NC Harm Reduction Coalition Monthly Updates

February 2019
Overview & Notes

• These data reflect information collected by or reported to the North Carolina Harm Reduction Coalition and are not representative of the entire state of North Carolina

• If you are aware of additional information please contact the Injury and Violence Prevention Branch at substanceusedata@dhhs.nc.gov
Kits and Community Reversals
Naloxone Kits Distributed by the North Carolina Harm Reduction Coalition, 8/1/2013-02/28/2019

105,663 kits distributed*

*287 kits distributed in an unknown location in North Carolina and 65 kits distributed to individuals living in states outside of North Carolina; includes 9,329 kits distributed to Law Enforcement Agencies and 2,073 kits distributed on the Cherokee Reservation.

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Opioid Overdose Reversals with Naloxone Reported to the North Carolina Harm Reduction Coalition, 8/1/2013-2/28/2019

13,439 community reversals reported

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Opioid Overdose Reversals with Naloxone Reported to the North Carolina Harm Reduction Coalition, 8/1/2013-2/28/2019

13,439 community reversals reported*

*40 reversals in an unknown location in North Carolina, 176 reversals reported on the Cherokee Reservation, and 290 reversals using NCHRC kits in other states reported to NCHRC

Source: North Carolina Harm Reduction Coalition (NCHRC) Analysis by Injury Epidemiology and Surveillance Unit
Percent of Opioid Overdose Reversals* with 1, 2, or 3+ doses of Naloxone Administered, 2019 Year to Date

*Percentage based on reversals with known dosage amount. Use caution when interpreting this data as a large percentage of each months’ reversals had unknown dosage amounts.

Source: North Carolina Harm Reduction Coalition (NCHRC)  
Analysis by Injury Epidemiology and Surveillance Unit
Percent of Opioid Overdose Reversals* with 1, 2, or 3+ doses of Naloxone Administered, 10/1/2016-2/28/2019

*Percentage based on reversals with known dosage amount. Percentages may not total to 100 due to rounding. Use caution when interpreting this data as a large percentage of each months’ reversals had unknown dosage amounts.

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Fentanyl Testing

These slides reflect only the fentanyl test strip results that are *reported* to the North Carolina Harm Reduction Coalition.

Participants are asked to report completed test results on a voluntary basis. Fentanyl testing procedures and the likelihood of false positives vary by the type of drug being tested.
Statewide Fentanyl Positive Test Strips by Year, 9/1/2017-2/28/2019

*Percent positive of those with a known result; total N does not reflect the total number of test strips distributed, but the total number of known test results.

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Fentanyl Test Strips Distributed by Test Site, 2019 YTD

Test Site and Percent with a Known Result*

*Percent with a known result (positive or negative); N is the total number of test strips distributed at each site; YTD Year to Date

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Fentanyl Positive Test Strips by Test Site, 2019 YTD

<table>
<thead>
<tr>
<th>Test Site</th>
<th>N</th>
<th>Percent of tests positive for fentanyl*</th>
</tr>
</thead>
<tbody>
<tr>
<td>Durham</td>
<td>16</td>
<td>47%</td>
</tr>
<tr>
<td>Raleigh</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Steady FTS</td>
<td>17</td>
<td>81%</td>
</tr>
<tr>
<td>Vance</td>
<td>0</td>
<td>0%</td>
</tr>
<tr>
<td>Wilmington</td>
<td>0</td>
<td>0%</td>
</tr>
</tbody>
</table>

Tests with a known result

*Percent positive of those with a known result; total N does not reflect the total number of test strips distributed at site, but the total number of known test results; YTD Year to Date

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Law Enforcement
Total Number of NC Law Enforcement Agencies Carrying Naloxone, 1/1/2015-2/28/2019

- **255** LE Agencies Carrying Naloxone
- **115** LE Agencies reporting reversals

### Data by Year

- **2014:** 3
- **2015:** 45
- **2016:** 136
- **2017:** 193
- **2018:** 252
- **2019:** 255

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Counties with Law Enforcement Carrying Naloxone*
as of February 28, 2019

*As reported by the NC Harm Reduction Coalition.
For the full list of known Law Enforcement Agencies carrying naloxone visit:

255 Law Enforcement Agencies covering 90 counties

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Opioid Overdose Reversals with Naloxone Reported by NC Law Enforcement Agencies, 1/1/2015-2/28/2019

1,786 total reversals reported by Law Enforcement*

*20 reversals with an unknown date included in total. Reversals are based on date report is received, which may not reflect the date the reversal occurred.

Source: North Carolina Harm Reduction Coalition (NCHRC)
Analysis by Injury Epidemiology and Surveillance Unit
Opioid Overdose Reversals with Naloxone Reported by NC Law Enforcement Agencies*, 1/1/2015-2/28/2019

1,786 Law Enforcement reversals reported


Source: North Carolina Harm Reduction Coalition (NCHRC)  
Analysis by Injury Epidemiology and Surveillance Unit
Currently there are 30 active* SEPs covering 40 counties in NC

*There may be SEPs operating that are not represented on this map; in order to be counted as an active SEP, paperwork must be submitted to the NC Division of Public Health.

Source: North Carolina Division of Public Health, Analysis: Injury Epidemiology and Surveillance Unit
Counties with Fair Chance Hiring Ordinances*

as of February 28, 2019

6 counties and 6 municipalities with
Fair Chance Hiring Ordinances

*Fair Chance Hiring policies, also known as Ban the Box, delay questions regarding a criminal record history until the applicant has first had a chance to show their qualifications and explain their criminal history to the employer.

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Counties with EMS Naloxone Take Home Programs for IDUs*
as of February 28, 2019

26 active Emergency Medical Services (EMS) Naloxone Take Home Programs†

*Naloxone Take Home Programs provide naloxone to Injection Drug Users (IDUs) who refuse transport to the hospital after an overdose.
†1 program covering the Eastern Band of Cherokee Indians Tribe

Source: The North Carolina Office of EMS (NC OEMS) and North Carolina Harm Reduction Coalition Analysis: Injury Epidemiology and Surveillance Unit
Counties with Law Enforcement Assisted Diversion (LEAD)*
as of February 28, 2019

*LEAD is a pre-booking diversion program that allows Law Enforcement Officers to redirect low-level offenders engaged in drug or sex work activity to community-based programs and services, instead of jail and prosecution.

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Counties with Post Overdose Response Programs* as of February 28, 2019

15 active Post Overdose Response Programs

*The Post Overdose Response Programs (or Rapid Response Teams) offer support, recovery resources and links to substance use disorder treatment options, overdose prevention education, naloxone, case management, and referrals to syringe exchange programs.

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit
Counts with First Responder Syringe Exchange Programs as of February 28, 2019

*First Responder Syringe Exchange Programs (SEPs) are operated by Fire and/or EMS and provide naloxone, recovery resources, syringes, and sterile injection supplies to those who need these services.

Source: North Carolina Harm Reduction Coalition
Analysis: Injury Epidemiology and Surveillance Unit