

Signal Confirmation Approaches for Risk Management Programs

James A. Inciardi Ph.D. & Hilary L. Surratt Ph.D.

University of Delaware Research Center

Coral Gables, Florida

Theodore J. Cicero Ph.D.

Washington University, St. Louis, Missouri

Tufts Health Care Institute Program on Opioid Risk Management

Boston, MA – September 7 - 8, 2006

Components of Risk Management Programs

- **Surveillance** – monitoring of populations, programs, and agencies.
- **Signal Detection** – indicators of abuse and diversion occurring at significant levels.
- **Signal Confirmation** – research to determine the validity, scope, and causes of the detected signals.
- **Intervention** – programs to reduce the validated levels of abuse or diversion.
- **Evaluation** – follow-up surveillance studies to determine intervention impact.

Signal Systems

- **Key Informants**
 - Treatment programs
 - Researchers
 - Impaired professional programs
 - School health centers
- **Diversion**
 - Police and sheriffs' departments
 - Drug task forces
- **Poison control centers**
- **Regulatory agencies**
- **Hospital emergency rooms**

Signal Confirmation

- **Exhaustive collection and compilation of data,**
- **from numerous sources**
- **corresponding with one another,**
- **which corroborate the detected signal.**

**Signal Confirmation
through
“Rapid Assessment”
Technology**

Rapid Assessment

A method for ascertaining, understanding, and characterizing the nature and extent of health and social problems in a particular locale, and for suggesting ways in which those situations can be improved.

- **builds upon existing information**
- **uses both quantitative and qualitative research methods**
- **speeds up epidemiological research**

Rapid Assessment Studies

- **A long history, going back to the 1920s**
- **Studies of a variety of health topics (malaria, sanitation, nutrition)**
- **Agricultural development**
- **HIV risks and prevalence**
 - **CDC studies of sex-for-crack exchanges**
- **Drug abuse**
- **Opioid abuse and diversion**

Rapid Assessment Methods

- **Surveys**
- **Key informant interviews**
- **Focus Groups**
- **Direct observations**
- **Ethnographic studies**
- **Existing indicator data**

Swat Team Approach

- Team of *experts* visit a community where there appears to be a problem.
- *Experts* need to be matched with target audience.
- All contacts should be *face-to-face*.
- Collect as much information as possible from *numerous sources*.
- Synthesize and report on findings.
- Suggest possible interventions.

Community Institutions

**Key informants (youths and adults)
knowledgeable of the local drug scene**

- **Hospital emergency rooms**
- **Treatment programs**
- **Schools**
- **Police and sheriffs' departments**
- **Drug task forces**
- **State police**
- **Religious institutions**

Regulatory Agencies

- **Nursing Board**
- **Medical Board**
- **Pharmacy Board**
- **Dental Board**
- **Veterinary Board**
- **Impaired health professional programs**
- **Other regulatory boards**

Drug Abusing Populations

- **Street-based crack, cocaine, and heroin users**
- **Club culture**
- **Circuit party culture**
- **Methadone maintenance patients**
- **Other treatment populations**
 - Publicly-funded
 - Private pay
- **Elderly populations**
- **Street sex workers**
- **HIV positives**

Dealer/Trader Populations

- **Street dealers**
- **Local pill brokers**
- **Traders**
 - **club culture**
 - **circuit party culture**
 - **street culture**
 - **adolescents**

Interview Guides

Separate guides are needed for –

- Prescription drug abusers
- Prescription drug dealers/pill brokers
- Police/diversion investigators
- Treatment counselors
- School counselors
- Physicians
- Pharmacists
- Other cultural insiders

Sample Interview Guides

For prescription drug abusers --

- Types and amounts of prescription drugs abused, settings for abuse, and motivations for initiation and continuation of use;
- Sources of supply, methods of initial and continuing contact with the dealers/brokers, and means of exchange (cash, trade of service or product, etc.);
- Relation of prescription drug abuse to other drug abuse and/or other health risk behaviors; and,
- Social acceptability of prescription drug abuse within the respondents' social networks.

Sample Interview Guides

For prescription drug dealers –

- Types and amounts, and prices of prescription drugs sold, and motivations for involvement in dealing;
- Sources of supply, methods of initial and continuing contact with the supplier(s);
- Relation of prescription drug dealing to other drug sales, drug abuse and/or other illegal activities; and,
- Types of prescription drug customers, settings and methods of customer contact, and methods of expanding and/or controlling the customer base.

Sample Interview Guides

For police/diversion investigators –

- Types and scope of prescription drug diversion cases observed in the local jurisdiction, including settings for drug sales and prices of diverted drugs;
- Types and numbers of purchasers of diverted prescription drugs, and social context of dealer-customer relationships;
- Relation of prescription drug diversion and dealing to other drug sales and other illegal activities; and
- Types and levels of prescription drug dealers, their social networks and interrelationships, and modes of acquiring and transporting diverted drugs.

Interview Guides for Diverters

Questions vary depending on whether diversion involved –

- **“Script docs”**
- **Pharmacists**
- **“Shorting” by a pharmacists**
- **“Doctor shopping”**
- **Pharmacy robberies or thefts**
- **Stolen, forged, altered scripts**

Other Types of Diverters

- **Thefts from physician's office**
- **Thefts from hospital**
- **Residential burglaries/home invasions**
- **Reverse distributors**
- **Smuggling from outside U.S.**
- **Insurance fraud**
- **Internet purchases**
- **Medicine cabinet thefts**
- **Street buys**

Sample Diverter Questions

For purchases from a “script doc” –

- what kind of a physician was it
- is he/she in the neighborhood
- how did client first come in contact with script doc
- how long has client known him/her
- does he/she give a physical exam before writing a script
- what is paid for the prescription (money? sex? referrals?)
- does he/she fill the script right there in the office
- is there somewhere else in particular where client gets it filled

Sample Diverter Questions

For thefts from a hospital –

- why was the client there
- where did client steal them from (nurses' station, cabinet)
- did client have help, who
- what did client get
- was this a burglary, robbery, or sneak theft
- which ones did client use, sell, trade
- what did client get for them

Swat Team Composition

Depends on the nature of the signal --

- **4 to 10 people depending on scope time allotted**
- **At least one drug abuse researcher with street experience, one person in recovery, one person with police experience**
- **Focus group facilitators with experience interviewing street drug users, sex workers, gay men, methadone and other treatment patients, and students**
- **All individuals must have enough experience with their subject matter and target populations to ask follow-up questions**

Timing

Overall, at least 10 to 12 weeks --

- **2 to 3 weeks preparation time for design, arranging for initial round of interviews and focus groups**
- **Multiple 3 to 5 day visits depending on scope and intensity of assessment**
- **2 to 3 weeks for analysis of findings and recommendations**