



January 31, 2019

Rep. James L. Boles, Jr. and Rep. Red Davis, Jr.,

Re: City of Wilmington Interim Committee Report for Pilot Project To Treat Opiate Overdose

On behalf of the City of Wilmington and the Cape Fear Opioid Overdose Quick Response Team Committee please accept our interim report to the Joint Legislative Oversight Committee on Justice and Public Safety. We thank you for the opportunity to provide you with this interim report related to funding awarded by the North Carolina General Assembly to the City of Wilmington to implement a pilot project to treat opiate overdoses in our community.

Documents included in this report are as follow:

Cover Letter....Page 1

Original Scope of Work....Pages 2-4

Summary of Financial Report....Pages 5-9

Copies of Narratives Submitted to NC DPS....Pages 10-14

***Summary of work/progress based on five
criteria outlined in legislation....Pages 15-16***

We appreciate the recognition of the unique nature of the opioid crisis in our community and the confidence that has been placed in us by your committee and the North Carolina General Assembly. We stand ready to provide any additional information requested or present to any entity on our progress.

Tony McEwen

Assistant to the City Manager for Legislative and Intergovernmental Affairs
City of Wilmington

01/025/2019

Cape Fear Opiate Overdose Quick Response Team (CFOOQRT)

Report information for submittal to the North Carolina General Assembly

1) Introduction:

Like many places across the U.S., The City of Wilmington (C.O.W.) is trying to determine how to best address the opiate epidemic and stop the illicit use of prescription opioids and heroin. ***"Since January of 2017 there have been over 2500 successful opiate overdose reversals by our First Responders and self-reported community rescues. Too many of these individuals are not receiving follow up care, counseling or referral to treatment. The impact on health and, the potential for loss of life reflected in these statistics underscore the need to get users to turn to treatment rather than continuation of drug use."

**As published in the November 7, 2017 New Hanover County Opiate Use Data Analysis, compiled by the Community Partners Coalition.

2) Background:

According to the North Carolina Department of Health and Human Services Violence and Injury Prevention Branch; overdose rates have increased in the state by 400 percent over the past 15 years. Unfortunately New Hanover County, to include C.O.W., and the surrounding region has not been exempt from this increase in overdoses; with New Hanover County, including C.O.W., seeing a nearly 900 percent increase in this same timeframe.

Opioid fatalities in New Hanover County (NHC) nearly doubled from 2014 to 2015. In 2015 there were 45 confirmed opioid overdose fatalities. 94.9% of all heroin, fentanyl, and fentanyl analogue related deaths in North Carolina occurred within the county of residence of the person. In 2016 NHC had 37 heroin related deaths and 28 fentanyl related deaths, making it the 3rd and 4th leading county for heroin and fentanyl respectively.

In July of 2016, the South East Area Health Education (SEAHEC) Center and the Southeastern North Carolina Regional Health Collaborative began leading a community opioid harm reduction initiative. The initiative began with a community Call to Action where stakeholder leaders identified gaps in the care of those misusing opiates. This Call to Action led to the eventual formation of the Community Partners Coalition (CPC) which is comprised of numerous agencies, organizations, and community members aimed at improving collaboration between agencies who provide mental health and substance use services. A service shortage identified was that overdose victims were not receiving any sort of follow up treatment or counseling. It had to be self-initiated by the opiate user. A proposal to create a team similar to those in other States eventually led to a request, to the State of North Carolina for funds to create a Quick Response Team in Wilmington, N. C.

Reference N.C. Senate Appropriations Bill 257: Appropriations Act of 2017, Sec. 16.3A

3) Project Approach.

- a) A new program, in partnership with the C.O.W. and NHRMC-EMS; will implement a rapid response program intended to initiate follow up care and counseling after an individual experiences a survivable overdose from opiates with Naloxone administration.
- b) The program goal for the duration of this Pilot Program is to: measurably reduce the incidence of opiate overdoses in C.O.W. and NHC and; increase the number of overdose survivors entering Recovery and Treatment.
- c) This Request for Proposals is not intended to provide substance abuse treatment but instead to provide follow up outreach, linkages to treatment and support for individuals accessing recovery.

4) Scope of Services:

- a) The Cape Fear Opiate Overdose Quick Response Team (CFOOQRT) will consist of one (1) North Carolina Certified Peer Support Specialist (CPSS), specifically substance abuse and; one (1) Licensed Behavioral Health Specialist (LBHS). The team will utilize the services of a Medical Director or Psychiatrist on a part time basis. Additionally, the team will work in conjunction with the New Hanover Regional Medical Center-Emergency Medical Services Community Paramedics (NHRMC-EMSCP)
- b) After receiving survivor contact information from NHRMC-EMS (method of information transfer to be determined after contract award); CFOOQRT personnel will make contact with the identified opiate overdose survivor to counsel the survivor regarding treatment and harm reduction options. The goal is to make contacts with all survivors of opiate overdose within 5 days of their overdose reversal to determine the type of use (accidental prescription misuse vs prescription abuse or dependency vs illicit use and addiction), screen for repeat overdose risk, explore harm reduction goals, encourage them to enter drug treatment and/or adopt enhanced harm reduction actions to reduce risk of continued opioid use and overdose.
- c) Provide referral to supportive services to individuals and families for whom the Wilmington Police Dept. (WPD), Wilmington Fire Dept. (WFD) and/or New Hanover Regional Medical Center- Emergency Medical Services (NHRMC-EMS) have responded to an opiate related overdose call and the individual has survived the overdose.
- d) These efforts should include, but not be limited to; repeated visits, phone calls, text messages, and other ways of communicating and reinforcing the harm-reduction message and monitoring the user's engagement with treatment programs.
- e) The CFOOQRT program will provide follow-up harm reduction and recovery-oriented care and support to survivors of opioid overdose who agree to be contacted by CFOOQRT program personnel. Ongoing education, referral, and other assistance to support and motivate opioid overdose survivors to follow smart harm reduction drug and personal behavior activities and initiate or engage in evidence-based recovery-oriented care will continue after the initial visits. These follow-up contacts (consisting of phone calls and in-person visits) will be patient centered and utilize best practices.
- f) Additionally, a peer-support communications strategy will be developed to continue support, harm reduction messaging, and encouragement for treatment.
- g) CFOOQRT will also work with NC Harm Reduction for referrals.

h) The contractor must operate based on an agreed upon referral process that may be subject to change.

i) Any member of the Oversight Committee may participate in patient contact from time to time as an observer with the CFOOQRT as coordinated through the Program Manager and the Vendor.

5) Education and Outreach

a) As scheduling allows the CFOOQRT will also collaborate with community partners for outreach and education to the public, first responders and at risk populations as well as provide information to individuals and families regarding substance abuse, addiction, treatment, recovery and harm reduction.



List of Key Personnel and Contact Information:

Kenny House

Clinical Director
Coastal Horizon's Center
615 Shipyard Blvd.
Wilmington, NC 28412
910-343-0145
khouse@coastalhorizons.org

Jennifer Burns

Controller
Coastal Horizons Center
615 Shipyard Blvd.
Wilmington, NC 28412
(910) 790-0187 (p)
(910) 790-0189 (f)
jburns@coastalhorizons.org

Employees Assigned to the Opioid Pilot Program

Name	Position / Title	Rate of Pay / Per Hour
Kenny House	Clinical Director	\$ 60.48
Jennifer Burns	Controller	\$ 41.83
Elizabeth "Buffy" Taylor	Therapist	\$ 25.55
Christina Carter	Finance Assistant	\$ 17.31
Evan Park	Senior Finance Specialist	\$ 24.23
Pamela Morrison	Assistant Psych Director	\$ 38.32
Eline Ricci	Coordinator	\$ 26.44
Samantha Kiger	SAIOP Facilitator	\$ 20.91
Ebony James	Peer Support Specialist	\$ 14.42
Dierdre Parker	Peer Support Specialist	\$ 17.31
Montrel (Lacy) Miller	Assistant Coordinator	\$ 23.03
Clif (Harvey) Bridgers	Data Coordinator	\$ 17.33
Justin Losh	Peer Support Specialist	\$ 15.00

**** Update and resubmit as other individuals are added. ****

PERSONNEL:

Period Covered: 07/01/18 to 12/31/18

Licensed Clinician / Team Lead:

Employee Name	Position/Title	Hourly Rate	July 2018	Aug 2018	Sept 2018	Oct 2018	Nov 2018	Dec 2018	Total Fringe	Salary To Date	Total Salary / Fringe	Budget
Elizabeth "Buffy" Taylor	Therapist	25.55	590.74	393.22	353.36	449.64	606.44	638.83	3,032.23	12,634.48	15,666.71	68,750.00

Supervisory Staff:

Employee Name	Position/Title	Hourly Rate	July 2018	Aug 2018	Sept 2018	Oct 2018	Nov 2018	Dec 2018	Total Fringe	Salary To Date	Total Salary / Fringe	Budget
Pamela Morrison	Asst Psych Director	38.32	353.33	320.63	339.94	354.65	357.40	360.17	1,886.12	4,061.92	4,948.04	
Elaine Ricci	Coordinator	26.44	126.67	230.88	301.31	246.30	538.91	553.57	1,997.64	7,588.28	9,585.92	
Montrel (Lacy) Miller	Assistant Coordinator	23.03	372.68	267.85	181.20	-	-	-	821.73	3,742.38	4,564.11	
Samantha Kiger	SAOP Facilitator	20.91	146.82	186.89	254.17	341.49	434.21	453.12	1,816.70	11,082.30	12,899.00	
			799.50	806.25	876.62	742.44	1,130.52	1,166.86	5,522.19	26,474.88	31,997.07	50,425.00

1.5 Peer Support Specialists:

Employee Name	Position/Title	Hourly Rate	July 2018	Aug 2018	Sept 2018	Oct 2018	Nov 2018	Dec 2018	Total Fringe	Salary To Date	Total Salary / Fringe	Budget
Ebony James	Peer Support Spec	14.42	101.26	109.06	109.16	111.68	694.26	659.20	1,783.02	6,359.22	8,142.84	
Diondre Parker	Peer Support Spec	17.31	121.54	130.91	263.02	277.96	343.91	355.98	1,493.32	7,477.92	8,971.24	
Justin Losh	Peer Support Spec	15.00	-	-	154.83	232.34	236.69	230.27	854.13	9,200.00	10,054.13	
			222.80	239.97	527.01	621.98	1,274.86	1,244.45	4,131.07	23,037.14	27,168.21	67,500.00

Administrative Staff:

Employee Name	Position/Title	Hourly Rate	July 2018	Aug 2018	Sept 2018	Oct 2018	Nov 2018	Dec 2018	Total Fringe	Salary To Date	Total Salary / Fringe	Budget
Kenny House	Clinical Director	60.48	306.07	751.01	745.07	-	-	-	1,802.15	9,797.76	11,599.91	
Jennifer Burns	Controller	41.83	104.95	126.78	162.37	163.82	164.19	175.68	897.79	4,349.48	5,247.27	
Cliff (Harvey) Bridgers	Data Coordinator	17.33	181.74	83.36	105.12	-	-	-	370.22	1,473.05	1,843.27	
Christina Carter	Finance Assistant	17.31	23.94	25.79	56.98	57.58	88.19	92.94	345.42	1,799.89	2,145.31	
Evan Park	Senior Finance Specialist	24.23	98.07	59.14	79.75	80.59	101.47	127.26	546.28	2,519.44	3,065.72	
			714.77	1,046.08	1,149.29	301.99	353.85	395.88	3,961.86	19,999.62	23,961.48	18,525.00

Total Hours:

2,327.81	2,485.52	2,906.28	2,116.05	3,365.67	3,446.02	16,647.35	82,086.12	98,733.47	205,000.00
0.02	0.02	0.01	0.02	0.01	0.01	0.03	0.01	0.03	

If you want to give a breakdown on how much it is costing to pay for each "type" of position working on the project through the service provider.

Coastal Horizons Center
PERSONNEL ACTIVITY REPORT
Opioid Pilot Program
Project Code: 2108

Program / Activity	2018 July	2018 Aug	2018 Sept	2018 Oct	2018 Nov	2018 Dec	Total Hours
PSS Support Services	71.50	87.00	68.00	51.86	49.88	25.00	353.24
Staff Meeting	99.50	61.50	50.00	51.00	53.00	34.00	349.00
Marketing & Development	65.00	57.50	27.50	55.00	42.00	7.00	254.00
Case Discussions / Consultations	25.50	51.50	70.00	32.00	19.00	54.00	252.00
Outreach w/ Community Partner	19.00	67.50	52.00	35.00	38.00	37.00	248.50
Administration	44.85	52.83	46.86	12.00	13.00	54.86	224.40
Contact Survivor at OTS Facility	45.50	26.00	36.00	31.00	55.50	15.00	209.00
Data Entry	43.00	62.00	29.50	6.00	17.50	44.00	202.00
Reporting - Programmatic	30.50	14.00	17.00	106.00	26.50	6.00	200.00
Public Outreach / Education	11.50	29.50	79.50	19.00	12.00	42.50	194.00
Client Intake (PSS)	10.00	26.00	22.00	44.00	34.00	47.00	183.00
Training	61.00	31.00	15.50	20.00	13.00	30.00	170.50
Contact Survivor by Phone	21.00	6.00	20.00	51.00	45.50	9.00	152.50
Travel	0.00	12.00	21.00	50.00	29.00	15.00	127.00
Accounts Payable	15.41	15.40	15.40	18.00	16.00	15.40	95.61
Harm Reduction	0.00	10.00	19.00	38.00	15.00	8.50	90.50
Accounts Receivable	15.35	15.33	17.80	4.00	6.00	17.80	76.28
Outreach w/ NCHRC	26.50	11.50	10.00	3.00	7.00	10.00	68.00
Payroll	8.94	8.93	8.93	15.40	15.41	8.93	66.54
Reporting - Financial	3.00	8.00	8.00	17.80	17.81	6.00	60.61
Survivor Visit	0.00	11.50	14.00	8.93	8.94	8.00	51.37
TOTAL HOURS	617.05	664.99	647.99	668.99	534.04	494.99	3,628.05

Note: Outreach w/ NCHRC or Community Partner includes travel time.

EQUIPMENT:



Period Covered _____ #REF! _____ #REF! _____ #REF! _____

Serial Number	Item Purchased	Vendor	Cost of Item	Amount Submitted for Reimbursement
FK1WCVV1HFLR	Cell Phone - Clinician #1	Verizon	45.97	45.97
FFMWCGXLFLR	Cell Phone - Clinician #2	Verizon	45.97	45.97
Asset #FA2753	Tablet #1	Amazon	179.79	179.79
Asset #FA2754	Tablet #2	Amazon	179.79	179.79
Asset #FA2755	Tablet #3	Amazon	179.79	179.79
Asset #FA2756	Tablet #4	Amazon	179.79	179.79
Asset #FA2757	Tablet #5	Amazon	179.79	179.79
	5 Cases for Tablets	Amazon	84.95	84.95
	5 Keyboards for Tablets	Amazon	31.99	159.95
Asset #FA2740 S/N 9RTKKR2	Dell Computer 136947D3-2F8D-472C-817E-35F35A5929F4	Dell	781.05	781.05
	Office 365 - Online Services	Microsoft	382.16	36.00
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
			-	-
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			-	-
			-	-
Total Equipment Expenses Reported			→	\$ 2,052.84

** Attach Receipts, Invoices, etc. **

REQUEST FOR REIMBURSEMENT

Sub-recipient: Coastal Horizons Center

Dates of Expenditures in this Request: 07/01/18 to 12/31/18

Actuals:

	Approved Budget	July 2018	August 2018	September 2018	October 2018	November 2018	December 2018	Expensed To Date	Balance Remaining
EXPENDITURES									
Personnel Expenses									
Direct Labor	145,000.00	14,959.99	17,291.27	15,283.74	13,423.94	10,870.94	10,256.24	82,086.12	62,913.88
Fringe Benefits	60,000.00	2,328.00	2,485.50	2,906.27	2,116.04	3,365.65	3,446.01	16,647.47	43,352.53
Contracted Staff	10,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	1,000.00	6,000.00	4,000.00
Program Expenses									
Harm Reduction Material	12,500.00	0.00	1,075.84	941.00	196.12	154.69	152.44	2,520.09	9,979.91
Harm Reduction Outreach	12,500.00	0.00	5,260.84	0.00	137.50	76.25	0.00	5,474.59	7,025.41
Travel	10,000.00	0.00	0.00	302.05	819.90	1,185.07	0.00	2,307.02	7,692.98
Total:	\$250,000.00	\$18,287.99	\$27,113.45	\$20,433.06	\$17,693.50	\$16,652.60	\$14,854.69	\$115,035.29	\$134,964.71

Paid 10/14/2018 CK #350554
 Paid 10/25/2018 CK #351117
 Paid 11/1/2018 CK #351268
 Paid 12/20/2018 CK #352373
 Paid 1/24/2019 CK #353173
 Paid 1/24/2019 CK #353173

Cape Fear Opiate Overdose Quick Response Team
Narrative for quarterly reporting to N. C. Dept. of Public Safety
10/2016-12/2018
Compiled by: J. C. Bower, Program Manager

October 2016—Opioid Legislative Roundtable meeting hosted by Mayor Saffo that including area legislators and experts to begin discussing opioid community concerns and possible legislative remedies.

November 2016—Opioid Legislative Roundtable hosted by Mayor Saffo follow up meeting to more closely identify what are legislative goals to advocate for. Idea for Quick Response Team came from this meeting.

January 2017—Mayor Saffo convened meeting with law enforcement leadership, District Attorney, and area legislators to convey to them our desire to establish a Quick Response Team pilot project with the help of the state. Legislators were in agreement on the need and scope.

January 2017-March 2017-A team of law enforcement, hospital officials, and City/County staff met regularly to flesh out the scope, budget, and concept for a QRT in Wilmington.

April 2017—The product of our QRT team's work was shared with individual area legislators with a request to consider securing state budget resources to fund QRT pilot.

June 2017—Understanding that the QRT pilot was funded in both the Senate and House budget, and later the compromise final budget.

4th Quarter of 2017—Actively worked with NC Dept of Public Safety and NC Govs. Crime Commission for clarification of what agency will administer awarded funding. Ultimately, GCC transferred administration responsibility over to DPS per our request.

Feb. 5, 2018; Wilmington Fire Chief Buddy Martinette, Fire Captain John C. Bower and Asst. to the City Manager-Tony McEwen met informally during a City Council Agenda Briefing to discuss creation of a team to implement a Quick Response Team for Opiate Overdoses; now that Funds were available from a State Grant/Appropriation. Tony McEwen becomes Program Coordinator, John C. Bower becomes Program Manager.

Feb. 9, 2018; assembled team for creation of a Scope of Work and Proposed Budget for the QRT. Representatives from Wilmington Fire Dept., Wilmington Police Dept., City of Wilmington Finance, City Manager's Office, New Hanover Regional Medical Center Emergency Medical Services and Southeastern Area Health Education Center as well as an Admin. Asst. for the Fire Dept. as the Scribe were present. It is determined that this group will also serve as the ongoing Oversight Committee and Fatality Review Board for the duration of the Pilot.

Feb. 14, 2018; Meeting with Group for input for Draft Scope of Work.

Feb. 15, 2018; First Draft Scope of Work submitted, via E-mail, to Group for review and research.

Feb. 16, 2018; Meeting with Group to provide refinements to the Draft Scope of Work, create a proposed Budget and a time line.

Feb. 17, 2018; Second Draft Scope of Work and proposed Budget submitted, via E-mail, to group for review.

Feb. 19, 2018; Quick Response Team Scope of Work and Proposed Budget submitted to NCDPS for review.

Feb. 21, 2018; Meeting with group to share information on creation of a Request for Proposal (RFP) and a more refined Scope of Work (second edition/draft) for use in the RFP. Utilized comparative documents from Wake and Guilford Counties as well as the City of Wilmington, N. C. City of Wilmington Finance Representative informed the group that the Scope of Work and Proposed Budget had been accepted by NCDPS.

Feb. 23, 2018; Due to scheduling conflicts and illness, this meetings participants were City of Wilmington Finance, City of Wilmington Fire Department and the City of Wilmington/City Manager's Office. Research and discussion surrounding content requirements for an RFP, the need for and content of a Resolution for NCDPS Contract acceptance to be brought before Wilmington City Council. City Finance Representative provided information regarding Quarterly Reporting requirements and time lines to the Project Manager.

Feb. 28, 2018; Meeting by Oversight Committee to review Second Editon/Draft of RFP requirements to include, but not limited to:

Introduction, Background, Scope of Services, Evaluation Criteria, Project Approach and Schedule, Additional to Scope of Service, Project timeline for components of the project.

Need quality information for review, # of References – at least 3, # of Copies of the proposal: 8 plus one flash drive and Resumes of key staff.

Mar. 1, 2018; third draft of narrative for RFP is submitted, via E-mail, to the committee for review prior to publish of Final version.

Mar. 6, 2018; after review of third draft by committee, final wording and punctuation corrections made. Final Narrative information for RFP is submitted to the Committee, Purchasing and Finance. Place holder issued for City Council Agenda Briefing March 19th, Regular City Council Meeting March 20.

March 19, 2018; Resolution to accept Contract for Grant funds from NCDPS brought before City Council at Agenda Briefing.

April 03, 2018; Meeting of Oversight Committee to discuss and develop scoring matrix for vendor proposal evaluations. Review of Checklist of Minimum Requirements for Proposal submittals. Discussion and agreement on creation of a Charter for the Committee (Bower to develop draft). Discussion regarding the intent and authority of the Fatality Review Board (McEwen to clarify intent of legislation by contacting Bill sponsor and/or writer). Confirmation of issuance of RFP was also provided.

April 11, 2018; Meeting of Oversight Committee to review and correct first draft of Scoring Matrix for vendor proposal evaluations (Dimopoulos). Review and correct first draft of Committee Charter (Bower).

Report of findings regarding intent and authority of a fatality Review Board (McEwen). Acknowledgment that no questions regarding the RFP had been submitted by potential vendors, to date (Bower).

(Meeting Minutes are available from each meeting)

April 17, 2018; Corrections to Committee Charter completed by Bower.

April 30, 2018; Request for Proposals (Cape Fear Opiate Overdose Quick Response Team) closing date. Two proposals were received and copies provided to each member of the Oversight Committee for independent scoring prior to a group meeting to develop a consensus score.

May 9, 2018; Meeting of Oversight Committee to review and consensus score the two proposals received. Organizations reviewed: Leading Into New Communities (LINC) and Coastal Horizons. After review and consideration of the scoring matrix (originals held by C.O.W. Purchasing), it was determined that Coastal Horizons was the vendor to be recommended. Bower to coordinate with the recommended vendor to conduct an interview. Tentative date of May 16, 2018; 10 AM – 12 PM, 305 Chestnut St. Each member of the Committee was asked to submit their own questions for the vendor to Bower.

May 13, 2018; Bower compiles all questions submitted by Members of the Oversight Committee into one document and assigns each member of the Committee to ask questions in a rotating fashion. The questions were not published or distributed until the day of the meeting, handed out to each Member as they arrived.

May 16, 2018; Meeting of the Full Oversight Committee to interview the prospective vendor. 10 AM – 12 PM, 305 Chestnut St. 5th Floor Conference Room.

May 17, 2018; Bower notifies Coastal Horizons that they have been selected as the vendor to be recommended to Wilmington City Council for approval.

May 21, 2018; Bower and Dimopoulos met with Coastal Horizons COO and CFO to discuss documents needed to be submitted with their formal acceptance of the offer and, confirm reporting requirements.

June 4, 2018; Acceptance of offer and supporting documentation received from Coastal Horizons.

June 8-18, 2018; Contract creation, review and acceptance by C.O.W. Legal/Purchasing/Coastal Horizons.

June 19, 2018; Ordinance/Resolution to accept/award a Contract to Coastal Horizons for implementation of the Cape Fear Opiate Overdose Quick Response Team goes before Wilmington City Council and passes unanimously.

June 20, 2018; Contract routed for signatures within the City of Wilmington, proposed award date of July 2, 2018.

June 28, 2018; Contracts approved/signed and submitted to all parties. Ahead of projected award date.

July 02, 2018; Coastal Horizons begins interviewing and hiring personnel for the Cape Fear Opiate Overdose Quick Response Team. Program Logistics and Training are put into place as well as identifying initial areas for Public Outreach.

August 01, 2018; Cape Fear Opiate Overdose Quick Response Team is in place and working.

August 03, 2018; Public announcement and Press release at Wilmington, N. C. City Hall. Representatives from N.C. Senate and House of Representatives, Wilmington City Council, New Hanover County Commissioners, New Hanover County Sheriff's Dept., Wilmington Police Dept. and Coastal Horizons were on hand for the Public roll out. The Implementation and Oversight Committee for the Program were also on hand. Chuck Bower, Program Manager for the CFOOQRT spoke with Rep. Ted Davis briefly about the possibility of expanding the program to include ANY type of overdose, at some point in the future.

August 13, 2018; The first meeting to review progress of program to date (July). Kenny House and Buffy Taylor from Coastal Horizons provided information and answered questions from the committee. Discussion on hiring, training and financial reporting. It was reported that the Team had been successful in getting one patient/client into treatment thus far.

August 13, 2018; Deputy Chief Mitch Cunningham of the Wilmington Police Department and Kenny House from Coastal Horizons; were interviewed by WECT TV-6 as part of a locally produced program to increase awareness of resources in the Community for those suffering from addiction.

September 11, 2018; Program Report from Coastal Horizons submitted via E-mail for review by Committee prior to meeting on September 14th.

September 14, 2018; Scheduled meeting of the full Committee, to review reports submitted by Coastal Horizons: Cancelled due to Hurricane Florence. Rescheduled until September 24th. Due to lingering effects of the Hurricane, Chuck Bower made the call to wait until the scheduled meeting on October 15th to review August and September reports.

October 11, 2018; Received August and September Program reports from Coastal Horizons for review of Committee prior to October 15 meeting.

October 15, 2018; Meeting of the full Committee and members of Coastal Horizons staff to review submitted reports.

October 31, 2018; After Kathy Dimopoulos' review of financial reports submitted by Coastal Horizons; a special meeting of Oversight Committee was called. During this meeting, budget over runs, projected over runs and work performed outside of the Scope of Work were reviewed and discussed. A series of questions were compiled and submitted to Coastal Horizons for clarification. Clarification provided directly to Kathy Dimopoulos.

November 9, 2019; Received October Program reports from Coastal Horizons; for review by the Committee prior to the November 14 meeting.

November 14, 2018; Meeting of the full Committee and members of Coastal Horizons staff to review submitted reports. After discussion, questions and answers; a revised report was requested.

November 15, 2018; Revised report for November was received from Coastal Horizons.

December 2018; No scheduled meeting

Quick Response Team – 6 month report – January 2019

Background & Purpose

The Quick Response Team (QRT) for New Hanover County was launched in July 2018 after almost two years of study and planning this particular strategy to address the opioid epidemic in our community. QRT is modeled after national best practices as seen in Ohio and West Virginia. Creating the team for QRT, which is comprised mainly of two Peer Support Specialists and two Therapists from Coastal Horizons, along with other supporting staff and community partners, a model for our community took shape to reach overdose survivors in New Hanover County. This team reaches out to those who have survived overdose, are at risk of overdose, or have been affected by their loved one's substance use & overdose - and helps connect them to treatment and other needed community resources.

There were five (5) main objectives with the implementation of the QRT:

(1) Increase engagement and treatment with family counseling and recovery groups.

From July thru December 2018, the QRT has come in contact with 66 overdose survivors, and of those, engaged 53 into treatment. The QRT has been able to reach not only the survivors, but also their family members, and at times engage both to access needed treatment services. The overwhelming majority of those engaged into treatment are receiving Medication Assisted Therapy (MAT), and many are participating in an intensive outpatient program as well.

(2) Provide follow-up care to survivable overdose incidents with police or medics and licensed counselors.

QRT has been partnering locally with the Community Paramedics of NHRMC (hospital), homeless shelters, the North Carolina Harm Reduction Coalition, NHRMC – Emergency Department, family members, other First Responders and the faith-based community to help bring in people affected by opioid addiction.

QRT regularly gave out information for treatment options, resources, and available services to overdose survivors. The types of treatment have varied, ranging from detox, long term and short-term inpatient treatment, outpatient counseling services, Medicated Assisted Treatment/Therapy (MAT), Intensive Outpatient Treatment, primary care and psychiatric services. For those who were “not ready” to seek help yet, QRT continued to follow-up with “check-in contacts”, providing information as needed for community resources and supplying Naloxone (“Narcan”) for safety.

(3) Provide short-term and long-term support to overdose victims and families.

With the 53 admissions for treatment, eight (8) of those involved couples – showing the impact this can have on and service benefits for families as well. Where one person decided to seek treatment after an overdose, the other person decided when they met QRT staff that they were ready for treatment at the same time. QRT has also helped those who have been affected by their loved one's drug use. QRT met a woman who witnessed her partner overdose, called 911, and watched her partner revived with Narcan by EMS. She sought counseling services to address that traumatic experience. She remains in counseling and is learning skills to take care of herself and healthy ways to support her partner's recovery.

Once connected to treatment, QRT staff continued to follow up with and track survivors by phone calls, private meetings in the community, and linking to transportation and recovery resources.

Recovery resources has included short-term and long-term treatment, housing, primary care, psychiatric services and self-help/12-step groups. QRT made 215 additional contacts - averaging 3 times per overdose survivor before they engaged in services. On 80 occasions, QRT reached out to community partners to collaborate services in need of treatment connections. The team has passed out over 400 flyers advertising the service in places such as: stores, fast food restaurants and gas station restrooms, local doctor's offices, and pain management agencies.

By November and December 2018, QRT was seeing that more friends and family members of loved ones were referring themselves to QRT. In one instance over the holidays, QRT assisted one family in connecting their loved one to a 4-month long treatment facility. In another situation, QRT met with an overdose survivor at the hospital, assisted them with navigating to inpatient treatment. QRT tracked the person while they were inpatient, and they recently were discharged from there to enter into outpatient treatment at Coastal Horizons.

(4) Provide follow-up within three to five days after an initial incident.

Once contacted about an overdose survivor by either a community partner or family member, the QRT begins contact with the individual to try to build rapport and offer services. Time is of the essence when someone has decided they are ready for treatment, and QRT has met the survivors 100% of the time within the expected 3-5 day window after they have survived an overdose. QRT will meet the person in a comfortable setting such as their home or a place of their choosing, which has helped to build rapport.

(5) Create a fatality review panel to analyze and keep track of the deaths of those served by QRT.

QRT has created a data server to assist them in tracking survivors – including a way to track subsequent (or repeat) overdoses since engagement with QRT as well as subsequent overdose deaths. During this first report period, one (1) QRT participant who was reached in August overdosed at the end of November and did not survive. This individual was enrolled in treatment at the time of the overdose death.

Summary

Through community collaboration and outreach, QRT has successfully responded as one key effective strategy to reduce repeat overdoses. With continued effort & support from the QRT, key partners and the community, we will see continued success here in New Hanover County.

Report submitted by Kenny House, VP of Clinical Services for Coastal Horizons