Partners working to Address North Carolina's Overdose Problem

Compiled by the Unintentional Poisoning Team of

the North Carolina Injury and Violence Prevention State Advisory Council

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Carolinas Poison Center

The Carolinas Poison Center is designated as the official state poison center for North Carolina. We are a not-for-profit telephone resource center of poisoning information, staffed 24-hours-a-day, seven-days-a-week by registered nurses (Specialists in Poison Information) who are uniquely trained to provide diagnostic and treatment advice for acute and chronic poisonings to the public and healthcare providers. Board-certified medical toxicologists and pharmacists provide backup for the Specialists and are also available for consultations on a 24 hour basis. There is no charge for caller services.

The Carolinas Poison Center not only treats patients who have been exposed to poisons but is also a resource on poison information for healthcare providers, educators, parents and others.

For poisoning emergencies or questions call 1-800-222-1222.

For more information go to www.ncpoisoncenter.org/

Chronic Pain Initiative/Community Care of North Carolina

Community Care of North Carolina (CCNC) works through public-private partnerships to bring together regional networks of physicians, nurses, pharmacists, hospitals, health departments, social service agencies and other community organizations. CCNC offers a private sector Medicaid management solution that improves access and quality of care as healthcare professionals work together to provide cooperative, coordinated care through the Medical Home model. This approach matches each patient with a primary care physician who leads a health care team that addresses the patient's health needs.

The Chronic Pain Initiative (CPI) is a recently started program of CCNC. The CPI seeks to address these challenges through a broad partnership that includes CCNC, the North Carolina Hospital Association, local hospitals and emergency departments, local health departments, primary care doctors, faith-based programs and law enforcement. CCNC is providing financial support and tapping into CCNC's local networks – professionals who are expert in local conditions and resources for treatment.

To assist partners in the Chronic Pain Initiative, CCNC has developed a series of toolkits aimed at providing information and resources to key players in chronic pain treatment: care managers, emergency room physicians and primary care providers. Kits are being distributed to Pain Initiative Coordinators in each of CCNC's 14 local networks. These documents can also be downloaded in PDF form via the links at www.communitycarenc.org/population-management/chronic-pain-project/

The Governor's Institute on Substance Abuse

The Governor's Institute (GI) is dedicated to prevention, identification and treatment of substance abuse. Headquartered in Raleigh, it reaches across the state to educate, assist and prepare primary and behavioral healthcare providers to address the profound problem of substance abuse.

The GI connects researchers with healthcare professionals to promote evidence-based practices – interventions that have been proven effective. It does this through educational conferences, technical support and workforce development programs. GI promotes SBIRT (Screening, Brief Intervention, and Referral to Treatment), as its primary means to identify and intervene with patients who use alcohol or drugs in a manner that puts them at increased risk for injury, medical complications and dependence, has been a major focus area.. The Institute has also implemented the "Use as Directed Campaign" (www.pillscankill.org) as well as developed trainings for clinicians on chronic pain and the safe use of opioid analgesics. Its clinician trainings are one of the core components of the Chronic Pain Initiative being implemented through CCNC. They co-sponsor a website on Substance Abuse Resources for Health Care Professionals (www.sa4docs.org/) along with a website on SBIRT (www.sbirtnc.org/).

For more information go to www.governorsinstitute.org

North Carolina Controlled Substances Reporting System (CSRS)

This reporting system was established by state statute to improve the ability to identify people who abuse and misuse prescription drugs classified as Schedule II-V controlled substances. It is also meant to assist clinicians in identifying and referring for treatment patients misusing controlled substances. The N.C. Commission for Mental Health and the N.C. Division of Mental Health, Developmental Disabilities and Substance Abuse Services provide rulemaking and day-to-day management of the program.

Information submitted through this reporting system is privileged, confidential and not considered a public record. Information may only be released under certain circumstances and to people authorized to receive the information. People authorized to get information from the system include:

- Practitioners and dispensers of controlled substances for the purpose of providing medical care for their patients.
- Special Agents of the North Carolina State Bureau of Investigation who are assigned to the Diversion and Environmental Crimes Unit.
- Assigned special agents of the primary monitoring authorities for other states.
- A court through a lawful court order in a criminal action.
- The Division of Medical Assistance (DMA).
- Certain licensing boards.
- Medical Examiners for the purpose of investigating the death of an individual.

For more information go to www.ncdhhs.gov/MHDDSAS/controlledsubstance/

North Carolina Injury and Violence Prevention Branch (IVPB): Epidemiology and Surveillance Unit

IVPB maintains statewide injury-related surveillance through several ongoing and regularly collected data systems that monitor the incidence of and risk factors for fatal and nonfatal injury, and provides this information to North Carolina's injury prevention community. Injury surveillance data provide the epidemiologic foundation for injury intervention strategies for North Carolina's Strategic Injury Prevention Plan as well as make programs more data driven and effective. Specifically related to unintentional poisonings, IVPB works to provide both general and enhanced surveillance, and facilitates and coordinates the State Advisory Council (SAC) Poisoning Goal Team.

For surveillance data: www.injuryfreenc.ncdhhs.gov/DataSurveillance/DataSurveillanceIndex.htm

For unintentional poisoning information: www.injuryfreenc.ncdhhs.gov/About/poisoning.htm

Or contact Scott Proescholdbell, Injury Epidemiology, (scott.proescholdbell@dhhs.nc.gov) at 919-707-5442

Operation Medicine Cabinet and Operation Medicine Drop

Operation Medicine Cabinet is a collaborative effort of law enforcement, health and safety, substance abuse prevention, environmental organizations and various community groups that works to facilitate events and to assist in developing statewide policies for the proper disposal of unused and expired medications.

Operation Medicine Drop is a partnership between Safe Kids North Carolina, the Riverkeepers of North Carolina, Community Anti-Drug Coalitions of North Carolina and local law enforcement agencies to encourage the public to safely dispose of unused and unwanted medication by providing safe and secure ways for people to get rid of unwanted prescription and over-the-counter medications. This helps prevent accidental poisonings and drug abuse while protecting our waters.

For more information go to www.omd-nc.org and www.ncdoi.com/OSFM/SafeKids/sk OperationMedicineDrop.asp

For questions about Operation Medicine Drop administration or downloadable materials, contact Lisa Blackmon at 1-888-347-3737.

Project Lazarus

Project Lazarus believes that communities are ultimately responsible for their own health and that every drug overdose is preventable. Project Lazarus is a secular, non-profit organization that provides technical assistance to community groups and clinicians throughout North Carolina and beyond. Using experience, data and compassion, it empower communities and individuals to prevent drug overdoses and meet the needs of those living with chronic pain. Project Lazarus enables overdose prevention by providing technical assistance to create and maintain community coalitions, help them create locally tailored drug overdose prevention programs and connect them to state and national resources. Project Lazarus is centrally involved in supporting the community aspects of the CCNC Chronic Pain Initiative.

For more information go to www.projectlazarus.org/about-project-lazarus

State Bureau of Investigations, Diversion and Environmental Crimes Unit

The SBI conducts criminal investigations of allegations in areas of original jurisdiction: narcotics, arson, election law violations, theft or damage of state property, environmental crimes, and child sexual abuse in day care centers. It also provides assistance to local law enforcement agencies in areas of criminal investigation, fingerprint identification and criminal laboratory services.

The Diversion and Environmental Crimes Unit investigates diversion of drugs by licensed healthcare professionals and others involved in the healthcare field. The unit also investigates large scale or multi-jurisdictional prescription fraud cases.

For more information go to www.ncdoj.gov/getdoc/250ddb66-abb9-48cb-a5a8-0f84bd8411ed/Diversion-and-Environmental-Crimes.aspx

UNC Injury Prevention Research Center

The University of North Carolina Injury Prevention Research Center (UNC IPRC) is one of 11 "Centers of Excellence" funded by the National Center for Injury Prevention and Control, Centers for Disease Control and Prevention. The Center's mission is to build the field of injury prevention and control through a combination of interdisciplinary scholarly approaches to research, intervention and evaluation as well as through the training of the next generation of researchers and practitioners.

Since 2010, IPRC has been focusing its research expertise in the area of prescription drug overdose. By the end of 2012, center researchers had received seven awards to conduct studies in this area. Funders have included the Robert Wood Johnson Foundation, the Centers for Disease Control and Prevention, the Kate B. Reynolds Trust, the National Institutes of Justice, and the North Carolina Department of Health and Human Services. IPRC was one of the agencies selected to provide an evaluation of the CCNC Chronic Pain Initiative.

For more information go to www.iprc.unc.edu/index.shtml