



# Wake County CoC Membership Meeting

Monday, October 27

2:00 – 3:30 pm

Raleigh Housing Authority

**Please Sign-in**

# AGENDA

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- Lead Agency Updates
- White Flag Updates
- Overdose Prevention and Naloxone Administration Training



# Lead Agency Updates

# HMIS Updates

**Software RFP:** Released 10/14, closes 11/13.

- Scorecard currently in development.
- Finalizing RFP review team, including scoring and non-scoring members.

## System Updates

- Naming Convention updates rolling out through the end of the year!
  - Agency name (or common abbreviation) - Program Name – Funding source
  - Ex. Wake County HACR – Permanent Supportive Housing – CoC
  - Agency Admins should be on the lookout for updates!
- Notes Guidance underway.

## Updates to sharing agreements and release of information

- Legal review complete. Reviewing final partner list before distribution.
- Documents will require signature from Executive Director (or designated leadership); be on the lookout to respond promptly!

**Agency QSOBAA & User Agreement**



**ROI & Privacy Notice → P & Ps**

# Coordinated Entry Updates

- Addressing CE Work Plan Goals:
  - 1: Ensure access to Wake CoC Resources → engage providers in CE enrollment
  - 2: Work with lead agency in the creation of prioritization tool → analyze local system needs.
  - 3: Ongoing monitoring and adjustment of policies, procedures and written standards → codify a HUD compliant process.

Goal	Target Date
<b>Phase Out VI-SPDAT</b>	November 2025
<b>CE Manual and Communication Updates</b>	November 2025
<b>Implement Vacancy Form and Policy</b>	December 2025
<b>Victim Service Provider Access Form and Policy</b>	December 2025
<b>Inactive Policy</b>	December 2025
<b>Transfer Form and Policy</b>	December 2025

# CE Policy & Form Updates

- **Victim Service Provider Policy & Form**
  - To ensure DV, SA and HT service providers have confidential access to housing opportunities
- **Inactive Policy**
  - Supports accurate and timely referrals and in compliance with HUD definitions of homelessness
- **Housing Vacancy Policy & Form**
  - Facilities timely vacancy reporting, minimizes unit downtime, and helps match eligible households to available housing opportunities
- **Transfer Policy & Form**
  - Supports housing stability by enabling client transfers between PSH and RRH programs when special needs arise, helping to prevent unnecessary returns to homelessness

# Next Steps

- Per CoC Charter ([Section V.F.3.b](#)), items requiring a vote by CoC Membership, include:
  - a) Annual updates to the Wake CoC Charter and any exhibits attached thereto [e.g. CE Policies and Procedures].
  - b) All general policies or procedures that apply to the Wake CoC.

## Timeline:

Milestone	Date
CES Committee Review and Vote	October 22, 2025
Introduce to Membership	October 27, 2025
<i>Test/Pilot Forms and Data Cleanup</i>	<i>October 27 – November 24, 2025</i>
CoC Governance Board Review and Vote	November 6, 2025
CoC Membership Review and Vote	November 25 – December 5, 2025

# CoC Committee Updates & Key Projects

Project/Update	Lead	Status/Next Step
<b>Written Standards</b>	CoC Staff	Drafting underway, Consultant review by early November
<b>Strategic Planning</b>	CoC Staff & Gov Board	Gaps Analysis and Data Review underway, Membership review December - January
<b>Point-in-Time Count</b>	Street Outreach CMTE	Planning underway, Confirm date, training and communications forthcoming
<b>Annual Work Plans</b>	All CMTEs	Focus November –December meetings for delivery to Board by 12/31
<b>CoC NOFO</b>	CoC Staff & Funding Review Committee	Participation in NAEH and NCCEH CoC Cohorts.

# White Flag Updates

# White Flag Updates

- Final edits underway. To be posted to the CoC website by mid-week.
- Key updates:
  - Defining shelter site type – e.g. primary alert night, peak season alert nights
  - Confirming roles and responsibilities between WF Operator and host sites
  - Confirming final budget for WF Operator and included logistics – e.g. meals



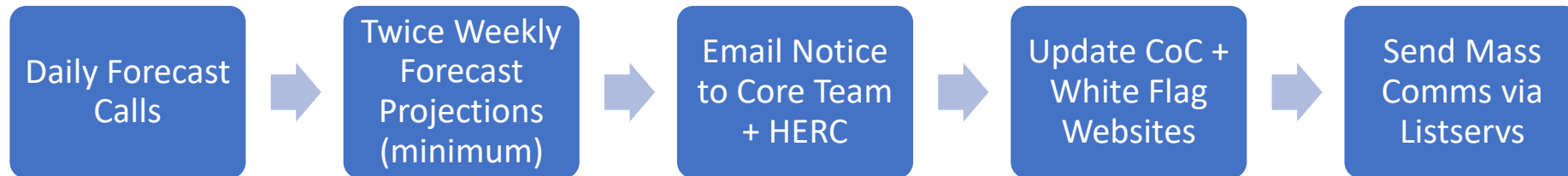
**White Flag Alert is activated when 35 degrees or lower with windchill.**

- The following sites will be ready for the first alert 11/01 or thereafter:

First Baptist Church (FBC)	90	Single Women	99 N. Salisbury St., Raleigh
Church of the Good Shepherd (COGS)	90	Single Men + Couples without Children	121 Hillsborough St, Raleigh

# Communications

- CoC Staff working closely with County Comms for general public.
- CoC Staff and Bryant Center to lead CoC Communications and alerts.



- For alert updates throughout the 2025 -2026 Winter Season:
  - Call: 919.759.5607 or
  - Visit: [www.wakewhiteflag.org](http://www.wakewhiteflag.org)
  - Volunteer & Staff [Interest Form](#)

# Overdose Prevention and Naloxone Administration Training

Wake County  
October 27, 2025

@wakegov    



wakegov.com

# What are Opioids?

- A class of drug used for pain management.
- Used since at least 3400 BC.
- They can be natural, synthetic, or semi-synthetic.
- They are produced both legally and illegally.
- They vary *drastically* in potency.
  - Fentanyl is roughly 100x stronger than morphine.
- They can be incredibly addictive, because they can change the structure and function of our brains.
  - Regardless of how or why people start consuming opioids, addiction causes changes in the parts of the brain that are wired for our survival.

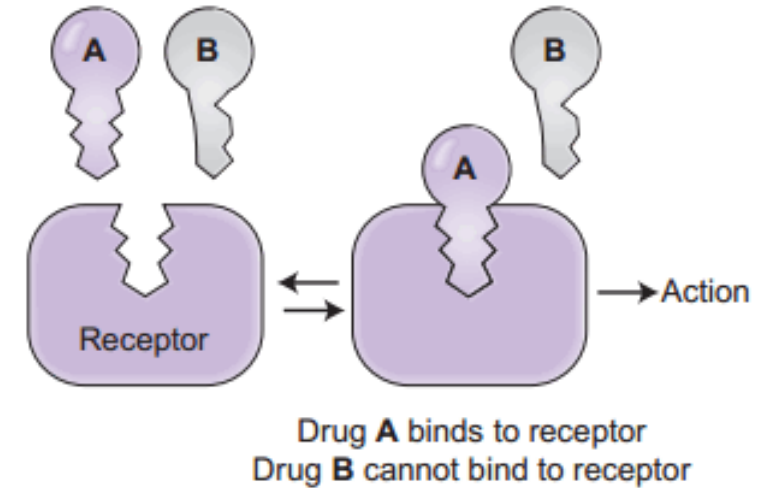
# Opioids You May Recognize

- Heroin
- Codeine
- Demerol
- Morphine
- Darvocet
- Fentanyl
- Dilaudid
- Methadone
- Hydrocodone
- Oxycodone
- Vicodin
- OxyCotin
- Percoet
- Tylenol 3
- Tylox



# How do Opioids Work?

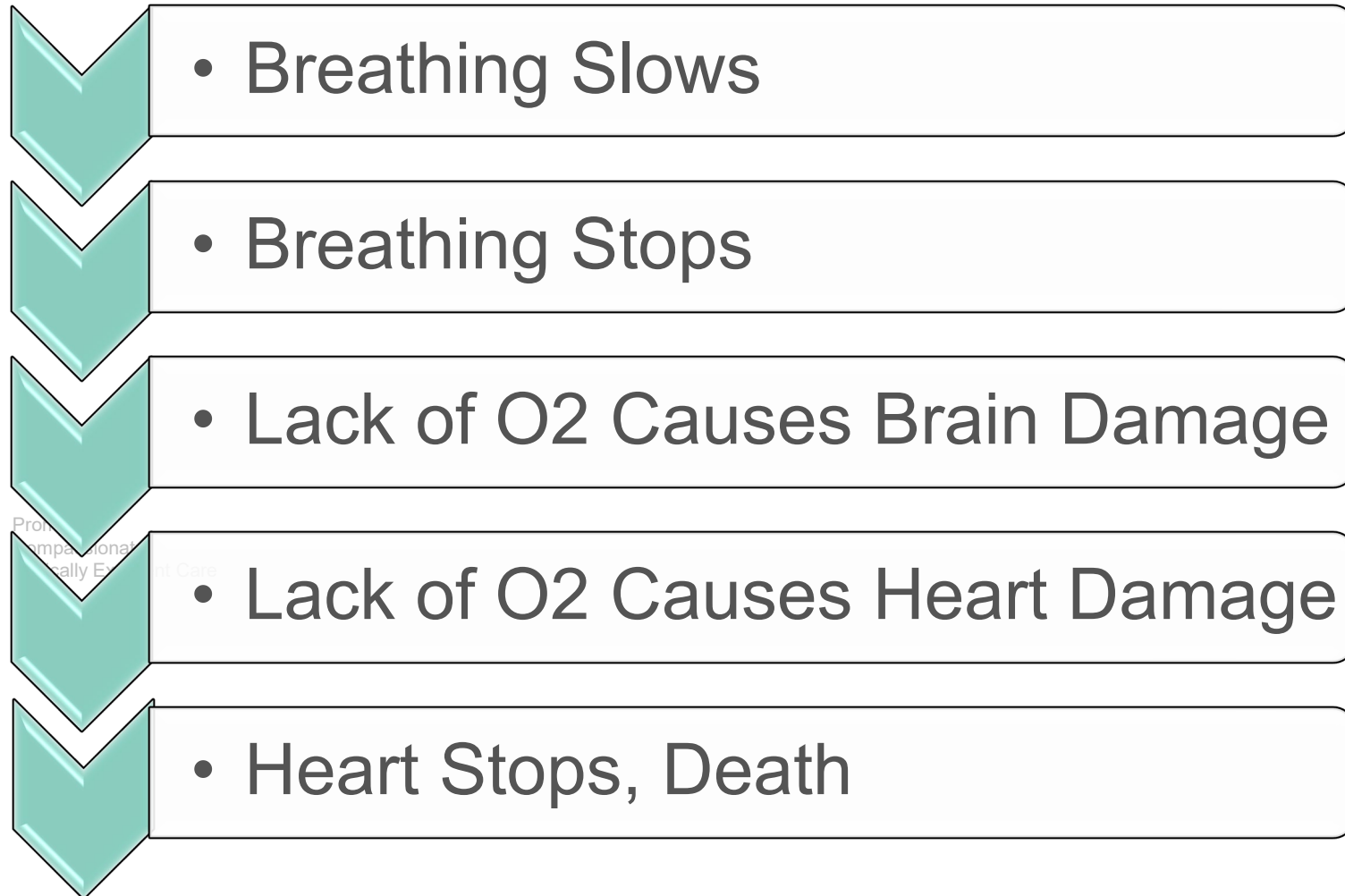
- Opioids affect the central nervous system.
  - Brain
  - Brain Stem
- All opioids function in the same way.
  - By definition, they can only plug into the opioid receptors.
- They attach to the receptors in our brains to:
  - Block pain signals to relieve pain.
  - Encourage dopamine production and release.
    - The neurotransmitter our bodies create to make us feel pleasure, motivation, and satisfaction.



# What is an Opioid Overdose?

- An overdose happens when too many opioids bind to opioid receptors in the brain.
- Too many opioid receptors are activated
  - The signals in our bodies that trigger us to breathe are turned down or off.
  - Also called **respiratory depression**.
- This is what causes injury and death in an opioid overdose:
  - Body stops breathing.
  - Within minutes our vital organs stop functioning and start to die due to a **lack of oxygen**.

# What is an Opioid Overdose?

- 
- Breathing Slows
  - Breathing Stops
  - Lack of O2 Causes Brain Damage
  - Lack of O2 Causes Heart Damage
  - Heart Stops, Death

# Risk Factors for Opioid Overdose

- Anyone who uses opioids can overdose and should be offered naloxone.
- The following factors increase risk of opioid overdose:
  - A prior history of overdose
  - Patients with sleep-disordered breathing
  - Patients with general poor health
  - Patients mixing benzodiazepines with opioids
  - Patients at risk of returning to a high dose for which they have lost tolerance
    - e.g., patients undergoing tapering or recently released from prison
  - Patients taking higher dosages of opioids
    - e.g.,  $\geq 50$  MME/day

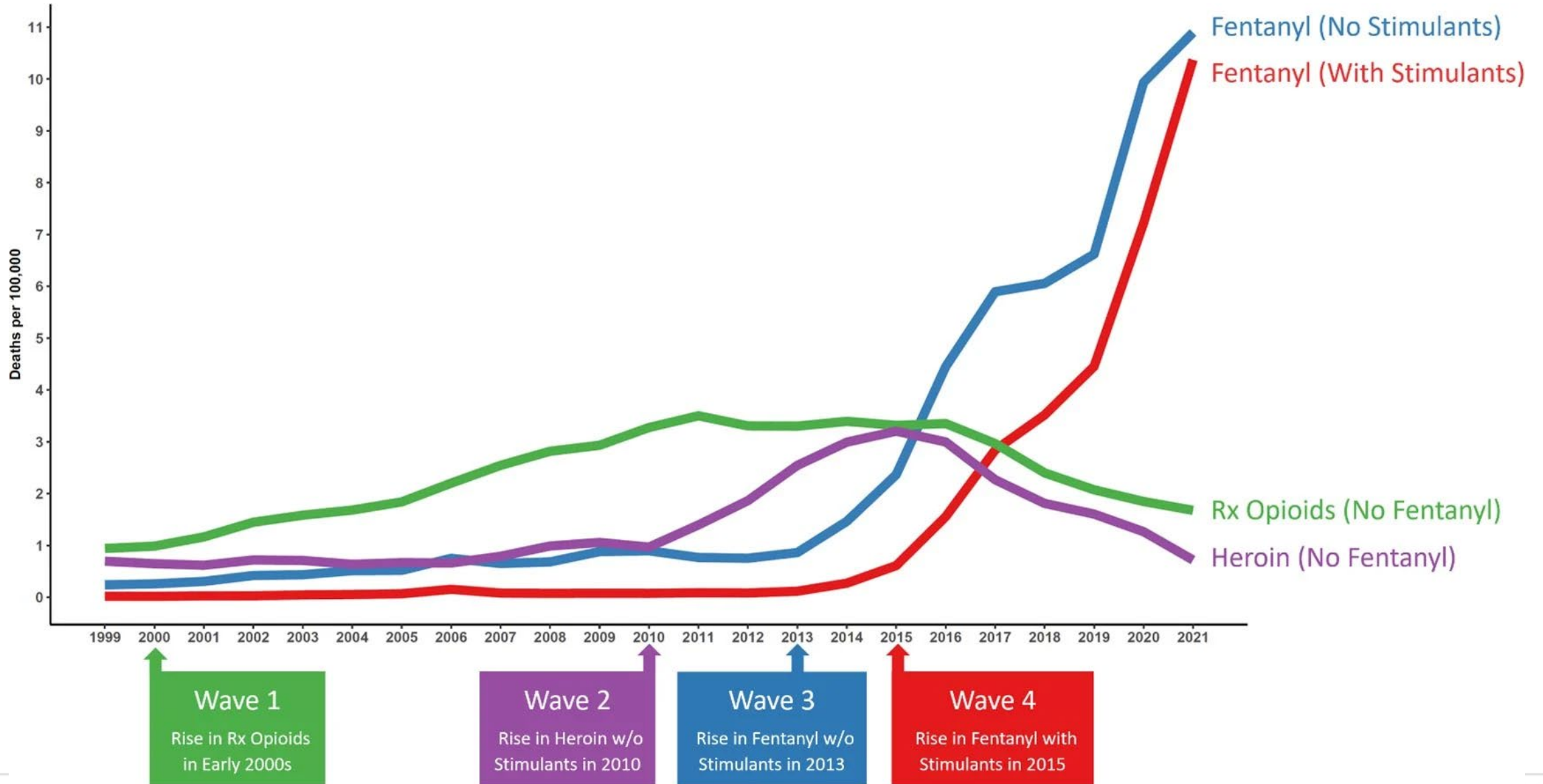
<https://www.cdc.gov/overdose-prevention/media/pdfs/2024/04/Conversation-Starter-How-to-Save-a-Life-With-Naloxone.pdf>



# Additional Risk for Overdose

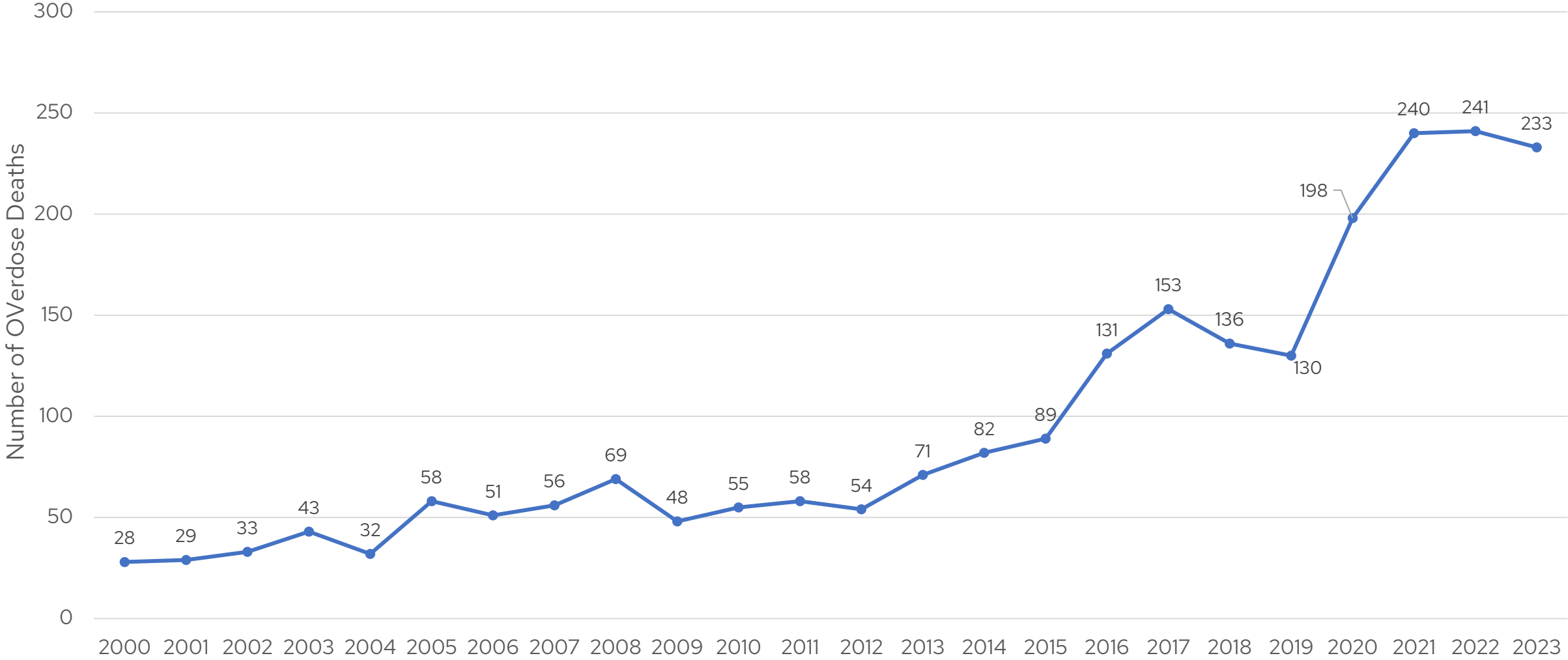
- **Homelessness:** The #1 cause of death for the homeless in NC.
  - <https://www.dph.ncdhhs.gov/chronic-disease-and-injury/injury-and-violence-prevention/homelessness-injuries-nc-fact-sheet-2025/download?attachment>
- **Mental Health:** Of all overdose deaths, 1 in 4 had a prior mental health diagnosis.
  - <https://www.dph.ncdhhs.gov/chronic-disease-and-injury/injury-and-violence-prevention/ncdhhs-mental-health-awareness-month-update/open>

# Waves of the Overdose Crisis



Source: CDC Wonder

# Overdose Death Counts, Wake County, 2000-2023



# Unintentional Poisoning Deaths, Wake County, 2019-2023\*

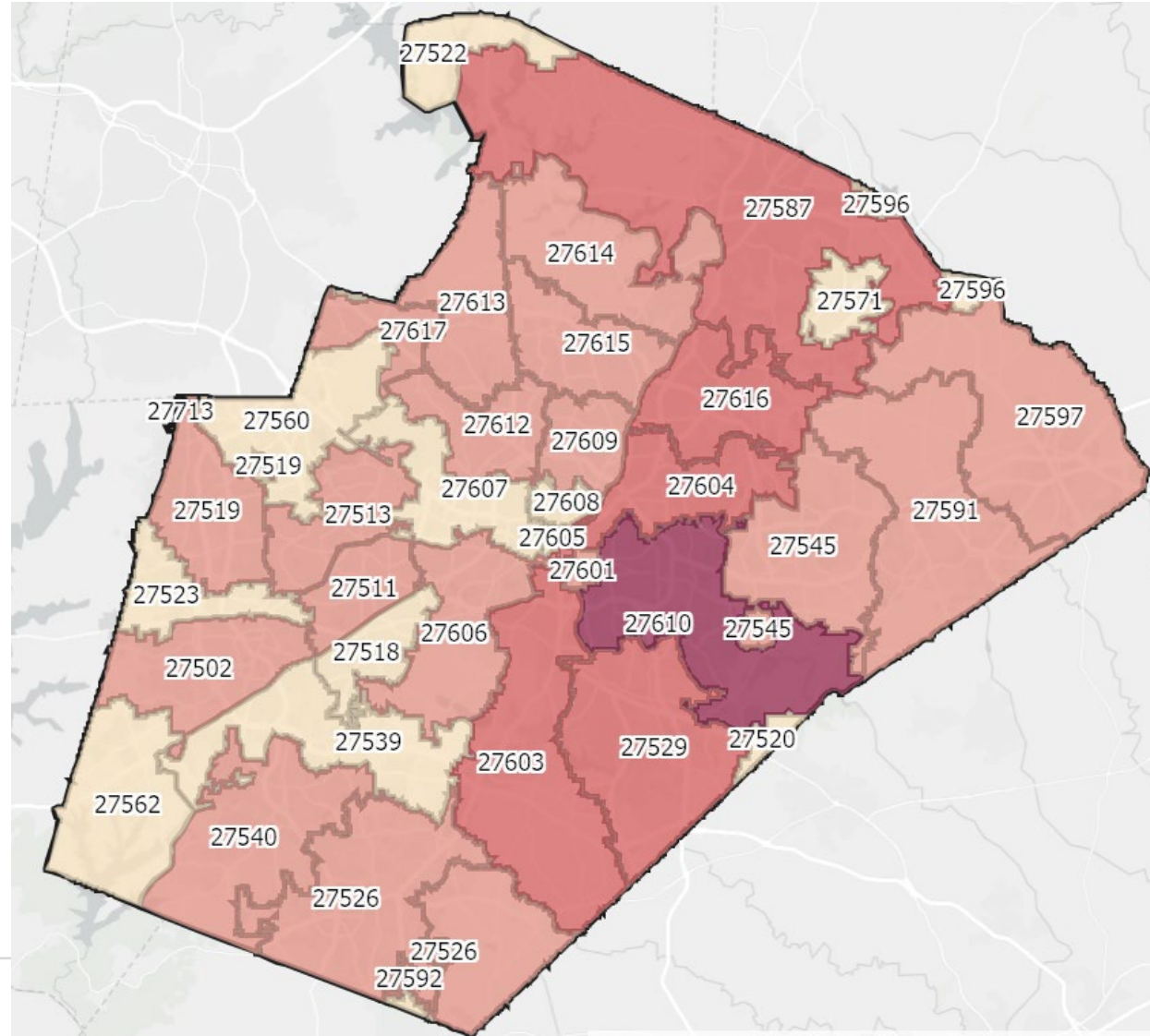
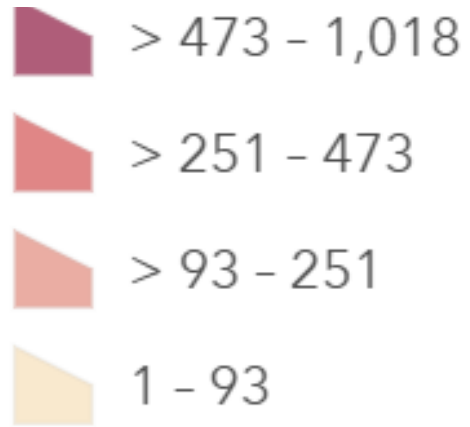
Characteristic	Number	Percent	Rate per 100,000
<b>Sex</b>			
Female	239	25.6	8.1
Male	695	74.4	24.7
<b>Race and Ethnicity**</b>			
White (NH)	570	61.0	17.0
Black (NH)	292	31.3	25.9
American Indian (AI)/Alaska Native (AN) (NH)	***	***	***
Asian (NH)	12	1.3	2.5
Hispanic	49	5.3	7.6
Other (NH)/Unknown	8	0.9	-
<b>Age Group</b>			
0-14	***	***	***
15-24	115	12.3	15.4
25-34	274	29.3	32.5
35-44	255	27.3	29.5
45-54	142	15.2	17.5
55-64	117	12.5	17.5
65+	31	3.3	4.3
<b>Total</b>	<b>934</b>	<b>100</b>	<b>16.2</b>

Rate not calculated for other/unknown due to unknown not having a category or total population count to calculate a rate from.

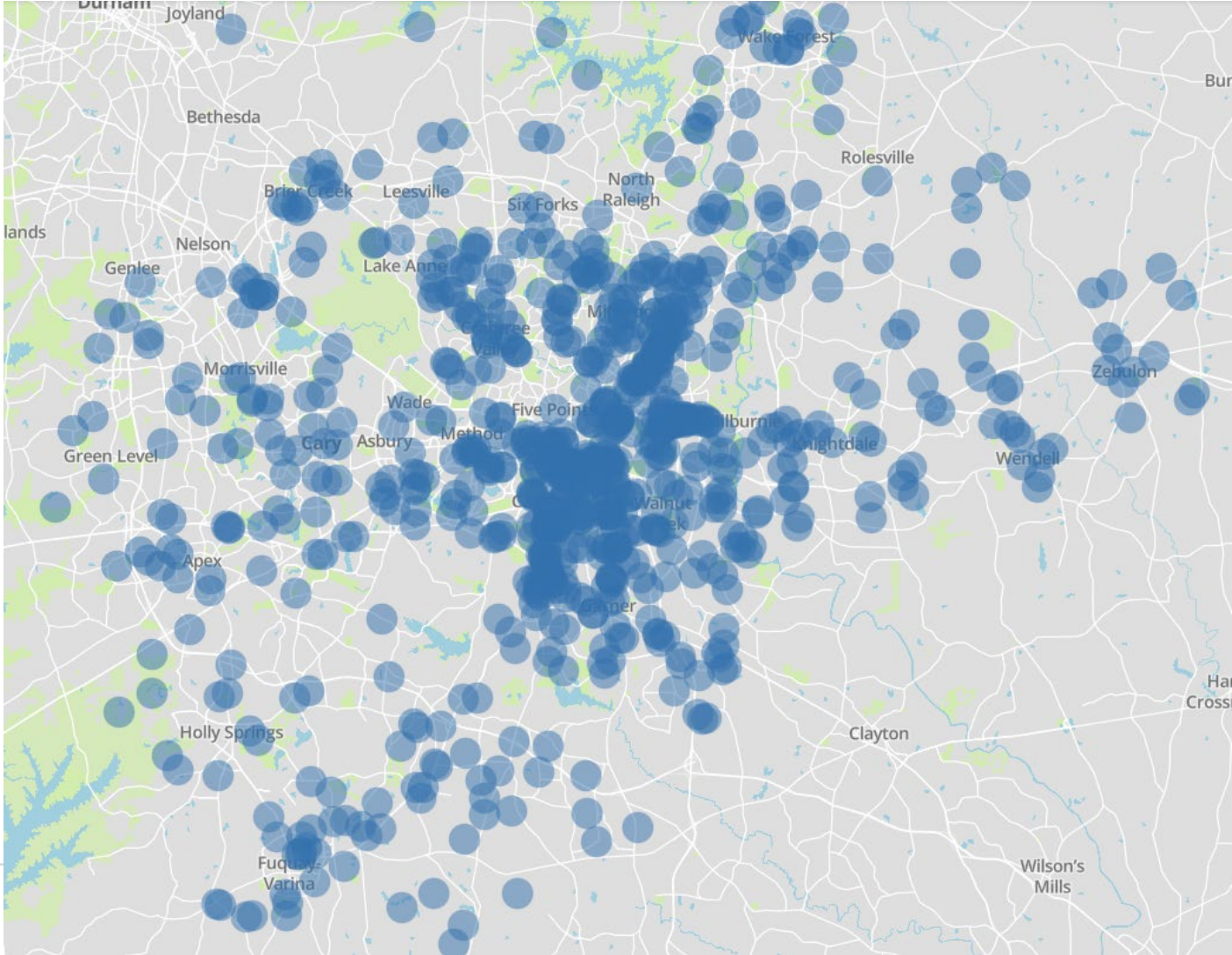
\*2023 data are provisional. \*\*\*" NH" means non-Hispanic ethnicity. \*\*\*Number, percentage, and rate suppressed for counts 1-4.

# Number of ED Visits for All Drug/Medication Overdoses, Wake County by Patient Residential Zip Code, 2020-2024

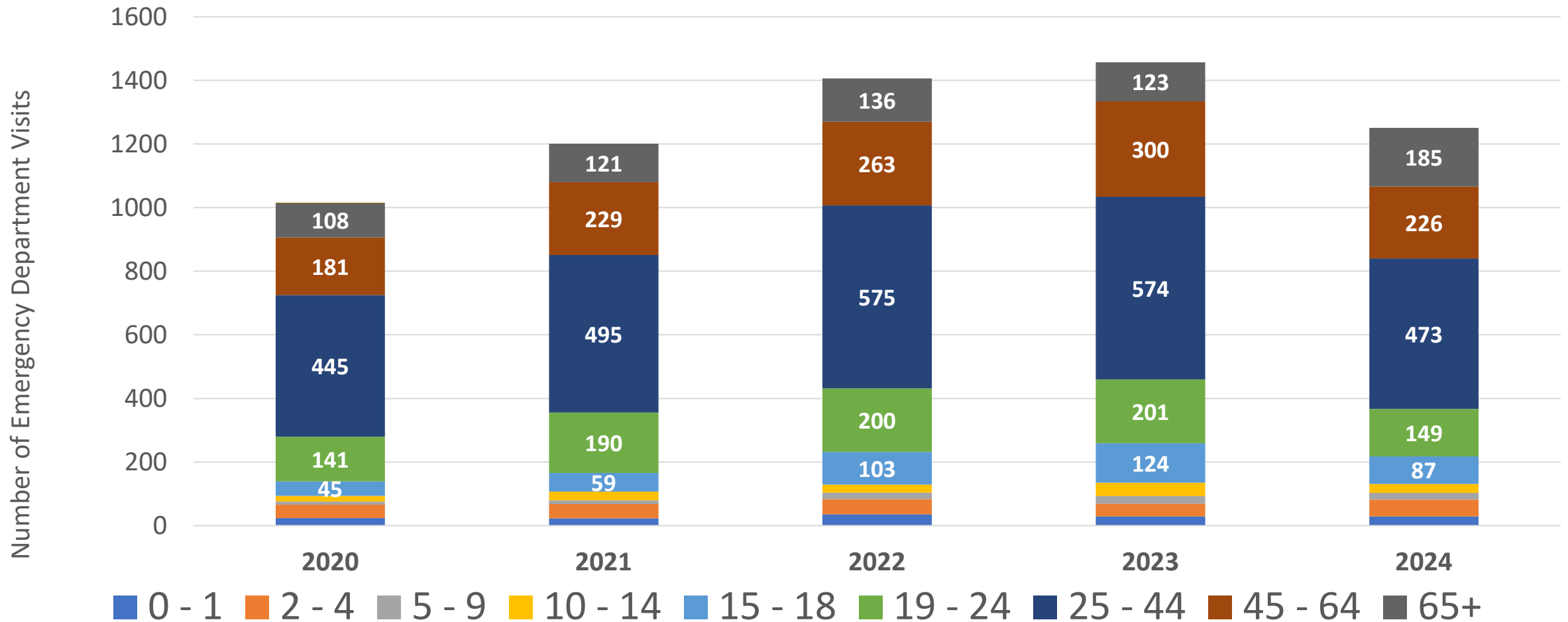
## Number of Overdose ED Visits



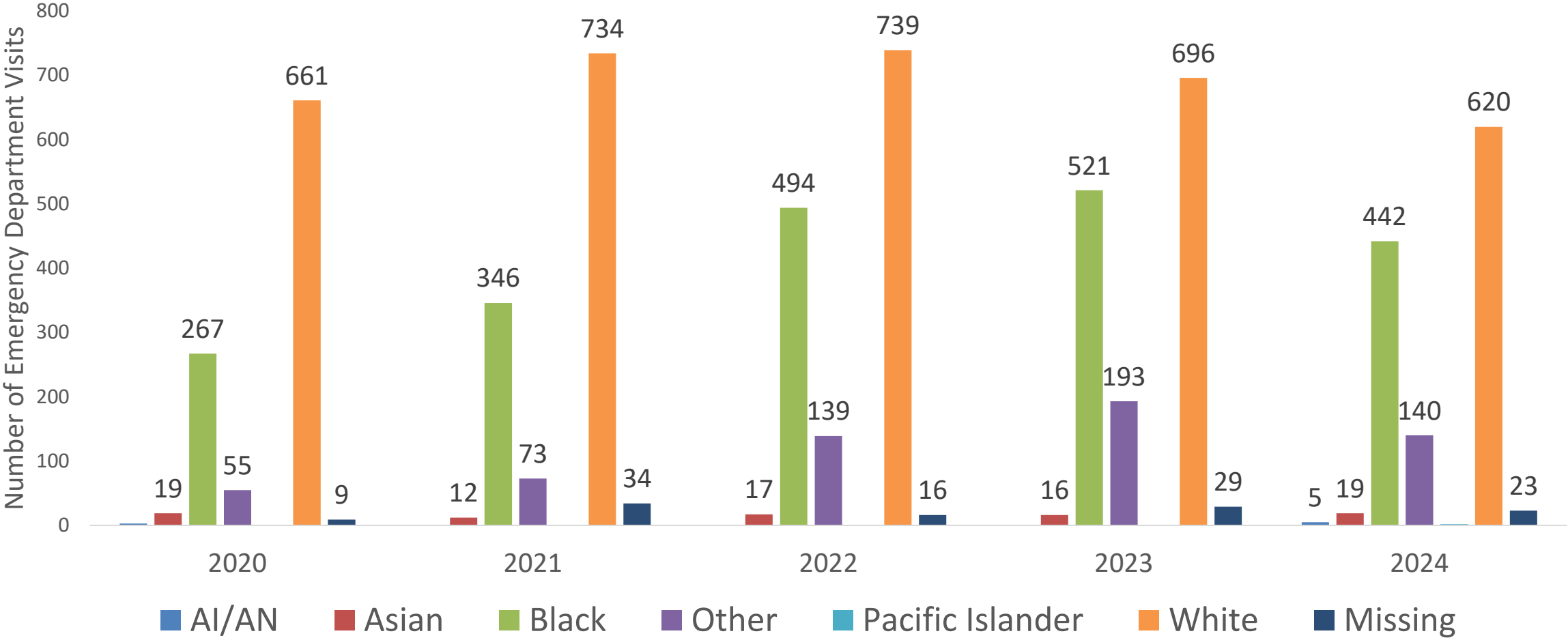
# Naloxone Administered by Wake EMS, July 1, 2024-June 30, 2025



# Unintentional or Undetermined Intent Medication or Drug Overdose Emergency Department (ED) Visits by Age Group, Wake County, 2020-2024



# Unintentional or Undetermined Intent Medication or Drug Overdose Emergency Department (ED) Visits by Race, Wake County, 2020-2024



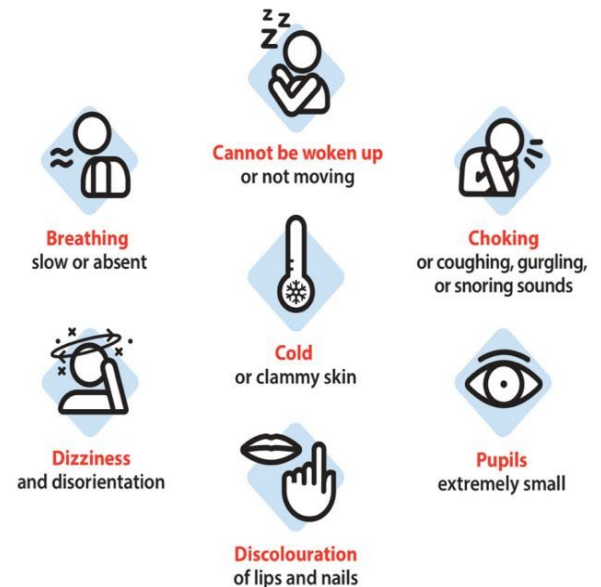
# Recognizing Opioid Overdose

- Opioid overdose is life-threatening and requires immediate emergency attention.
- Recognizing the signs of opioid overdose is essential to saving lives.
- Call **911 immediately** if a person exhibits **ANY** of the following symptoms:
  - Face is extremely pale and/or feels clammy to the touch
  - Body goes limp
  - Fingernails or lips have a purple or blue color
  - Start vomiting or making gurgling noises
  - Cannot be awakened or are unable to speak
  - Breathing or heartbeat slows or stops

<https://www.samhsa.gov/medications-substance-use-disorders/medications-counseling-related-conditions/opioid-overdose>

## SIGNS OF AN OPIOID OVERDOSE

Learn how to spot an overdose and what to do.



## CALL 911 IMMEDIATELY!

Your address: \_\_\_\_\_

### THEN:



**Give breaths**  
1 breath every  
5 seconds

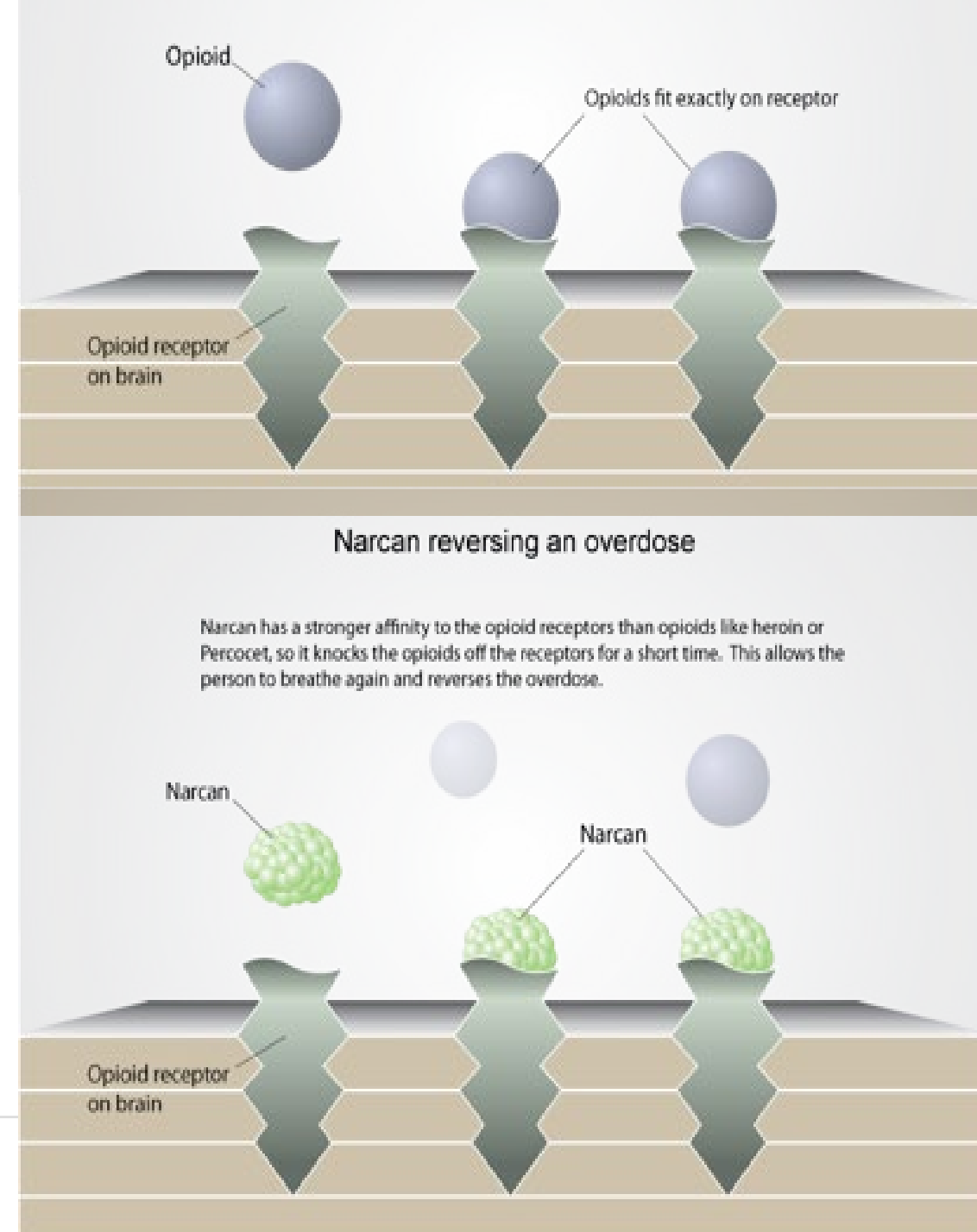


**Use naloxone**  
if you have it

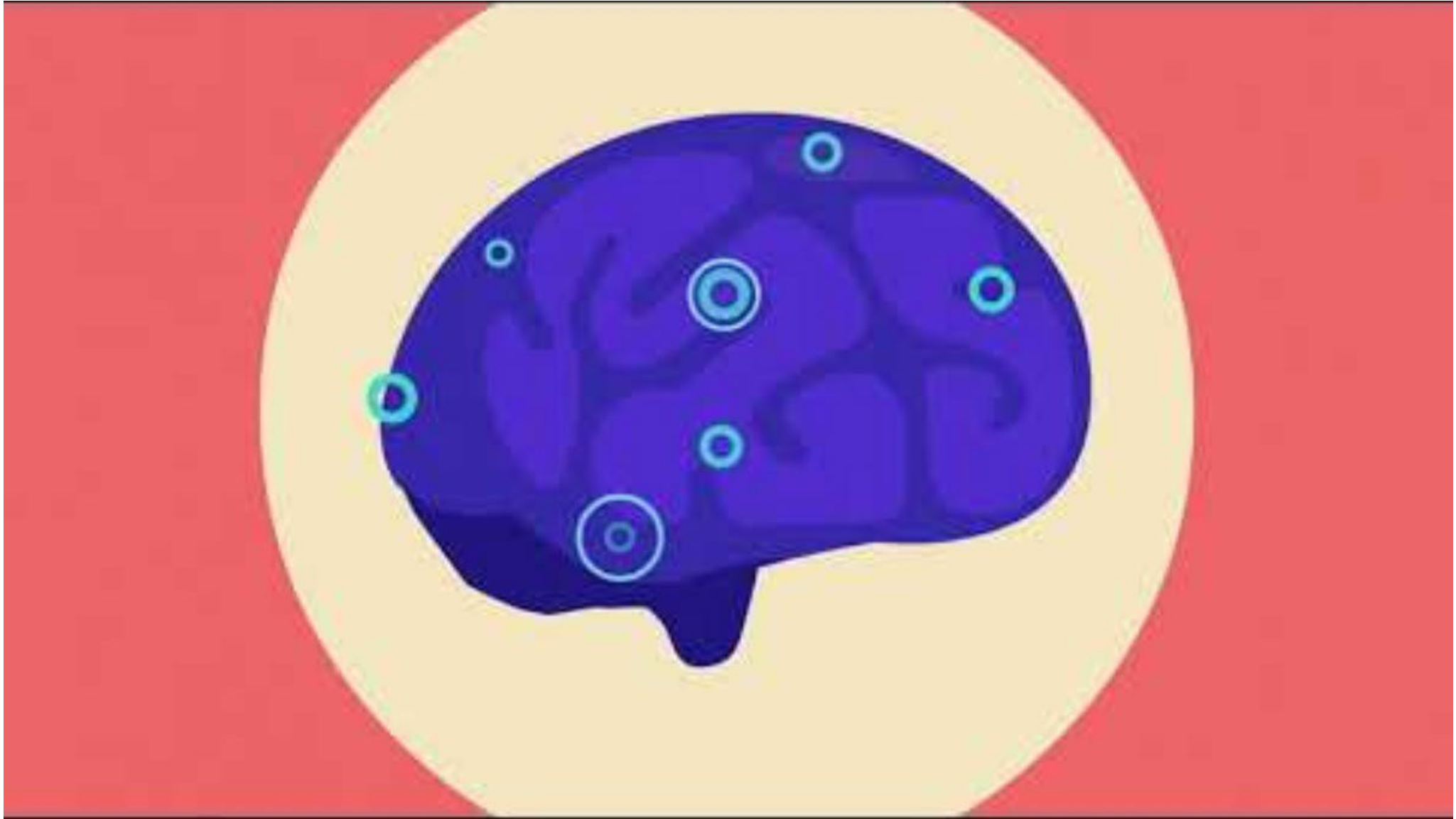
# What is Naloxone?

- Naloxone is an opioid antagonist.
  - Only works if an opioid is present in the body.
- Available in many formulations.
  - **Nasal**
  - Intramuscular
  - Intravenous
- Ideally stored at room temperature.
- Nasal formulation can be given to all ages.
  - Infants
  - Children
  - Adults
- Effects of one dose last 30-90 minutes.

[UpToDate: Naloxone Drug Information](#)



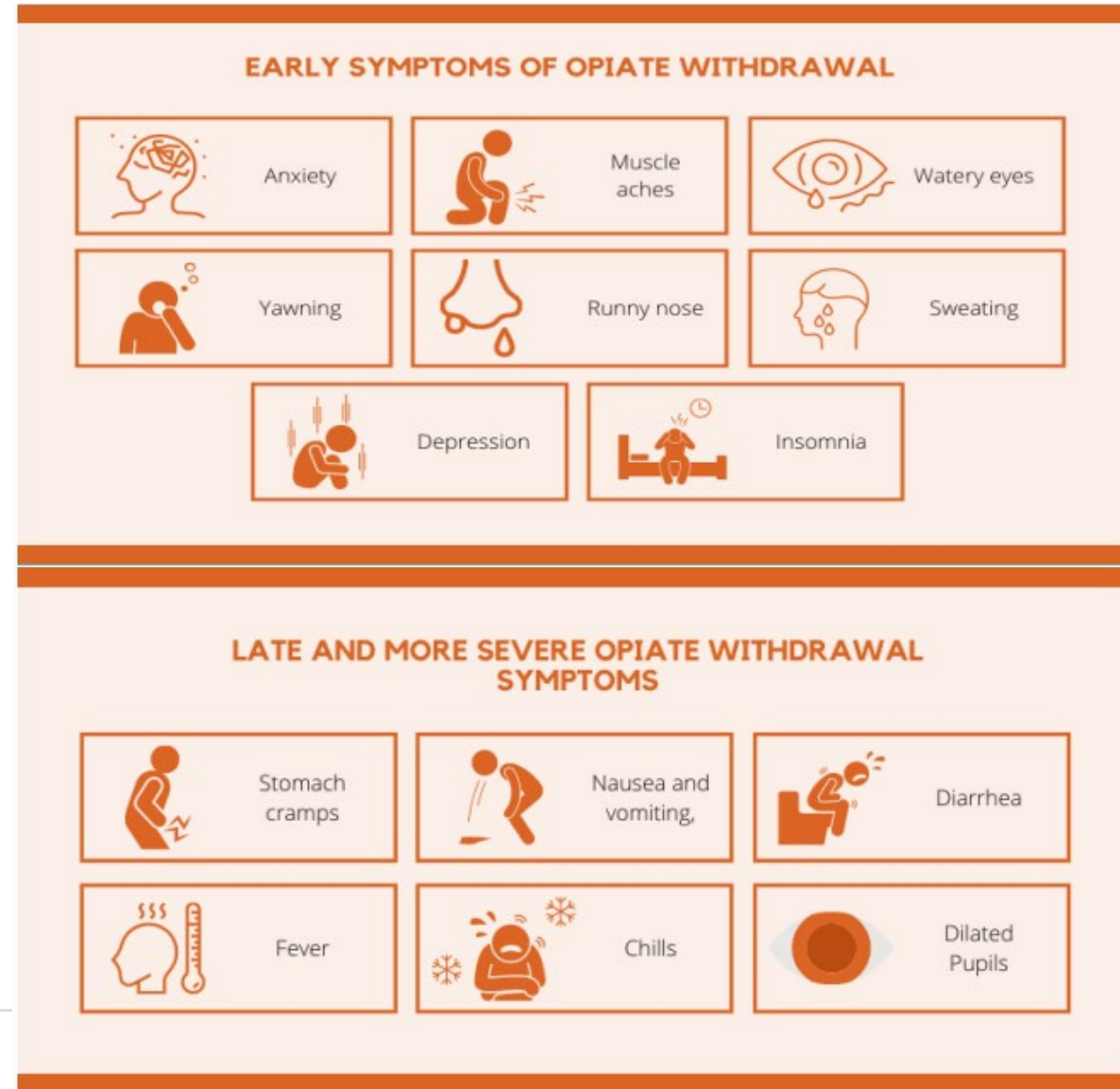
# Naloxone/Opioid



<https://www.youtube.com/watch?v=RcAaZQQqd50>

# After Effects of Naloxone Administration

- Effects are consistent with someone going into opioid withdrawals, but much quicker than if they simply stopped using.
- Agitation and Irritability
- Vomiting
- Seizures
- Pulmonary Edema



# What to Do If You Suspect an Overdose

1. **Call 911 immediately**
  2. Give naloxone as quickly as possible.
    - No need to wait for EMS to arrive before administering.
    - If no response after 2 to 3 minutes, give 2<sup>nd</sup> dose.
  3. Try to keep the person awake and breathing.
  4. Lay the person on their side to prevent choking.
  5. Stay with the person until EMS arrives.
- **Naloxone is a temporary treatment.**
    - **More than one dose may be needed**
  - **If no pulse, start CPR and get an AED.**
    - **This is no longer an overdose.**

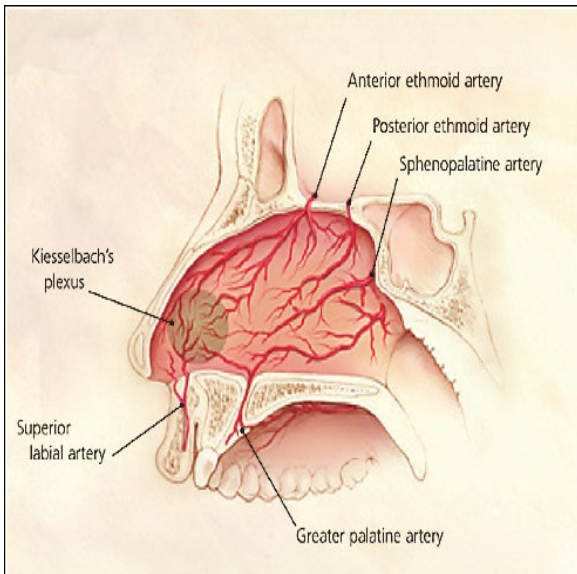


<https://www.cdc.gov/overdose-prevention/media/pdfs/2024/04/FactSheet-How-and-When-to-Use-Naloxone.pdf>

<https://harmreduction.org/issues/overdose-prevention/overview/overdose-basics/responding-to-opioid-overdose/>

# How to Administer Naloxone

1. Visualize the nasal passages.
2. Select the most clear/appropriate nostril.
3. Insert the entire tip of the applicator.
- 4. Firmly and briskly** press the plunger.
5. Roll patient into recovery position.
6. Monitor for breathing.



# Legal Context of Responding to an Overdose

- **NC Good Samaritan Law (NC G.S. 18B-302.2)**
  - You can call 911 for help during a drug overdose, and both the victim and the caller are protected from prosecution for the following:
    - Possession of less than one gram of illegal substance.
    - Underage drinking
    - Possession of paraphernalia
- **NC Naloxone Law (NC G.S. 90-12.7)**
  - Removes civil liabilities from doctors who prescribe and bystanders who administer naloxone
  - Allows community-based organizations to dispense naloxone not available over-the-counter (e.g. IM naloxone) under the guidance of a medical provider
- **Over-the-Counter Naloxone**
  - Some formulations of naloxone (4mg) are available at pharmacies and do not require a prescription to purchase or a standing order to distribute.

# Questions?

# Where to Get Naloxone in Wake County

Naloxone is available for free at several locations throughout Wake County and can be purchased at any pharmacy without a prescription.

- **North Carolina Harm Reduction Coalition**

Contact Chelsea Dauphinee at (984) 800-4124 or [chelsea@nchrc.org](mailto:chelsea@nchrc.org) for mobile exchange or visit the NCHRC office located at 4024 Barrett Dr, Suite 101, Raleigh Wednesday- Friday: 11:00 am – 4:00 pm.

- **Healing Transitions' Rapid Responder Program**

Contact Justin Garrity at (919) 703-6290 or [jgarrity@healing-transitions.org](mailto:jgarrity@healing-transitions.org) Monday – Friday: 9:30 am – 4:30 pm.

- **Wake County Health and Human Services Pharmacy**

10 Sunnybrook Road, Raleigh

Pharmacy hours: Monday–Friday, 8:30 am- 12:30 pm/1:30 pm–5:00 pm.

Naloxone can be purchased in bulk from [narcandirect.com](http://narcandirect.com) and [harmreductiontherapeutics.org](http://harmreductiontherapeutics.org).

For more information about finding Naloxone in North Carolina, visit <https://naloxonesaves.org/>.

# Wake County Drug Overdose Prevention Coalition



## Education and Outreach

Conducts drug use and overdose prevention education and outreach with a focus on vulnerable populations



## Data Analytics

Collects and applies data to better use interventions and measure prevention efforts



## Syringe Exchange

Supports syringe exchange programs that reduce the spread of disease and connects individuals to treatment



## Access to Naloxone

Improves access to Naloxone kits to prevent deaths



## Recovery Initiation and Maintenance

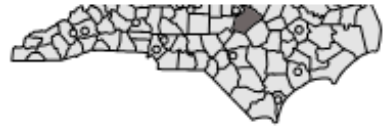
Establishes mechanisms to connect those in need to specialized care and recovery resources



## First Responders

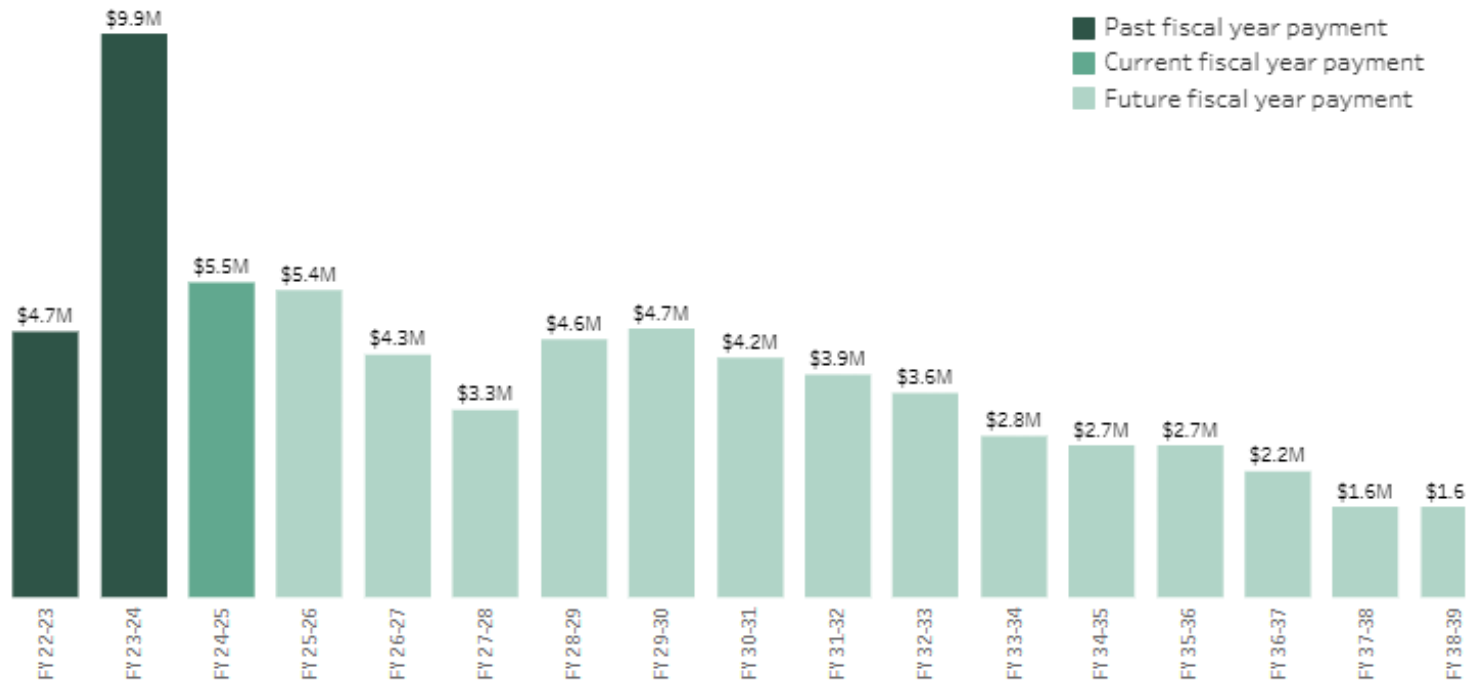
Identifies and supports community-based treatments that meet the needs of substance users

# Anticipated Settlement Funds Coming to Wake County



Wake County

Wake County is receiving \$67,736,628 in opioid settlement funds from 2022 through 2038.



# Wake County Settlement Funding Plan

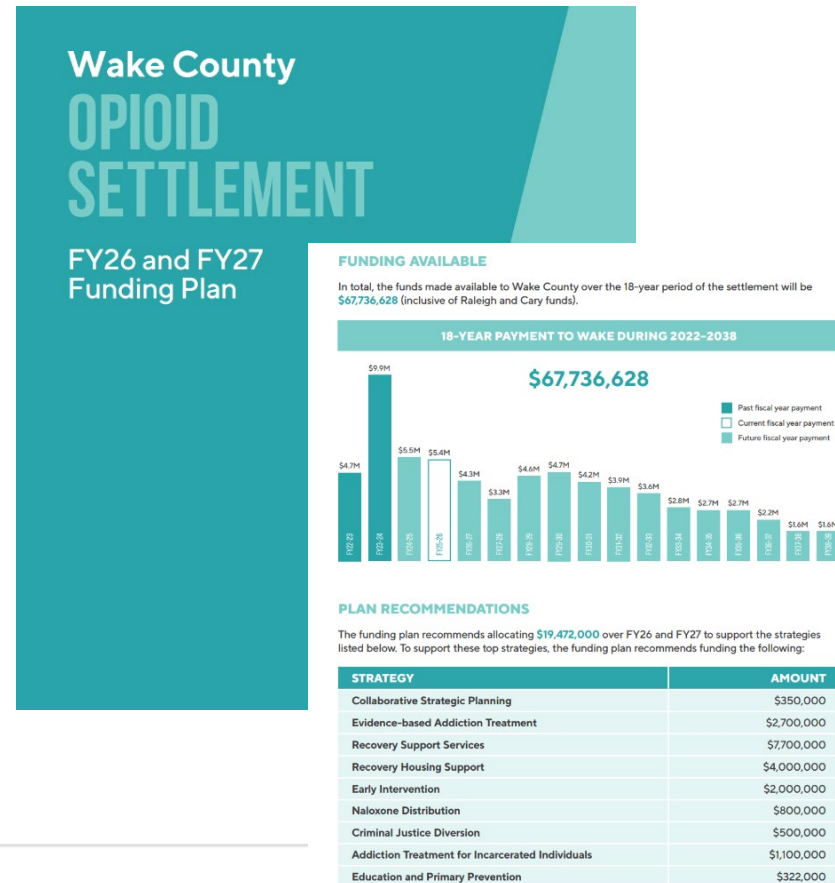
FY 26 + 27 Funding Plan approved in June 2025.

- Builds off community engagement process and previous spending plans.

## Priority Investment Areas

- Early Identification and Intervention
- Housing Access and Support
- Justice Services
- Naloxone Distribution
- Opioid Use Disorder Treatment
- Recovery Support Services
- Primary Prevention and Education\*

\* New opportunity using McKinsey and Co. Funds



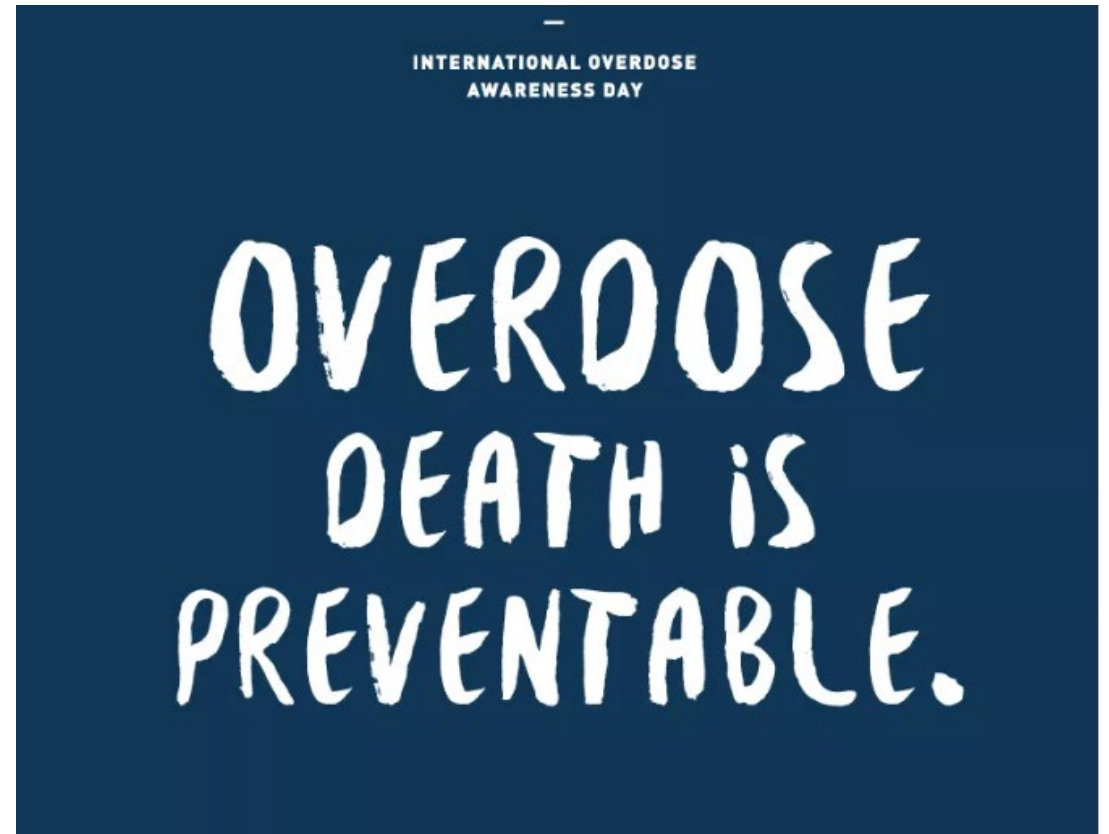
## For More Information:

**Reid Getty**

[reid@nchrc.org](mailto:reid@nchrc.org)

**Alyssa Kitlas**

[Alyssa.Kitlas@wake.gov](mailto:Alyssa.Kitlas@wake.gov)



# Adjourn



## **Next Meeting:**

- **Date:** Monday, November 24 at 2:00pm
- **Location:** Raleigh Housing Authority – Community Room
  - 971 Harp Street, Raleigh, NC 27601 (Across from 900 Haynes Street entrance)
- **Tentative Agenda:**
  - 2026 Governance Board Nomination Slate – vote.
  - Coordinated Entry Policies and Procedures – vote.
  - Strategic Planning

*If you have not done so already, please sign-in!*

CoC Coordination or for more info: [Info@wakenc507.org](mailto:Info@wakenc507.org)