

A participatory process to develop a naloxone, buprenorphine, and syringe safety intervention for community pharmacies

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Background

- Pharmacies are well positioned to mitigate opioid risks through provision of naloxone to people taking opioid medications and supplying nonprescription syringes for safe injection.
- Many pharmacists and technicians are unsure of how to address these topics with patients and some may harbor stigma towards people who use drugs.

Objective

- We used a participatory design process with multiple stakeholders to integrate two evidence-based opioid safety-focused training toolkits (**MOON** and **RESPOND**) and to enhance content related to buprenorphine dispensing and nonprescription syringe sales.

Methods

- MOON** materials focused on naloxone knowledge and dispensing; **RESPOND** emphasized communication strategies and importance of opioid safety screenings.
- We formed external advisory committees (EACs) across each state comprised of **pharmacists, policy makers, community health workers, and researchers** (n=20) to provide feedback via online surveys and presentations to local task forces.
- Three in-person focus groups with **people who use drugs** (n=17) in one urban and two rural areas were held.
- Toolkits included a continuing education (CE) online course, academic detailing, as well as pharmacist-and patient-facing materials.



Academic Detailing

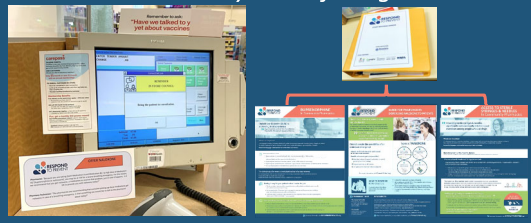


Pharmacy Materials

Patient-facing



Pharmacy team-facing



Online CE-Accredited Course



Results

- EAC survey responses and task force discussions need to focus **online courses** and **academic detailing**
 - naloxone assessment,
 - counseling, and
 - pharmacy workflow.

Pharmacy Naloxone Key Points

- Review pharmacology and therapeutic use
- Highlight pharmacy distribution approaches
- Provide guidelines for intervention
- Provide communication strategies

- New content** and **tool enhancement** areas per EAC
 - buprenorphine effectiveness,
 - concomitant medication monitoring,
 - prescriber communication,
 - reducing stigma at syringe sale,
 - community benefit of syringe sales, and importance of safe disposal.

Focus group participants discussed toolkit refinements

- reduce stigma
- present content in a more patient-facing manner
- offer syringe sales in a more discreet container
- use training materials more effectively

Conclusion

- Adaptation and enhancement of a comprehensive harm reduction toolkit for pharmacists was formalized through a participatory process with multiple stakeholders.
- Community engagement in intervention development improved the validity and meaning of materials for stakeholders for people who use drugs.

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