

Cumberland County

Public Health Department

C-FORT Minutes October 2024

Agenda Item 1. Introductions

Attendees

Sanquis Graham, CCDPH
Greg Berry, CCDPH/NCHRC
Tamra Morris, CCDPH
Lisa Blandin, SR-AHEC
Louis Leake, CTC Fayetteville
Mitzi Averette, Care Clinic
Barbara A. White, Mid Carolina Regional Council
John Russell, Butterfly efx
Ilana Sheppard, Marius Maximus
Charlton Roberson, NCHRC
Jasmine Harris, SR-AHEC
Orlando Smith, CCDPH
Lisa Jayne, Cumberland County
Selena Wilkins, CCDPH
Ana C. Jaramillo-Adams
Amy Jordan
Angela Hebel
Ainsley Johnson
Casey Perry, Camp Rockfish
De'Ara Anderson
Demetris West
Elijah Bazemore
Heather Skeens
Heather Sroka
Jennifer Green
Jermaine Russell
Leah Rhone
Lynette McMillan
Melanie David

Melissa G	-
Monica Washington	
Martina Sconiers- Talbert	
Sheena Butler	
Subrena Guy	
Tatum Evans	
Tracy Honeycutt, Mid-Carolina AAA	

- Review minutes and make suggestions.
- No suggestions to revisions
- No opposition to minutes from previous meeting

2. Opioid Data and Opioid Settlement Updates

Louis Leeke, Review of Overdose Data, ED Visits Data, Fentanyl Report

- Injury prevention is two months behind
- \circ Year over year, 126 170, same time last year
- Over the last 3 months, overdose rates are lower
- Same age range between 20-54, 25-44 is still the group being affected the most
- Numbers had to be corrected from last time, numbers were higher
- ED visits were at 445 in 2023, currently we are at 332 in 2024
- Numbers are the very close/same between black and white populations
- Fentanyl positive deaths 44 2024 vs 58 Jan June 2023
- NC as a whole, the opioid overdose ED visits are drastically down from this time last year, inclusivity as a harm reduction practice
- Cumberland county changed, following up on why that is (ED visits)
- Areas of concern to keep eyes on even with numbers lower than last year

Orlando Smith, BJA Funds Housing Data

- Final report for these funds: 129 total funding requests
- Partner: oxford house, 10
- These funds are used to help someone in transition housing for a month (or up to 2)
- Usually for those coming from prison or inpatient care, helps prevents homelessness for those that are looking for house
- Funding started august 2022, ended sept 2024, had to cease taking in more requests two weeks ahead of (sept 17, 24)
- 6 requests for a second month
- 123 requests for one month
- \circ 75% of residents are still there, in houses

Tara Tucker, Cape Fear Valley CP

- Sept had first patient celebrate 1 year of sobriety
- 140 active patients
- 3 Narcan trainings
- Nov 9, 10am 168 dedication drive FD is doing an outreach for the unhoused
- still have 3 openings
- Protocol induction, pharmacy supply needs to be checked on because we do not keep enough for people to get their Rx filled
- Taking clothing donations to be dropped off at any time

Casey Perry, Camp Rockfish Camp and Retreat

- Jess Horvath, filling in
- Working on getting a Cumberland County location set up
- Looking forward to a family event

Louis Leeke, CTC Opioid Settlement

- Carolina Treatment Center
- Ended Q3 for the fund grant,
- Housing, transportation, reentry services
- Numbers are unique individuals for each
- Transportation number is always the highest, spent nearly 11K just in transit for people who need it
- Helps increase the retention rate of treatment
- Reentry services for those leaving prison/detention centers but also those who have prior history of arrest
- $\circ~$ Food security for those that want to remain unhoused, gift cards to Walmart, food pantry and MREs
- Nutritionist is available to go shopping with people who need help to get the best food they can on their budget
- Recovery support homeless supplies, issuing a tent, blanket, sleeping bags, etc.
- Medical costs not just for the doctor or an Rx, but costs for buying would care kits
- Connectivity issuing phones for people or sustaining the phone service
- Education PSS 1 person who attained a job, another person who is enrolled in a paramedic course

Courtney McCollum, CCJS Opioid Settlement

• Justice services: No update today

Heather Sroka, Healing from Within

- 15 individuals in the MAT program in the detention center, 15 for community resources and referrals for outside services, mental health services, partnering with CTC, etc
- To keep up with therapy sessions

Barbara White, Mid-Carolina Regional Council

- \circ Got approval to use grant on 10/1, goal of program towards caregivers impacted
- Providing early intervention
- Had first PS training, 13 participants
- Out of all, all verified as kinship caregiver
- Working on partnership in Dunn

Amanda, Myrover Reece Opioid Settlement

- Wrapping up Q3 numbers
- This quarter has been much busier
- Opioid listed has increased
- Rebranding
- Main goals are within 72 hours of intake, residents are enrolled in mental health services
- Process for referrals and intake: if approved, should be done within a day
- MOU with the Fayetteville care resource center
- More details next meeting

Charlton Roberson, NCHRC Opioid Settlement

- This quarter, 3 strategies
- Recovery support services- syringe exchange services, 228 unique individuals
- Criminal justice
- 255 linkages (add more here)
- 1400 Narcan distributed
- Xylazine and fentanyl test strips
- \circ 265 205 positive fentanyl
- 80200 syringes given out, 12000 given back want to improve this number
- 75 wound care kits given out
- Criminal justice diversion
- 20 active participants
- Get 2 contacts a month
- Only one diversion this month
- 6 social contact referrals
- Hope to ramp up numbers of assessments to get them into an actual leave program
- Reentry activities
- Over 12 referrals from the detention center
- Overdose prevention post release
- Early intervention going to juvenile detention center, provided 5 trainings, serving 38 unique individuals over those courses
- Group homes have contacted them to do trainings (prevention)
- RRC will have these trainings as well
- School staff received overdose prevention trainings

Regina Williams, Administrator Recovery Resource Center

• Finished renovations, carpets are getting cleaned

- Staff will be on site Thursday to get prepared for next week
- Mock walkthroughs on Monday and Wednesday
- Ribbon cutting on the 28th at 11am
- Services starting the 29th
- Youth smart recovery is scheduled for that day
- Youth cut off age: 13-19, high school age, will assess as we go to see what works based on ages
- Classes how are they being advertised?
- Palm cards are being made
- Smart recovery website needs to include the schedule on their site
- We have people assigned to each class that is on the schedule
- Hours of operation, M-W, F 8-5, Th 10-7
- Contact Regina Williams for services that are being provided
- Women's meeting will not be advertised as a "smart recovery" class

3. Opioid Settlement Town Hall Feedback 20 min, Dr. Green and Sanquis Graham

Dr. Green, Director CCDPH

- Summary of feedback
- Settlement dollars MOA
- 31.5 million dollars over 18 years
- Making suggestions for the next chunk, not all 31 million/18 years
- Survey open until the 31st
- Primary strategy was recovery housing, ranked as top for funding
- Full report of data will be provided after survey information is collected
- State metrics: overdose deaths, overdose ed visits, illicit drug overdose, prescription opioids
- Would like to keep tracking these metrics
- Recommendations made:
- Making sure we are doing high impact "Option A strategies"
- Continuing to use multi sector partnerships
- Leverage funding to implement a coordinated response to the opioid epidemic
- Funds do not include the perdue settlement
- Funding:
- 2022-2038 31.6 million
- Previously approved: 2.097 million
- New funding recommendations: 7.7 million
- First is about collaborative strategic planning (option a, strategy 1)
- o 500,000, 100K/year
- Travel to required statewide
- Prevention education (option b)
- New strategy being recommended
- \circ 450K, beginning in 2027
- Pairs with SAMHSA grant
- Continue prevention education in middle and high schools at ARP funds conclude
- Public health education and PSS

- Community based projects to align with "Option A strategies"
- \circ 4 million
- 4 years of funding
- Up to 800K per project
- RFP process in 2025, implementation in 2026-29
- Require joint applications between providers and community-based orgs
- Service delivery at RRC
- Early intervention, evidence-based treatment programs to support people in treatment and recovery
- Recovery housing support
- 500K
- Relaunch the program, short term housing for people in treatment or recovery
- Oxford house, rental, utility assistance
- We usually spend 50K a year
- Naloxone distribution
- 500K
- Pickup points and comm distribution
- Aligns with federally funded trainings projects
- Recovery Resource Center (option a, strategy X)
- 800K, 3 staff positions, uber health, supplies and materials
- Ongoing support for family drug treatment court (option a, strategy X)
- 400K
- Court coordinator
- Ongoing support for medication for opioid use disorder program at Cumberland County detention center
- 500K
- PSS
- Supported by jail health provider
- Total: 9.8mil
- 8 funding recommendations
- Money comes in a payment schedule
- pay you upfront for a lot of this
- State gives us our money and then payments come overtime once a year
- Anything not spent rolls over
- Agencies that we fund, they are funded on reimbursement each month
- Partnerships are established
- RFPs to be released timeline is TBD, 2025
- Current projects end in oct 2026 so hope to align with that cycle
- Option a are short list of 12 strategies
- Option b must be approved by the state, collaborative process
- Based the dollar amount is based on what is spent so far, and projected costs for the future based on current spending (recovery housing)
- Early intervention vs prevention education:
- Mass education in schools is "prevention education"

4. Opioid Remediation Research/Evaluation Grant Update

Dr. Luo Shanhong, Fayetteville State University

- Measuring the impact of Xylazine
- 200K grant awarded to support FSU & CCPHD, money from the state
- Encourage collaborations
- Looking at xylazine in the opioid process
- Trying to understand how it affects drug users, do a survey of people who use drugs and with health professionals to understand xylazine and the affects, treatments, etc.
- Get drug samples, ask users to donate samples to see if the street drug has xylazine in it or not
- Aiming for 900 drug users, 300 health professionals, going to pay for time and effort
- \$20 (gift cards) for drug samples
- \$40 for health care professionals
- Whole project will take place in 2025
- Heavily relying on CFORT to recruit for samples, etc.
- Collaborating with CFORT
- Incentivized Surveys and testing

5. Perinatal Taskforce

Tamra Morris, Deputy Director CCDPH

- Healthy Start/CCP accepting Referrals
- Nutritionist on site that can help and provide lessons

6. Next Steps & Announcements

- Recovery Resource Center opens for service on October 29, 2024
- Recovery Recourse Center request for scheduling and materials
- Any other announcements?
- Amy Jordan The living room is officially open
- Referrals are not needed, send folks to retreat and will be moved if they need further care
- RI MOUD induction component: Solidifying training for the team and making sure providers are ready

Meeting Adjourned

Next meeting: Tuesday, November 19, 2024, 10 am-11:30 pm