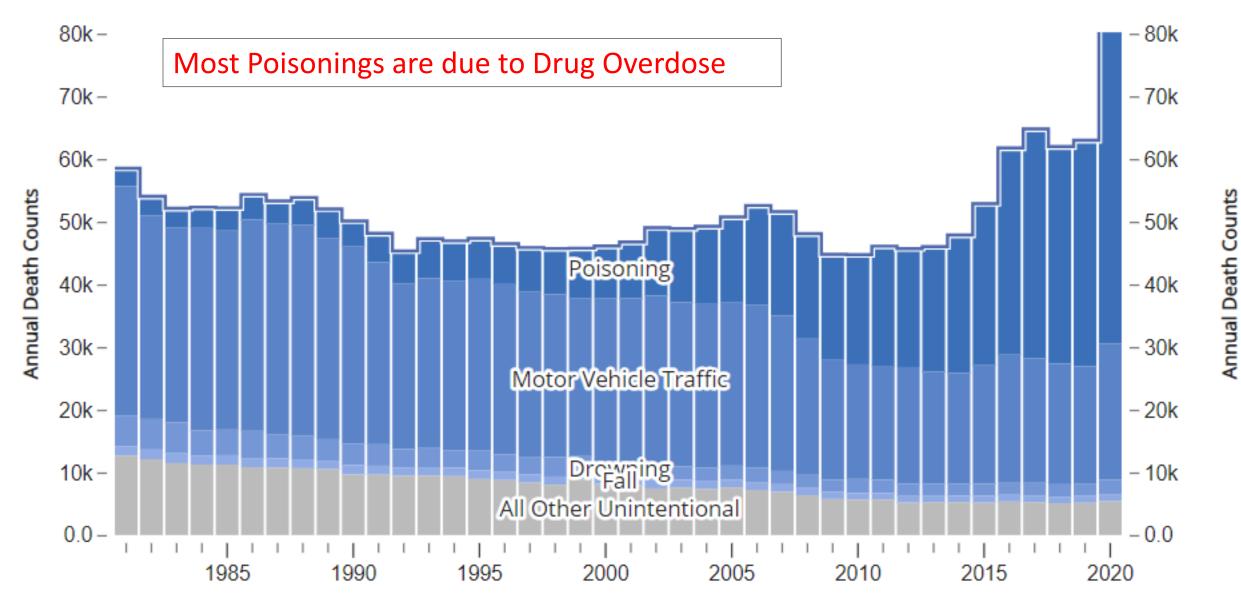
Opioid Guidelines and the Construction Industry

Ann Marie Dale, PhD Healthy Work Center

Funding: National Institutes of Health, National Institute on Drug Abuse, 1R34DA050044-01



Unintentional Injury Deaths for ages 1-44, in U.S.

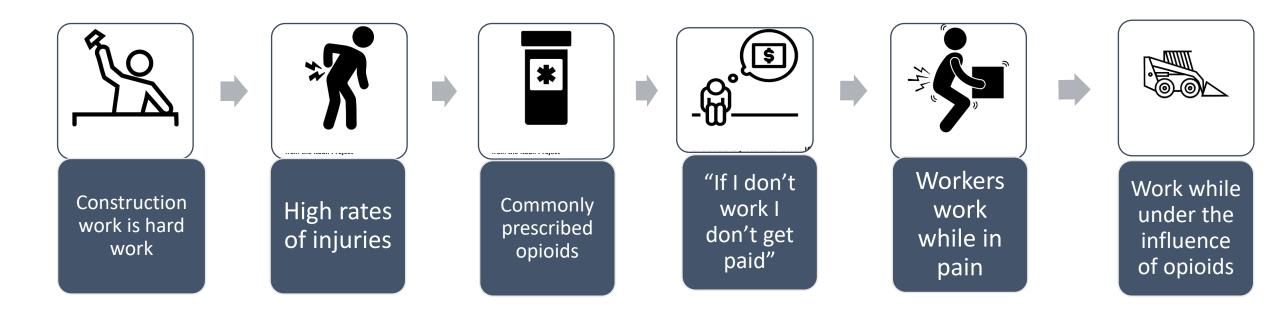


Source: CDC wisqars 2020

Drug/opioid use disorder and Construction

- Over their lifetime, 10% of adults will meet the criteria for drug use disorder. (data from 2018)¹
- 8 to 12 percent of people using an opioid for chronic pain develop an opioid use disorder²
- 1 out of 5 construction workers have a substance use disorder ³
- Construction workers are 6 to 7 times more likely to die of an overdose than workers in other professions⁴
- 1. Substance Abuse and Mental Health Services Administration (SAMHSA), 2018 National Survey of Drug Use and Health (NSDUH) Releases https://www.samhsa.gov/data/release/2018-national-survey-drug-use-and-health-nsduh-releases
- 2. Vowles KE, McEntee ML, Julnes PS, Frohe T, Ney JP, van der Goes DN. Rates of opioid misuse, abuse, and addiction in chronic pain: a systematic review and data synthesis. Pain. 2015;156(4):569-576.
- 3. National Opinion Research Center and National Safety Council. Substance Use Disorders by Occupation. 2020
- 4. Dong, X.S., R.D. Brooks, and C.T. Cain. Overdose fatalities at worksites and opioid use in the construction industry. 2019 [cited 2022 February 24,];

Why construction workers?



- High injury rates
- Job insecurity

- High levels of job stress
- No sick leave for treatment
- Dale AM, Evanoff B, Macomber M, O'Reilly M, Rosen J, Schneider S. Can ergonomics programs help solve the opioid crisis? Preventing Pain Is the Key. The Synergist. May 2019; https://synergist.aiha.org/the-synergist-may-2019
- All icons are from the Noun Project, creators in order from left to right: SBTS, Adrien Coquet, Blaise Sewell, Kamin Ginkae, Gan Khoon Lay, Alex Fuller

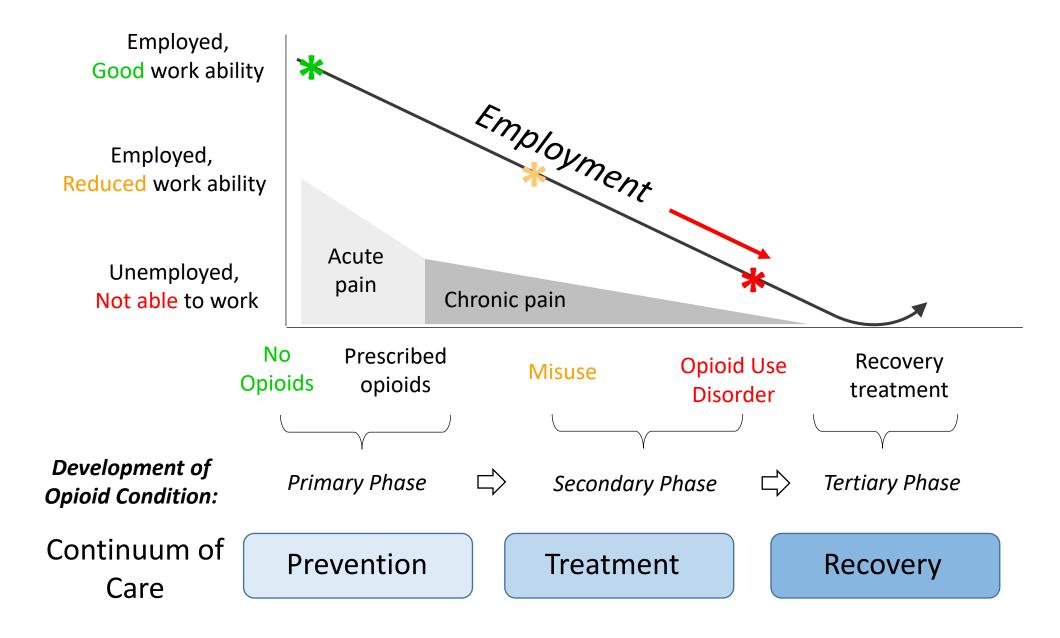
What did we find in worker health claims data (2015-2018)?

- Nearly half of workers had claims for a musculoskeletal condition (MSD)
- 75% of those with MSD claims were prescribed opioids ¹
- 25% of those prescribed opioids used them long-term ¹
- Those with long-term use of opioid prescription were 10 times more likely to develop an opioid use disorder ¹
- About 80 percent of people who use heroin, first misused prescription opioids.²

¹ Dale AM, Buckner-Petty S, Evanoff BA, Gage BF. Predictors of long-term opioid use and opioid use disorder among construction workers: Analysis of claims data. Am J Ind Med. 2021 Jan;64(1):48-57. doi: 10.1002/ajim.23202.

² Muhuri PK, Gfroerer JC, Davies MC. Associations of Nonmedical Pain Reliever Use and Initiation of Heroin Use in the United States. *CBHSQ Data Rev*. August 2013.

Cascade of Employment from Opioid Use Disorder



What did we do?

- Created a guidance document for construction organizations to promote prevention and management of opioid use
- Conducted a literature review, identified other employment guides on opioid prevention
- Interviewed subject matter experts:
 - Addiction specialist, primary care physicians
 - Insurance and PBM
 - Labor law attorneys
 - Employers and union stakeholders

Workplace Opioid Guidelines for Employer and Union in the Construction Trades

GOALS:

- 1. Prevent new cases of addiction
- 2. Treat those already prescribed or on longterm, high-dose opioid
- 3. Improve access to recovery services
- 4. Maintain/ regain employment

Workplace Guidelines to Prevent Opioid and Substance Abuse for the Construction Trades



This work was supported by National Institute on Drug Abuse grant R34 DAD50044-01.

Version 3.0: Workplace Opioid Prevention Program in Construction

Topics Addressed in the Guidelines



Employee Education



Supervisor Training



Written Substance **Use Policy**



Drug Testing Program



Medical, Behavioral, & Pharmacy Coverage



Created by Dude Design 5

Member/Employee Assistance Program

Legal Concerns:



safety & work accommodations

Policy and Program Activities Across the Continuum of Care

Essential	Elements
LSSCIILIAI	

Prevention

Treatment

Recovery

Build a Culture of Care	Leadership demonstrates commitment to worker well-being via communications, policies, programs, and education.		
Employee Education	Educate on opioid risks and non-opioid pain free options	Know signs of impairment and seeking help for self and encourage others	Learn non-stigma language for communication and use of naloxone
Supervisor Training	Educate on opioid risks and know safety sensitive tasks	Know signs of impairment, and how to talk to employees in need	Find appropriate accommodations to aid return to work
Written Substance Use Policy	Clearly state employee expectations on substance use	Policies include treatment for those with positive tests	Written return to work policies after substance use treatment
Drug Testing Program	Testing to deter employees from misusing alcohol and drugs	Refer positive tests to get help (MAP or counseling)	State activities and return to work contract for a second chance program
Healthcare and Pharmacy Coverage	Substance use (including opioids) and mental health screenings	Cover non-opioid pain treatments and opioid prescription limits	Cover medication for opioid use disorder and behavioral counseling
Member Assistance Program (MAP)	Train employees and supervisors about opioids and healthy behavior	Provide counseling and referral to services	Support employees during Critical Incident Response
Legal: safety and work accommodations	Provide safe and healthy working condition for all workers	Protect privacy of individual medical information (HIPAA)	Have reasonable accommodations for those in recover with limited ability

What do the Guidelines include?

A process guide to help organizations develop and implement a plan based on their unique needs

Off-the-Shelf Resources:

a list of freely available resources, trainings, and education.



How to get started?

STEP 1: Education for Prevention



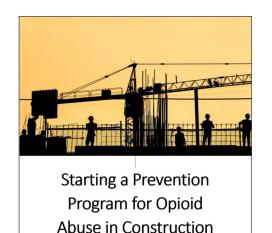
Educate Employees on Opioid Risks

Educate staff on how opioids affect health, job performance, workplace safety, workplace expectations, policies and prevention.

Question: Employee Education	Resource
Does your organization provide employees	<u>The</u>
training about opioid risks and how to get	Hartford:
help if they are struggling with opioids?	Shatter
The All Allertes the State of t	Proof
	Addiction

EDUCATE EMPLOYEES: HOW TO GET STARTED

Include opioid training as part of the new hire process, toolbox talks, or staff meetings. See the resource provided for educational materials.



Program Resources and Training

Employee Education

CPWR: Opioid Awareness Training Program (pg. 14)

Supervisor Training

NSC: Impairment Recognition and Response Training for Supervisors (pg.14)

Human Resources/Employers

Kentucky Comeback: Policy and Procedure Samples (pg.15)



Construction > Opioid Awareness Training Program

feedback on how to make it even more effective.

with opioid use.

Opioid Awareness Training Program

leading role in helping our industry respond through a wide range of resources

RESEARCH **NEWS & EVENTS** RESOURCES TO PREVENT OPIOID DEATHS IN CONSTRUCTION Home > Research > Research to Practice (r2p) > r2p Library > Handouts, Planning Tools & Training Programs > Mental Health & Addiction > Resources to Prevent Opioid D ← RESEARCH The latest addition to CPWR's resources for responding to opioids in construction is an updated training program, intended for use by experienced instructors, to increase awareness of opioids and decrease the stigma associated **Research Projects** Construction has been hit particularly hard by opioids — state-level studies have found that construction workers are **Data Center** six to seven times more likely to die of an opioid overdose than workers in other professions. CPWR is playing a Research to Practice The training program below was updated in the fall of 2021. A second module will be added later. We welcome your (r2p)

Search

Lista de recurs

Three challenging issues

- A. The culture stigmatizes those with an addiction
- B. Siloed worker support activities
- C. Difficult to create a Recovery Friendly Workplace

A. The role of stigma in substance use disorders

- **Stigma** is the shame or disgrace attached to something regarded as socially unacceptable, often excluding the individual.
- A belief that the person is making a choice to use and can stop if they want to.
- Sources of stigma: self (person), social, and structural
- Worker's won't seek help if they lack trust.



Build a compassionate, trusting environment

- Implement and integrate worker supports within the organization/system
 - Employee/Member Assistance Programs
 - Peer Recovery Specialists
 - Support groups (employee resource groups, NA, AA)
- Obtain and demonstrate leadership support

B. Siloed entities create siloed worker supports

- Multi-organization situations
 - Health and Welfare Fund/Union & Employer
 - General contractor/Subcontractors
- Siloed departments within a single organization
 - Human Resource, Safety, Supervisor, Operations

Multi-Organization Situation: Who is responsible?

Health and Welfare Fund/Union Employer -Build a Culture of Care -Supervisor Training -Medical, Behavioral & -Employee Education -Legal Concerns: **Pharmacy Coverage** -Written Substance Use Policy: Safety and Work -Member Assistance Collective Bargaining Agreement accommodations Program (MAP) -Drug Testing Program*

^{*}Drug testing requirements and responsibilities depend on collective bargaining agreement and State and Federal laws; certain industries and jobs involving safety sensitive tasks have specific drug testing mandates.

C. Challenges creating a Recovery Friendly Workplace

- Relapse is common
 - Recovery is challenging to sustain under any condition
- Need to counter all stigma (self, social, and structural)
 - Workers may need special considerations but don't want to be singled out
- Use of Medication Assisted Treatment may require accommodations
 - Suboxone and Buprenorphine may be inacurately viewed as 'replacement opioids'
 - Possible concerns for using MAT in safety sensitive work
- Concern for loss of income
 - Need to take additional leave
 - Outstanding bills from recovery treatment and personal bills

C. Challenges creating a Recovery Friendly Workplace

Purpose

- Increase chance of successful return to work
- Reduce risk of relapse

Policies

- Allow flexible work schedule to continue to receive treatment
- A return to work plan with manageable workload
- Provide ongoing social (access to Peer Recovery Specialists)
- Ongoing organizational support (EAP check ins, trained foreman)
- Organizational statement prohibits stigma and enforces the policy

"They know my struggle with addiction, and they've always been very supportive, like, hey, go to treatment. It's okay. Your job will be here."

Want more information?

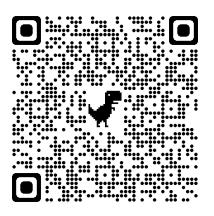
Contact information:

Ann Marie Dale:

amdale@wustl.edu







Workplace Guidelines to Prevent Opioid and Substance Abuse for the Construction Trades



This work was supported by National Institute on Drug Abuse grant R34 DA050044-01.

Version 3.0: Workplace Opioid Prevention Program in Construction

www.opioidsandconstruction.com