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WHERE PUBLIC HEALTH AND PUBLIC SAFETY INTERSECT

ODMAP streamlines data-sharing to show law enforcement and partner agencies where opioid overdoses are happening

By Aliese Alter and Mitch Cunningham



The opioid epidemic was declared a National Public Health Emergency in October 2017. And although COVID-19 has been the primary national focus of resources and policymaking since the beginning of last year, the opioid epidemic has continued to accelerate, causing death and grief while remaining elusive with the introduction of new opioid analogues.

Law enforcement agencies have adapted quickly to these developments, carrying and administering the overdose-reversal drug naloxone—likely the first time they have taken on a routine medical role. Collaboration and coordination between public health and public safety have proved essential in responding to the epidemic, and the Overdose Detection and Mapping Application Program (ODMAP) has strengthened that collaboration.

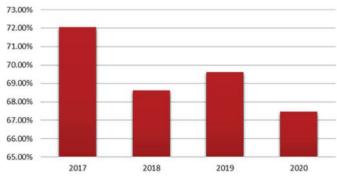


ODMAP was launched in 2017 by the Washington/Baltimore High Intensity Drug Trafficking Area (W/B HIDTA) as a tool to support the sharing of information surrounding suspected fatal and non-fatal overdoses, in near-real time, across disciplines and jurisdictional boundaries.

Given the extent and impact of the epidemic in many communities, law enforcement may respond to an overdose scene before an EMS provider or may be the sole responder. As a result, law enforcement possesses critical data that must be shared with other community sectors.

The federal HIDTA program is heavily engaged in the law enforcement community through its coordination of federal, state, local, and tribal law enforcement to support reduction of domestic drug trafficking and production. As a result of HIDTA's roots in law enforcement, the group has continued to represent the majority of participating agencies in ODMAP and has paved the road for innovation in the use of the ODMAP tool.

Law enforcement has continually represented nearly 70% of the total participating public service agencies in ODMAP nationwide. As ODMAP matures, more agencies outside law enforcement are participating, underscoring the idea of multidisciplinary partnerships. As of September 2020, ODMAP has logged more than 335,000 suspected overdoses submitted by nearly 30,000 users, representing more than 3,300 participating agencies in 49 states, the District of Columbia, and Puerto Rico.



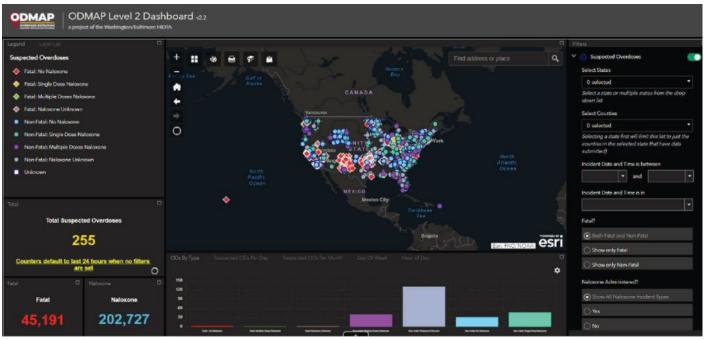
% Law Enforcement

Law enforcement's share of the data collected by ODMAP

ODMAP is a web-based tool that collects overdose data provided by law enforcement officers who respond to overdose calls. From their MDTs, mobile phones, or tablets, they simply submit basic information on the date/time, approximate location, and naloxone administration. For example, if an officer administers several doses of naloxone, he or she can indicate that by pressing the icon that represents multiple doses.

ODMAP is easy to use. If entering the data manually, it takes approximately 20 seconds to complete a report on a mobile device, MDT, or desktop computer as long as there is an internet connection. ODMAP can also connect directly to a native records management system through an Application Programming Interface (API), allowing suspected overdose data to populate directly after an incident report is submitted.

The trend data ODMAP produces gives police, EMS, and public health the opportunity to focus their resources based on the data.



ODMAP's online dashboard

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"ODMAP is an essential tool because it keeps the data we need at our fingertips," says Hennepin County (Minnesota) Sheriff David Hutchinson. "It helps us identify when we need to make public notifications, address enforcement issues, increase drug takeback strategies, and do more public education. ODMAP helps our community by providing the data [it needs] to understand the scope of the threat we are facing."



Over the past few years, ODMAP has been an integral component of many innovative and collaborative public health/public safety responses to the opioid epidemic, including:

- Erie County (New York) was one of the first communities to forge an integrative public health and public safety partnership utilizing ODMAP as a centralized platform for data-sharing across disciplines. When a police agency responds to a suspected overdose in Erie County, they enter it into ODMAP. The Erie County Public Health Department monitors ODMAP daily for new overdose submissions, and when a new overdose is identified, it contacts the police department for a police report containing the overdose survivor's information. Once received, a peer recovery coach contacts the survivor within 24 hours to discuss treatment modalities.
- The Saint Paul (Minnesota) Police Department (SPPD) expanded its mental health unit, renaming it the Community Outreach and Stabilization (COAST) Unit to better reflect its goals and vision. Embedded within the COAST Unit is the Recovery Access Program (RAP), which includes a partnership between SPPD, licensed clinical

Online forms are easy to fill out.

social workers (LCSWs), and local project partners to conduct post-overdose outreach. SPPD utilizes ODMAP to track overdose data, share drug trends within SPPD and the community, notify community stakeholders and the public of spikes in overdoses, and conduct post-overdose outreach.

• The Wilmington (North Carolina) Police Department (WPD) uses ODMAP for geospatial awareness. With information on where overdoses are occurring, patrols and resources can be allocated to the areas where the need is greatest and targeted for community outreach. Overdose information is a vital part of WPD's response strategy. Its LEAD program, a pre-arrest diversion approach, uses ODMAP to determine where outreach needs to occur, and a quick response team visits and assesses every person who has overdosed, using ODMAP as a strategic outreach tool.

DOUBLE THE CRISIS

The country is now facing two national public health emergencies concurrently—opioid abuse and COVID-19. Now more than ever, it's imperative for public health and public safety to collaborate to generate and implement effective solutions, and ODMAP can help. Below are a few actions to consider if you're unsure how to begin implementing ODMAP in your agency or community:

- Organize a multidisciplinary team to review, respond to, and evaluate suspected overdoses. Consider partners from the fields of law enforcement, criminal justice, fire, EMS, emergency services, medical examiners or coroners, public health, and local nonprofits.
- Discuss your intentions for the data. Develop a data governance framework with supporting memoranda of understanding as necessary. Since some members of the multidisciplinary team may be from agencies or organizations that are restricted from sharing information due to HIPAA, regulations covering data-sharing are essential.
- Foster an environment of collaboration. Monthly or quarterly meetings can help partners build relationships and ODMAP use.
- Develop a spike-response framework. ODMAP offers agencies the ability to customize both spike and overdose alerts, permitting users to establish a threshold and overdose type (fatal or non-fatal) notification and response system.

If you're interested in learning more about ODMAP or registering for agency access, visit *odmap.org*. Training is available at any time; simply download the training manuals or watch the videos online. If you have additional questions, please reach out to ODMAP Coordinator Marquis Johnson, at *mjohnson5@wb.hidta.org* or 301-489-1780.

Aliese Alter is ODMAP's senior program manager for Washington/ Baltimore HIDTA. Mitch Cunningham is an NSA consultant and training coordinator for law enforcement continuing education at Cape Fear Community College in Wilmington, North Carolina.



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