



# A Hidden Workplace Epidemic

## Prescription Painkillers Impact





# Who is NSC?

Our Mission:

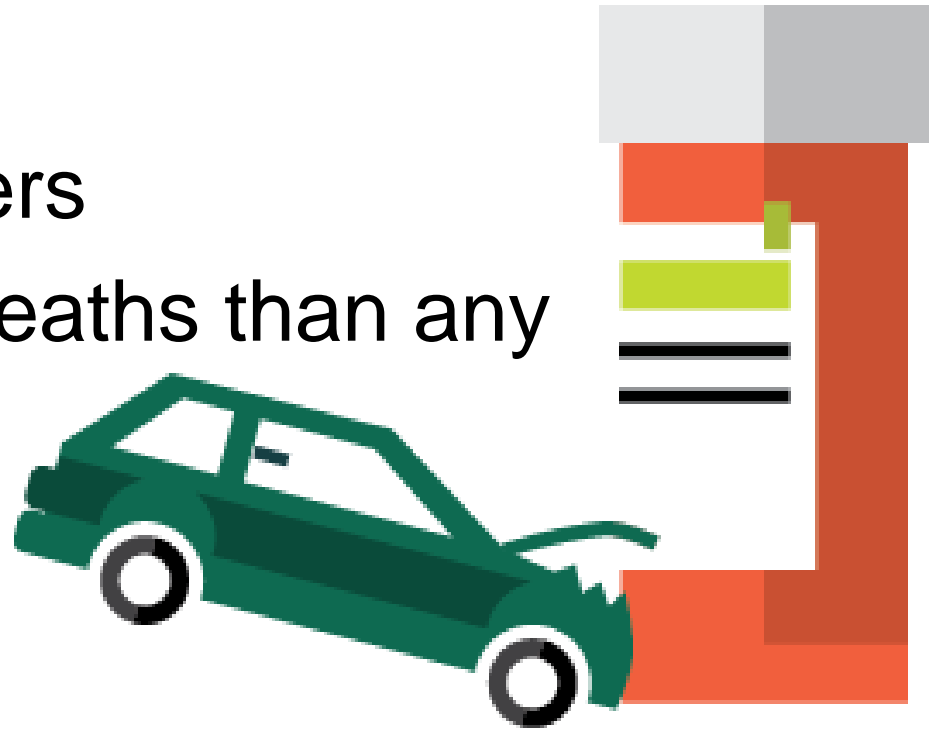
The National Safety Council saves lives by preventing injuries and deaths at work, in homes and communities, and on the roads through leadership, research, education and advocacy.





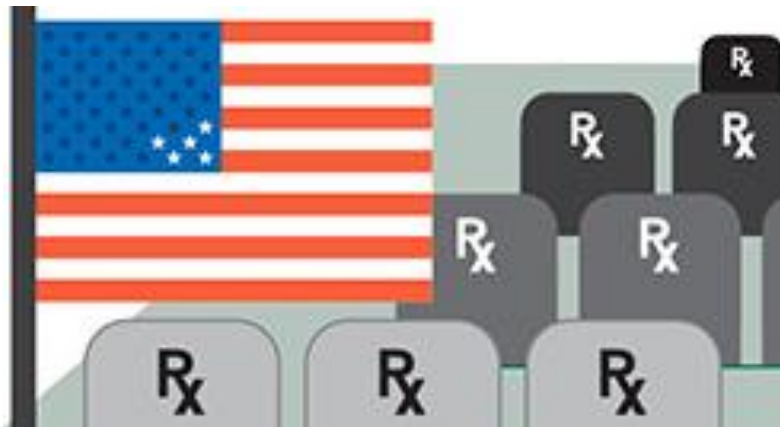
Drug Overdoses now cause more deaths than car crashes.

Prescription painkillers contribute to more deaths than any other type of drug.





# 45 U.S. Citizens Die Everyday from unintentional overdoses of prescription pain relievers





In 2010, 23% of the U.S. workforce used prescription drugs to get high or to self-treat a medication condition without guidance from a physician or medical professional

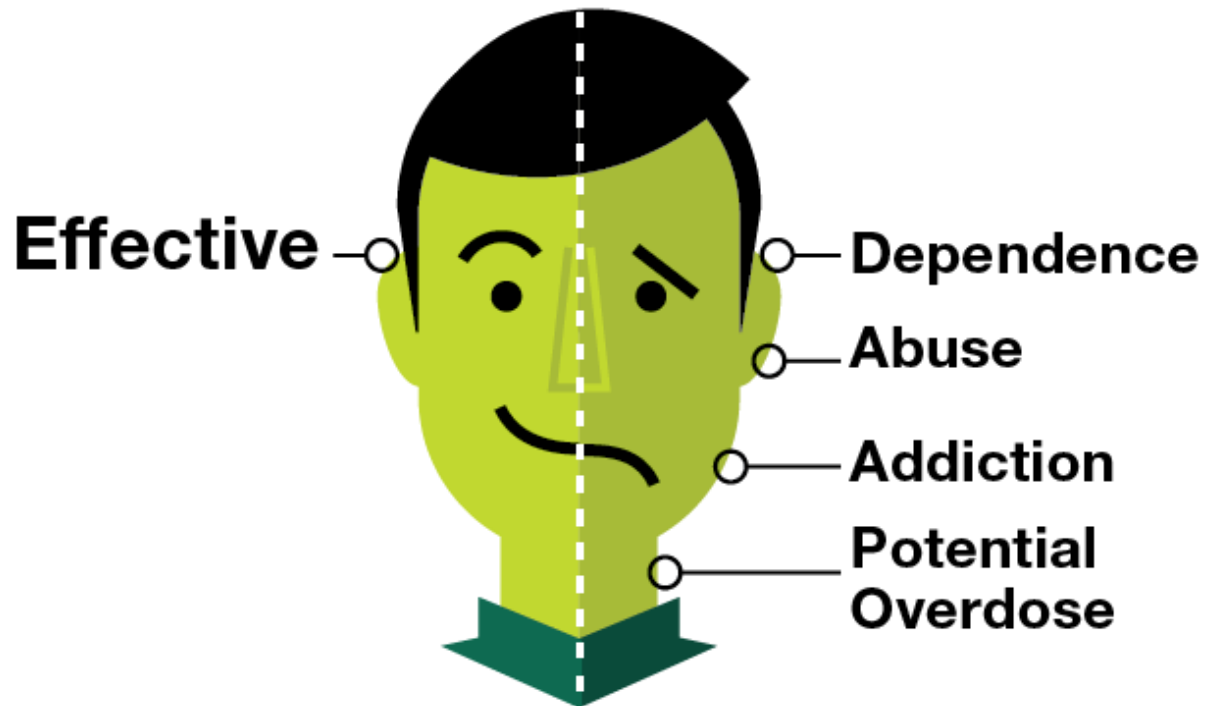




*How does this epidemic translate to **our** workplace?  
No one is overdosing here at work. Do we really have a problem?  
Are employees aware of the risks associated with these medications?  
Its not our business what medications an employee is taking...or is it?  
What are the human and financial costs to our organization?  
What can be done to address safety and health risks related to employee opioid use?*



# The Two Faces of Prescription Medications





# Who Is At Greater Risk for Developing a Problem With Prescription Opioids?

- Personal or family history of addiction or substance abuse
- Having participated in previous treatment programs for addiction
- Suffers from depression or anxiety
- Long term use of prescription opioids







# *Opioids Are Not More Effective for Most Pain*



# Common Workplace Risks Associated with Prescription Painkiller Use



**Risk of  
incidents and  
injuries**



**Driving  
vehicles  
to/from/at  
work**



**Operating  
machinery/  
equipment**

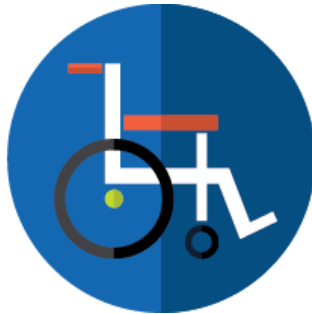


**Making  
critical  
errors**



**Productivity  
(pace, focus and  
concentration)**

# Painkiller misuse increase medical claim costs and the length of disability



**Length of  
Disability**



**Medical  
Claim Costs**



**Insurance  
Fraud**



# What employers can do

- Partner immediately with prescription and health plan providers
- Revise your Drug-Free Workplace Program to protect your employees and reduce liability





Employers should insist upon **conservative prescribing guidelines** for pain treatment for **all participating providers** in their medical, workers compensation and occupational health programs.





# High Risk Situations

Dangerous scenarios for injured workers that increase their risk of addiction, overdose and death:

- Prescribed prescription painkiller for more than 30 days
- High daily dose exceeding 120 MED
- Prescribed a benzodiazepine and opioid at same time





# Partner with Health Plans

Employers should insist on specialized workers compensation programs to:

- manage conservative use of opioid medicines for pain
- monitor use of opioids through on-going urine drug tests
- close formulary and require prior authorization and approval for opioid prescriptions





# Examples of Program Interventions

- Patient Review and Restriction programs
- Provider outreach and education
  - Letter
  - Provider to Provider Education
  - Scorecards on provider prescribing patterns
- Pharmacy Flags







# Partner with Health Plans

- ☑ cover non-medication methods of treatment such as physical therapy or acupuncture
- ☑ cover Substance Abuse Treatment and medications used in treatment (MAT)





# Update Drug Free Workplace Program

- Policy
- Drug Testing
- Supervisor Training
- Employee Education
- Employee Assistance Program





# Update DFWP Policy

- ☑ Address prescription use at work
- ☑ Encourage employees to avoid unsafe work practices
- ☑ Require proof of valid prescription
- ☑ Prohibit the illegal or nonmedical use of prescription drugs





# Update DFWP Drug Testing

- ☑ Ensure that employee drug testing includes the most commonly prescribed opioid painkillers.

**Drug testing should include at least the following seven compounds:**

**opiates, benzodiazepines, oxycodone, methadone, cocaine, amphetamines and THC, the active ingredient in marijuana.**





# Update DFWP Drug Testing

- ☑ Utilize Medical Review Officer (MRO) to review test results.
- ☑ Contract with physician to perform Fitness for Duty assessment.





# Managers and Supervisors

- ☑ Supervisor responsibilities under your DFWP policy.
- ☑ Understand how to implement your company's procedures related to fitness for duty or reasonable cause testing



# Managers and Supervisors

- ☑ Managers need to know that the ADA may protect an employee's use of OTC or prescription drugs to treat a disability.
- ☑ Be prepared to engage in interactive process to identify reasonable accommodations, including modifying job responsibilities.



# Employee Education

- Safe medication use, including risks of sharing drugs
- Importance of safe storage of these medications and prompt, proper disposal
- Employee responsibilities and consequences of employee violation of your DFWP policy







# Employee Assistance

- Remind employees of confidential help available through an Employee Assistance Program
- Communicate about and market the EAP at all levels of your company





# Safe Effective Treatments are Available

- Detoxification only is not recommended
- Medication assisted treatments include
  - Naltrexone
  - Suboxone/Buprenorphine
  - Methadone
- Successful workplace treatment programs exist





# Final Thoughts...

Research has demonstrated that treatment that is supported and monitored by the employer has resulted in better sustained recovery rates than treatment initiated at the request of friends and family members.



(Weisner, et al)

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<http://safety.nsc.org/rxemployerkit>





# Questions

Don Teater

630.775.2125

[Don.Teater@nsc.org](mailto:Don.Teater@nsc.org)

Tess Benham

630.775.2159

[Tess.Benham@nsc.org](mailto:Tess.Benham@nsc.org)

[rxsafety@nsc.org](mailto:rxsafety@nsc.org)

