



NC Opioid and Prescription Drug Abuse Advisory Committee (OPDAAC)

Coordinating Workgroup Meeting **August 30, 2017**

Welcome! and Introductions of Attendees

- **Welcome!**
 - Mandy Cohen
 - Josh Stein

- **Introductions of Attendees**
 - Your name
 - Your organization/affiliation

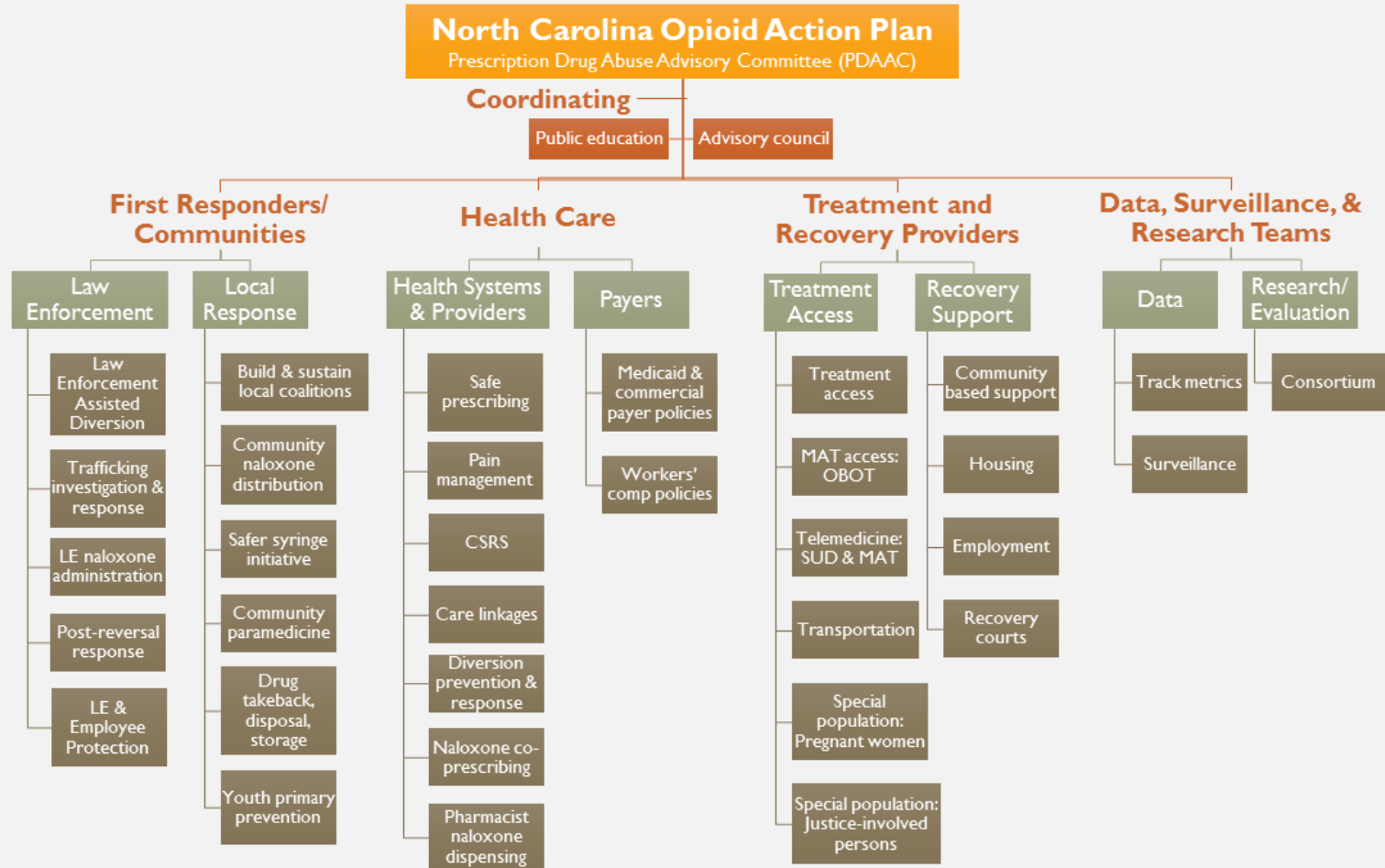
Susan Kansagra and Steve Mange

Purpose and Meeting Goals

Alan Dellapenna

Forming and Norming

Forming and Norming: Relation to OPDAAC



Forming and Norming: Expectations

- What are our group **expectations** of this workgroup?
 - Coordinates implementation of NC Opioid Action Plan
 - Select membership leads NC's effort to prevent and respond to NC's opioid crisis and tracks progress
 - Respects and appreciates different perspectives
 - Title free zone
 - Opportunity for candid, thoughtful, focused discussions of real issues and root causes without defensiveness
 - Meets need for collective wisdom to address complex issues
 - Action oriented learning to identify new solutions
 - Meets 8 times a year (any non-OPDAAC month)

Forming and Norming: Expectations

- What are our group **expectations** of this workgroup?
–???

Forming and Norming: Leadership

- What **leadership** role will Coordinating Workgroup members take in coordinating, implementing, and tracking the NC Opioid Action Plan?
–???

Anna Stein

NC Opioid Action Plan

Nidhi Sachdeva

Problem Analysis

Problem Solving: Approach

- Process based on Action Learning model for change
- Facilitated discussion allows for maximum learning
- Opportunity to come up with different, workable, useful, and timely solutions



Problem Analysis: Method

1. PROBLEM STATEMENT (>10 minutes)

– A pressing/difficult problem or challenge that:

- is related to a focus area or strategy included in the NC Opioid Action Plan
- is a problem you have been struggling with and has no known or clear solution;
- is a problem that you are involved in or that implicates you/your organization;
- is a complex problem that requires the coordination or input of multiple organizations or levels of work beyond your immediate scope;
- People could have multiple opinions or disagree about the solution to the problem; and,
- It is important to you (and/or your organization) to find a solution *soon*

– *State the problem in the form of a question.*

2. CLARIFICATION (5 minutes)

3. GROUP DISCUSSION/OBSERVATION (20+ minutes)

4. REFLECTION/ANALYSIS (8 minutes)

5. ACTION (2 minutes)

>10 minutes

Problem Statement

Jai Kumar and Julia Wacker, NC Hospital Association

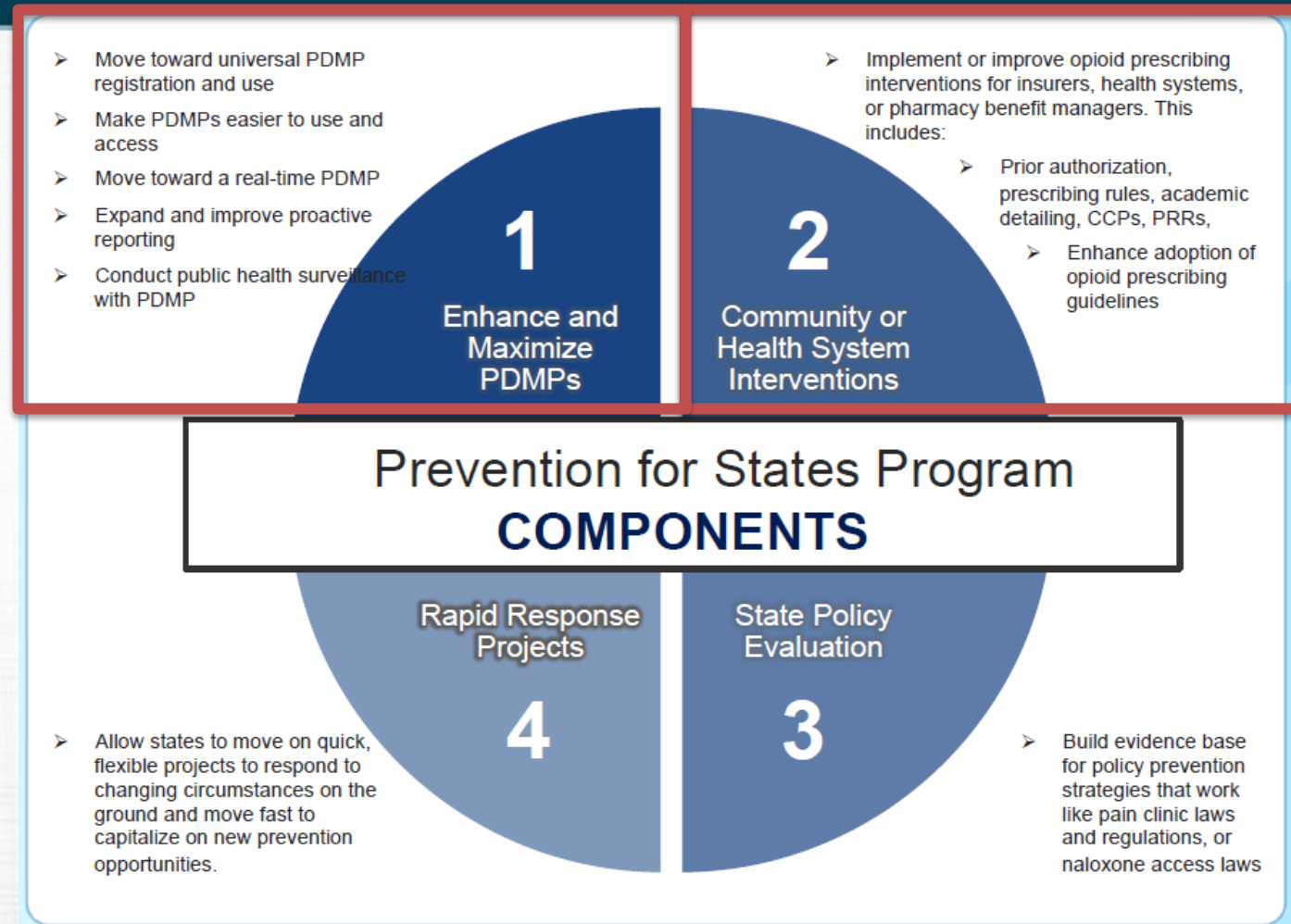


Coalition for Model Opioid Practices in Health Systems: **Care linkages**



North Carolina Hospital Association

CDC Prevention for States (PfS) Grant

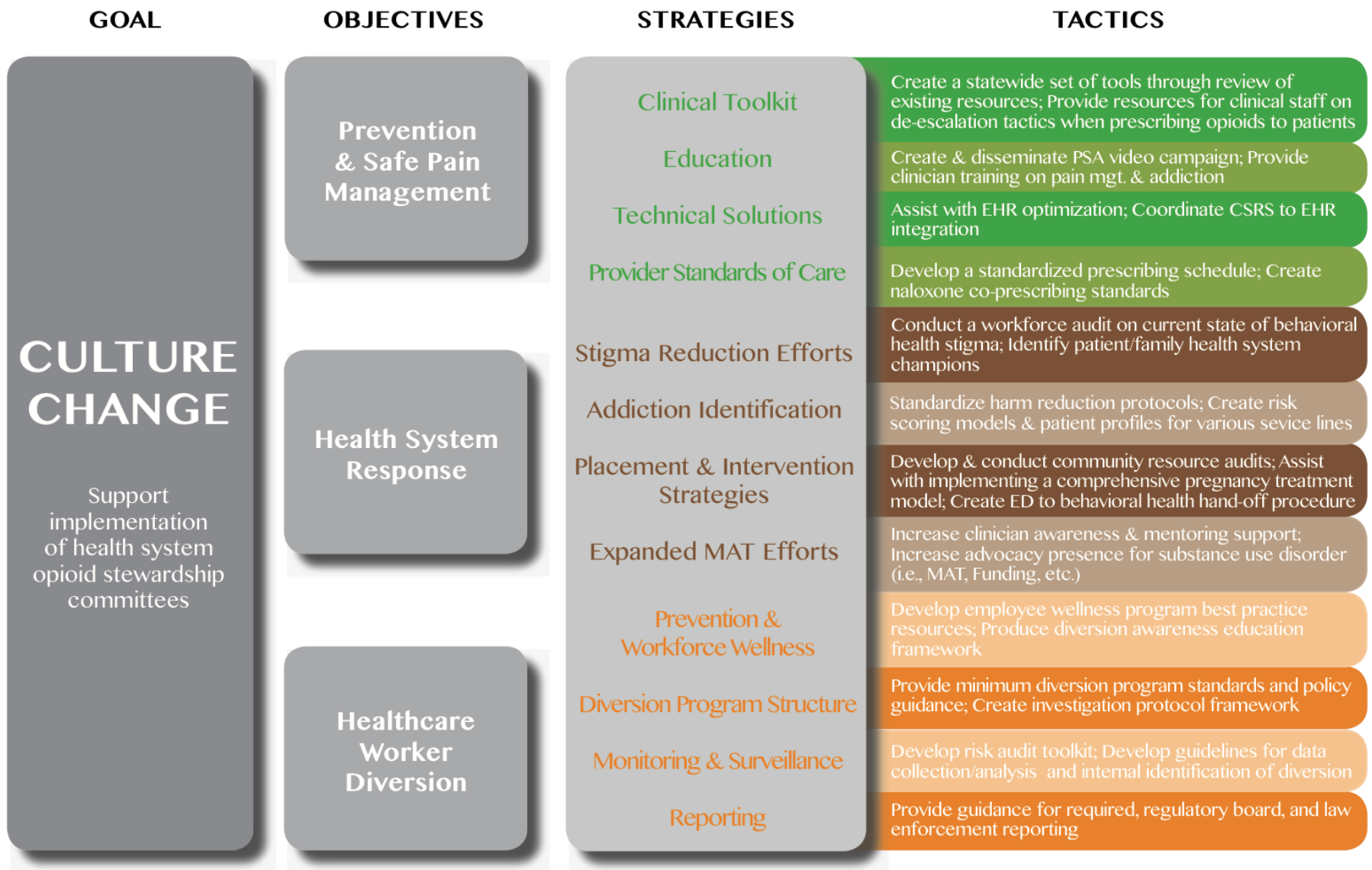


NC Division of Public Health supports NCHA under CDC PfS Components **1** and **2**

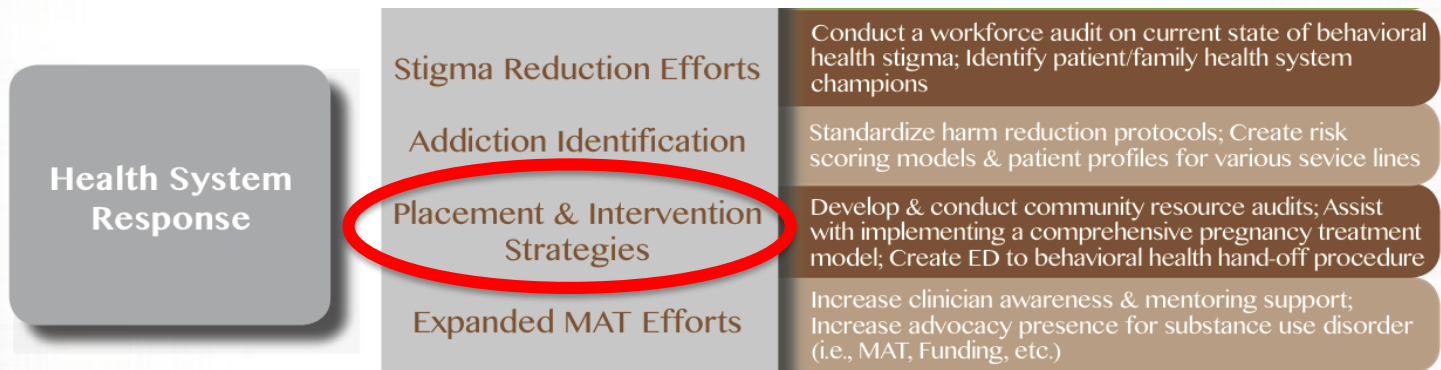
North Carolina
Injury & Violence
PREVENTION Branch



The Coalition for Model Opioid Practices in Health Systems



Area of Concern

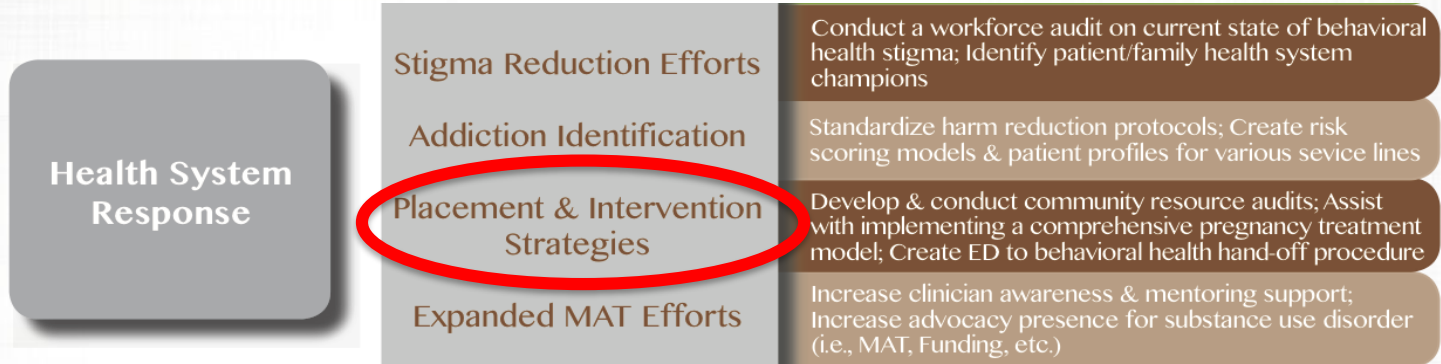


NC Opioid Action Plan

6. EXPAND TREATMENT ACCESS

Strategy	Action	Leads
Care linkages	Work with health systems to develop and adopt model overdose discharge plans to promote recovery services and link to treatment care	NCHA, LME/MCOs
	Link patients receiving office-based opioid treatment to counseling services for SUD using case management or peer support specialists	DMH, RCOs, APNC, CCNC, LME/MCOs, NCATOD
Treatment access	Increase state and federal funding to serve greater numbers of North Carolinians who need treatment	All

NC Opioid Action Plan



6. EXPAND TREATMENT ACCESS

Strategy	Action	Leads
Care linkages	Work with health systems to develop and adopt model overdose discharge plans to promote recovery services and link to treatment care	NCHA, LME/MCOs
	Link patients receiving office-based opioid treatment to counseling services for SUD using case management or peer support specialists	DMH, RCOs, APNC, CCNC, LME/MCOs, NCATOD
Treatment access	Increase state and federal funding to serve greater numbers of North Carolinians who need treatment	All

Problem Analysis

How do we ensure patients are discharged from inpatient units to proper treatment and appropriate care in the community?

5 minutes

Phase 2: Clarification

20+ minutes

Phase 3: Group Discussion/Observation

How do we ensure patients are discharged from inpatient units to proper treatment and appropriate care in the community?

8 minutes

Phase 4: Reflection/Analysis

2 minutes

Phase 5: ACTION

Next Steps and Wrap-up

- **Next Full OPDAAC Meetings**
 - **September 29**
 - **December 15**
- **Next Coordinating Meeting, October XX**
- **Homework: Complete Survey by 9/6 to**
 - **prioritize Top 5 Actions from NC Opioid Action Plan**
 - **rank preference on regular meeting days/times**
 - **provide other feedback**

Survey link:



Thank you!