

Goals and Objectives for 2028

Goal 1: Reduce and Prevent Substance Misuse Through Education and Community Collective Impact

Objectives:

- A. Reduce ED overdose visits by 10% (from 136.5 to 122.8 per 100,000).
- B. Reduce the percentage of ED overdose visits among Black residents from 55% to 45% of the total ED overdose visits.
- C. Reduce self-reported vape use by 5% of the students surveyed in middle school (16%) and high school (29%).

Data Sources: NCDHHS Injury and Violence Prevention Branch (baseline 2024), Youth Risk Behavior Survey (baseline 2023).

Goal 2: Address Substance Misuse and Reduce Harm Through Intervention and Treatment

Objectives:

- A. Increase the percentage of people with OUD who receive treatment from 0.4% to 0.5%.
- B. Obtain comprehensive data on patient retention rates from SUD treatment providers to establish a baseline retention rate.
- C. Enroll all eligible residents on Medicaid (100%) and retain those who are currently enrolled.

Data Sources: NCDHHS Injury and Violence Prevention Branch (baseline 2024), NCDHHS NC Medicaid Division of Health Benefits

Goal 3: Enhance Continuum of Care for Individuals with Substance Use Disorder

Objectives:

- A. Conduct an assessment to determine why the Alcohol and Drug Abuse Treatment Center (ADATC) facility was not successful.
- B. Conduct an inventory of existing services, the possibility of enhancing those services, and options to reduce use of emergency departments for detox.
- C. Explore existing continuum of care models in other counties, define best practices, and identify an ideal continuum of care from detox to inpatient and long-term treatment.

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Models to Explore: Healing Transitions, Anuvia Prevention and Recovery, McLeod Centers for Wellbeing, Hope Haven, Upcoming Medicaid-covered level of care

Goal 4: Support Stable Housing for Individuals with Substance Use Disorder

Objectives:

- A. Reduce the total number of chronically homeless individuals by 10% (from 399 to 359) and the total number of Black or African-American individuals who are homeless by 10% (from 2,766 to 2,489).
- B. Open a day center for individuals who are homeless that includes connection to harm reduction resources and treatment for substance use disorders and co-occurring disorders.
- C. Add a total of 20 additional beds in recovery housing facilities with no restrictions on MOUD.

Data Sources: Homeless Management Information System (HMIS) via Durham County DSS's Coordinated Entry system (baseline 2024)