August 23, 2011

Honorable Thomas J. Borris
Presiding Judge of the Superior Court of California
700 Civic Center Drive West
Santa Ana, CA 92701

Subject: Addictive Prescription Drugs and Orange County Seniors

Dear Judge Borris:

Per your request, and in accordance with Penal Code 933, please find the County of Orange response to the subject report as approved by the Board of Supervisors. The respondent is the County of Orange Health Care Agency. If you have any questions, please contact Michelle Zink at (714) 834-7487 in the County Executive Office who will either assist you or direct you to the appropriate individual.

Sincerely,

Thomas G. Mauk
County Executive Officer

Enclosure

cc: 2011-12 Orange County Grand Jury
Responses to Findings F.1 through F.5

F.1 Average annual increases in the amount of potentially addictive medications being prescribed for Orange County seniors significantly outpaced population growth.

Response: Agrees with finding.
The Orange County Health Care Agency (OCHCA) does not dispute the finding. However, given the limited information and details regarding the methodology used to analyze the California Department of Justice Controlled Substance Utilization Review and Evaluation System (CURES), OCHCA cannot validate that all appropriate scientific and statistical considerations were made to control for other factors that might help explain some part of the increase in the selected drugs prescribed.

F.2 By 2010, large quantities of narcotic pain relievers and benzodiazepine tranquilizers were being prescribed for County seniors. Prescribing trends for these drugs indicate even higher numbers in coming years.

Response: Agrees with finding.
The OCHCA does not dispute the finding. However, given that only one local emergency department participates in the national Drug Abuse Warning Network (DAWN) program, OCHCA cannot validate that the results from this national sample are representative of all Orange County senior admissions to hospital emergency rooms.

F.3 Data from one hospital emergency room in Orange County showed significant annual increases in admissions for those 65 and older for prescription drug overdoses during the period examined.

Response: Agrees with finding.
The OCHCA does not dispute the finding. However, given that only one local emergency department participates in the national Drug Abuse Warning Network (DAWN) program, OCHCA cannot validate that the results from this national sample are representative of all Orange County senior admissions to hospital emergency rooms.

F.4 Questions remain regarding the ultimate disposition of the large quantities of pain relievers being prescribed annually for County seniors.
Response: Agrees with finding.
The OCHCA does not dispute the finding. However, we are not aware of any existing data system or other method of tracking how these prescription drugs are being used and/or abused by Orange County seniors.

F.5 Little systematic data collection is taking place regarding indicators of prescription drug misuse or abuse (e.g., overdose rates, signs of substance abuse) among the County’s seniors.

Response: Disagrees partially with the finding.
Prescribers in the community and at OCHCA utilize the CURES process to review patient records to ensure patients are appropriately prescribed such medications.

The OCHCA monitors and analyzes Orange County emergency department data provided by the state Office of Statewide Health Planning and Development (OSHPD), as well as death data, and prepares reports detailing poisoning/overdose incidents in our “Self-Inflicted Injury and Suicide in Orange County” report.

Responses to Recommendation R.1 through R.5

R.1 A comprehensive study of this topic, similar to the one conducted in 2009 by the County Health Care Agency regarding youth and young adults, to focus on County seniors.

Response: The recommendation will not be implemented because it is not warranted or is not reasonable.
OCHCA’s Alcohol Drug Education and Prevention Team created a report in 2009 that relied upon secondary data that were already available including the California Healthy Kids Survey (CHKS) data. CHKS data help to gain understanding about the types of behaviors that youth engage in resulting in over the counter or prescription drug misuse. There is not an analogous study that is conducted with older adults. The costs associated with conducting such a study could be prohibitive. Furthermore, a similar study may not result in reliable responses from this population. There is a significant amount of stigma associated with intentional misuse of prescription drugs by seniors. Additionally, cognitive issues in some senior populations may preclude them from providing an accurate response to unintentional misuse of prescription drugs. These considerations could make such a study potentially less effective.

R.2 Investigate the possibility of grant money for further study and research, including from major pharmaceutical corporations.

Response: The recommendation has been implemented.
Using eCivis and list serve announcements, the OCHCA monitors and seeks external grant funding for such special projects.

**R.3** Promote or increase routine screening of elders for signs of prescription drug misuse or abuse at all County operated or contracted clinics and facilities.

*Response: The recommendation has been implemented.*

This recommendation has already been implemented in OCHCA’s Behavioral Health Services clinics. Programs regularly coordinate with primary care providers (PCPs) and routinely follow-up with them as appropriate. An in-depth history and assessment is taken on each client. Many times the misuse of prescription medication is identified once the person has engaged in treatment. Once the issues have been identified, different intervention techniques are applied. Further information and educational material focusing on routine screening of elders for prescription drug abuse/misuse will be disseminated by the County Health Officer through the Health Care Agency’s Medical Directors Advisory Committee (MDAC). The MDAC represents providers from each of the Health Care Agency’s service areas: Behavioral Health Services, Correctional Health Services, Medical Services, and Public Health Services.

**R.4** Incorporate more systematic data collection and analysis during existing County outreach and intervention program efforts, such as by the County Health Care Agency’s Older Adult Services, Substance Abuse Resources Team.

*Response: The recommendation has been implemented.*

Substance Abuse Resources Team (START) clinicians collect a large amount of data for outcome measures and quality improvement purposes. The START clinicians assess each client’s use of prescription drugs, including the type and amount of medication prescribed, the client’s compliance with prescribed dosage and frequency, and medication abuse risk for each client.

The OCHCA monitors and analyzes Orange County emergency department data provided by the state Office of Statewide Health Planning and Development (OSHPD) and prepares reports detailing poisoning/overdose incidents in our “Self-Inflicted Injury and Suicide in Orange County” report.

**R.5** Access and make better use of Orange County-specific prescription drug data from existing governmental databases, in particular California’s Controlled Substance Utilization Review and Evaluation System, and the U.S. Drug Abuse Warning Network.

*Response: The recommendation has been implemented.*

OCHCA’s Behavioral Health Services already utilize CURES, with one designated psychiatrist who has immediate electronic access to CURES. Other psychiatrists may request information from CURES as needed through the designated psychiatrist.
This information will be shared and discussed with the Over the Counter and Prescription Drug Abuse Task Force. This task force, convened by OCHCA in 2008 and initially focusing on youth, brings together key partners to review the issue of prescription and over-the-counter drug abuse in Orange County.