

## NAPCRG 52nd Annual Meeting — Abstracts of Completed Research 2024.

**Submission Id:** 6545

**Title**

*A Comprehensive Approach to the Opioid Crisis in Caldwell County, North Carolina*

**Priority 1 (Research Category)**

Social determinants and vulnerable populations

**Presenters**

Edward Bujold, FAAFP, Chief Physician Strategist for KPN Health

**Abstract**

County governments are struggling to manage the opioid crisis. County budgets are strained as a result. It cost, on average, \$800 every time a County EMS truck responds to a 911 call in the United States. In one week, EMS personnel may respond to a 911 call six times at the same address in a one week period. The homeless population has tripled with over half of this population suffering from untreated drug addiction and mental health issues. Caldwell County is getting \$800,000 per year from the Purdue Drug Settlement for the next 15 years but our county manager states it will take ten times that much money to address this crisis appropriately.

Any opportunity to resolve this crisis will take a global initiative involving multiple stakeholders. The author and his many stake holders have created a multi-pronged approach to address the crisis. We invited all of the people who are touched by the opioid crisis (addicts, family members of addicts, the faith based community, law enforcement, public health officials, county commissioners, EMS personnel, physicians, hospital representatives, the legal community, etc.) to a three day workshop and also invited an expert on community based opioid treatment programs to moderate the program. In addition, we partnered with the Eschelman School of Pharmacy at the University of North Carolina to create a data base (named GOLDIE) which is HIPPA compliant and I Phone and I Pad compatible to monitor the number of addicts we have in the county so we could track their progress. The data base also taps into the county's resources to determine the social determinants of health the addict may need to recover. An Ad Hoc Overdose Response program was created taking a Peer Support Specialist (a recovered addict) to 911 overdose calls to bring the lived experience of the Peer Support Specialist to the scene of calls and post event issues at local hospitals and after the calls if no contact was made with the patient. Through a funded grant. this program, renamed New RESTART, created a project coordinator, appointed by County Manager, in addition to a person in recovery (peer support specialist) and pre-hospital

medicine paramedic to lead a multi-disciplinary team to respond to each 911 call. The GOLDIE database is considered a crucial part of this project. We feel we can't measure any progress we might make without proper data to act on.

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