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Date: November 14, 2016

To: Family and Human Services Committee, Contra Costa Board of Supervisors

From: William B. Walker, M.D., Health Services Director

By: Daniel Peddycord, Public Health Director

Re: Safe Drug Disposal Ordinance

Recommendations:

- 1. Receive report by the Public Health Director on a draft Safe Drug Disposal Ordinance ("Ordinance").
- 2. Consider referring and recommending approval of the Ordinance to the Board of Supervisors.

Background:

On April 27, 2010, the Contra Costa Board of Supervisors adopted a resolution supporting Extended Producer Responsibility. It was noted that local governments do not have the resources to adequately address the rising volume of discarded products and that there are significant environmental and health impacts associated with improper management of Universal Wastes, sharps and other products.

In March of 2012, Supervisor Mary Piepho brought forward a resolution to the Board of Supervisors declaring March as "Prescription Drug Abuse Awareness Month". Comment was made regarding the importance of safely storing and disposing of medications. Subsequently, at an April 28th, 2012 Prescription Drug Take Back event, Supervisor Piepho noted that her office was working with County departments to review and evaluate a "Safe Medication Disposal" Ordinance for Contra Costa County.



On March 3, 2015, the Contra Costa County Board of Supervisors, again, issued a Proclamation recognizing March as Prescription Drug Awareness month to bring attention to the seriousness and significance of deaths associated with the misuse of prescription drugs. Supervisor Candace Andersen referenced the importance of disposing of unwanted medications when they are no longer needed and Supervisor Mary Piepho indicated that she hoped the County would soon be able to adopt a safe drug disposal ordinance, following Alameda County's lead in adopting a similar ordinance.

Extended producer responsibility (EPR) laws, sometimes referred to as product stewardship laws, assign responsibility for end-of-product life management of consumer products on the manufacturers of those products. Given the parallel increase in the number of prescription drug related overdose deaths, with the dramatic increase in sales of prescription controlled substances, product stewardship is a relevant and essential strategy to protect the public's health. However, there is currently no mandatory statewide drug stewardship program for unwanted household drugs in California.

Over the past year staff has worked with the Office of Supervisor Piepho to develop a draft ordinance for safe drug disposal. These efforts have focused on modeling an ordinance that would require the producers of covered drugs to create and pay for a system for the safe and convenient disposal of unwanted prescription drugs, similar to those adopted by other Bay Area counties.

Scope of the Problem:

The United States is in the midst of an epidemic of drug overdose deaths. From 2000 to 2014 nearly 500,000 people in the US died from drug overdose. In 2013 alone, 16,000 people died from overdose related to opioid pain relievers, a four hundred percent increase as compared to 1999. The significant increase in number of overdose deaths is largely attributed to the misuse of prescription opioids and sedatives. In 2014, 47,055 drug overdose deaths occurred nationally, more than during any previous year on record and opioids, including prescription painkillers and heroin, were involved in 28,647 deaths, or 61 percent of all drug overdose deaths. Overdose deaths involving opioid pain relievers (OPR) are now associated with more deaths than heroin and cocaine combined. The increase in deaths associated with drug overdose has now replaced motor vehicle crashes as the leading cause of accidental death for persons age 25-64.

Drug misuse and abuse resulted in approximately 2.5 million emergency department (ED) visits nationally in 2011. More than 1.4 million of these were related to prescription drugs.

Misuse and diversion of prescription medication is a significant issue. According to the 2014 National Survey on Drug Use and Health administered by the US Department of Health and Human Services, about 15 million people age 12 or older used prescription drugs non-medically in the previous year.

In the United States, prescription opioid abuse costs were about \$55.7 billion in 2007. Of this amount, 46 percent was attributable to workplace costs (e.g., lost productivity), 45 percent to healthcare costs (e.g., abuse treatment) and 9 percent to criminal justice costs.

Contra Costa County:

On March 1, 2016, the Contra Costa Public Health Division Issued a Health Advisory warning of the misuse and abuse of prescription opioids. The advisory was issued to bring attention to a national epidemic of misuse and abuse of prescription opioids and sedatives. The advisory called attention to the need for health care professionals to be aware of the scope of this epidemic and new guidelines for prescribing.

Data from the California Department of Public Health reveal that there were 53 accidental drug overdose deaths in 2003 in Contra Costa County. The number of accidental drug overdose deaths increased to 84 in 2008 and 113 in 2013. In 2014, the majority (72 of the 96) of drug-related accidental deaths reported to the Contra Costa Coroner's Office in 2014 involved prescription drugs.

What we are experiencing in our County is mirrored across the Nation. Information from the Centers for Disease Control and Prevention (CDC) reveals that the death rate from drug overdose has more than doubled since 2000. On a national level, drug overdoses have claimed the lives of nearly 500,000 individuals since 1999. http://www.cdc.gov/mmwr/pdf/wk/mm6450.pdf

It is no coincidence that the number of drug overdose deaths reported in the U.S. during 2014 was 140 percent higher than in 2000 (CDC statistic). The increase in deaths parallels a decade long increase in medical prescriptions for opioid pain medication.

According to the CDC, prescription opioid sales in the United States increased by 300 percent between 1999 and 2010. (CDC Vital Signs MMWR 2011:60(43); 1487-1492.) Between 1999 and

2013, the number of deaths attributed to opioid pain relievers increased by 400%. http://www.cdc.gov/nchs/deaths.htm

Nationally each year, prescription narcotics result in more fatal overdoses than heroin and cocaine combined. The second leading cause of fatal overdoses are prescription sedatives — medicines like Xanax and Ativan.

Counties, health systems and community partners across the greater bay area are addressing this epidemic. The Alameda-Contra Costa Medical Association, working together with local public health agencies, health insurers, community partners and health care provider organizations have helped local Emergency Departments, Urgent Care Centers and Primary Care clinicians adopt a set of guidelines for prescribing opioids. These guidelines are intended to help balance the need for the treatment of pain with the risk of drug dependency, abuse and addiction. In addition, health systems are expanding the availability of drug treatment programs, medication assisted treatment and drug counseling services.

Safer disposal of prescription medication is also a strategy that aids in reducing the risk of diversion and misuse of prescription drugs. Having ease of access to appropriate methods to dispose of these medications helps to reduce the chance that unwanted medications will be taken by individuals who misuse or are addicted to prescription medications.

In 2010, Congress passed the "Secure and Responsible Drug Disposal Act of 2010" (Public Law No. 111-273), which authorized the Attorney General to increase methods, formerly restricted to law enforcement, by which controlled substances may be collected, including collection at pharmacies. On October 9, 2014, the Drug Enforcement Administration (DEA) promulgated regulations implementing the bill. These regulations, among other things, authorize retail pharmacies to maintain secure collections bins for controlled substances. However, these policies and regulations are permissive, not mandatory. On August 29, 2016, Governor Jerry Brown signed Senate Bill 1229, which protects pharmacies that properly secure drug disposal bins from civil damages.

Only two pharmacies in Contra Costa County have yet to establish drug disposal kiosks for the collection of controlled and uncontrolled medication. One is located in El Cerrito and the other in Walnut Creek. Both are part of a large retail chain, Walgreens, which has expressed interest in supporting safe drug disposal. However, to date, this voluntary model has yet to yield a common or widely available means of disposing of unused prescription medications.

The current solid waste collection system run by the three regional entities, West Contra Costa Integrated Waste Management, Central Costa Sanitation District and Delta Diablo Sanitation District, Central San and Delta Diablo) is also insufficient to dispose of unused prescription pain medication. These entities are focused on the collection of non-controlled pharmaceutical

substances, and according to regulations from the Drug Enforcement Administration (DEA) they cannot legally accept controlled substances, such as prescription opioids or sedatives.

To date, there are only two local law enforcement agencies in the County that accept controlled substances for disposal on a regular basis, those being in Antioch and Pittsburg.

In addition, the DEA host periodic prescription drug take back events. These are often supported by and located at local police or Sherriff stations but are infrequent in nature. Hence, they create an environment where members of the public might hoard their medication vs. disposing of it readily.

To test the interest and need for a more convenient means of safe drug disposal, from the perspective of consumers, the Public Health Division conducted a survey in September of 2016, modeled after a similar one done in Los Angeles County. More than 1,600 individuals responded. Below is a summary:

- 73 percent of respondents reported having unused or left-over prescription medications in their home.
- 94 percent of respondents said that they believe it is inappropriate to dispose of medications in the toilet and 84 percent said the same thing about disposing of medication in the trash.
- 37 percent of respondents said one reason they keep unwanted medications around the home is that there is no convenient means to properly dispose of them. Less than 10 percent said they were saving the medications for a drug take-back event.
- 83 percent of respondents said they would be likely or very likely to dispose of unwanted medications at a pharmacy, while 55 percent said they would be likely or very likely to use a prepaid return envelope.
- 58 percent of respondents selected "take back to pharmacy" as their most preferred option, more than three times the number who preferred dropping them off at a police or sheriff's office.
- As to why respondents were unlikely to use certain methods to dispose of their unwanted medications, nearly 78 percent said drug take-back events are inconvenient and more than 83 percent said the same thing about household hazardous waste collection facilities.
- 66 percent of respondents indicated that a benefit of removing unused or left-over medications from the home was less chance of misuse of the medication. Less chance of theft

and less chance that children or pets might inadvertently get into them were also selected as reasons to remove unused prescription medication from the home.

The survey results and significance of this public health issue indicate that the currently available disposal measures in Contra Costa County are not sufficient to alleviate the risk of misuse, addiction and death, nor to curb the tide of this national epidemic. It is the view of staff that a similar ordinance is needed here in Contra Costa County.

The counties of Alameda, Marin, San Mateo, Santa Clara, Santa Cruz and Santa Barbara and the City and County of San Francisco have adopted product stewardship ordinances to promote safe drug disposal. So too have King County (Seattle), Washington, and most recently Cook County, Illinois. In addition, Mexico, Brazil, Columbia, a number of Canadian provinces, including British Columbia and Manitoba as well as number of European nations, including France, Spain, Portugal and Belgium have adopted safe drug disposal programs, which are paid for by drug manufactures and operated under product stewardship programs on their behalf.

Features of the draft Safe Drug Disposal Ordinance:

The proposed ordinance would require producers of covered prescription medications to establish and pay for a collection system consisting of the following:

- A minimum of 3 drop-off sites in each of the five supervisorial districts in locations that allow for convenient and equitable access by residents of the unincorporated areas of those districts. If achievement of this standard is not feasible in a supervisorial district, the stewardships program must provide for both of the following additional methods of collection of unwanted covered drugs.
 - A mail-back service
 - Periodic take-back events that are at least 6 hours in length, held a least once per quarter and located in at least three locations in the district.
- Preference is given to having retail pharmacies and law enforcement agencies serve as collectors.
- In addition, mail-back services must be made available to individuals who are disabled or homebound.

If adopted, the Ordinance would require the producer(s) (manufacturer) of a covered drug to submit a product stewardship plan, to the Public Health Officer, describing how they would provide for the disposal options noted above. The proposed ordinance allows for producers to satisfy their stewardship obligation either individually or jointly with other producers, in the form of a stewardship organization. As drafted, the ordinance would require that producers provide notice to

all retail pharmacies and all law enforcement agencies located in the County of the opportunity to participate as collectors.

Covered drugs include prescription drugs but do not include vitamins, herbal-based remedies, cosmetics, non-prescription drugs or personal care items.

Producers would have six months after the effective date of the ordinance to provide the Health Officer with written notice of their intent to participate in a stewardship program. Within 90 days after the Health Officer's approval, the producer shall implement the plan by commending operations of the approved product stewardship program. In addition to meeting the requirements for number and convenience, the stewardship program will need to describe how the mail-back components of the program are to be administered. Public notice will also be required at the collection sites and advertised in the local media.

The Operators of the Stewardship program(s) are required to submit an annual report noting, among other things, the weight of total drugs collected, a description of public education and promotional activities, the number of mailers provided to county residents, details on transportation of drugs to be disposed and total expenditures of the stewardship program.

The administrative and operational cost of the stewardship program will be the sole responsibility of the participating producers. However, the proposed ordinance does not require a producer to pay for staff time provided by collectors who agree to participate in an approved stewardship program. Revenue from fees paid may only be used to cover the cost of the Health Officer in the performance of investigations, inspections, audits, and administrative enforcement and adjudication.

The drug stewardship program described in the draft ordinance would benefit the public by significantly increasing timely and convenient disposal options for county residents, enabling collection of larger quantities of unwanted drugs and reducing the above risk to public health.

In Summary:

Reflecting on the strong themes from the survey together with the significance of this public health issue, the available disposal measures noted above are not sufficient to alleviate the risk of misuse, addiction and death, or to curb the tide of this national epidemic. There is a glaring lack of (legal) disposal options for controlled substances, which are a contributor to the epidemic of drug overdose deaths in our County. While many nations and multiple counties in California, particularly in and around the Bay Area have adopted Extended Producer Responsibility ordinances for the safe disposals of prescription drugs, to date, the State has not yet provided similar policy. The current environment for safe drug disposal is inadequate, in some examples inappropriate, and is better

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described as a patchwork system vs. a consumer friendly and convenient system of safe drug disposal. For all of these reasons staff recommends consideration of the Safe Drug Disposal Ordinance.

Attachment:

Draft Safe Drug Disposal Ordinance

cc: Randy Sawyer, Director Contra Costa Hazardous Materials Marilyn Underwood, Director Contra Costa Environment Health Michael Kent, Hazardous Materials Ombudsman