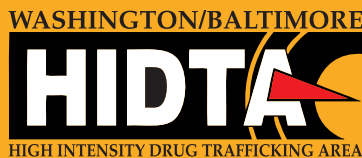


FREQUENTLY ASKED QUESTIONS

MARCH 16, 2021



PURPOSE

The purpose of this document is to provide additional information and Frequently Asked Questions, regarding ODMAP. The questions are broken down by agency type.

CONTENTS

FIRST RESPONDER FAQs	1
BEHAVIORAL/PUBLIC HEALTH FAQs:	4
HOSPITALS/OCME/CORONER FAQs	5
NON-PROFIT FAQs	6
GENERAL FAQs	7

FOR MORE INFORMATION

Aliese Alter, ODMAP Program Manager
aalter@wb.hidta.org, 301-489-1754

Marquis Johnson, MHA, ODMAP Coordinator
mjohnson5@wb.hidta.org, 301-489-1780

Help Desk
hd@wb.hita.org, 301-489-1744

FIRST RESPONDER FAQs

Q What if I don't use Case Explorer (CE), can I still use ODMAP or alternatively what if I am a CE user, how do I link my ODMAP and CE accounts?

A Yes, you can still use ODMAP if you aren't a CE user. If you are an existing CE user, you will register for ODMAP through Case Explorer as outlined in our online training specific for Enforcement user. <http://odmap.org/#train>

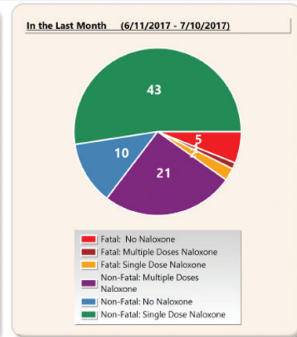
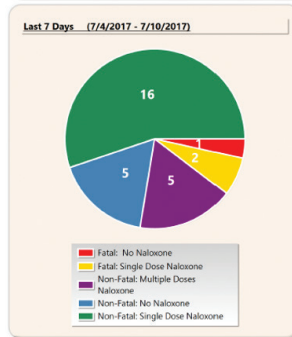
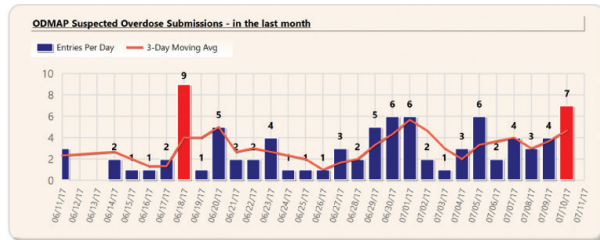
Q How can ODMAP help my Agency with investigations and analytics?

A Using ODMAP in conjunction with analytical tools such as Case Explorer, Communications Analysis Portal (CAP), and other analytical tools has proven successful in linking overdoses within ODMAP to a Drug Trafficking Organization (DTO). If your Agency is interested in obtaining Case Explorer or CAP, contacts are below:

- **CAP Program Manager:**
Jami Galbraith
jgalbraith@wb.hidta.org
- **Case Explorer Program Manager:**
Aliese Alter
aalter@wb.hidta.org

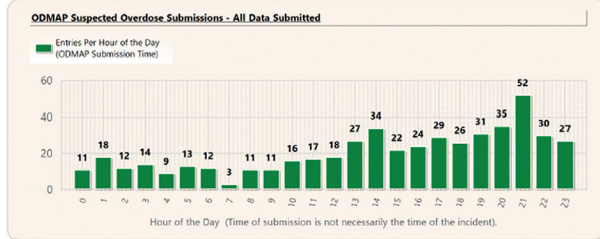
Additionally, agencies can request weekly reports once they have been actively and consistently inputting data into ODMAP. This request can be completed by e-mailing mjohnson5@wb.hidta.org. On the next page is an example of what this report looks like.

FIRST RESPONDER FAQs



Total Submissions In Last Week	Daily Max	Fatal	Non-Fatal	Naloxone Administrations
29	7	3	26	23

Total Submissions	Average Daily Count (All Time)	Standard Deviation	Max Count (Single Day)	Suggested Spike Value
502	3.35	1.861	15	7



FIRST RESPONDER FAQs

Q Can a transcriber, intelligence analyst, or civilian enter the data so that the actual first responder doesn't have to enter?

A Yes, the overall mission of ODMAP is to collect real-time data. However, we also understand that first responders have an ever increasing workload and it may make most sense for someone else within the Agency to enter this data in "near real-time." Larger delays in entering data also affect real-time system functions such as spike alert notifications.

Q What if EMS/LE has already entered the data, will the system detect potential duplicates?

A Yes, once the user confirms the point the system will check for any existing overdoses that are within 285 feet and 1 hour before or after the overdose they are submitting.

If there are any potential duplicate points (the system checks ALL records, not just those submitted by the user), it will return a warning message with the contact information for the other user(s) and asks if the point should still be submitted.

- Possible duplicate overdose point(s) already submitted.
- Name: Lady Bug Agency: holuo Email: bewalsh7@gmail.com Phone 3019822754
- Do you want to submit this point anyway?

You can also learn more about this feature in our online training PowerPoints, <http://odmap.org/#train>

BEHAVIORAL/PUBLIC HEALTH FAQs

Q How can we get additional information such as what is in ODFORM from LE?

A Collaboration within your locality is crucial to a cohesive effort. Erie County, NY has implemented as strategy that we have identified as a promising practice:

In Erie County, New York the local Health Department has partnered with the Cheektowaga Police Department to utilize ODMAP as a tool to identify treatment referrals. When an overdose occurs, Cheektowaga law enforcement officers enter the incident in ODMAP and leave a package of introductory educational materials about Substance Use Disorder including local treatment contact information. A Health Department staff member monitors ODMAP for new points. When a new point is identified the staff member contacts the Cheektowaga Police Department to receive a copy of the incident report through an open FOIL. The Health Department's Peer Recovery Specialist then contacts the overdose victim by phone within 24 - 72 hrs to discuss treatment options focusing on Medicated Assisted Treatment modalities. If the individual is not reached by phone, a follow-up home visit is made by the peer and their partner, if they are still unsuccessful in reaching the individual the police officer may try to return later in the day to try to make contact on the Peer's behalf if contact was not made through phone numbers and addresses accessed in the incident report. Family and friends are also invited to engage in care and will be referred to family recovery support groups. At the 90 day follow-up point 56% were connected to care (30 of 54), 19% (10) are working with a peer to identify a program that meets their needs, 11% (6) are speaking with a peer but have committed to or turned down treatment, and 11% (6) have refused treatment, but will continue to be contacted every 30 days.

BEHAVIORAL/PUBLIC HEALTH FAQs

Q How are other localities interfacing with EMS/LE?

A In addition to above, Broome County, NY has also implemented a strategy. If you know of any additional examples within your Region, we would love to hear them!

The Broome County Intelligence Center identifies overdose victims through ODMAP and makes referrals to the Addiction Center of Broome County's Peer Recovery Advocates. The Advocates then ride with police or District Attorney Investigators to meet with overdose victims and discuss treatment options.

HOSPITALS/OCME/CORONER FAQs

Q Will there be something similar to ODFORM for Hospitals and OCME?

A The W/B HIDTA Team is constantly working on developments for both the ODMAP platform. Initial efforts have focused on user and agency management. In the future, we hope to explore further functions for Hospitals and OCME/Coroner.

Q What address should be used for overdoses that were not transported to the hospital by a first responder?

A The location should be the physical address of the hospital. This will allow for tracking of overdoses that are not attended by First Responders. Using the hospital address alleviates any concerns related to PHI/PII and HIPAA.

NON-PROFIT FAQs

Q How can non-profit agencies utilize ODMAP?

A Currently, only federal, state, local, or tribal government agencies serving the interest of public health or public safety may register for ODMAP. However, government agencies may choose to provide access to ODMAP to non-profit agencies, by registering individuals under the government agency. It is recommended that this is only done for non-profit agencies who are receiving funding to provide treatment, recovery, or harm reduction services.

Q No one in my area is using ODMAP, but I think it could benefit us. How do I get our local agencies to sign up?

A Talk to your local agencies that are ODMAP eligible partners. Encourage them to attend a demo.

GENERAL FAQs

Q How does the Application Program Interface (API) work?

A An API has been created to allow an Agency's local Record Management Software (RMS) to interface with ODMAP. This allows for automatic reporting into ODMAP electronically.

Q How do I set-up an API?

A Please email Aliese Alter aalter@wb.hidta.org for more information.

Q Can we enter historical data?

A Yes, upon submitting a location, you have the ability to adjust. Historical data is limited to January 1, 2017 to the present

Incident Location Information

Use An Address

Address (include State, City & Zipcode)

9001 Edmonston Rd, Greenbelt, Maryland, USA

Use Coordinates

Latitude: 38.998687068483 Longitude: -76.9004196223286

Date: MM/DD/YYYY Time: AM PM

GENERAL FAQs

Q How do I edit points submitted by other users at my agency?

A Any user with “write” access to an agency will be able to edit and delete points submitted by other users within that agency.

Q How do I get more agencies in my area to sign up?

A Please share all of the information available on our website, <http://odmap.org/>. Weekly demos are held on Thursdays at 1PM EST.

Q What are some examples of statewide legislation?

A Below are a few examples, however, this list continues to grow. Please reach out to the W/B HIDTA for additional examples.

FLORIDA - passed legislation mandating the use of ODMAP for Fire/EMS. Statewide implementation has begun and is active. <https://www.flsenate.gov/Session/Bill/2017/0249>

ILLINOIS - Police/Sheriff’s Departments are enrolled as a contingency of the Naloxone Grant (ILEAS). <https://www.ileas.org/naloxone-grant>

MARYLAND - Passed legislation mandating the use of EMS data Statewide. The law went into effect on 7/1/18 and we are now getting a full data set through Patient Care Reports from EMS through an API (Application Programming Interface). mgaleg.maryland.gov/webmgga/frmMain.aspx?id=hb0359&stab=01&pid=billpage&tab=subject3&ys=2018RS

GENERAL FAQs

WISCONSIN -The Governor passed an Executive Order for all LE to use the system - we are currently working on statewide implementation. https://walker.wi.gov/sites/default/files/executive-orders/Executive_Order_273_0.pdf

Q How can I stay up-to-date with the latest ODMAP changes and news?

A Once registered with ODMAP, you will be automatically signed up for the monthly ODMAP Newsletter, which provides all of the latest ODMAP information, including links for our monthly webinar series. Webinars are held on the 3rd Tuesday of each month at 1PM EST.

Q Where can I go to see materials, such as spike alerts or resource cards, developed by other ODMAP users?

A ODMAP Box is an online repository that houses ODMAP related materials. To obtain a log-in for ODMAP Box, please request and complete an agreement form and submit to odmapnewsletter@wb.hidta.org.

Q How do I find out what agencies are signed up in my state?

A A list of registered agencies by county is available at <http://odmap.org/#agency>.



Prepared by the National HIDTA Assistance Center