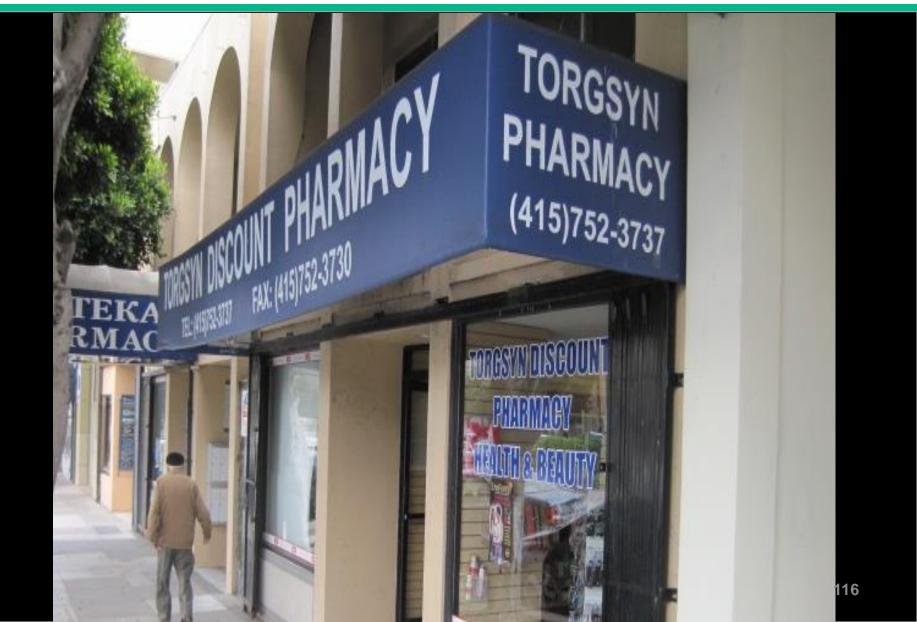
#### SF Pilot Program launched April 2012





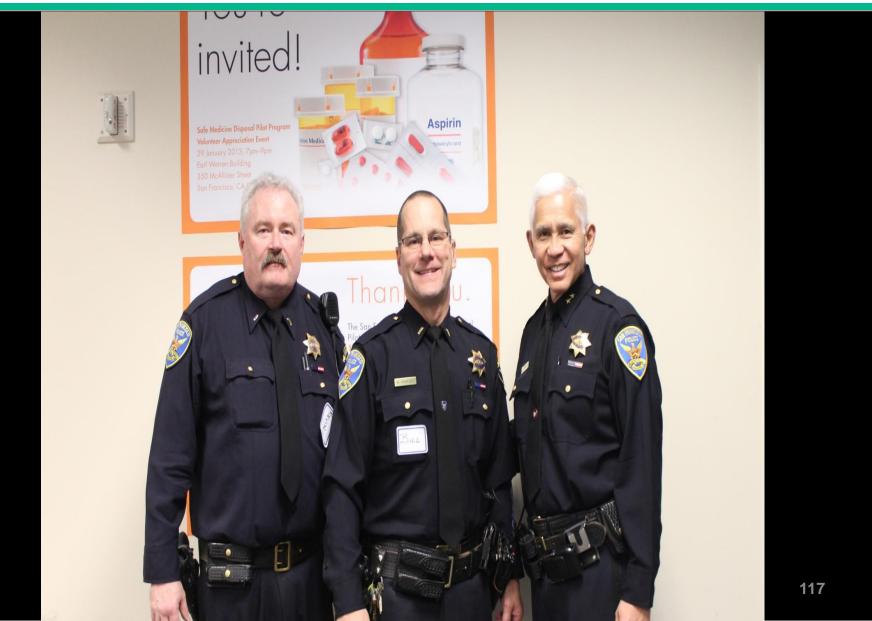
#### **13 Independent Pharmacies**





#### All 10 SFPD Stations





#### **Information Ordinance**





#### Collected 87,000 Pounds of Medicine





#### That's the Weight of 9 African Elephants!

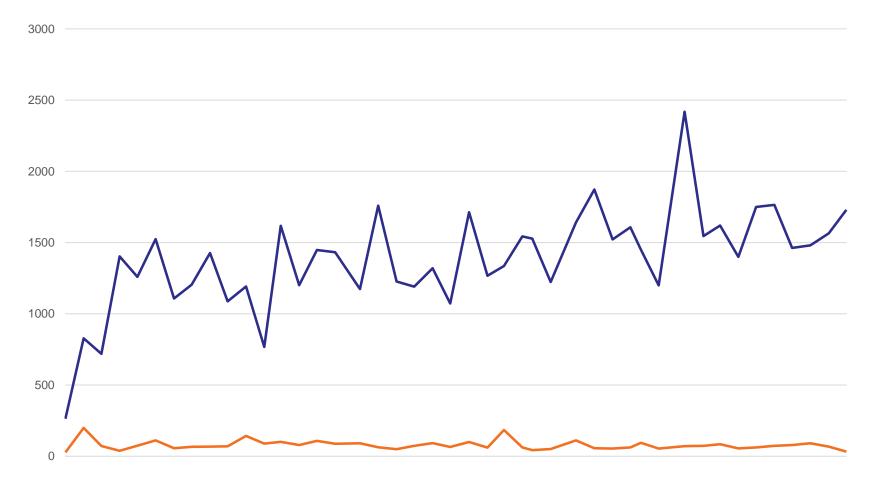




#### **Residents Prefer Pharmacies**







#### **Pharmacy Based Collection Works**





#### SFPD Also Host DEA Days





#### SF Ordinance Passed March 2015





#### Pharmaceutical Industry to Run Program



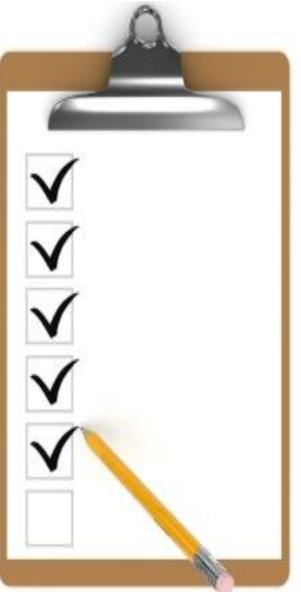




#### Manufacturers Submit Stewardship Plan



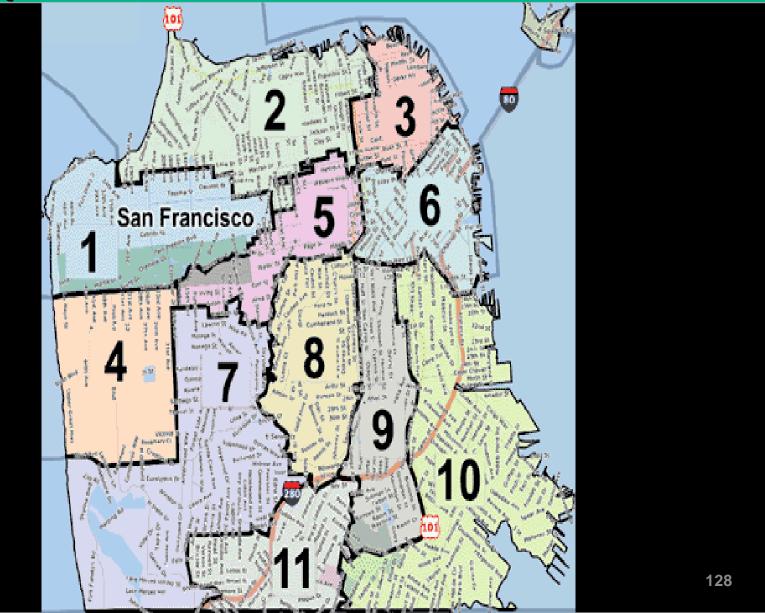
#### Department Oversees Implementation





#### Requires 5 Drop-off Locations Per District





#### **Required to Promote Program**





129

Received One Viable Stewardship Plan



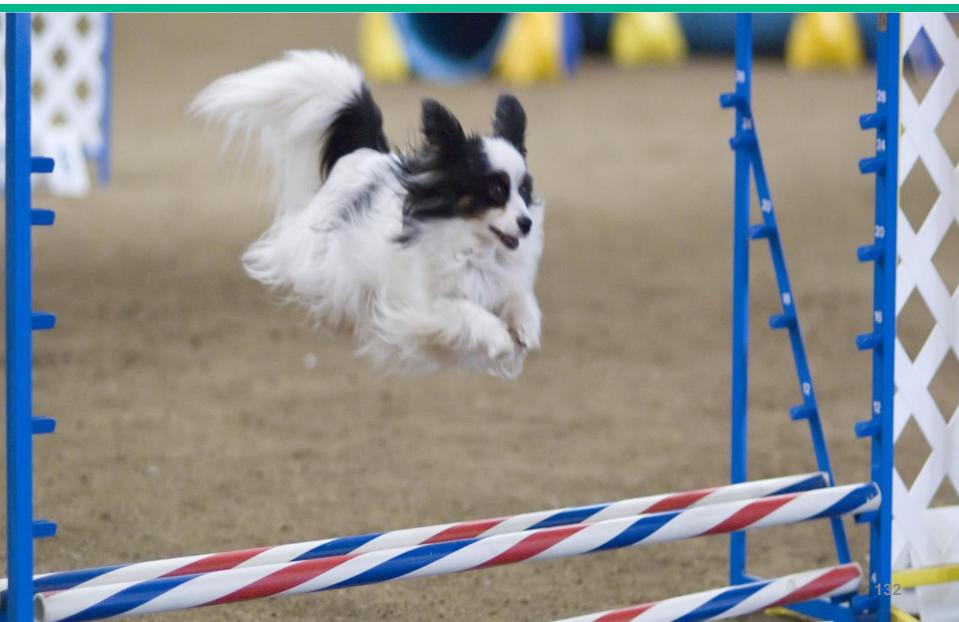
#### Plan Approved in July 2016





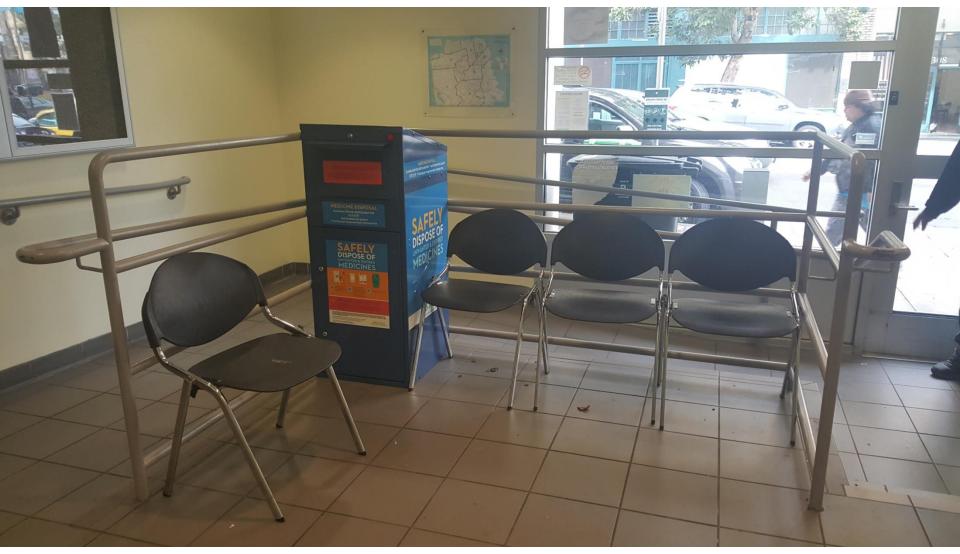
#### **There Have Been Challenges**





#### 26 Medicine Drop-Off Locations





#### **33 Mail-Back Distribution Locations**





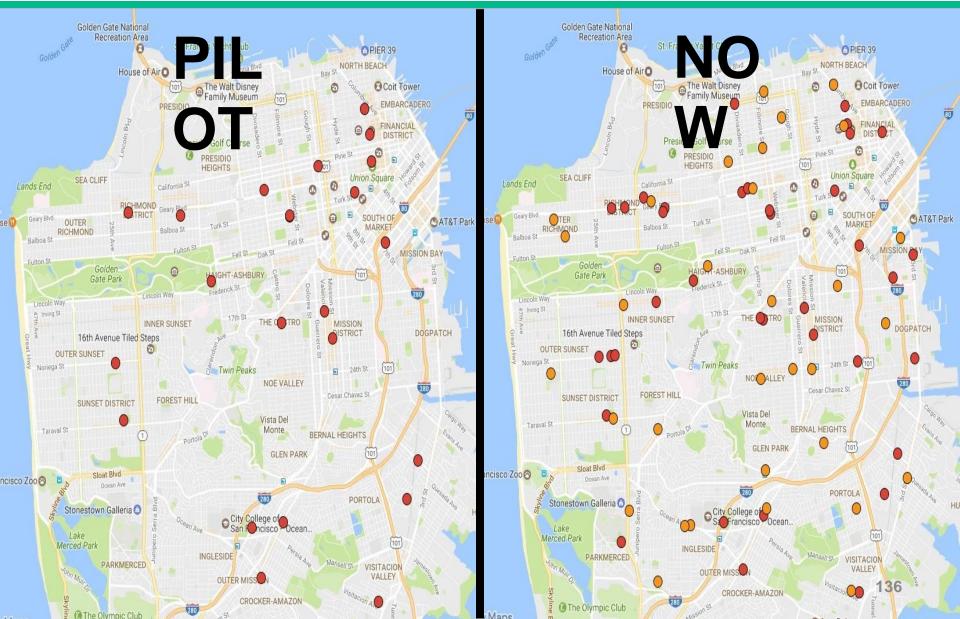
#### **Take-Back Events**





#### More Disposal Options Now





#### Ordinance is Working!







### **Eileen Leung**

#### Safe Medicine Disposal Program

#### SF Department of the Environment

eileen.leung@sfgov.org



**SF**Environment

Our home. Our city. Our planet.

A Department of the City and County of San Francisco

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## DEA Drug Take Back Regulations



June 7, 2017





The United States Department of Justice
Drug Enforcement Administration

Lisa Sullivan, DPM DEA Dallas Division

#### **DEA Diversion Program**



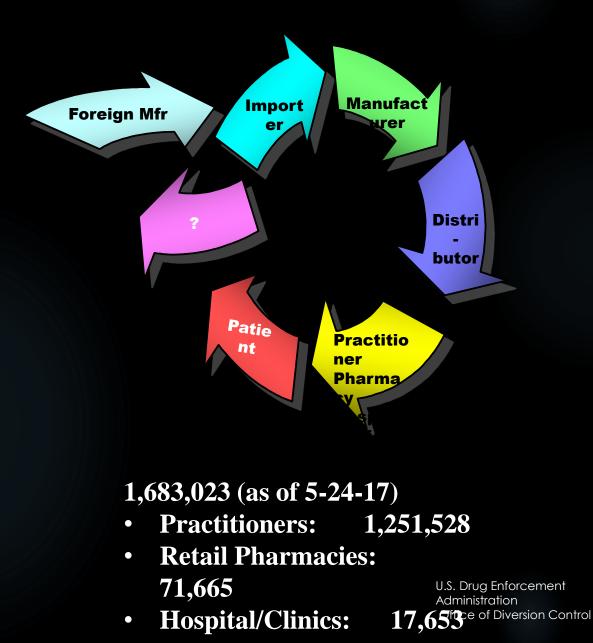
## Mission

The mission of the Office of Diversion Control is to <u>prevent</u>, <u>detect</u>, and <u>investigate</u> the diversion of pharmaceutical controlled substances and listed chemicals from legitimate channels of distribution

#### while ...

ensuring an adequate and uninterrupted supply of controlled substances to meet <u>legitimate medical</u>, <u>commercial</u>, and <u>scientific needs</u>

#### Closed System of Distribution



142

The Secure and
 Responsible Drug Disposal
 CSA establishes the closed system of distribution-stop diversion into illicit market before the end user

The Secure destruction of unwanted pharmaceuticals-stop diversion into the illicit market after the end user

Final regulations became effective October 9, 2014 Most Frequent Method of Obtaining a Pharmaceutical Controlled Substance for Non Medical Use

### Friends and Family...For



## FINAL RULE-THREE OPTIONS

# Take Back Events Mail-Back Programs Collection Receptacles

## TAKE BACK EVENTS

- Law Enforcement events-Law Enforcement Officer has to be there, has to be in charge of the drugs, has to stay with the drugs, has to take the drugs with them, has to destroy the drugs
- Non-Law Enforcement events-Law Enforcement Officer has to be there, has to be in charge of the drugs, has to stay with the drugs, has to take the drugs with them, has to destroy the drugs

## MAIL BACK PROGRAMS

For sale
Given away
Goes back to a DEA Registrant for final destruction

## **Collection Receptacle**

AUTHORIZED-Hospitals and Pharmacies may maintain collection receptacles at their business

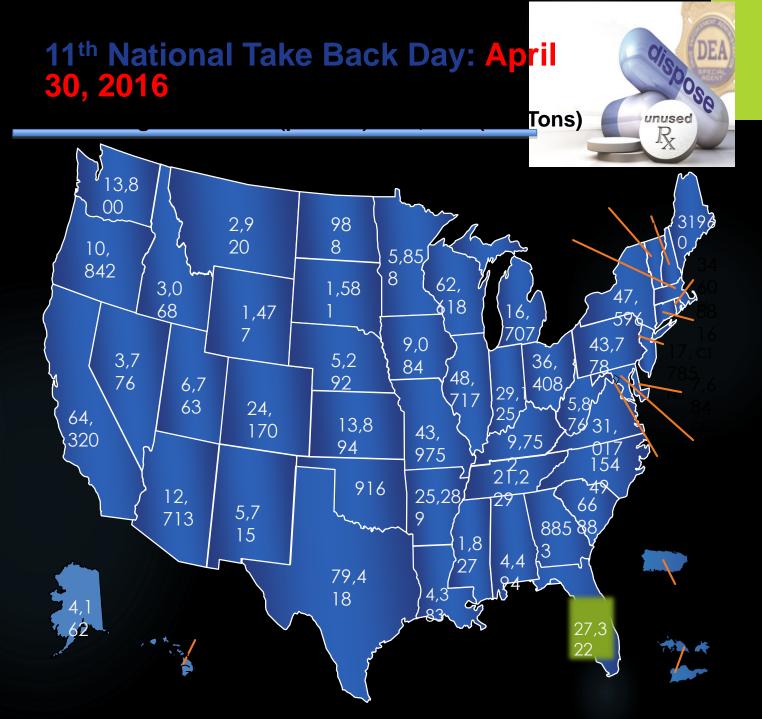
AUTHORIZED-Hospitals and Pharmacies may place receptacles at Long Term are Facilities.

## A Fourth Option? Federal, State, Tribal and Local Law Enforcement At the law enforcement physical location

#### National Take Back Initiative April 30, 2016



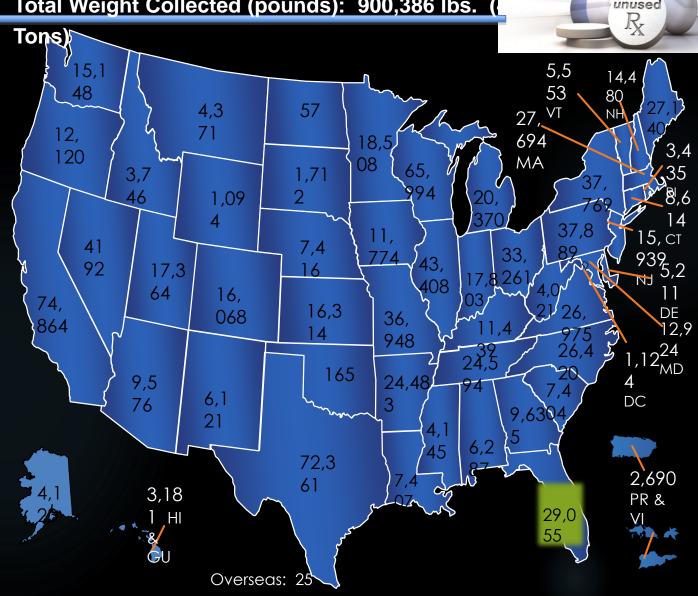
10:00 AM - 2:00 PM

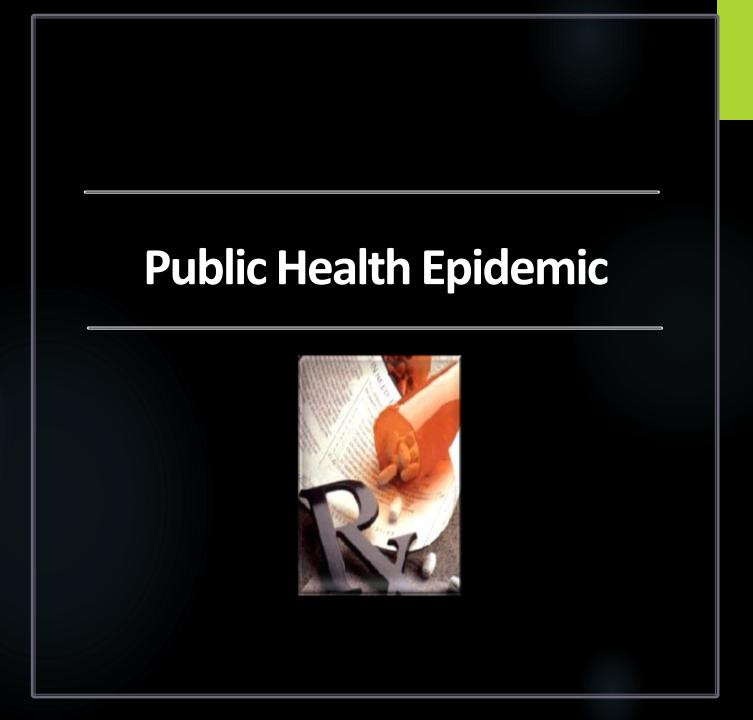


#### 13<sup>th</sup> National Take Back Day: April 29, 2017

Total Weight Collected (pounds): 900,386 lbs.







## **Opioid Overdose Deaths**

#### 2000-2014:

Unintentional drug overdose deaths in the US increased <u>137%</u>, which was a <u>200%</u> increase in overdose deaths involving opioids.

#### 2015:

Over 47,000 drug-related overdose deaths

28,647 deaths involved opioids, including heroin 19,000 deaths involved prescription opioid 1 death every 11.16 minutes 46 deaths by end of a normal work day (8 <sup>1</sup>/<sub>2</sub> hours) 129 deaths every 24 hours

CDC National Center for Health Statistics/Morbidity and Morality Weekly Report (MMWR); January 1, 2016

## How Much Hydrocodone?

THE UNITED STATES MAKES UP 5 PERCENT OF THE WORLDS POPULATION

WHAT PERCENTAGE OF THE WORLD'S HYDROCODONE USAGE DOES THE UNITED STATES MAKE UP?

## Hydrodocone Top 10

- Guatemala
- Mexico
- Vietnam
- China
- Denmark
- Syrian Republic
- Germany
- Canada

25 Kilograms 50 Kilograms

10 Kilograms

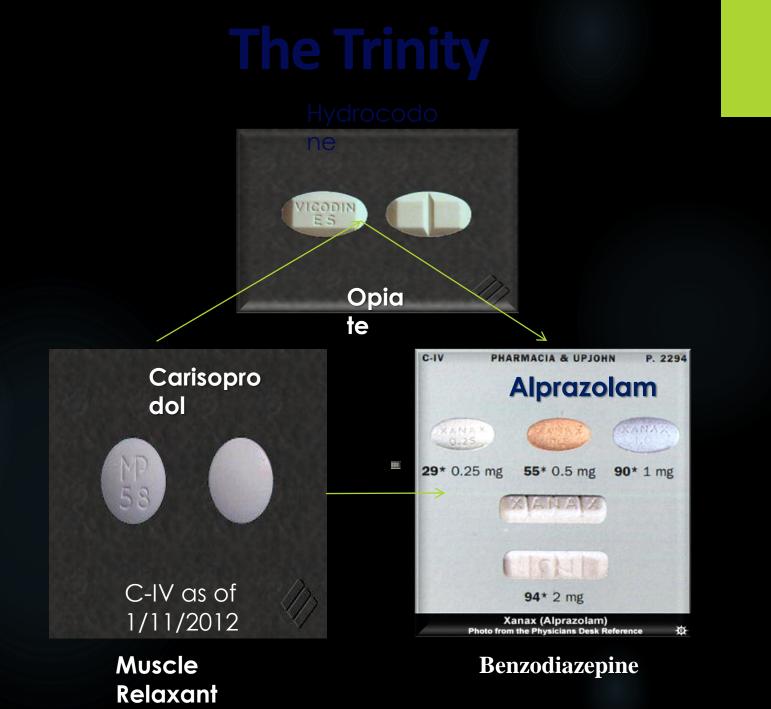
20 Kilograms

20 Kilograms

grams

- 60 Kilograms
- 100 Kilograms
- United States 79,700 Kilograms (99.5%)

Source: UN International Narcotics Control Board Website. Estimated World Requirements of Narcotic Drugs in grams for 2015 www.incb.org



## Promethazine with Codeine









#### C-II CEPHALON, INC. COMPACE CO



#### Fentanyl

- Fentanyl Patches
- Fentanyl Citrate dispensed in a berry flavored lollipop-type unit
- Fentanyl is 100 times more potent than morphine
- Intended to be used for chronic cancer pain & only for people who are tolerant to prescription opioid (narcotic) pain medicines
- Abused for its intense euphoric effects



## What do these two things have in common?????





#### ← Timeline Photos

#### U. S. First Responders Association

Dear Medics, Police, and Firefighters. Please share this with your colleagues. If you find drugs on a patient, be extremely careful when handling them. A new drug is in town called "carfentanil" which is so potent that it landed two first responders in the hospital from inhaling dust while closing a ziplock bag a patient had. Expect people who OD to take 10x more Narcan to start breathing again. The picture compares the lethal amounts of heroin, fentanyl, and carfentanil.

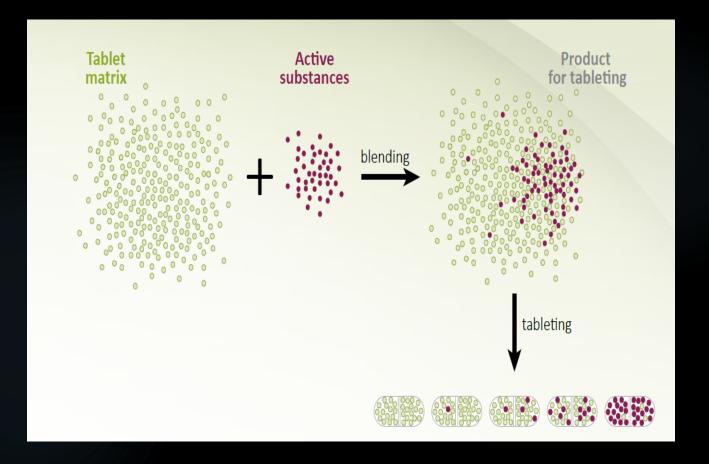
😟 <sup>36</sup> 📶 71% 🗖 18:54

Q

 $\sim$ 



## Mixing Fentanyl



#### Non-medical Prescription Opioid Users Who Try Heroin

- Prescription opioid use is a risk factor for heroin use. Approximately 4 out of 5 recent heroin initiates ages 12-49 used prescription opioids non-medically before heroin initiation.<sup>1</sup>
- Transition from prescription opioid abuse to heroin use is relatively rare; approximately

4 percent of prescription opioid abuse initiates begin using heroin within five years of their initiation of prescription opioid abuse.<sup>2</sup>

- Injection-drug users report that tolerance motivates them to try heroin.<sup>3</sup>
- New research shows that heroin's effects, price, availability, and ease of use motivate heroin users who formerly used prescription opioids.<sup>4</sup>

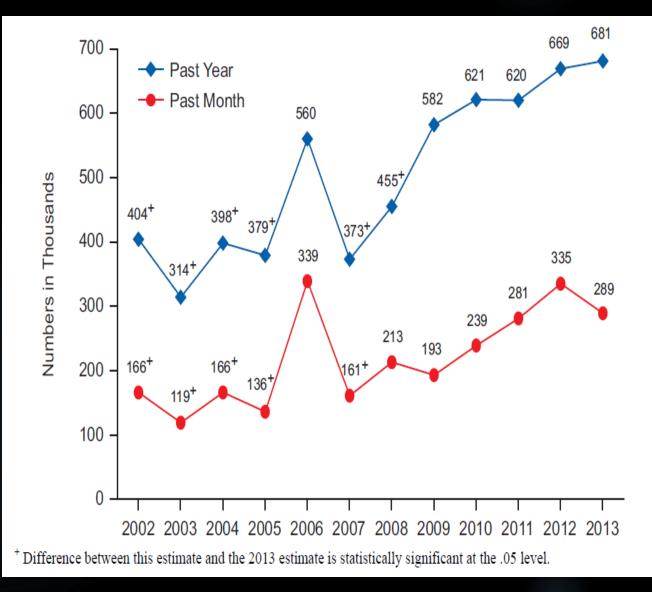


1. Muhuri, P.K. Gfroerer, J., Davies, C. (2013). Associations of Nonmedical Pain Reliever Use and Initiation of Heroin Use in the United States. SAMHSA CBHSQ Data Review (August).

2. Ibid

- 3. Lankenau SE, et al. (2012). Initiation into prescription opioid misuse amongst young injection drug users. Int J Drug Policy. 2012 Jan;23(1):37-44. Epub 2011 Jun 20.
- 4. Cicero TJ, Ellis MS, Surratt HL, Kurtz SP. The Changing Face of Heroin Use in the United States: A Retrospective Analysis of the Past 50 Years. JAMA Psychiatry. Published online May 28, 2014. doi:10.1001/jamapsychiatry.2014.366

#### Past Month and Past Year Heroin Use Among Persons Aged 12 or Older: 2002-2013





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Wastewater And Treatment Education Roundtable



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#### **Facilitated Session:** Designing a take-back system for NCTCOG



#### **Designing a Drug Take-Back System for NCTCOG**

- How many collection sites are needed?
  - Large geographic area with high growth expected
  - Diversity of small, medium, and large cities

#### • Location?

• Retail pharmacies, law enforcement, long-term care, hospitals

#### • Type?

• Mix of rural, suburban, urban, tribal

#### Collection method?

• On-site receptacle, mail-back, events

#### Outreach/education

Promotional campaign & public awareness survey



## **Drug Take-Back**

How many collection sites needed?

- EPR convenience standards for collection sites:
  - ✓ Range from 1/6,500 residents to 1/60,000 residents
     ✓ Most fall between 1/15,000 1/20,000
- Variation depends on:
  - ✓ Political feasibility
  - ✓ Availability of potential collection sites (# of local pharmacies)
  - ✓ Urban vs. rural environments
- Mandatory pharmacy participation in some EPR laws



### Launching a Drug Take-Back Pilot Project

- Gather data
  - Volumes
  - Costs
- Build relationships
- Follow How-to Guide



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### **Funding Options** for Drug Take-Back Programs

- Government
- COG/potential grants
- TX state funding
- Law enforcement (municipality)
- Retailer pharmacies
- Manufacturers/EPR
- Other?



## Safe Drug Disposal Flier



## **Consumer messaging** on safest drug **disposal methods**

#### www.bit.ly/leftover-meds

PRODUCT STEWARDSHIP

### Implementation of NCT Drug Take-Back Program

- Who should be the Lead implementing agency?
- Who is interested in running a pilot?
- What information do you need to succeed?
- Are any changes needed to state or regional regulations/statutes?
- Any additional advice to help design a drug take-back system for NCT?
- Any additional partners that should be included in implementation?



## **PSI Pilot Coalition** Key Stakeholders

- 1. Pharmacies
- 2. Law enforcement
- 3. Public health agencies
- 4. Waste managers/recyclers
- 5. Wastewater treatment
- 6. Environmental advocates
- 7. Reverse distributors

- 8. Manufacturers
- 9. Medical community
- 10. Drug abuse/recovery centers
- 11. Poison control
- 12. Universities/ext. programs
- 13. Local drug abuse prevention/ safe med disposal coalitions, etc.



#### **Next Steps** for North Central Texas



## Thank you!

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