

ANNEX – 1

FOCUS AREA – EDUCATE AND COMMUNICATE SOUTH CAROLINA OPIOID EMERGENCY RESPONSE PLAN

COORDINATING AGENCIES:	S.C. Medical Association (SCMA), S.C. Hospital Association (SCHA)
PRIMARY AGENCIES:	BlueCross BlueShield of South Carolina (BCBSSC); S.C. Department of Alcohol and Other Drug Abuse Services (DAODAS); S.C. Department of Health and Environmental Control; S.C. Department of Labor, Licensing and Regulation; Chernoff Newman
SUPPORTING AGENCIES:	S.C. Department of Health and Human Services, S.C. Educational Television, S.C. School Boards Association, Behavioral Health Services Association of South Carolina Inc., Faith-Based Organizations, Local Coalitions, Hospitals & Medical Practices, Other Professional Associations & Private Sector Partners

I. INTRODUCTION/PURPOSE

The Focus Area 1 communication and education initiative supports existing efforts in South Carolina to help address the opioid crisis. The two coordinating agencies – joined by the primary and supporting agencies – will work to advance the conversation that physicians have with their patients regarding pain and pain management, as well as to raise general population awareness of the dangers of opioid use.

- A. Focus Area 1 will endeavor to encourage open dialogue between physicians and their patients, family members, and the community at large around realistic expectations for experiencing and managing pain to help stem the opioid crisis and surge in overdose deaths.
- B. Potential measurable objectives include:
 - 1. Reduction in the number of opioid prescriptions dispensed annually by South Carolina physicians
 - 2. Increases shown in alternative modes of therapy used by patients for pain management
- C. Focus Area 1 will also continue existing efforts to educate and inform the people of South Carolina about the grave consequences associated with prescription pain killer/opioid abuse.
- D. Measurable objectives for this goal include:

1. Raising the general population awareness of the dangers of opioid use, as measured by research.
2. Providing county alcohol and drug abuse authorities, other partners, and stakeholders throughout the state with the tools they need to directly impact populations throughout the state.

II. ASSESSMENT

- A. The new initiative noted above is primarily centered on implementing and elevating key discussions on opioids, pain, and prescribing. These conversations occur:
 1. Physician to physician
 2. Physician to patient
 3. Hospital to physician
 4. Hospital to patient
 5. Insurance carrier to hospitals, physicians, and patients
- B. The ongoing initiatives created by this taskforce will continue.
 1. The educational materials created through the pain management campaign spearheaded by SCMA, SCHA and BCBSSC will continue to be shared, updated and utilized.
 2. The “Just Plain Killers” campaign created by DAODAS and Chernoff Newman – will continue to disseminate messages and resources via the platforms below. The coordinating, primary, and supporting agencies will share this messaging as appropriate.
 - www.JustPlainKillers.com
 - Social media (i.e., Facebook, Twitter, Instagram)
 - Paid traditional and social media

III. GOALS & TIMELINE

- A. The Coordinating Agencies will continue to work with stakeholders to create additional educational materials focused on reducing use and quantity of opioid use and the widespread use of fentanyl.

- B. The SCMA and SCHA will focus on sharing best practices with physicians and hospitals related to:
 - 1. Proper opioid use.
 - 2. Treatment of patients who are addicted to pain killers.
 - 3. Tools to provide patients who present with opioid addiction.
- C. The SCHA will also work to partner hospitals and treatment centers to develop a system of support.

IV. CONCEPT OF THE OPERATION

- A. The ongoing and new campaigns will encourage open dialogue between physicians and their patients, family members, and the community at large around realistic expectations for experiencing and managing pain to help stem the opioid crisis and the surge in overdose deaths. Potential measurable objectives include:
 - 1. Reduction in the number of opioid prescriptions dispensed annually by South Carolina physicians; and
 - 2. Increases shown in alternative modes of therapy used by patients for pain management.
- B. The campaigns chosen – will raise general population awareness of the dangers of opioid use, as measured by research. The campaign also seeks to reduce the stigma surrounding the issue of opiate-related drug misuse/abuse in South Carolina, and to support local offices, partners, and stakeholders throughout the state by providing them with the tools they need to directly impact South Carolina’s various populations.

V. AGENCY RESPONSIBILITIES

- A. Each agency listed above is responsible for:
 - 1. Outreach to community partners, as related to each agency's initiatives
 - 2. Tracking of progress
 - 3. Updating annex as needed
- B. Each agency commits to attending regular meetings regarding this annex.

VI. RESOURCES

- A. State Opioid Response Grant