

In this State Tort Claims Act case against DHHS, Martin & Jones proved that the negligence and wrongful conduct of employees and agents of the North Carolina Department of Health and Human Services (DHHS) caused the wrongful death of a gentleman who went to a state-operated alcohol and drug abuse treatment center for help with substance abuse issues. A verdict was obtained at trial in favor of the plaintiff. In November 2013, the trial verdict was affirmed 3-0 by the Full Commission.

In August 2009, a 42-year-old man sought help with substance abuse issues and voluntarily admitted himself to a DHHS-operated alcohol and drug abuse treatment center. Without checking the results of a urine drug screen, staff began administering methadone, a powerful and potentially fatal drug used to treat the symptoms of opiate withdrawal. In the context of a drug abuse treatment center, the only use for methadone is to treat opiate withdrawal symptoms. A urine drug screen was eventually taken and showed that the decedent had no opiates in his system, such that there was no medical justification for the administration of any methadone.

Over the course of 27 hours, staff administered 80 milligrams of methadone even though applicable federal regulations specify that the daily maximum dose of methadone is 40 milligrams. Staff had administered 60 milligrams of Methadone - 150 percent of the daily max pursuant to federal regulations - in the course of just 13 hours. In addition to administration of large amounts of methadone despite the absence of any medical justification for the use of that powerful drug, staff failed to monitor the decedent's vital signs. For instance, staff took no responsive action when it was noted that the decedent's pulse rate had dropped from 100 beats per minute to just 52 beats per minute in just two and one-half hours. At the same time, the decedent's respiratory rate was dropping, indicating that the decedent was suffering from respiratory distress, one of the more serious and potentially fatal side effects of methadone.

The decedent collapsed at the facility and EMS was called. Efforts to revive him were unsuccessful. Thereafter, the decedent's family sought to ascertain from DHHS what had happened to their loved one but DHHS officials refused to come forward with information about the inappropriate administration of methadone and the circumstances of the man's death. The family had to hire an attorney to find out what happened to their loved one.

The case was tried in December 2012. In February 2013, the trial judge entered a verdict in the Plaintiff's favor for approximately \$628,000, plus costs. That verdict was affirmed on appeal to the Full Commission, though the verdict

was reduced to approximately \$528,000, plus costs.