The Opioid Crisis
One Community Fights Back

The opioid epidemic facing our country, state, and local neighborhoods is proving to be an extraordinary opponent, but the community stakeholders in New Hanover County and the City of Wilmington are rising to the call and fighting back.

RHA has had the opportunity over the past several months to participate in a multitude of initiatives to combat this health crisis and we are honored to work alongside a host of others dedicated to serving. Projects such as the LEAD project, the Quick Response Team pilot, medication drop off sites, and community forums are designed to make a difference in the lives of those affected by opiate misuse.

Whether it is first responders, city or county officials, educators, or behavioral health providers, everyone comes to the table as an equal partner possessing knowledge, expertise, and compassion with a common goal of making a difference.

Leaders in this effort include professionals and citizens who have looked past artificial boundaries and are banding together around several strategies aimed at creating a healthier, more informed community. SEAHEC is leading the charge with increasing awareness and educating the public through pulling people from all layers of community groups.

“Since Wilmington was named #1 in the nation for opioid abuse, I’ve often said, I’m so sad we’re here, but I’m so glad we’re here. I’m sad, that my home, that is usually recognized for our beautiful beaches, our historic Riverwalk, and the amazing people who live and work here is instead being recognized for this epidemic. But I’m glad we’re here because it is through that recognition that the right people are coming together, making real changes that will save lives, build a stronger region, and make our community a better place.”

- Olivia Herndon Director Continuing Education- Operations/Outreach Director
Anecdotes and statistics agree, Wilmington is suffering an epidemic of opioid drug use. What remains unclear and what this series hopes to clarify are fundamental questions about the epidemic.

The epidemic does not have one single narrative but, instead, intertwining threads. Street heroin has a different, but related, story to prescription drugs. Likewise, there is not a stereotypical opioid user. Rather, users come from varied backgrounds. To this complicated mix of people and drugs is added the different relationships among law enforcement, health care, and treatment and recovery.

This is not to say there are no answers, only that there are no easy answers. This series will present those intertwining threads of the epidemic in an effort to help area residents to better engage with the crisis going on around them, to understand its origins, and to better understand the current state of affairs and what can be done about it.

By Benjamin Schachtman

Part I – The epidemic, by the numbers
(Excerpted)

An epidemic is, by definition, a crisis defined by facts and figures, a story told in numbers. And there is one number that paints in sharp relief the opioid crisis in this area: in New Hanover County there was only one recorded death from heroin overdose in 1999.

Things have changed.

But if it is difficult to understand the crisis solely in terms of these numbers, it is impossible to understand it without them. For that reason, Port City Daily’s month-long series on opioids starts with the numbers.

It’s no secret that drug fatalities statewide have increased, often lumped together under the umbrella category of ‘opioids.’ In these reports, opioids refers to everything from naturally occurring opium to derivatives, like prescription oxycodone and illicit heroin, to lab-made synthetics, some of which are more powerful than morphine.

Between 1999 and 2014, opioid fatalities in New Hanover County grew from one to 24. Then, in only a year, the rate ballooned, nearly doubling to 45. These overdoses did not result only from heroin; they came increasingly from prescription opiates and synthetic painkillers. In fact, prescription medication killed more than twice as many people as heroin in 2015. In North Carolina, 738 were killed by prescription medication, some of it stolen.

By Benjamin Schachtman

The Ultimate Goal is for People to Move Toward Recovery.

The ultimate goal is for people to move toward recovery. In this effort, providers have also moved beyond competition for business and are partnering to provide easier access to services. “Kenny House, LCAS and Clinical Director with Coastal Horizons shares, ‘We focus on the prevention of and treatment for opioid dependence, so our services must be accessible and able to reach and respond to the need that is out there.’ Coastal Horizons and RHA are working hand in hand to build capacity and develop treatment opportunities.

The Quick Response Team Pilot project (QRT), is a project led by the City of Wilmington and their Legislative Affairs Director Tony McEwen. It is modeled after a program in Colerain, Ohio, which is reporting early positive results and targets those accessing treatment after experiencing an overdose. A medical, legal, and treatment partnership response is focused on successfully linking people with on-going treatment rather than providing medical crisis stabilization alone, incarceration, institutionalization, or hospitalization. Much of the support comes in the form of eliminating barriers to treatment such as transportation, linking to medical treatment, quick access to services, and follow-up.

Because of the efforts of SEAHEC, Wilmington Police Department, the New Hanover County Sheriffs department, Coastal Horizons, RHA Health Services Behavioral Health, and many, many others, Wilmington and the larger New Hanover County are hoping to implement a similar program. Currently, a proposal has been submitted to request funding from the state. Early signs are positive for successful passing of this bill. Regardless of that specific outcome, the future is hopeful as a community movement has gained momentum in Wilmington and New Hanover County. This on-going movement can only lead to success in decreasing the adverse outcomes of the opioid crisis and the creation of an even stronger and healthier community.

“I am just continually surprised at how much notoriety the Quick Response Team Pilot Project is getting across the state.” - Tony McEwen, Legislative Affairs Director, City of Wilmington
We are pleased to announce the Brittne was pinned on May 4, 2017, and graduated with her BSN on May 6. We could not be more proud of all that she has accomplished.

Brittne began working as the office LPN in the Nashville unit in July, 2014. We knew right away, she was going to be an amazing asset to RHA. The following survey, we had zero findings in the nursing department thanks to Brittne’s hard work and determination.

In March, 2016, the Nashville unit assumed services for another agency. This transition will go down in the history books as one of the most difficult transitions ever. There were many issues with records we obtained from the previous agency across all domains. Brittne worked tirelessly to piece what information we did have together so she could begin building records, get people caught up on appointments, correct medication issues, work with the RN to complete delegation training, all while training the new nurse we hired during the transition. While we were all frustrated, Brittne never appeared to be discouraged.

After the transition, it became very clear that a regional administrator would no longer meet the needs of the unit, therefore, we began searching for an administrator. We watched Brittne work with difficult families, challenging individuals, and at times, challenging staff. She handled each situation with grace. It became very obvious to us, we had our administrator. Through several discussions, and maybe even a little gentle persuasion, Brittne agreed to give it a try. She assumed the role of unit administrator in August, 2016.

It should also be mentioned, Brittne is a wife, and a softball mom to a very smart and talented 10 year old daughter. Brittne, you are a wonderful example of hard work paying off. Congratulations on your graduation, and we are so happy to have you on our team!
**Denise Redfearn named Chief Information Officer**

Asheville, NC

Denise Redfearn is RHA’s new Chief Information Officer. Denise has worked with RHA over the past 14 years as a consultant on various technology projects, and knows RHA’s business and culture well.

In Denise Redfearn’s own words, “I’ve worked in healthcare information technology during most of my career, except for my years at Tandy Corporation in Ft Worth. During this time, I’ve worked with acute care hospitals, long-term care nursing homes and assisted living, home health care, private nursing, community care, and of course mental health IDD and behavioral healthcare.

Over the years, I’ve experienced compliance and regulatory changes to Medicare and state Medicaid programs in 24 states and worked with both US and Canadian based companies on healthcare information policies and clinical quality measures.

I’ve been a member of the North Carolina Providers Council, serving as session speaker at several conferences, hosting technology seminars and events, and advocating for improvements in data and technology on state and MCO systems committees.

I have been very fortunate to work with RHA for many years and get to know all the wonderful people that make up the RHA family. In my new role at RHA, I hope to provide the vision and leadership for developing enterprise IT initiatives in support of RHA’s strategic business development and growth opportunities.”

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**Sam Hedrick Retires**

Sandra K Hedrick, known to all as “Sam”, has decided to retire from RHA Health Services. Sam has been with the company for 14 years in various executive roles, including President of RHA Howell. She is a legendary force in the health care field, but has always seen her role simply as an advocate for people with intellectual and developmental disabilities and behavioral health and substance use challenges.

While at RHA, Sam was the recipient of the Steve Jordan Lighthouse Award at the 2016 NC Providers Council Conference, was named the 2016 Champion of Equality and Justice by Disability Rights NC, received the Triangle Business Journal’s Healthcare Hero Executive Award, was a member of the Emerging Issues Panel hosted by Governor Jim Hunt, and served on the Board of Directors at ANCOR. Sam was also a graduate of the University of Delaware’s Leadership Institute.

Jeanne Duncan, President, RHA Health Services says, “Sam’s contributions to RHA are very much appreciated. She worked to develop innovative programs that have enriched the lives of the people we serve. She is highly respected in the field and will be missed by all. We wish her well as she moves into the next phase of her life.”

Sam does not know what the next chapter will be but with her background as an RN, JD, public defender, publisher, and advocate for clean water in underdeveloped countries, her opportunities are endless! In fact, she has already accepted the honorary position of chairperson for a gala event hosted by Ellis Family Law in Durham, which will be held for the benefit of Meals on Wheels. The event has pledged to raise $25,000 for this very worthy cause and will be held on February 24th, 2018 at 21c Hotel and Art Gallery located in downtown Durham.

Sam is also taking some time to reflect and enjoy her Japanese garden and to spend time with her family and husband Bob Hedrick, before moving forward. She treasures the life-long friendships she has made over the years at RHA and the joy of trying to make a difference in the lives of so many.
The SHORE Program Team

Dr. Catherine McCall
Psychiatrist
Heather Hughes
Team Lead
Aimee Fowler
Nurse
Susan Shafer
Clinician
Demetria Gaines
Supported Employment
Steffany Murray Block
Peer Support Specialist Lead
Jessee Phillips
Peer Support Specialist

SHORE Program
Reaching Out to Families

Supporting Hope Opportunities Recovery and Empowerment (SHORE) is a first-episode psychosis treatment program based at the RHA Covil location in Wilmington NC. The Shore Team publishes a monthly newsletter for family members of people active in the program. A FaceBook page has also been set up strictly for parents and is a closed group administered by two parent volunteers.

An excerpt of an article written by one of our SHORE parents accounting this family’s experience. The goal of the newsletter and the FaceBook page is to help parents to relate, comfort, and inspire in some way.

“No One Knows What To Say”

No one knows what to say. After all, what do you say when someone tells you that your 21 year old son is psychotic and in a psychiatric hospital? People feel bad, but they don’t know how to help. I don’t know what I need; all I know is that my heart is heavy and my eyes are full of tears. I am so sad. Did I miss something when he was young? Could we have done something differently to prevent him from ending up this way as an adult?

For more information contact: Susan Shafer sshafer@rhanet.org

Senior Night Speech By A Remarkable Young Man

Excerpt from Tai McLear’s Graduation

“Ladies and gentlemen, it is my honor to be here tonight on behalf of the Class of 2017. I thank the faculty for giving me the easiest transition to this amazing school as well as my fellow classmates for including me in everything from the very first day.

When I was three years old, I was diagnosed with a genetic disease called Spinal Muscular Atrophy, more commonly known as SMA. SMA involves the loss of nerve cells called motor neurons in the spinal cord and is classified as a motor neuron disease. When I first understood what I had, I felt depressed knowing that I would not be able to do some of the things that my friends can do. But then I realized that I can make a difference in this world by proving to others that anything is possible if you set your mind to it. I live by a quote that Jim Valvano once said which is “don’t give up. Don’t ever give up.”

I am a National Honor Society student with much to look forward to in life. I will continue my education in the fall at Coastal Carolina University pursuing a degree in sports management. My dream job is to become an owner of a professional baseball team. My goal in life is to become an inspiration for many with disabilities.

With that said, I hope that I have been able to inspire each and every one of you in some way. I would like to thank my classmates, teachers, Mrs. Williams for giving me the opportunity to share my story with you all tonight, but most importantly my family for helping me get to where I am today.”

Tai McLear
Tai has been in the Community Alternative Program for Children (CAP-C) since 2014. His Case Manager, Casey Robinson, will be attending his graduation ceremony on June 24th!

Tai and Casey

Wheels For Tai

Tai’s family is desperately in need of a new or used wheelchair van to take him to his Doctors appointments. If you are interested in helping please visit www.gofundme.com/2c7zagk or call his Grandmother Francine at 919-322-2098.
The RHA Behavioral Health Spruce Pine program began participating in the Whole Person Care Learning Collaborative: Moving our organization ahead in Integrated Care in October of 2016. The Collaborative was presented through VAYA health and MAHEC. We just submitted our finished project this past week and it summarizes the steps we have taken in moving forward toward Integrated Care in our offices. Our goal in beginning the project was to increase effective communication between Primary Care Physicians and RHA in order to meet our client’s holistic needs.

RHA completed a practice review using the Maine Health Access Foundation’s assessment tool (MeHAF) for our Mitchell County site. The MeHAF helped us better understand opportunities for growth in developing our Integrative Care model. Based on MeHAF recommendations, the project team identified three steps to help facilitate communication between Primary Care Physicians and RHA:

1) Identify a healthcare screening tool to share with local Primary Care Physicians (PCPs).
2) Implement tool and train staff in the utilization of the new healthcare screening.
3) Collect feedback from participating Primary Care Physicians.

We achieved our goal for each PDSA cycle and learned that streamlined, consistent communication improves quality of care. Staff became more aware of medical and psychiatric co-morbidity and clients began to enter into a dialogue on holistic self-care with behavioral health providers. The project posters were displayed at the “2017 Transforming Care Conference: Advancing the New Culture of Healthcare” at MAHEC on June 1 and June 2nd.

For more information about this project contact: Debbie Sprinkle at 828-649-9174 or debbie.sprinkle@rhanet.org

Passageways PSR members visit Fox 8

Passageways has been very active this past quarter. They enjoyed getting the opportunity to learn new things as well as explore their community.

We recently visited the Fox 8 News Station in Greensboro NC and several members were treated to a tour! They learned how news and weather reports are really structured and provided to the community. They also got a little taste of being a weather anchor!

For more information on our Passageways program contact: Carlo Black carlo.black@rhanet.org or 336-242-2403

What is a PSR?

Psychosocial Rehabilitation (PSR) is designed to help adults with behavioral health challenges increase their ability to live independently minimizing their need for ongoing professional intervention. We help people set and pursue their own personal goals and implement steps to better manage their illness and their everyday lives. Enhanced skills and increased feelings of a positive self image, help adults with behavioral health needs maintain dignity, respect and a sense of pride that helps them become active and productive members of the community. Success in the real world comes, in part, from knowing how to manage responsibilities and learning how to make the right choices.
Paying it Forward

Today, Melissa Blackmon works on fundraising initiatives for Donate Life NC. They encourage all North Carolinians to become organ, eye and tissue donors. Organ donors can save the lives of 8 people, tissue donors can help improve the lives of over 75 people. Right here in North Carolina over 1500 people are waiting for an organ!

To become an organ donor you can sign up at your local DMV, at any of our fundraising events or online at www.donatelifenc.org

Every time someone signs up to be an organ donor after hearing Sophie’s story, it gives a purpose to our journey.

-Melissa Blackmon

Grab your superhero cape and join us for the third annual Donate Life NC Hero Run, March 24, 2018 at the Portofino neighborhood in Clayton, NC!

For more information on organ donation or how you can help support our cause, please contact me at mblackmon@donatelifenc.org

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