

ONEIDA COUNTY OPIOID TASK FORCE Overdose Response Team

Using Data, Collaboration & Innovation to Save Lives



Opioid Task Force Chairpersons:

Anthony J. Picente, Jr., Oneida County Executive

Robert M. Maciol, Oneida County Sheriff

Scott D. McNamara, Oneida County District Attorney

A BRIEF: PUTTING DATA TO ACTION

OCTOBER 2022

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MESSAGE FROM ONEIDA COUNTY OPIOID TASK FORCE CHAIRS

Opioid and other emerging drug threats plague communities across the nation and Oneida County is no different. We are challenged by the rapidly changing drug threat environment taking far too many lives at an alarming rate. We need real-time actionable data at the local level to understand and more effectively address this public health epidemic. We also need to maximize limited resources by learning from other communities and sharing evidence-based and promising practices. We know from experience that what is proven to work well in one community can be tailored to another. Much of the data-driven work of our Opioid Task Force has garnered commendation and requests for guidance from communities across the state and nation seeking to replicate some of our activities including our Overdose Response Team, Overdose Detection and Mapping Application Program (ODMAP) and other real-time data collection and surveillance activities, data and information sharing tools, and the ways in which we put the data into action. It is our hope that this brief will provide guidance on these activities for the benefit of other communities.

We are keenly aware of the complexities and challenges associated with the opioid epidemic and the sobering fact that there is much more work to do in Oneida County to save lives. We are also proud of the partnership we have mobilized and the innovative and life-saving work being done in our community. It is our resolve to continue to learn and adapt and to use data-driven approaches to implement strategies proven to both prevent addiction and improve the lives of those battling the disease. As our work evolves, this document will be updated periodically to reflect key enhancements.

Our thanks to our dedicated partners, staff, and the communities that have and continue to share their successes with us and we hope that this tool will benefit others in the same way.

Anthony J. Picente, Jr., County Executive

Robert M. Maciol, Sheriff

Scott D. McNamara, District Attorney

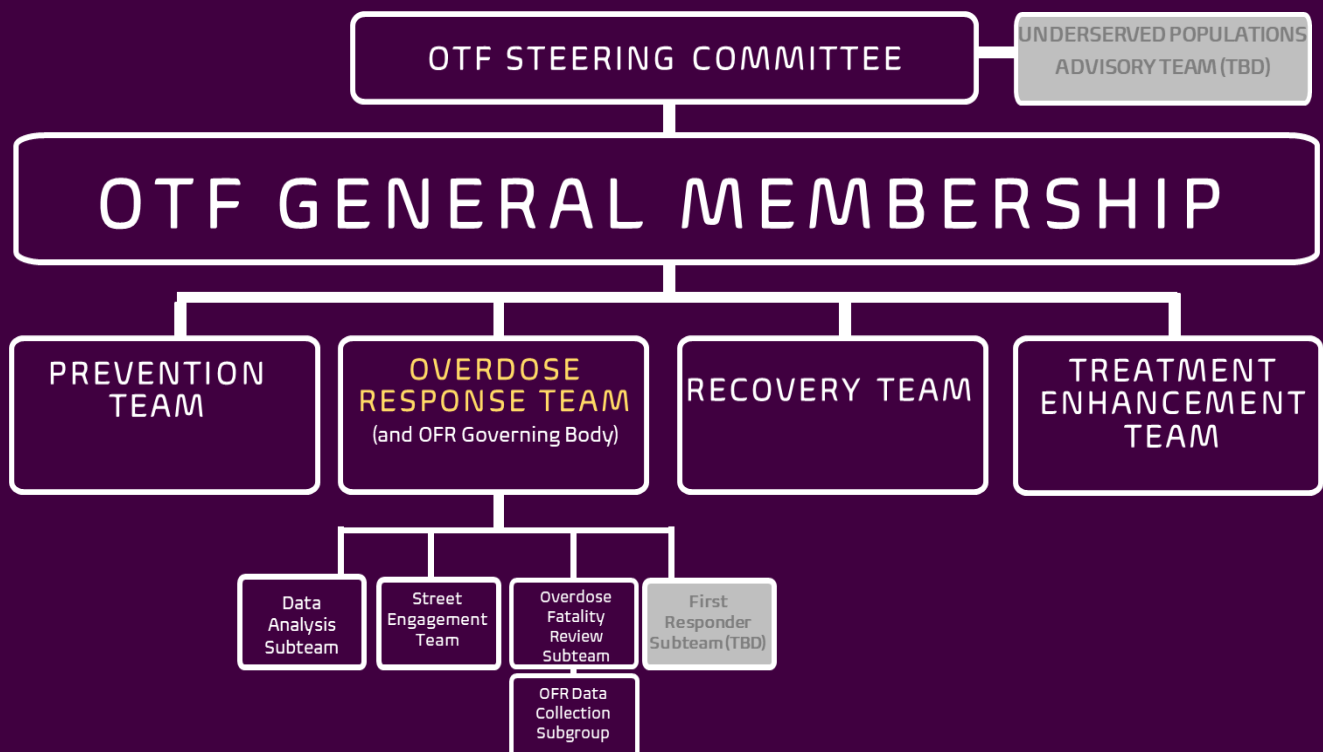
Oneida County Opioid Task Force—Overdose Response Team

The Overdose Response Team (ORT) is one of four workgroups under the Oneida County Opioid Task Force (OTF), a multi-agency partnership focused on reducing the number of fatal overdoses in the county using a multi-pronged, data-driven approach. The ORT meets every 2 months (*See Attachment A—Sample ORT Meeting Agenda*) and is responsible for overdose and drug trend surveillance data collection and analysis, information sharing, and implementing overdose prevention and harm reduction activities. The other OTF workgroups focus include Treatment Enhancement Team, Recovery Team and Prevention Team (focusing on preventing addiction).

The Overdose Detection Mapping Application Program (ODMAP) is the main hub for tracking near-real time overdose reports from law enforcement and the Medical Examiner's Office. This data is the foundation of the ORT's Overdose & Drug Trend Dashboard and for weekly overdose surveillance reports to promote evidence-based, data-driven response actions across all the OTF teams and initiatives. Other near-real time qualitative and quantitative data sources also support the surveillance program. The ORT develops and disseminates coordinated public education messages to the public regarding overdose spikes and emerging drug trends and uses the data collected to support a post-overdose follow up program for overdose survivors as well as several other OTF data-driven initiatives summarized in this report.

ONEIDA COUNTY OPIOID TASK FORCE

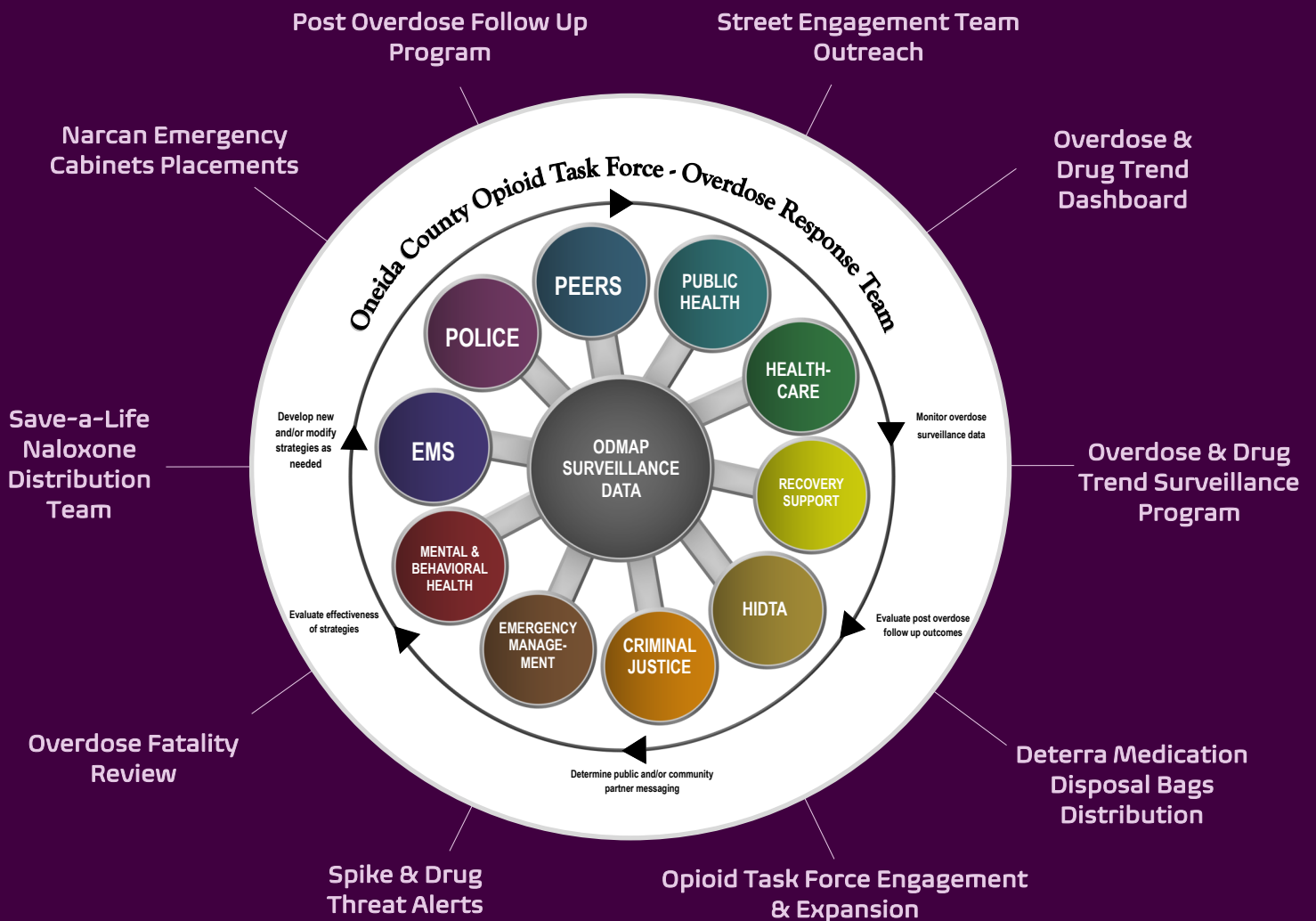
COUNTY EXECUTIVE ANTHONY J. PICENTE, JR., CO-CHAIR
DISTRICT ATTORNEY SCOTT D. MCNAMARA, CO-CHAIR
SHERIFF ROBERT M. MACIOL, CO-CHAIR



OVERDOSE RESPONSE TEAM MEMBER AGENCIES:

ACR HEALTH SYRINGE EXCHANGE PROGRAM
 MIDSTATE REGIONAL EMS
 MOHAWK VALLEY CRIME ANALYSIS CENTER
 MOHAWK VALLEY HEALTH SYSTEM
 NY/NJ HIDTA
 NYS POLICE
 ONEIDA COUNTY DISTRICT ATTORNEY'S OFFICE
 ONEIDA COUNTY EMERGENCY SERVICES
 ONEIDA COUNTY EXECUTIVE'S OFFICE
 ONEIDA COUNTY HEALTH DEPARTMENT
 ONEIDA COUNTY DEPARTMENT OF FAMILY & COMMUNITY SERVICES
 ONEIDA COUNTY LAW DEPARTMENT
 ONEIDA COUNTY MENTAL HEALTH DEPARTMENT
 ONEIDA COUNTY PLANNING DEPARTMENT
 ONEIDA COUNTY SHERIFF'S OFFICE
 ONEIDA HEALTH HOSPITAL
 ONEIDA COUNTY PROBATION
 ONONDAGA COUNTY MEDICAL EXAMINER'S OFFICE
 ROME FIRE DEPARTMENT
 ROME MEMORIAL HOSPITAL
 UTICA FIRE DEPARTMENT
 UTICA POLICE DEPARTMENT
 WHITESBORO POLICE DEPARTMENT

Many of the data-driven responses outlined in this report are implemented not only by the ORT, but a variety of dedicated partners across the larger multi-sector Opioid Task Force and its workgroups.



TIMELINE OF OPIOID TASK FORCE HIGHLIGHTS



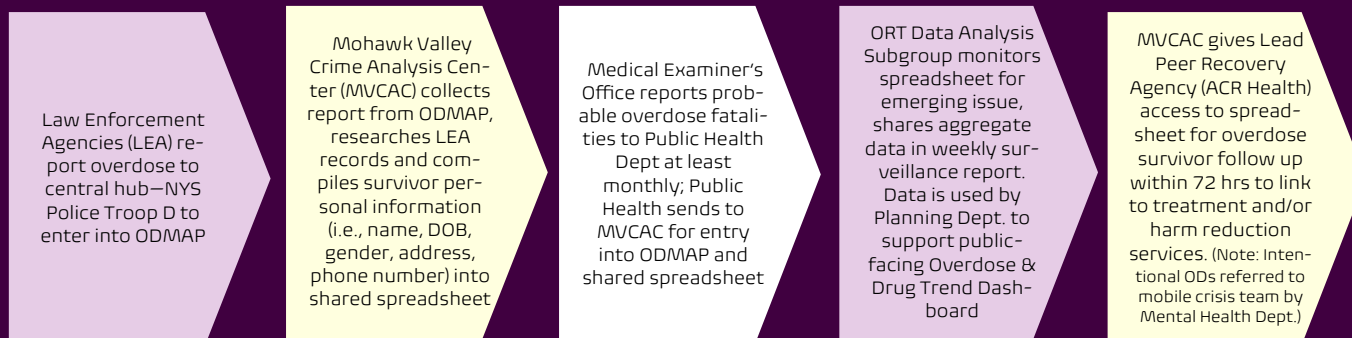
1. OVERDOSE & DRUG TREND SURVEILLANCE

A. COLLECTING THE DATA

Near real-time data from multiple data stream sources listed below is collected, monitored, analyzed and shared:

- Law Enforcement overdose reports entered into ODMAP. The Mohawk Valley Crime Analysis Center opted to create a data sharing agreement with all 16 local LEAs that secures commitment to report overdoses to ODMAP and disclose how data will be used for public health purposes. As law enforcement records are public information, the MVCAC plays a critical role in sharing with public health for analysis and the lead peer recovery agency for follow up.
- Medical Examiner's Office Probable Overdose Reports entered into ODMAP; MVCAC and Public Health Department have access to Medical Examiner's Office data program
- Monitoring hospital emergency department overdoses via the New York State Department of Health (NYSDOH) Electronic Syndromic Surveillance System.
- Fatal overdose forensic toxicology report drug detections.
- Boots on the ground drug trend intel from service providers and law enforcement.

ODMAP DATA COLLECTION PROCESS



B. MONITORING THE DATA

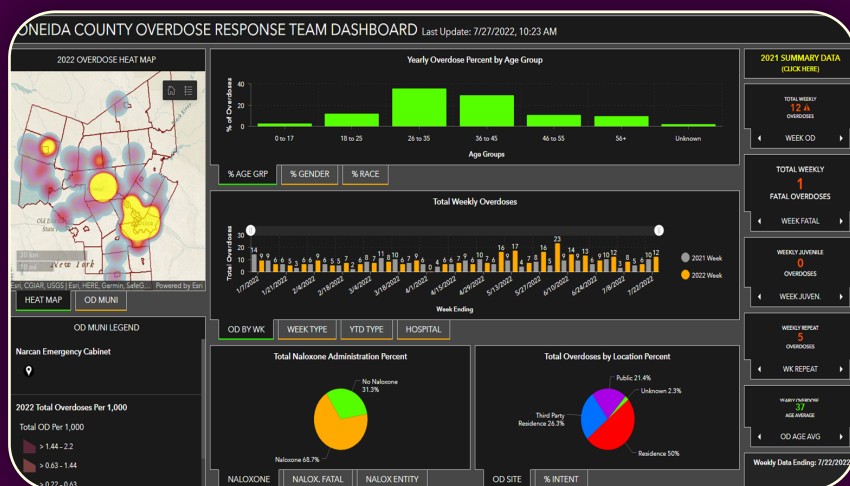
The ORT reviews data trends routinely at bimonthly meetings. The ORT's Data Analysis Subgroup (DAS) is responsible for monitoring data for overdose spikes and drug trends through an ongoing surveillance process to identify:

- Spikes or unusual increase in overdoses triggered by an ODMAP spike alert notification. Current spike threshold is 4 opioid-related overdoses in 24 hours.
- Overdose increases that may not trigger an automated ODMAP spike alert notification (4 in 24 hours), but surveillance shows an increase in overdoses or trend of concern; this could include multiple fatal overdoses in a short period, unusual increase in overdoses in a given time period, geographic or demographic clusters or trends (i.e., age, gender, race) and/or credible reports of drug trends.
- Emerging drug trends identified in overdose fatality forensic toxicology reports and/or partner agency intel (i.e., stimulants tainted with fentanyl, xylazine, novel substances)
- Increase in number of Naloxone administrations required to reverse overdoses.
- Increase in emergency department overdose incidents.
- Increase in number of intentional overdoses.
- Trends in overdose locations (i.e., outdoor, residential, businesses, shelters).
- Individuals at high-risk (i.e., multiple overdose in a sort time period) for priority follow up.

2. INFORMATION SHARING

Data collected is shared in aggregate with Opioid Task Force partners and the community using the methods listed below to promote a shared understanding of overdose and drug trends, foster stronger partnership engagement, and to support data-driven responses:

- A one-page Weekly Overdose Surveillance Report is prepared and disseminated to over 200 partners.
- A public-facing, interactive and comprehensive Overdose & Drug Trend Dashboard was developed and is maintained by the Oneida County Planning Department using ODMAP data compiled by the Mohawk Valley Crime Analysis Center (See Box—Technical tips for Dashboard development).
- Ad hoc Drug Trend Reports are prepared and disseminated when emerging drug trends are identified (i.e., carfentanil detection).
- Overdose Response Team spike and drug trend alerts are issued to the public via press releases from County's Executive's Office, social media postings and to subscribers of the Spike Alert by Text platform (See Spike Response Section).



Oneida County Planning Department Technical Tips for Dashboard Development

Software Needs:

- ◆ Google Docs for initial data collection
- ◆ Microsoft Excel for data compilation
- ◆ ESRI ArcGIS Pro Additional Database Management and Data Publishing
- ◆ ESRI ArcGIS Enterprise Platform for Data Hosting and Map Services
- ◆ ESRI ArcGIS Online account for generating Web Maps and Dashboard

Process:

- ◆ Compile base data from ODMAP, Mohawk Valley Crime Analysis Center, & Medical Examiner's Office (shared spreadsheet)
- ◆ Convert Data into ArcGIS Database Compatible Format
- ◆ Upload ArcGIS Data to County Server
- ◆ Publish ArcGIS Databases to Web Services
- ◆ Create Web Maps and Dashboard features in ArcGIS Online

3. SPIKE RESPONSE

A. OVERDOSE SPIKE & DRUG TREND TRIGGERS

The following data systems or surveillance activities will trigger an alert notification for a potential increase in overdoses and/or drug threat.

- ODMAP spike alert notification; the threshold for a notification is currently 4 opioid overdoses in a 24-hour period.
- Monitoring ODMAP and/or fatal Overdose Forensic Toxicology Drug Detections and identifying a novel or emerging substance or identifying an unusual increase or cluster of overdoses or fatalities with geographic, demographic or other commonalities (i.e., neighborhood, municipality, age, gender, race or ethnicity).
- Alert notification from the New York State Department of Health (NYSDOH) Electronic Syndromic Surveillance System signaling a geographic cluster or unusual increase in hospital emergency room overdoses.
- Boots on the ground intelligence from people who use drugs and/or service providers (i.e., syringe exchange program, treatment providers, first responders) regarding a dangerous drug trend that may be contributing to an increase in overdoses or fatalities.

B. THREAT RISK ASSESSMENT

When an one or more of the triggers above are activated, the ORT Data Analysis Subgroup conducts a rapid risk assessment (*See Box – Risk Assessment Questions*) to evaluate the incident (s) and prepares a recommended action for ORT leadership. Alerts and recommended course of action are typically processed within 24 hours or by next business day . Recommendations include one of the following response levels:

- **No Notifications at this Time** – Continue to monitor for changes (i.e., spike or incident appears to be an anomaly).
- **Potential or Suspected Increase:** Awareness Notification to Community Partners Only – (i.e., informational email to Opioid Task Force and/or recommended response actions)
- **Confirmed Increase:** Issue Spike Alert to Public and Community Partners and/or initiate active responses (i.e., spike OR drug threat press release, spike alert by text, social media, neighborhood outreach teams, and/or other Opioid Task Force actions).

RAPID RISK ASSESSMENT:

- ◆ Any fatalities?
- ◆ Hospital emergency department overdoses increasing?
- ◆ Multiple Doses of Naloxone required?
- ◆ Repeat Overdoses? (individuals at high risk)
- ◆ Geographic connection? (i.e., cluster or widespread)
- ◆ Demographic commonalities? (i.e., age, race, gender, relation, group)
- ◆ Other factors? (recent drug seizure, etc.)
- ◆ Reports from people who use drugs or service providers regarding a contributing drug threat (i.e., stimulants and fentanyl, bad batch, color of substance, forensic toxicology)
- ◆ Any similar trends with baseline data (time of year, etc.)
- ◆ Is this a potential growing or novel threat?

Spike/Drug Threat Alert Levels



MONITOR



NOTIFY PARTNERS
AND/OR RESPONSE
ACTIONS



PUBLIC ALERT
AND/OR RESPONSE
ACTIONS



ONEIDA COUNTY OFFICE OF THE COUNTY EXECUTIVE

ANTHONY J. PICENTE, JR.
County Executive
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For Immediate Release

Contact: Phil Vanno 315-723-5465 or pvanno@ocgov.net

June 3, 2022

Oneida County Overdose Response Team Issues New Spike Alert

2 Fatal and 5 Non-Fatal Overdoses Occurred

ONEIDA COUNTY OVERDOSE RESPONSE TEAM ISSUES SPIKE ALERT, WARNS OF LACED COCAINE



The Oneida County Overdose Response Team has issued a spike alert following six overdoses over 24 hours, five of which were in the Sylvan Beach area.

Posted: Jul 21, 2021 2:37 PM
Updated: Jul 21, 2021 5:41 PM
Posted By: WATV



The Team is alerting the public to deaths.

and five non-fatal overdoses primarily as a result of heroin use. The spike is connected to the earlier reports of a purple colored

Overdose spike in Oneida County related to cocaine laced with fentanyl, carfentanil



The ORT also issued spike alerts on May 26 (six non-fatal overdoses) and May 27 (two non-fatal overdoses).

As of June 3, the County's Overdose Detection & Mapping Application Project (ODMAP) recorded 63 overdoses in May, the highest numbers of overdoses since the implementation of ODMAP in 2019.

NEWS

Six overdoses in one day trigger Oneida County spike alert, fears of stronger drugs

Amy Neff Roth

Published 4:58 p.m. ET July 21, 2021

View Comments

Oneida County has had six overdoses, including one death, in 24 hours, prompting an overdose spike alert from the Oneida County Overdose Response Team.

The spike includes four overdoses at a residence in Sylvan Beach on Tuesday; firefighters revived all four with naloxone. It also includes two separate overdoses in Vienna, one of them fatal.

Test results for drugs involved in those overdoses are still pending.

community is aware that there is still a risk of overdoses, but has also taken steps to help. County Executive Anthony J. Picente said the spike, which is now continuing into June, is of concern to him and his friends to be on elevated

public of the following:

There is always on hand. Go to the

where you can access Narcan locally and online.

Given the increasing potency and prevalence of these drugs, it is not uncommon for overdose victims to require more than two doses of Narcan to be revived. For this reason, it is essential to also call 911. First responders will be

NEWS

Oneida County Overdose Response Team issues advisory after tranquilizer linked to deaths

Amy Neff Roth Observer-Dispatch

Published 5:22 p.m. ET July 9, 2021 | Updated 7:37 p.m. ET July 9, 2021

View Comments

At least three people have died in Oneida County this year after taking fatal overdoses of xylazine, an animal tranquilizer most frequently used in horses, in combination with other drugs, according to the Oneida County Overdose Response Team.

The team issued a public health advisory about xylazine Friday.

The tranquilizer is only approved for use in animals because it is known to be harmful to humans, according to the advisory.

New trend is causing spike in cocaine overdoses, Oneida County health officials say

Frankie Jupiter, Jeanne Tyler Moodee Lockman - Sep 24



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to End Addiction

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1-855-963-5669

4. DATA TO ACTION

ODMAP and other data supporting the Overdose & Drug Trend Surveillance process is used to support numerous innovative and evidence-based initiatives of the Opioid Task Force and its workgroups. Examples include:

A. ODMAP POST OVERDOSE FOLLOW-UP PROGRAM:

Peer Recovery Advocates from the Syringe Exchange Program follow up on all non-fatal overdose survivors within 72 hours post-overdose. Approximately 30% of individuals reached are connected to substance use disorder treatment; ~ 67% of individuals reached connected to Inpatient or Outpatient Treatment, Peer Support, Harm Reduction, Mental Health and/or Other Support Services.

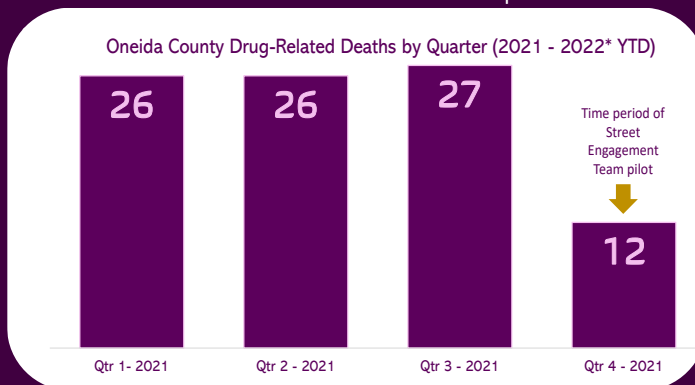


B. STREET ENGAGEMENT TEAM OUTREACH:

A “boots on the ground” Street Engagement Team (SET) is currently deployed at least once a week to hot spots identified in ODMAP to provide low-barrier linkage to same-day buprenorphine treatment and/or harm reduction resources. The team references the Overdose & Drug Trend Dashboard heat map prior to deployment to select hot spots for focused outreach in neighborhoods, businesses, apartment complexes and abandoned buildings. Prior to outreach in new areas, businesses, community and/or law enforcement agencies in neighborhoods with hot spots are canvassed to provide awareness about the SET its purpose and to solicit feedback on other areas where people who use drugs may convene. This low-barrier model was piloted in

2021 in Oneida Square, Utica, a neighborhood with growing number of unhoused individuals and provided ~100 linkages to same-day treatment and harm reduction resources in two months. During the period of intensive outreach, overdose fatalities decreased by almost 30%. Additionally, street outreach efforts revealed a major barrier to services for many was a lack of a valid ID to access resources, services, etc. As a result, a process

was set up with the Sheriff’s Office to facilitate access to Sheriff’s ID at no cost to the clients. YTD over 70 IDs have been issued. The Health Department meets every two week with the post overdose follow up and SET staff to debrief, identify successes as well as issues and barriers that may require additional resources or support from the ORT or other partners.



C. NY MATTERS PROGRAM

In 2020, Oneida County initiated implementation of the NY MATTERS (Medication Assisted Treatment and Emergency Referral) Program, a renowned and successful opioid treatment program developed by Dr. Joshua Lynch in the Buffalo region. Local hospitals and treatment clinics were recruited to participate in this model program for Emergency Department Initiated Buprenorphine for people with opioid use disorder in addition to providing rapid, reliable referrals to treatment clinics for patients upon discharge.

D. NALOXONE EMERGENCY CABINET PLACEMENTS

YTD ~100 Narcan Cabinets have been placed in locations throughout the County. Partners with Naloxone training and distribution programs were recruited to assist in placing cabinets throughout the County with priority focused on businesses and locations identified in ODMAP as overdose hot spot areas or public places with reported overdoses.



E. "SAVE-A-LIFE" CAMPAIGN:

- **NALOXONE DISTRIBUTION TO BUSINESSES:** Partners were recruited to participate in the "in the "Save-a-Life" Overdose Rescue Kit Campaign in which Naloxone kits with an instruction card and QR code to training resources were distributed and promoted as a basic first aid tool to numerous local businesses including restaurants, bars, gas stations and convenience stores, retail stores and other businesses and organizations in the community. Partners were encouraged to go to businesses throughout the county and use Overdose & Drug Trend Dashboard as a guide for hot spots. In just two months, this resulted in over 800 Naloxone drop offs & mailings.



- **NALOXONE DISTRIBUTION TEAM:** The ORT formed a new multi-agency Naloxone Distribution Team to jointly distribute Naloxone to businesses in targeted areas identified in ODMAP. The team is comprised of law enforcement, public health, and peer advocates from treatment and recovery agencies. The Planning Department is currently adding all the points of distributions to businesses to the Dashboard map as well as developing a GIS mapping tool for internal team use to track and manage distributions; the mapping will identify by color points for businesses that either received, declined or are yet to be offered a kit and overlay a heat map for ODMAP overdoses. The team will reference the tool for targeted outreach prior to deployment each month. The mapping will be updated after each outreach.



- **NALOXONE-BY-MAIL TO HOMES:** In response to one of the highest overdose spikes on record, the Health Department started a *Naloxone by Mail Program* for homes/ residences and a Naloxone resource page on the Opioid Task Force website with a simple online request form and link to brief overdose rescue trainings. In three months almost 200 requests for Naloxone by Mail were processed (an additional 300 were distributed to individuals at community events). All individuals requesting Naloxone by Mail consent to receiving informational messages from the OTF including overdose spike and/or drug threat alerts.

F. LEAVE BEHIND NALOXONE PROGRAM

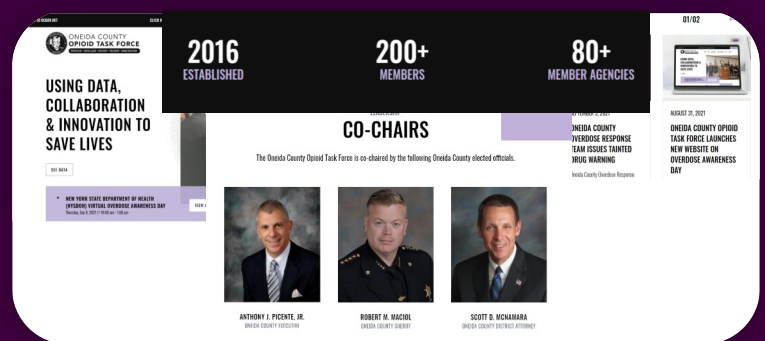
Seven first response agencies (2 law enforcement and 4 Fire/EMS) support the Leave Behind Naloxone Program in which first responders leave a Narcan kit with individuals at high-risk for overdose and/or their families or friends. The ORT coordinates with Midstate Regional EMS to recruit first response agency participation and provide Naloxone at no cost to the agency.

G. OVERDOSE PREVENTION CARE KITS & FENTANYL TEST STRIP DISTRIBUTION

Three thousand (3,000) Fentanyl Test Strips (FTS) and 1,000 Overdose Care Kits were distributed to treatment and recovery partners and 500 Overdose Care Kits to First Responder agencies. disseminated to people at high-risk of overdose. The kits include some basic supplies and overdose prevention resources that can also help facilitate conversations and engagement. The kits are designed to be distributed in conjunction with Naloxone kits and to help partners communicate care and understanding to people who use drugs and to open doors to engagement and treatment and harm reduction services. In 2022, over 10,000 additional FTS were purchased for further distribution.

H. OPIOID TASK FORCE WEBSITE

The Oneida County Opioid Task Force official website was launched in 2021. The website serves as the main communication tool for sharing data, news, highlights, data and a host of other substance use-related resources for the partners and the public. It houses the newly developed Narcan page that provides the public with access to online trainings and electronic applications to request Narcan by mail.



I. OVERDOSE FATALITY REVIEW:

An OFR Team has been formed under the ORT and will use ODMAP and Medical Examiner data to select cases for review. Through the surveillance program, baseline demographic and incident information is in place and the ORT Data Analysis Subgroup is positioned to provide context and use spike and overdose trend surveillance data to make recommendations for case reviews.

J. PEER ALLIANCE PROGRAM

In 2021, the OTF formed a Peer Alliance Program under its Recovery Team to provide training, support and paid apprenticeship opportunities for individuals in with lived experience to help others find their path to recovery. YTD 9 individuals have been guided through the process of becoming trained and certified peer recovery advocates. The program seeks to fill gaps and build local capacity to support increased integration of invaluable peer support services in various community settings. The program is coordinated by Center for Family Life & Recovery, Inc. and funded by OCHD's OD2A grant.

K. MEDICATION DISPOSAL

In 2020, Oneida County ODMAP surveillance captured 10 overdoses involving minors aged 18 years and younger; that number increased by 150% in 2021 with 26 overdoses (17 intentional; 9 unintentional). Most of the intentional overdoses involved prescription drugs and 50% occurred in rural areas of the County. In 2021, 13% (45) of the 361 overdoses tracked in ODMAP involved prescription pills. Identifying this trend led to selecting the distribution of Deterra Drug Deactivation bags as an OTF Prevention Team initiative to increase access to safe drug disposal in homes to reduce access to prescription drug misuse for minors and adults. Over 12,000 bags will be distributed in the community.



L. DRUG DETECTION IN CORRECTIONS

Through the OCHD's Bureau of Justice Assistance Grant, supporting public health and public safety collaborations that promote a shared understanding of patterns and characteristics of local problem drug use, the Oneida County Sheriff's Office was the first correctional facility in NYS to acquire and integrate the MX908 drug detection device at the county jail which can detect more than 2,000 fentanyl analogs.



5. INCREASED ENGAGEMENT AND FUNDING

In 2018, Oneida County established its Overdose Response Team under the OTF and began implementing ODMAP. These small beginnings to collect and share real-time data and issue overdose spike alerts directly resulted in a marked public and media interest and partner engagement leading to restructuring and expanding the OTF membership to strengthen overdose prevention activities under the OTF and add workgroups to address other key areas of focus, including prevention, treatment enhancement and recovery. Implementation of ODMAP has been at the center of new funding opportunities because of demonstrated real-time data collection and data-driven approaches that engages partners across the public health system. The following grants significantly strengthened and expanded the OTF and support all of the data-driven responses in this report:

- In 2018, Oneida County Health Department (OCHD) was one of 24 NYS local health departments to automatically receive opioid crisis funding (~\$72,000 annually) to support crisis activities to address the high burden of opioid overdoses in the County. The **Overdose Data to Action (OD2A)** grant led to implementation of ODMAP as one of its recommended evidence-based strategies.
- In 2019, OCHD was 1 of 10 U.S. communities to receive the competitive **Bureau of Justice Assistance Partnerships for Data-Driven Responses to Emerging Drug Threats** grant in the amount of \$640,000 which has been the main catalyst for the expansion of the OTF, real-time data collection enhancements and supporting data-driven responses including the pilot of the Street Engagement Team.
- In 2021, OCHD was 1 of 13 U.S. communities to receive the competitive **National Association of County & City Health Officials Implementing Overdose Prevention Strategies at the Local Level** grant for ~\$500,000 to support expansion of the best practice Street Engagement Team and other initiatives.

6. LESSONS LEARNED

- Real-time data collection and sharing (i.e., ODMAP) can be a catalyst for change and is a powerful tool for increased partner engagement and community awareness.
- Recognize the benefits and limitations of real-time data; it's actionable data that can be used for situational awareness and real-time response actions, however it is provisional or preliminary data versus final record data that is scrubbed for accuracy and thus has a longer lag time for reporting.
- There are benefits to starting small and not waiting for the ideal or "perfect" data to collect and spike responses to implementing; small starts build familiarization with data and its strengths and limitations. It also facilitates testing, refining and improving processes over time and builds a solid foundation for integrating new data sources and resources that may become available in the future.
- Leverage what you currently have in resources by identifying and engaging supportive leaders, champions, service providers and community advocates that are invested in the issue with or without resources.
- Small beginnings can lead to increased funding opportunities, resources, technical assistance that can significantly enhance and expand efforts.
- Identify a coordinator(s) to support, expand, and unify the partnership and manage key activities necessary to strengthen and sustain cross-sector collaborations including recruitment, engagement, meeting coordination, and overall project management.
- Use multi-pronged public health approaches to mobilize and engage a broad cross section of representatives from numerous sectors and disciplines to participate in implementation strategies across the spectrum of needs in the community.
- Continually explore and add new interventions across the continuum of services as capacity and resources allow, as opposed to a one-dimensional approaches (i.e., Narcan cabinets). Implementing new and multi-faceted approaches can open paths to new opportunities and partners and appeal to a variety of people with or at high risk of developing a substance use disorder (i.e., approaches that focus on harm reduction, treatment, recovery support and addiction prevention).
- Identify and acknowledge successes while addressing real barriers, challenges and opportunities for improvement.

ATTACHMENT A—SAMPLE ORT MEETING AGENDA

ONEIDA COUNTY OVERDOSE RESPONSE TEAM MEETING AGENDA

*October 27, 2022, 10:30 AM – 12:00 PM
Oneida County Executive's Office & WebEx Option*

- **WELCOME & INTRODUCTIONS** - County Executive Anthony J. Picente, Jr.
 - Guests/Visitors - Nicole Carter, Epidemiologist and Sara Watrous, Project Director, Cortland Area Communities That Care
- **NARCAN VENDING MACHINE OVERVIEW AND Q&A** - Brad Pommen President, CEO & Founder, SMRT1 TECHNOLOGIES LTD
- **OVERDOSE & DRUG TREND UPDATES**
 - ODMAP & Forensic Tox Data Summary: Cory White, MVCAC; Lisa Worden, Public Health; Kristi Barba, Medical Examiner's Office
 - Drug Trend Updates: Ermelindo Laracuenta Jr., DIO, NY/NJ HIDTA, MVCAC; Other agencies
- **OUTREACH PROGRESS REPORT**
 - Post Overdose Follow Up – Lisa Worden, Public Health, Roberto Gonzalez & Megan Weston-Flanders, ACR Health
 - Street Engagement Team Update - Lisa Worden, Public Health; Roberto Gonzalez & Megan Weston-Flanders, ACR Health
 - MCAT Intentional Overdose Follow Up – Sean Miri, Mental Health
- **NALOXONE EXPANSION PROJECTS**
 - Leave Behind Naloxone Program – First Response Agencies
 - Other Expansion Projects – Lisa Worden, Public Health
 - "Save a Life" Campaign
 - Naloxone by Mail
 - Naloxone Distribution Team
 - Narcan Emergency Cabinets
 - Narcan in Schools
- **OVERDOSE FATALITY REVIEW**
 - Progress Report – Lisa Worden, Public Health
 - Data Sharing Status – Maryangela Scalzo, Law Dept.
 - Data Collection Status - James Genovese, Planning Dept.
- **NEXT MEETING**
 - December 6, 2022, 10:00 – 11:30 am

QUESTIONS?

Contact:

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ocopioidtaskforce.org