

National Opioid Crisis Management Congress

Addressing the Opioid Epidemic: A State's Perspective

Kody H. Kinsley

Secretary

North Carolina Department of Health and Human Services July 19, 2022

Agenda

- 1. Looking Back: Our Action Plan Since 2019
- 2. Shift due to COVID-19 Pandemic
- 3. Recovery Priorities

1. Opioid and Substance Use Action Plan



The Opioid and Substance Use Action Plan broadens its focus to include polysubstance use and centers equity and lived experience

1. Action Plan Progress

Community

200

Trained 300+ Community Partners to advance harm reduction strategies, and funded 31 local organizations to implement linkage to care strategies

Working With Providers

Provided waiver training to 1200 prescribers and worked with 29 residency and advanced practice programs to incorporate it into their curriculum. Trained 4000+ providers on clinical issues relating to the opioid epidemic including safe prescribing. Worked with 29 other states to improve and expand the controlled substance reporting system to allow health record queries.

Harm Prevention

250,000 Doses of Naloxone distributed since 2019, and 40 Syringe Services Programs serving 57 countries and one Federally recognized tribe

Access and Awareness

Launched multiple **public education** campaigns, and revamped the OAP dashboard to add local actions in monitoring OAP Progress. Over 21,000 people without insurance received treatment with federal funds.

Justice Involved

Funded **19 programs to connect justice-involved individuals to care**, including a technical assistance manager. Funding to four Jail-based medication assisted treatment programs Overdose deaths and emergency department visits had declined in 2018 and plateaued in 2019.

An average of 9 North Carolinians died each day from a drug overdose in 2020. That number is a 40% increase from the previous year.



Technical Notes: Medication and drug poisoning, all intents; Source: Deaths-N.C. State Center for Health Statistics, Vital Statistics, 2010-2020 Analysis by Injury Epidemiology and Surveillance Unit

2. What's Driving the 40%?

In North Carolina, as in the United States as whole, deaths due to **medication/drug overdoses** have been steadily increasing since 1999, and the vast majority (92%) of these are unintentional.



2. Prior and Current Initiatives



Invested **\$400,000 in naloxone** to provide to local government agencies, providers, and other community-based organizations.



Funded **15 mobile health clinics** that will assess clients and provide treatment, primary care and recovery support services in **hard-to-reach** areas.



Provided funding and support **to community-based organizations** to extend the reach of overdose prevention, harm reduction and substance use treatment.



Funded **trainings for professionals** working on initiatives like harm reduction, justice-involved linkages to care, and prescribing medications.



Monitoring **progress on data dashboard** that tracks state regional and county-level metrics and local actions.



In the first year, Hope4NCHelpline received over 9,000 total Calls with 10% referred for more intensive services.

3. Priorities

These priorities and our work across the department are grounded in **whole-person health**, driven by **equity**, and responsive to the lessons learned responding to the greatest health crisis in more than a generation.

Behavioral Health & Resilience



We need to offer services further upstream to build resiliency, invest in coordinated systems of care that **make mental health services easy to access** when and where they are needed and **reduce the stigma** around accessing these services.

Child & Family Wellbeing



We will work to ensure that North Carolina's children grow up safe, healthy and thriving in nurturing and resilient families and communities. Investing in families and children's healthy development builds more resilient families, better educational outcomes and, in the long term, a stronger society.

Strong & Inclusive Workforce



We will work to strengthen the workforce that supports early learning, health and wellness by delivering services to North Carolina. And we will take action to be an equitable workplace that lives its values and ensure that all people have the opportunity to be fully included members of their communities.

The health insurance coverage gap coupled with insufficient access to affordable care disproportionately impacts Historically Marginalized Populations who have also experienced worse outcomes than others under COVID-19. Medicaid expansion would help close the health insurance coverage gap.

An estimated 89% of people don't receive the substance use disorder treatment they need.



In North Carolina, the uninsurance rate is around 13%.

In 2020, **1 in 3 (33%)** emergency department visits for a medication/drug overdose was self -pay. As of May 2022, the number has increased to **38%**.



Disproportionate amount of ED visits for Med/Drug Overdoses are uninsured North Carolinians.

Expanding Medicaid would provide insurance to over 500,000 North Carolinians.

Serious mental illness affects an estimated **14.5% of men** and **31% of women** in jails.

60% reported symptoms of a mental disorder in the past year

68% have a history of misusing drugs, alcohol, or both

83% did not receive mental healthcare after admission **ΥΥΥΥ**

3. Justice-Involved Populations

Compared to other North Carolinians, within the first 2 weeks post incarceration, formerly incarcerated people are *40 times* more likely to die from an opioid overdose.

STRATEGY 1: Early Diversion/Alternatives to Incarceration

Goal: To reduce incarceration and increase access to mental health and substance use disorder treatment through promoting early diversion and alternatives to incarceration.

STRATEGY 2: Treatment During Incarceration

Goal: To close the treatment gap in incarcerated settings. Through treatment during incarceration, access to care is increased, equity in healthcare is addressed, and re-entry success is increased.

STRATEGY 3: Re-entry Services

Goal: To increase potential for productive re-entry into society and decrease likelihood of recidivism through providing linkages to care and needed recovery supports upon re-entry from jail/prison.

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STRATEGY 4: Invest in Behavioral Health Care and Justice System Reforms

Goal: To address potential system infrastructure/process issues to increase access to needed care and increase availability of services system-wide.

3. Justice Involved Populations

Crisis Intervention Team (CIT) Training



1,417 of non-law enforcement officers were trained to become CIT certified by the end of 2021.

1,254

kits

Naloxone

distributed

64% of all law enforcement officials trained in CIT

Progress of Combination Diversion and Re-entry Programs

65% of programs have met or exceeded target for serving marginalized communities.

100% of programs operational 13,016 contacts with existing and potential service users

Progress for Justice Populations

170

Individuals continued Medication Assisted Treatment post release

804

The number of individuals diverted to drug education programs.

500

Number of Justice Involved People who received treatment advice and overdose prevention information

120

People were referred to communitybased recovery services