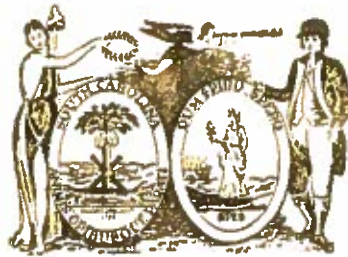


State of South Carolina  
Executive Department

FILED

DEC 18 2017

Mark Hammond  
SECRETARY OF STATE



Office of the Governor

EXECUTIVE ORDER NO. 2017-42

**Proclamation of a Statewide Public Health Emergency and  
Establishment of the Opioid Emergency Response Team**

**WHEREAS**, opioids are a class of drugs that includes prescription pain relievers such as hydrocodone, oxycodone, codeine, and morphine, as well as illegal drugs such as heroin and analogs of the synthetic opioid analgesic fentanyl, such as carfentanyl; and

**WHEREAS**, the growing epidemic caused by the misuse and abuse of opioids and other similar controlled substances is one of the greatest challenges facing the State of South Carolina; and

**WHEREAS**, in May of 2013, the South Carolina State Inspector General highlighted the crisis by preparing a report on the need to implement a statewide strategy to combat prescription drug abuse, titled "South Carolina Lacks a Statewide Drug Abuse Strategy"; and

**WHEREAS**, on March 14, 2014, Executive Order No. 2014-22 established the Governor's Prescription Drug Abuse Prevention Council ("PDAP Council"), which was tasked with developing a comprehensive State Plan to combat prescription drug abuse; and

**WHEREAS**, the PDAP Council published the State Plan on October 1, 2014, which consisted of fifty-four (54) recommendations, and the PDAP Council completed its mission after ensuring implementation of most of the recommendations; and

**WHEREAS**, on May 9, 2017, the House Opioid Abuse Prevention Study Committee began meeting to discuss further State action to combat the opioid epidemic and is expected to publish a report with recommendations for the State in January of 2018; and

**WHEREAS**, as the Governor's Opioid Summit was held September 6 and 7, 2017, in collaboration with and sponsored by the Department of Alcohol and Other Drug Abuse Services ("DAODAS"), attracting nearly 600 attendees; and

**WHEREAS**, on October 26, 2017, President Donald J. Trump declared a public health emergency under the Public Health Services Act; and

**WHEREAS**, on November 1, 2017, President Trump's Commission on Combating Drug Addiction and the Opioid Crisis published a Final Report with fifty-six (56) recommendations to assist the President in combating the opioid crisis and drug addiction affecting the nation; and

**WHEREAS**, it is clear from the meetings and reports detailed above that South Carolina needs a comprehensive and continuous statewide strategy to address the opioid epidemic, as demonstrated by the increasing number of deaths related to opioid misuse, abuse, and overdose; and

**WHEREAS**, the following statistics further highlight the rapid increase in fatalities due to the opioid epidemic:

1. In 2016, 684 deaths occurred in South Carolina from overdose related to all types of prescription drugs as indicated by death certificates, which reflects an increase of 7% from 641 in 2015, and an increase of 12% from 572 in 2014.
2. The occurrence of deaths related to all opioids, including prescription drugs, is rising steadily, with a 21% increase from 2014 to 2016.
3. Fatal overdoses related to heroin increased by 67% from 2014 to 2015 and again increased by 14% from 2015 to 2016.
4. For the past three years, the number of opioid-related overdose deaths in South Carolina surpassed the number of homicides, with 2016 statistics reporting 616 opioid-related overdose deaths and 366 homicides.
5. In 2016, Horry, Charleston, Greenville, Richland, York, Spartanburg, Lexington, Pickens, Georgetown, and Berkeley Counties reported twenty-five (25) or more fatal opioid overdose occurrences.
6. Since 2015, the South Carolina Law Enforcement Division's ("SLED") forensic laboratory has seen an over 650 percent increase in the number of drug cases in South Carolina involving fentanyl-related compounds.

**WHEREAS**, the rise in deaths associated with the opioid epidemic continues to increase, causing a public health threat; and

**WHEREAS**, a state public health emergency exists when a qualifying health condition “poses a substantial risk of a significant number of human fatalities” pursuant to section 44-4-130(P), (R) of the South Carolina Code of Laws; and

**WHEREAS**, the increased prevalence of opioid use disorder and the increasing number of opioid-related deaths give rise to a public health emergency; and

**WHEREAS**, the opioid epidemic is a serious threat to the safety, security, and economic well-being of the State; and

**WHEREAS**, law enforcement must coordinate a concerted effort to stop the trafficking of prescription drugs and unlawful opioids; and

**WHEREAS**, coordination among state agencies, private entities, and law enforcement, and the ability to share data, capabilities, and processes is necessary to effectively combat the opioid epidemic.

**NOW, THEREFORE**, by virtue of the authority vested in me as Governor of the State of South Carolina and pursuant to the Constitution and Laws of this State and the powers conferred upon me therein, I hereby proclaim a statewide public health emergency exists in South Carolina relating to opioid misuse and abuse, opioid use disorder, and opioid-related deaths pursuant to section 1-3-420 of the South Carolina Code of Laws. The statewide public health emergency shall remain in place until modified, amended, or revoked by subsequent Executive Order. Emergency health powers triggered by a statewide public health emergency shall be activated and invoked only by additional Executive Orders identifying any such emergency health powers to be utilized.

Additionally, pursuant to section 1-3-440 of the South Carolina Code of Laws, I hereby authorize any and all law enforcement officers of the State or its subdivisions to act as necessary and consistent with the foregoing to maintain good order during this statewide public health emergency. Also, pursuant to section 1-3-480 of the South Carolina Code of Laws, I hereby authorize the Adjutant General to enter into mutual assistance and support agreements with law enforcement agencies as needed to support drug interdiction, counterdrug activities, and demand reduction activities.

Further, recognizing the need for urgent action to effectively coordinate federal, state, and local resources to address this health crisis, I hereby establish the Opioid Emergency Response Team (“Team”), as outlined below, to ensure coordination and collaboration among government agencies, private entities and associations, and state and local law enforcement authorities in the fight against the opioid crisis:

**A. Co-Chairs and Coordination of the Opioid Emergency Response Team:**

The Team shall be co-chaired by the Director of DAODAS and the Chief of SLED. Team meetings shall be hosted at the South Carolina Emergency Management Division (“SCEMD”) due

to its experience with and comprehensive approach to emergency preparedness, response, recovery, and mitigation. SCEMD is active in the management of public health crises and has contacts with state and local officials that will benefit the Team in coordinating this statewide effort.

**B. Members of the Opioid Emergency Response Team:**

The Team will consist of the following members:

1. One representative from each of the following State agencies or entities, as designated by the director or chief of the same: DADOAS; SLED; SCEMD; South Carolina Department of Health and Human Services; South Carolina Department of Labor, Licensing and Regulation; South Carolina Department of Health and Environmental Control; the South Carolina Commission on Prosecution Coordination; the Department of Public Safety; and the Medical University of South Carolina;
2. The Attorney General of South Carolina or his designee;
3. The Adjutant General of South Carolina or his designee;
4. Representation from the following private entities and associations upon invitation by the Co-Chairs: local law enforcement; third party health plans; South Carolina Coroner's Association; South Carolina Chapter of American Association for the Treatment of Opioid Dependence ("SC AATOD"); South Carolina Behavioral Health Services Association; American College of Emergency Physicians ("ACEP"); and a citizen representative in recovery;
5. Representation from federal agencies, such as the Drug Enforcement Agency ("DEA") and the Postal Inspector, upon invitation by the Chief of SLED, to coordinate federal resources and assist in the interdiction of drugs; and
6. Other representatives may be invited by the Governor or Co-Chairs to serve on the Team or attend various Team meetings as needed.

**C. Opioid Emergency Response Team Purpose:**

The Team shall hold its first meeting on December 19, 2017, at 2:30 P.M. The Team shall thereafter meet at least monthly for the first six (6) months and shall thereafter meet at the call of the Governor or the Co-Chairs as needed to ensure continued collaboration. The Team shall coordinate best practices and address action items related to the opioid crisis, including but not limited to the following:

1. Review resources to determine needed action items and strategies:

- a. Recommendations from the President's Commission on Combating Drug Addiction and the Opioid Crisis;
  - b. Recommendations from the South Carolina House Opioid Abuse Prevention Study Committee;
  - c. Recommendations set forth in the South Carolina State Plan created and implemented by the Prescription Drug Abuse Council;
  - d. Strategies and actions in place in South Carolina, other states, and recommended by the National Governors Association; and
  - e. Other information as determined by the Team.
2. Draft an Opioid Abuse State Plan by June of 2018 with a list of action items. The Opioid Abuse State Plan should be continually revised to move the State forward in combatting the opioid crisis. Action items may recommend agency policies, regulations, and legislation.
  3. Coordinate state agencies and private stakeholders to implement the Opioid Abuse State Plan and limit duplication of services.
  4. Identify federal and state funding streams that can be directed to combat opioid abuse, misuse, and overdose.
  5. Encourage data sharing between law enforcement authorities, state agencies, and private entities to combat drug use and the interdiction of drug sources. Inclusion of federal law enforcement authorities will be utilized to stop illegal opioids from entering South Carolina.
  6. Share information on the presence of highly lethal synthetic drugs in geographic areas of the State and communicate information through social media and other resources to prevent further deaths.
  7. Recommend and implement training for state and local law enforcement authorities regarding referrals of opioid abuse victims to public and mental health agencies.
  8. Educate state and local law enforcement and local health officials regarding the benefits and administration of naloxone in preventing both prescription and illicit opioid deaths.
  9. Recommend ways to strengthen the current Prescription Drug Monitoring Program ("PDMP"), known as SCRIPTS.
  10. Review options to incorporate treatment for individuals prior to, during, after, or in lieu of incarceration, to include the expansion of drug courts.
  11. Take all other and further actions as deemed necessary by the Team.

This Order is effective immediately.



GIVEN UNDER MY HAND AND THE  
GREAT SEAL OF THE STATE OF  
SOUTH CAROLINA, THIS 18th DAY OF  
DECEMBER, 2017.

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**HENRY MCMASTER**  
Governor

ATTEST:

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**MARK HAMMOND**  
Secretary of State