

**Participation Agreement  
For  
Overdose Detection Mapping Application  
Program (ODMAP)  
Between  
Washington/Baltimore High Intensity Drug  
Trafficking Area (W/B HIDTA)  
And  
Mission Fire Department**

This Agreement is made and entered into between the Washington/Baltimore High Intensity Drug Trafficking Area (W/B HIDTA), which is responsible for coordinating the Overdose Detection Mapping Application Program (ODMAP) system and the Mission Fire Department (Agency) hereinafter referred to as the Agency.

**ODMAP Overview**

Substance use disorder is a disease that has affected every region of the United States. Many parts of the nation have recently witnessed a dramatic increase in heroin and other opioids, and as a result, rates of fatal and non-fatal opioid overdoses have exponentially increased to crisis levels. Combating this issue requires aggressive detection and surveillance of this disease. In an effort to detect a sudden increase in drug overdoses, the W/B HIDTA created ODMAP.

ODMAP uses a web service accessible through a smart phone or computer to allow first responders to report suspected fatal and non-fatal overdose incidents. The location, date, and time of the incidents are transmitted to the W/B HIDTA secure map server and plotted on an electronic map. The electronic map allows participating agencies to visualize overdose incidents. ODMAP data can be filtered using location, date, time, incident type and user information to give participating agencies the ability to identify overdose spikes not only in their jurisdiction, but also in other jurisdictions.

ODMAP data resides on secure servers located in Baltimore, Maryland.

## **Goals of ODMAP**

**To provide a near real-time drug overdose surveillance of known and suspected overdose events occurring nationwide using a specialized program (ODMAP) accessed by mobile devices and computers to collect overdose event information.**

**To collect and upload the approximated geographic locations of known and suspected overdose events to ODMAP so Participating Agencies can use this data to identify overdose occurrences and spikes in near real-time.**

**To provide liaison, coordination, and resource assistance in the collection, storage, exchange, dissemination, and analysis of ODMAP data for Participating Agencies.**

**To enable Participating Agencies to develop effective strategies for addressing overdose incidents occurring in their jurisdictions.**

**To enhance the development of regional strategies designed to prevent the spread of substance use disorders resulting in overdose incidents.**

## **Purpose**

**To give approved Participating Agencies technology that will allow them to report overdose incidents in near real time.**

**To enable Participating Agencies to develop effective strategies for addressing overdose incidents occurring in their jurisdictions**

**To enhance the development of regional strategies designed to prevent the spread of substance use disorders resulting in overdose incidents**

## **Access**

### **Natinoal Map**

**Agency administrator(s) will determine those personnel within their Agency authorized access to the National Map feature of ODMAP. Access allows authorized personnel to view the entire National Map, and filter event data to**

identify overdose spikes, patterns, and trends.

### **ODMAP Administrator**

The Agency head, or their designee, will designate an ODMAP Administrator(s) for their Agency. The ODMAP Administrator(s) will be responsible for monitoring ODMAP Users for the Agency, communicating with W/B HIDTA on behalf of the Agency, and helping to ensure the Agency complies with the ODMAP Policies and Procedures. The ODMAP Administrator will be responsible for ensuring new users read, agree and abide to this user agreement and any further policies made by the W/B HIDTA.

### **ODMAP User**

ODMAP Users are personnel authorized by the Agency Administrator(s) to submit event information to ODMAP. ODMAP users serve the interests of public health and public safety, and many are licensed first responders, such as police, EMS, and fire department personnel, who would typically be among the first to arrive at an overdose scene. Agency administrator(s) will determine authorized ODMAP Users among Agency personnel and be responsible for users complying with this agreement.

### **Other Participating Agencies**

**Agency grants access to all other Participating Agencies, and their authorized personnel, to view the entire National Map.**

**The W/B HIDTA Hereby Agrees to:**

**Establish and maintain ODMAP and ensure that information in ODMAP is stored and transmitted in accordance with the standards set forth in the ODMAP Policies and Procedures and ODMAP Participation Agreement.**

**Provide the Agency with access to ODMAP.**

**Provide training in the use of ODMAP.**

**Use ODMAP data to create analytical products.**

**Remove incorrect data and duplicate entries.**

**Remove improper and/or unauthorized Users.**

**Agency Agrees to:**

**Ensure that Agency and its Users follow the ODMAP Policies and Procedures and ODMAP Participation Agreement.**

**Ensure that its Users contribute to ODMAP by submitting Event data on all known or suspected overdoses to which Agency's Users respond.**

**Use the information in ODMAP to develop a strategy to combat fatal and non-fatal overdoses in Agency's area of responsibility.**

**Designate an ODMAP Administrator for Agency.**

**Ensure that information submitted to ODMAP meets all applicable federal, state, and local laws, rules and regulations pertaining to collection, storage, and dissemination of overdose event data.**

**Ensure that only approved Users enter data into ODMAP, use ODMAP, and all actions related to ODMAP comply with this agreement.**

**Ensure that ODMAP use is in accordance within the guidelines of established jurisdictional MOUs.**

**Only grant National Map Access to proper personnel.**

**Assume responsibility that the data entered into ODMAP is accurate, timely, and properly obtained. Agency will promptly notify W/B HIDTA if it discovers that its data does not meet this standard. This includes duplicate/multiple entries for the same event.**

**Assume responsibility for restricting the dissemination of information obtained**

from ODMAP within the Agency to authorized personnel with a need to know the information.

Users of ODMAP are responsible for protecting the information and will log out of ODMAP website after use to ensure that there is not unauthorized disclosure of data in ODMAP.

Users shall not share any data from ODMAP with those who do not have a need to know. A need to know is established when a set of facts supports the legitimacy of access to a specific individual with a right to know. This need to know shall be pertinent and necessary in the performance of a specific responsibility of this individual's job.

Supply the ODMAP Project Manager with a list of personnel to include their name, position, email address and phone number from Agency's authorized Users. This information is used to assign and track ODMAP accounts.

#### **Furthermore**

The Parties hereto acknowledge and agree that **all information submitted to ODMAP is the property of the submitting Agency**. Agency hereby grants permission to the HIDTA to use its ODMAP data as the HIDTA sees fit pursuant to the goals of ODMAP. This includes, but is not limited to, combining Agency's data with ODMAP data from other Participating Agencies, combining Agency's information with data from other databases that the HIDTA manages, analyzing the information to create law enforcement products, public health products, academic research and sharing the information with law enforcement and public health agencies.

#### **Indemnification**

Each Party to this Participation Agreement shall be responsible for liability arising from its own conduct and retain immunity and all defenses available to it pursuant to applicable laws.

#### **Termination**

This Participation Agreement will become effective upon signature by both Parties,

and will remain effective unless terminated by either of the parties. If a party wishes to terminate this contract, they need to provide a written notice to the other party and the agreement will be terminated immediately upon receipt of written notice.

**IN WITNESS WHEREOF**, the parties hereto caused this Participation Agreement to be executed by the proper officers and officials:

**Signatory Initials**

**Signature Date**

10/04/2024

**W/B Representative**

Jeff Beeson

**Signature Date**

10/04/2024

**On Behalf of Mission Fire Department**

Adrian L. Garcia

Fire Chief

Deputy Director

W/B HIDTA

**Sign Agreement**