

**Public Health-Dayton & Montgomery
County
Community Response Plan
for Overdose Surge
Montgomery County, Ohio**

May 2020

**Appendix 5
PHDMC Public Health Emergency Preparedness Plan**



**Public Health – Dayton & Montgomery County
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RECORD OF CHANGES

This plan is reviewed and updated after exercises and assessments identify improvements needed.		
Section	Date	NAME OF POSTER

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I. Background and Purpose

Multiple areas around the nation have experienced what amounted to mass casualty incidents (MCIs) caused by opiate overdoses. Those MCIs, however, were atypical, in that they occur in multiple locations over a relatively short span of time, but not as compressed as typical MCIs. Many communities are now planning for such overdose surges.

In late August 2016, Cincinnati saw 78 overdoses in two days, and an estimated 174 overdose cases in emergency rooms in less than a week. They called it a heroin crisis.

Mansfield, Ohio, population 46,000, had 15 overdoses in eight hours on August 11, 2016. Perhaps most significantly, Huntington, WV, a city with a population of 49,000, experienced 27 heroin overdoses in four hours. That's the equivalent for the city of Dayton of well over 75 calls in only four hours. For perspective, the Dayton Fire Department averages about 85 EMS calls every 24 hours.

In September 2016, the Montgomery County Commissioners convened a community-wide forum to request that stakeholders work together to address the crisis in Montgomery County. Public Health - Dayton & Montgomery County and Montgomery County Alcohol, Drug Addiction & Mental Health Services (ADAMHS) took the lead in coordinating these efforts. This resulted in the formation of the Community Overdose Action Team (COAT). The COAT's primary goal is to reduce drug overdoses and substance abuse in Montgomery County. The team seeks to enhance current services, looks for gaps in existing services and explores more effective ways to combat drug overdoses. The COAT operates under a Collective Impact Model – an innovative and structured approach to making collaboration work across various sectors to achieve significant and lasting social change. Additionally, given the emergent nature of the crisis, ICS was utilized for the response structure. ICS is a comprehensive management system designed to enable community partners to work together to respond to local, state and federal emergencies.

Given the addiction crisis both locally and throughout the country, the frequency with which we see “hot loads” causing accidental overdoses, and the increase in extremely potent narcotics such as carfentanil and sufentanil, a plan must be outlined should Montgomery County experience a large, chronologically compact cluster of overdoses in our community.

The purpose of this tiered plan is to describe the process in which drug overdose events are monitored, and community partners are notified and mobilized during periods of increased activity related to suspected drug overdoses. The plan is meant to serve as guidance and is subject to change, as needed. The tiers warrant different levels of response. Community partners will be contacted and mobilized based on a variety of events, including occurrences of EpiCenter alerts, ODMAP surges, or other alert circumstances initiated by first responders, community

members, hospitals, local governments, the media, or other partners as deemed appropriate. The implementation of this plan is intended to mitigate the circumstances and prevent additional injuries and fatalities. The plan is one of multiple efforts in managing the overall drug crisis in Montgomery County.

II. Definitions

- **Overdose** - an injury to the body that happens when a drug is taken in excessive amounts. An overdose can be fatal or nonfatal.
- **EpiCenter** - Ohio’s syndromic surveillance system, which collects near real-time data from approximately 95% of Emergency Departments (ED) in Ohio. Definitions have been developed in Epicenter to identify ED visits related to a suspected drug overdose. This suspected drug overdose data is used for both anomaly detection and to monitor and identify trends in suspected drug overdose.
 - **Anomaly** – occurs when overdose hospital visits detected in a 24-hour period exceed the calculated threshold for that specific time period and location.
- **ODMAP** – A national syndromic surveillance system, which provides near real-time suspected overdose surveillance data across jurisdictions to support public health and safety efforts to mobilize an immediate response to a sudden increase, or spike in overdose events. It links first responders and relevant record management systems to a mapping tool to track overdoses to stimulate real-time response and strategic analysis across jurisdictions.
 - **Spike Alert** – occurs when the number of overdoses reported to ODMAP exceeds the predetermined threshold within a rolling 24-hour period.
- **Quick Response Teams (QRTs)** – QRTs are interdisciplinary teams, often comprised of first responders, peer support and/or substance abuse counselors, who provide outreach to overdose victims immediately following drug overdose events. In Montgomery County, these teams are also known as “GROW Teams.” GROW stands for “Getting Recovery Options Working.”
- **Project DAWN (Deaths Avoided with Naloxone)** - Ohio’s network of community naloxone distribution programs. These programs, operated on a local level, provide take-home naloxone kits and overdose response training to people at risk of opioid overdose and other community members who may be in a position to respond to an overdose.
- **Response Tiers** – The following plan has been structured in a tiered manner to signify different levels of response, dependent upon the severity of the overdose event. The Epidemiologists, as part of their data analysis, will help identify the level of response necessary.
 - **Tier 1** – Increased awareness and community outreach to respond to the event.
 - **Tier 2** – Comparable to a mass casualty incident (MCI); immediate action by all partners needed.

III. Monitoring and Alert Analysis

The following section establishes what data will be monitored regularly. The data sources identified below will provide needed information in identifying a possible spike in overdoses in Montgomery County. Additionally, the process for investigating and verifying the alert of a potential spike in overdoses is outlined.

- EpiCenter –
 - Upon receipt of an alert from the EpiCenter syndromic surveillance system, Public Health epidemiologists will conduct a brief review to determine the validity of the anomaly. Public Health will then report the results of the investigation to local partners and the Ohio Department of Health (ODH).
- ODMAP –
 - Public Health will utilize historical data to establish a county-wide threshold for spike alerts in the ODMAP system. The threshold will be adjusted as determined necessary.
- Montgomery County Regional Dispatch Center (RDC) –
 - When RDC, run by the Montgomery County Sheriff's Office, notice an unusual number of overdose calls or is notified by other dispatch centers or hospitals that they are receiving an unusual number of overdose calls, they will alert the appropriate entities. If RDC is aware of, for example, eight overdose calls in twenty minutes, or twelve overdose calls within a two-hour period, they will provide paging notifications to the appropriate entities.
- Other sources of data that could indicate a spike in overdoses in Montgomery County could include, but is not limited to:
 - Law Enforcement Task Forces – have a large drug seizure
 - Other local health departments & ODH - surrounding communities experience a spike or surge in overdoses
 - Additional information gathered from Quick Response Teams (QRTs), jail intake, hospitals, Montgomery County Emergency Room Notification System (MCERON), etc.

IV. Key Partners and Roles

Community Overdose Action Team (COAT) Backbone Support – The COAT Backbone Support will serve as the coordinating group in the event of an overdose surge in Montgomery County.

The COAT Backbone Support includes representatives from the following agencies: Greater Dayton Area Hospital Association (GDAHA), Dayton Fire Department and/or other area Fire or EMS Agencies, Montgomery County Sheriff's Office, Dayton Police Department and/or other area Law Enforcement (LE) Agencies, Montgomery County Alcohol, Drug & Mental Health Services (ADAMHS), Greater Miami Valley EMS Council (GMVEMSC), Montgomery County Coroner's Office/Miami Valley Regional Crime Laboratory, Montgomery County Criminal Justice System, Public Health, Local Government Leadership, Montgomery County Emergency Management Administration, and Goodwill Easterseals. Additional partners to include in an overdose surge response include the Dayton Metropolitan Medical Response System (MMRS), regional and state health department partners, and any additional partner agencies as deemed necessary. The Greater Miami Valley EMS Council Overdose Surge Coordination Group will serve as the coordinating group at the regional level.

Tier 1:

- Meets in person if feasible, or virtually.
- Considers recommendations for agency actions, for example, notify Quick Response Teams (QRTs), deploying Mobile Unit for naloxone distribution, etc.
- Provides advice and assistance regarding public safety (Fire, EMS, and Law Enforcement (LE) strategies).
- Develops and distributes Situation Reports (SitReps), ensuring that all partners (Fire, EMS, LE, Hospitals, Public Health, et al) receive appropriate and timely information.
- Consult with the Joint Information Center (JIC)/virtual JIC members to disseminate necessary messaging.

Tier 2:

- All Tier 1 actions listed above.
- Considers the need for, and if indicated promulgates, Just in Time Standing Orders to GMVEMSC EMS Protocols.
- Call-in all Quick Response Teams for immediate response.
- Consider the need for use of Triage Tags rather than standard patient care reports (run sheets).
- Makes recommendations or provide a Just-In-Time Standing Order on transport destination orders, and non-transport including field terminations.
- Activate the Joint Information Center (JIC)/virtual JIC.

Dispatch Centers

Tier 1:

- Utilize I-PSAP Radio Talk Group and other means as indicated to announce situation, make Sit-Reps, request mutual aid, etc.
- Make mutual aid and fill-in requests as needed.
- Participate in messaging (Reverse 911, Everbridge, SendWordNow, Communicator, Code Red, etc.) using Public Health templates as provided and if requested.

Tier 2:

- All Tier 1 actions listed above.
- Participate in a JIC/virtual JIC if activated.

Emergency Medical Services (EMS)

Tier 1:

- Operate under standard protocols to prevent overdose fatalities (first responders are the experts in overdose reversals).

Tier 2:

- Consider move-up strategies, including fill-in at nearby stations using Mutual Aid EMS Transport Units, possibly multiple transport units in a single station.
 - EMS force protection
 - Rapid naloxone administration
- Facilitate data sharing across jurisdictions and disciplines.
- Carry resource bags and identify additional resources as deemed necessary to distribute to individuals in crisis.
- Provide additional coordination with local emergency departments to ensure patients are transported to the appropriate emergency department.
- Consider recall of off duty personnel to place reserve Fire and EMS apparatus in service.
- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.
- EMS Supervisors – need to ensure they’re addressing the needs of their staff (around compassion fatigue and secondary trauma).

Law Enforcement

Tier 1:

- Operate under standard protocols to prevent overdose fatalities (first responders are the experts in overdose reversals).
- Ensure first responders use local safe handling guidelines.
- Determine the need for carrying additional naloxone.

- Carry resource bags and identify additional resources as deemed necessary to distribute to individuals in crisis.
- Consider initiating a GROW Blitz in identified cluster areas.
- Work with the Crime Lab as deemed necessary to determine substances involved in event.

Tier 2:

- All Tier 1 actions listed above.
- Consider moving up mutual aid resources to provide additional rapid response for multiple purposes:
 - Law Enforcement & EMS force protection
 - Rapid naloxone administration
 - Investigative assets
- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.
- Law Enforcement Supervisors - Implement a plan to reduce the likelihood of first responder burnout.

Hospitals and Greater Dayton Area Hospital Association (GDAHA)

Tier 1:

- Hospitals may contact the Regional Dispatch Center (RDC) at 937-333-USAR (8727) or Public Health Epidemiology to notify the COAT Backbone Support when seeing a significant increase in the number of overdoses presenting to the Emergency Department, or higher than normal doses of naloxone are being given; or patients with opioid overdoses are presenting with symptoms that are at a higher level of acuity and require more extensive treatment than usual.
- Work with the local health department and COAT Backbone Support to provide additional information on event from a hospital perspective.
- Identify additional resources needed based on the characterization of the event.

Tier 2:

- All Tier 1 actions listed above.
- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.
- Activate Regional Hospital Notification System (RHNS) immediately to advise of scenario.
- Consider the use of Mass Casualty Incident (MCI) Region 3 or MCI Region 6 Radio Talk Groups (or patch both) as indicated.
- Use either RHNS or MCI Talk Groups for Sit-Reps.

- Treat this as an MCI and update the SurgeNet MCI webpage.
- Nearest hospitals to clusters may need to consider activating Code Yellow (disaster).
- Participate in the joint Public Health – Dayton & Montgomery County/ADAMHS/Hospitals/Center for Disaster Mental Health Crisis Response Team, if activated.

Public Health

Tier 1:

- Epidemiologists continue surveillance monitoring for additional EpiCenter anomalies and ODMAP spike alerts.
- Consult Joint Information Center (JIC) members on messaging.
- Develop and disseminate coordinated messaging to the community, including the provision of messaging templates to all involved agencies (LE, fire/EMS, EMAs, jurisdictions, etc.)
- Assess inventory of naloxone across the county partners, in conjunction with ADAMHS, and acquire additional naloxone as needed.
- Notify Addiction Services Outreach Team to support coordination of outreach accordingly.
- Provide the public with action items including, but not limited to: carrying naloxone, advertising how to safely dispose of medication and store prescription medications, messaging about treatment and support services, etc.
- Ensure information sharing with local health departments in the West Central Ohio region.
- When indicated, notify, inform, or engage additional agencies involved in the response (Federal, State, Local, e.g., State Analytical Intelligence Center (SAIC), Ohio Department of Health (ODH), or federal, state and local elected officials and others who need to be informed of the situation).

Tier 2:

- All Tier 1 actions listed above.
- Support standing up a Rumor Control Hotline, if deemed necessary.
- Activate and lead the JIC/virtual JIC in partnership with ADAMHS.

Montgomery County Alcohol, Drug Addiction, and Mental Health Services (ADAMHS)

Tier 1:

- Inform treatment providers and recovery housing about the situation, lethality of the drugs in the community, and any other pertinent information pertaining to the situation, as deemed necessary.
- Assess inventory of naloxone across the county partners, in conjunction with ADAMHS, and acquire additional naloxone as needed.
- Ensure that Project DAWN is readily accessible and adequate naloxone supply is available.
- Consider organizing community meetings for affected neighborhoods.
- Consult with Joint Information Center (JIC) on messaging.

Tier 2:

- All Tier 1 actions listed above.
- Consider providing crisis responders to meet with groups of parents/families affected by overdoses or overdose deaths.
- Consider activation of the joint Public Health – Dayton & Montgomery County/ADAMHS/Hospitals/Center for Disaster Mental Health Crisis Response Team
- If needed, request mutual aid from the Ohio Crisis Response Team for additional behavioral health responders.
- Activate and lead the JIC/virtual JIC in partnership with Public Health.

Coroner & Regional Crime Lab

Tier 1:

- The Coroner will contact the RDC at 937-333-USAR (8727) or Public Health Epidemiology to notify the COAT Backbone Support when seeing a significant increase in the number of apparent overdose deaths.
- Identify characteristics of apparent overdose deaths and communicate with JIC for public alert, as needed.
- Assist with verification of data and emerging trends (new lethal substances).
- Prioritize evidence analysis, per a pre-established plan to support law enforcement and public messaging.

Tier 2:

- All Tier 1 actions listed above.
- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.

Local Government Leadership

Tier 1:

- Provide communication support and public health awareness.

Tier 2:

- All Tier 1 actions listed above.
- Support resource identification and allocation.
- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.

Emergency Management Agencies

Tier 2:

- Participate in JIC/virtual JIC and messaging via media/social media using Public Health templates as provided and if JIC is activated.
- Consider opening the Assessment Room/Emergency Operations Center (EOC) to support county-wide response to large scale event.
- Consider activating Rumor Control Hotline.

Public Information & Local Media

Tier 1:

- Consult with the Joint Information Center (JIC) on messaging.
- Inform the community of the drugs trending in the community through: press releases, press briefings, social media platforms, and other appropriate channels.
- Promote appropriate messaging to the public, including messages such as:
 - Raise awareness of the current situation, including what partners are doing to respond.
 - Safe usage messaging.
 - Promote GetHelpNow and CrisisCare phone number to get connected to treatment and other recovery support services.
 - Project DAWN sites where individuals can access naloxone.
 - Any additional messaging deemed necessary.

Tier 2:

- All Tier 1 actions listed above.
- Actively participate in the Joint Information Center (JIC)/virtual JIC.

Certified Peer Recovery Supporters

Tier 1:

- As part of Quick Response Teams (QRTs), utilize Certified Peer Recovery Support Specialists for outreach-based peer support in the event of an overdose spike.
- Contact pre-identified Certified Peer Recovery Support Specialists in the event of an overdose spike and deploy pre-identified Peers to the determined location(s).

Tier 2:

- All Tier 1 actions listed above.
- Peer Supporter Supervisors - need to ensure they're addressing the needs of their peers (around compassion fatigue and secondary trauma).

Appendix A

Partner Agencies Planning Considerations Pre- and Post- Overdose Spike

The following outlines actions that partner agencies can consider when planning for an overdose spike in Montgomery County. The list of actions is meant to provide guidance and is not meant to be prescriptive. The following actions were presented as planning considerations made by local experts and state and national plan templates.

Dispatch Centers

PRE- SPIKE

- Ensure dispatch is trained on signs of an overdose and how to communicate this to emergency responders.
- Establish relationships with other dispatch centers in Montgomery County for purposes of information sharing, such as making mutual aid requests.

Emergency Management Services (EMS)

PRE- SPIKE

- Ensure medics have access to naloxone and appropriate community resources.
- (First responder supervisors) Develop a plan to reduce the likelihood of first responder burnout. (i.e. If possible provide access to employee assistance programs or critical incident stress management to support staff following a spike)

POST-SPIKE

- Implement employee assistance/critical incident stress management plan, as needed

Law Enforcement

PRE- SPIKE

- Ensure officers are trained on the signs of an overdose.
- Ensure officers have access to naloxone and appropriate community resources.
- Ensure adequate staffing for Quick Response Teams.
- Establish process with Coroner and Crime Lab to expedite analysis.
- Ensure information sharing procedures in place with other law enforcement departments.
- (First responder supervisors) Develop a plan to reduce the likelihood of first responder burnout. (i.e. If possible provide access to employee assistance programs or critical incident stress management to support staff following a spike)

POST-SPIKE

- Implement employee assistance/critical incident stress management plan, as needed
- Consider mobilizing investigative personnel to determine the source

Hospitals and GDAHA

PRE- SPIKE

- Ensure protocol in place for educating and/or connecting patients on treatment and recovery support services available to them
- Ensure protocol in place for educating/ providing patients with naloxone upon discharge to opioid-dependent/addicted patients

Public Health

PRE- SPIKE

- Develop an Overdose Community Response Plan in collaboration with community partners.
- In conjunction with the COAT JIC, develop messaging templates for communication, should there be a spike event.
- Develop procedures for regular monitoring of surveillance data, including communication plans with partners.

POST-SPIKE

- Evaluate data, summarize response to the event and distribute findings to partners to improve future response strategies.

ADAMHS

PRE- SPIKE

- Ensure the framework is in place for timely communication with local treatment and recovery support providers.
- In conjunction with Public Health, develop messaging templates for communication should there be a spike event.
- Work with Project DAWN to ensure adequate naloxone supply.

POST-SPIKE

Coroner & Regional Crime Lab

PRE- SPIKE

- Establish a data sharing process with the local health department to ensure accurate and timely data.

- Establish a process with local law enforcement to expedite the analysis of evidence during a spike event.

Emergency Management Agency

PRE- SPIKE

- Develop a plan to use existing emergency alert systems for spike notifications, if deemed necessary.
- Ensure necessary infrastructure in place for an Emergency Operations Center (EOC) and Rumor Control Line.

Public Information and Local Media

PRE- SPIKE

- Establish a Joint Information Center (JIC) for drug overdose efforts.
- Establish regular communication with members of the JIC.
- Develop relationships with local media outlets.
- Consider creating messaging templates for a spike event.

Certified Peer Recovery Supporters

PRE- SPIKE

- Establish regular communication with Certified Peer Recovery Supporters in Montgomery County.
- Establish working relationships with all agencies providing outreach-based peer support.
- Consider a referral process to get overdose survivors connected to peer support through QRTs or other means, as necessary.

POST-SPIKE

- Ensure the opportunity for Certified Peers involved in response to debrief.