

Robeson County Impact Report Narratives for Fiscal Year 2023-2024

Each local government that receives opioid settlement funds is asked to share an Annual Settlement Update describing how they have made use of settlement funds during each fiscal year. For each strategy funded, local governments also share additional narratives to describe their progress and successes (success information is optional for some local governments). Across all funded strategies, each local government selects one progress narrative and one success narrative to spotlight each fiscal year.

Robeson County provided the following narrative information for Fiscal Year 2023-2024 (July 2023 through June 2024):

Annual Settlement Update

In the 2023-2024 fiscal year, Robeson County made significant strides in our opioid relief efforts. Recovery support services expanded rapidly, driven by a county investment of over \$300,000 to support multiple agencies and initiatives. The work of our recovery support teams, medication-assisted treatment providers, and large-scale naloxone distributions has played a crucial role in reducing opioid overdose rates over the past year.

One of our proudest accomplishments has been fostering collaboration. Robeson County has now partnered with the Robeson Rural Communities Opioid Response (RRCOR) consortium and the Southeastern Prevention & Addiction Recovery Center (SPARC) to develop a forward-thinking strategic plan for opioid mitigation efforts. This year, SPARC created a questionnaire designed to assess both community and professional perspectives on opioid mitigation needs. Using RRCOR's mass distribution platform, we will collect valuable data to inform the County's decisions on funded strategies.

We are seeing a shift from siloed efforts to a more unified, collective approach. By integrating platforms for collaboration, organizations are working together more effectively than ever before. While there is still progress to be made, momentum is building and positive change is taking root. The spirit of partnership continues to strengthen, bringing real hope for the future.

Strategy Spotlights

❖ Exhibit A, Strategy 2: Evidence-Based Addiction Treatment

Progress Narrative

The funded strategies for Breeches Buoy Addiction Medicine Service were Evidence-Based Treatment and Recovery Support Services. Breeches Buoy Addiction Medicine Service provides inpatient addiction medicine services for patients suffering from substance use disorder/opioid use disorder that come to the hospital at UNC Health Southeastern. Over the past year, Breeches Buoy Addiction Medicine service has assisted 72 individuals suffering from opioid use disorder attain inpatient residential treatment for their opioid use. Breeches Buoy has assisted 112 individuals suffering from opioid use disorder attain outpatient treatment for their opioid use. 72 of Breeches Buoy Addiction Medicine Service patients were assisted with receiving MAT services. The reported opioid overdose ED visits to date this year are 48. This time last year the number was 65. Also, every patient seen by

Breeches Buoy, whether they declined services or accepted, was given a prescription for naloxone. Evidence-based treatment in the hospital has reduced the number of return patients, we are seeing a decreased number of overdoses in the emergency room, and MAT is being implemented for those suffering with opioid use disorder who may not have previously been able to obtain service or their medication. Recovery efforts have been supported in that every patient seen is given the opportunity for treatment services in the form of inpatient, outpatient, MAT, community services, and harm reduction. Patients who declined addiction medicine services are given a naloxone prescription as well as the information for Breeches Buoy Addiction Medicine Service so they can contact the agency should they change their mind. Over 30 patients who previously declined called back to reach out for help. Breeches Buoy Addiction Medicine Service assists every patient that is seen and is also planting the seed recovery is possible and available.

❖ **Exhibit A, Strategy 2: Evidence-Based Addiction Treatment**

Success Narrative

“I began seeing Breeches Buoy Addiction Medicine Service when I went to the emergency room for my opiate use disorder. At the time, I did not think I needed inpatient treatment for my opioid use disorder, but I wanted to start MAT and outpatient services. Breeches Buoy Addiction Medicine assisted with a buprenorphine induction and outpatient treatment. I learned that my disease was too far progressed for outpatient treatment. I came back to the hospital once again for Breeches Buoy Addiction Medicine to help me. Not only did they assist with my medication, but they found me long-term inpatient treatment for my opioid use disorder where I could also continue MAT. Finding treatment had been hard for me before because I did not have money or the kind of insurance you need to go to a lot of places. I have been in a 12-month program now for over 6 months. I am healthy, happy, thriving, and most importantly clean. Breeches Buoy Addiction Medicine still follows me every week via telehealth. I can call peer support anytime I need encouragement or someone to give me extra support. The staff have not abandoned me on my recovery journey like so many people have. I finally look forward to the future and see that I am more than an addict. I did not think I would ever be able to get clean and live clean but because of the staff at Breeches Buoy Addiction Medicine, I know I can because I am doing it. I still have 6 months left in my program and the future looks bright finally. I know that I will have their support during my 12 months and long after. Thank you, Breeches Buoy Addiction Medicine, for guiding me to recovery and helping me get my life back.”

Progress and Success Narratives for All Funded Strategies

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❖ Exhibit A, Strategy 3: Recovery Support Services

Progress Narrative

As the Care Navigator Nurse with Robeson County Jail Health Services, I interact directly with those individuals suffering with opioid use disorder. I begin my assessment by building rapport with the incoming detainees that are identified with opioid use disorder upon entering facility. I encourage detainees to use the health care services and professional support systems we offer. I also collaborate with the jail health treatment team which currently includes a Licensed Clinical Addiction Specialist/ Recovery Coach and community-based peer support specialists that come on-site. The recovery team works together with the detainee to provide assessments and referrals upon release into community care treatment. In the past year, the jail health treatment team has worked together to identify over 250 detainees with opioid use disorder. We provided over 70 referrals for both in-patient and out-patient treatment services after release from custody. Individuals who will be detained longer term or more than 90 days, receive services for harm reduction and group counseling on substance use disorder recovery strategies. We anticipate expanding our services to include continued medications for opioid use disorder with a MAT provider and more on-site community-based peer support services. The rewarding part of my job has been the high number of detainees showing interest in participating in

the program; and the feedback from several of those released that have entered treatment programs and maintained sobriety.

Success Narrative

Numerous participants suffering from opioid use disorder and substance use disorder have benefited from the services funded through this initiative. In particular, one individual has been impacted by all programmatic funding and stands out as a success during this reporting period. This individual was enrolled into our Recovery Care Coordination program while they were an inmate at the Robeson County Detention Center. During the intake process, the case manager observed the participant was eligible for the local recovery courts. They were successfully referred to and enrolled in adult treatment court, where they facilitated the participant's enrollment into a residential treatment center in Charlotte. Upon returning home, the participant reached out to our case manager for additional support via contact information provided to them in their exit kit. Our case manager assigned the participant a peer support specialist, who helped facilitate their enrollment into a local residential treatment facility, and subsequently into a local Oxford House. The peer support specialist also supported the participant in removing their ankle monitor due to compliance with this court sanctioned punishment. The peer support specialist also helped the participant attain full time employment through a local business. Today, this individual continues to maintain their recovery, is highly engaged with the peer support specialist, regularly attends our talking circles and is eligible to receive all the contingency management funding. This success represents how the opioid settlement funding has allowed us to develop a system of care, where several high-risk individuals are provided additional support, redirected out of the criminal justice system, and are now productive members of the community.

❖ Exhibit A, Strategy 5: Employment-related Services

Progress Narrative

Southeast Area Transit System (SEATS) has been utilizing opioid settlement funds to enhance our employment services, specifically aimed at supporting individuals in recovery. Our initiatives focus on providing transportation to both employment opportunities and recovery/treatment centers. We have successfully transported a total of 128 individuals to job interviews and employment locations, facilitating their transition back into the workforce and we provide regular transport to recovery centers, ensuring that clients can attend essential treatment sessions without transportation barriers

Success Narrative

One of our riders faced significant challenges due to his opioid use disorder. After enrolling in a local recovery program, he struggled with transportation to both treatment sessions and job interviews. This barrier kept him from accessing vital resources and employment opportunities. Thanks to Southeast Area Transit System (SEATS) and opioid settlement funds, he now has reliable transportation to his treatment center, ensuring he attended every session. In addition, he was able to travel to several job interviews, which he previously could not have accessed. He continues to maintain his recovery and is also providing for his family.

❖ Exhibit A, Strategy 8: Post-Overdose Response Team

Progress Narrative

The post-overdose response team is in the early planning phases of our program, funded by opioid settlement funds. Despite facing challenges with high employee turnover, we are committed to developing a robust response system to support individuals affected by overdose. High turnover rates

among team members have hindered our ability to finalize program details and strategies. We are actively addressing this issue by focusing on team stability and recruitment. Despite these challenges, we have successfully distributed over 500 naloxone kits to local community organizations and first responders, ensuring immediate access to lifesaving measures in overdose situations. We are working to implement measures to improve team retention and cohesion, including training and support initiatives.

Success Narrative

The EMS team continues to provide naloxone to reduce overdose rates and save lives. EMTs responded to an overdose call where they administered naloxone to a 28-year-old male who had lost consciousness. Thanks to the quick response and access to naloxone, the individual was revived and stabilized before being transported to the hospital. The EMS team reported that this successful intervention not only saved a life but also highlighted the importance of naloxone availability in the community.