

Division of Overdose Prevention: Overdose Data to Action (OD2A) State and LOCAL Cooperative Agreements

Recipient Orientation Handbook



February 2024

Recipient Orientation Handbook

Purpose

This guide serves as a resource for new recipient staff working on the CDC Division of Overdose Prevention cooperative agreements Overdose Data to Action in States (OD2A-S), CDC-RFA-CE-23-0002, and Overdose Data to Action: Limiting Overdose through Collaborative Actions in Localities (OD2A: LOCAL), CDC-RFA-CE-23-0003. This is a living document describing resources for you to manage your award.

Objectives

- Improve new recipient staff's subject matter expertise of the overall substance use disorder (SUD) landscape and the overdose crisis.
- Increase the capacity of new and incoming recipient staff to successfully manage CDC's Division of Overdose Prevention (DOP) cooperative agreement activities.



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About the Overdose Data to Action (OD2A) Cooperative Agreement

Overdose Data to Action (OD2A) supports jurisdictions in collecting high-quality, comprehensive, and timely data on nonfatal and fatal overdoses and in using those data to inform prevention and response efforts. OD2A focuses on understanding and tracking the complex, changing nature of the drug overdose epidemic and highlights the need for seamless integration of data into prevention strategies.

The OD2A program page details funded jurisdictions, how this cooperative agreement contributes to CDC's efforts to prevent opioid overdoses, and more.

Welcome

This orientation handbook serves as a resource for new recipient staff involved in the CDC DOP OD2A awards. We hope this will assist you in managing your award. Please send any recommendations for items to be added to OD2A_LOCAL@cdc.gov (LOCAL recipients use) or od2a-states@cdc.gov (state recipients use).

Advice from Past Principal Investigators (PIs)

[OD2A Leadership Coffee Talks](#) is a video from past PIs who have worked on overdose prevention and surveillance cooperative agreements with CDC. Past PIs share key information that is needed to be successful in managing a CDC cooperative agreement.

Getting Started

Cooperative agreements are funding mechanisms where there is substantial involvement between the recipient and U.S. Government for technical and programmatic support. CDC launched the initial OD2A cooperative agreement in September 2019 with 66 recipients (referred to as jurisdictions) comprising state, territorial, county, and city health departments. In September 2023, CDC launched OD2A-S and OD2A: LOCAL, five-year cooperative agreements with two separate notice of funding opportunities (NOFOs) for state recipients (49 states and Washington, D.C.) and local recipients (40 health departments). Your jurisdiction will interact with several CDC staff and systems to support your activities during the entirety of the cooperative agreements.

Key Roles at CDC to Support Your Award

- **Project Officer (PO):** Your assigned PO is your main day-to-day point of contact supporting your funded jurisdiction. Your PO provides overall administrative and programmatic support, facilitates appropriate technical assistance (TA) support, monitors your program and budgetary spend down, and assists in ensuring compliance with grant terms and conditions. Each PO is assigned to a select number of funded jurisdictions and coordinates regular contact with each.

- **Science Officers (SOs):** Your assigned SOs provide scientific guidance and support to jurisdictions with subject matter expertise related to prevention, surveillance, or evaluation funding requirements, as applicable. They will interact with you in several ways, which may include participation on routine calls with your PO, designated workgroup calls, or designated communication platforms.
 - » **States:** You have been assigned an Evaluation SO and a Mortality SO. Additionally, Prevention SOs and Morbidity SOs are available but will not have 1:1 state assignments. Collectively, your SOs and PO make up your CDC support team.
 - » **LOCAL:** You have been assigned an Evaluation SO and a Prevention SO. Collectively, your SOs and PO make up your CDC support team.
- **Grants Management Specialist (GMS):** Your GMS is your point of contact for fiscal-related, non-programmatic aspects of your award, including changes in the terms and conditions of the award and receiving progress and fiscal reports. Your GMS is named on your notice of award and works in the CDC Office of Financial Resources (OFR). Your PO and GMS will work closely regarding your OD2A award requirements.

Systems

Depending on their role, your staff will need access to several systems to be able to receive and submit data or documents securely to CDC and complete the requirements of your award. Typically, your staff role will determine which systems will be relevant. Key systems related to the CDC OD2A award are:

GrantSolutions

[GrantSolutions](#) is a grants management platform that provides many tools for grant-related tasks. The Grants Management Module (GMM) is one piece of the larger GrantSolutions system used by CDC/ATSDR programs and business services offices to manage grants and cooperative agreements. You will need to have designated staff registered to use GMM. Recipients are required to use this system to officially submit award applications, amendments, approval requests, and all required reporting and documentation. It is also where CDC staff, including the PO, GMS, and OFR, officially recommend approval of recipient actions, recommend approval of budget-related tasks, and send official communications. GMM is a repository of your electronic grant files and correspondence for historical purposes and provides a record of your current year's budget.

Funded recipients can have one of three recipient roles in GMM. Each grant is required to have an Administrative Official and a PI or Program Director. A Grantee Financial Official is optional. Notifications from the grants management module go to the listed PIs of record (listed on the notice of award) and the listed Administrative Official.

For more information on GrantSolutions:

- [Getting Started – Request a User Account | GrantSolutions](#)
- [Responsibilities | GrantSolutions for Grantees | Grants | CDC](#)
- [Grant Recipient Actions, Roles, Notifications, and Training | GrantSolutions for Grantees | Grants | CDC](#)
- [Frequently Asked Questions | GrantSolutions](#)

The Secure Access Management Services (SAMS)

The Secure Access Management Services (SAMS) portal is a website that allows public health partners and providers to access information and computer applications operated by CDC. Several pertinent applications relevant to your award are available on SAMS. These include Partner’s Portal, the Drug Overdose Surveillance and Epidemiology (DOSE) System, and the State Unintentional Drug Overdose Reporting System (SUDORS).

Not all of your staff working on the OD2A award will need SAMS access. Staff performing the listed activities below will likely need access. Consult with your PO regarding the relevant form to request access.

SAMS Activities: States

Activity Name	Description
SUDORS Abstractor	Default user role within the SUDORS/NVDRS web-based platform, with which the user can view, search, edit and create records in SUDORS
SUDOR Administrator	SUDORS Administrator access allows users to import, export, delete and merge cases along with all SUDORS Abstractor functions.
OD2A Upload	OD2A activity on SAMS that lets recipients submit data or documents securely to CDC.
OD2A Download	OD2A activity on SAMS that lets CDC provide feedback and datasets to OD2A recipients securely.
Partner's Portal System (OD2A)	Application on SAMS for OD2A-related documents such as Annual Performance Reviews, Workplans, and Performance Measures.
Partner's Portal System (DOSE) Syndromic Data	Access to OD2A-S Strategy 2 activities to allow for monthly emergency department (ED) data submissions within the Partner’s Portal System.
Partner's Portal System (DOSE) - Discharge/Billing Data	Access to OD2A-S Strategy 2 activities to allow for annual ED and/or inpatient hospitalization discharge/billing data submissions within the Partner’s Portal System.

SAMS Activities: LOCAL

Activity Name	Description
OD2A Upload	OD2A activity on SAMS that lets recipients submit data or documents securely to CDC.
OD2A Download	OD2A activity on SAMS that lets CDC provide feedback and datasets to OD2A recipients securely.
Partner's Portal System (OD2A)	Application on SAMS for OD2A-related documents such as Annual Performance Reviews, Workplans, and Performance Measures.

OD2A Partner's Portal

The [CDC Partner's Portal](#) is an OD2A programmatic tool used to collect grants management and award requirements from recipients. All recipients enter information into the system for their work plans, budgets, annual progress reports, evaluation plans, and data management plans. Throughout your award period, you will be able to access your program's most recent work plan and budget in the Partner's Portal. The Partner's Portal is also used for OD2A-S Strategy 2 (DOSE) data submission, as mentioned in the section above. A request form for SAMS access must be submitted for staff to have Partner's Portal access. Recipient staff added to the Partner's Portal are notified by an email sent through SAMS.

Recorded training videos and webinars on how to use the Partner's Portal modules are available. To view these, you must have access to the OD2A Technical Assistance Center (TAC).

- **OD2A Partner's Portal Training Video: Evaluation Plan Task | OD2A TAC:** This training specifically covers data entry into the Evaluation Plan module, including cross-cutting indicators, strategy-specific indicators, evaluation questions, qualitative measures, and quantitative measures.
- **OD2A Partner's Portal Training Video: APR Task | OD2A TAC:** This training specifically covers data entry into the Annual Progress Report module, including Technical Review comments and responses.
- **Coming soon—DOSE Partner's Portal Guidance:** This document will provide guidance on how to use CDC's Partner's Portal for DOSE Data Submission (OD2A-S only). Please inquire with your project officer about this document's release.

Routine Communications

Mailboxes

There are several mailboxes used to communicate with award recipients. These are typically based on the role of your staff on the OD2A award. Routine communications may be received from the following:

- **OD2A-S Mailbox:** od2a-states@cdc.gov

The OD2A-S mailbox is primarily used to send guidance and mass communications to funded state recipients. This mailbox manages events, recipient meetings, and other larger OD2A-States activities. The distribution list includes all OD2A-S recipient staff, CDC OD2A-S staff, and leadership.

- **OD2A LOCAL Mailbox:** OD2A_local@cdc.gov

The OD2A: LOCAL mailbox is primarily used to send guidance and mass communications to funded OD2A: LOCAL recipients. This mailbox manages event invites for OD2A: LOCAL events such as recipient meetings and other large OD2A: LOCAL events. This mail distribution goes to all OD2A: LOCAL recipient staff in addition to CDC OD2A: LOCAL staff.



Strategy-Specific Mailboxes

OD2A Strategies/ Components	Mailbox	Purpose
OD2A-S		
Strategy 2. Morbidity Surveillance (DOSE)	DOSE@cdc.gov	Primarily used to send updates, guidance, reminders, and mass communications for OD2A-S Strategy 2 Morbidity Surveillance from CDC to recipients. Recipients can also submit Strategy 2 questions to this mailbox.
Strategy 3. Mortality Surveillance (SUDORS)	ODsurveillance@cdc.gov	Primarily used to send updates, reminders, data closeout reports, and mass communications for OD2A-S Strategy 3: Mortality Surveillance from CDC to recipients, and to respond to data abstraction guidance questions from recipients.
Strategy 4. Laboratory surveillance of nonfatal overdoses	od_lab_surveillance@cdc.gov	Primarily used to send updates, guidance, reminders, and mass communications for OD2A-S Strategy 4: Laboratory surveillance of nonfatal overdoses. Recipients can also submit Strategy 4 questions to this mailbox.
Strategy 5. Data Linkage	od_data_linkage@cdc.gov	Primarily used to send updates, guidance, reminders, and mass communications for OD2A-S Strategy 5: Data Linkage from CDC to recipients. Recipients can also submit Strategy 5 questions to this mailbox.
OD2A: LOCAL		
Component B. Drug product and paraphernalia testing	od2aLtest@cdc.gov	Primarily used to send updates, guidance, reminders, and mass communications to the 18 recipients funded to implement OD2A:LOCAL Component B. Drug product and paraphernalia testing. Recipients can also submit OD2A:LOCAL Component B questions to this mailbox.
Component C. Linkage and retention in care	od_data_linkage@cdc.gov	Primarily used to send updates, guidance, reminders, and mass communications to the 12 recipients funded to implement OD2A:LOCAL Component C: Surveillance of Linkage to Care and Retention in Care. Recipients can also submit OD2A:LOCAL Component C questions to this mailbox.

Recipient Engagement Calls with Key CDC Roles (PO and Support Team Members)

The OD2A Program utilizes routine virtual meetings to maintain two-way communication with funded recipients. The frequency of calls may be determined by your recipient team and CDC PO. The purpose of these calls is to have dedicated time for addressing the progress of your work plan, sharing lessons learned, highlighting successes, problem-solving, and/or receiving TA to enhance the completion of work plan activities. Recipients can expect to have routine communication with their PO regarding stewardship of funds and the progress of work plan activities.

Site Visits

It is customary for CDC POs and other support staff such as surveillance SOs to conduct site visits with CDC-funded recipients as a regular part of program monitoring. Site visits, which can be in person or virtual and range from 1-2 days long, allow CDC to learn more about the recipient's programmatic, operational, and fiscal efforts as well as allow the recipient to learn about CDC expectations and receive TA to enhance the implementation and evaluation of their OD2A program. Funded recipients typically invite their key staff and partners to facilitate in-depth discussions about their programmatic progress, successes, and challenges.



Learning Opportunities

As a participant in OD2A-S or OD2A: LOCAL, you will have an opportunity to participate in various training events and learning communities.

Annual In-Person Meetings

An in-person kick-off meeting will be held during the first year of OD2A-S and OD2A: LOCAL. Annual “reverse site visits” will be held in subsequent years. These are most often held during the month of May, though dates may vary.

Webinars

Periodic webinars on specific topics will be offered throughout the OD2A experience. These are hosted by CDC, the OD2A TAC, or national organization partners of OD2A. A calendar of webinars can be found on the OD2A TAC website. Commonly offered webinars include:

- **Program management webinars** on topics such as performance measures, using the Partner's Portal, and other topics.
- **Prevention webinars** on specific topics associated with NOFO objectives such as harm reduction, working with people with lived or living experience, and other topics.
- **Surveillance webinars** held periodically for the following “working groups”:
 - » SUDORS (OD2A-S)
 - » DOSE (OD2A-S)
 - » Drug product and paraphernalia testing (OD2A: LOCAL)
 - » Surveillance of linkage to care (OD2A: LOCAL)
- **Learning Community** webinars on emerging topics offered by national organization partners of OD2A.

Learning Communities

- **Communities of practice** for various types of OD2A staff in state and local health departments are anticipated for OD2A in upcoming years. They bring together people with common job functions across jurisdictions for rich dialogue about emerging issues.
 - » *Example:* OD2A recipients will participate in an evaluation community of practice (CoP), specifically focused on evaluating their overdose prevention activities. The CoP will provide a forum for sharing between recipients as well as between CDC and recipients. The CoP will meet quarterly beginning the first year of OD2A-S and OD2A: LOCAL. During quarterly meetings, recipients will be invited to share progress and challenges they've faced with implementing evaluation activities. Recipients will be encouraged to share questions and strategies used in their evaluation work, progress toward the targeted evaluation project and translational product, and collection and reporting of performance measures data. Recipients also will be encouraged to share innovative evaluation methods.
- **National organization sponsored peer learning opportunities** provide peer-to-peer learning through in-person or virtual events that bring recipients together in small cohorts to discuss shared experiences.
 - » *Example:* The Association of State and Territorial Health Officials (ASTHO) provides a variety of learning opportunities, including peer-to-peer learning events of small cohorts convened around practices such as leadership and health equity, and one-to-one consultation on Business Practice Improvement.
- **DOP Technical Assistance Center (DOP-TAC)** provides resources to support your OD2A work. You can request TA from the DOP-TAC, track TA assignments, and complete TA reports. See “Resources” for more information.



Surveillance Workgroups

CDC supports surveillance workgroups specific to types of data that play important roles in OD2A.

OD2A-S Workgroups	Description
SUDORS	SUDORS workgroup meets monthly on the third Wednesday of the month. Contact ODsurveillance@cdc.gov for details. NOTE: Please use the SAMS access form to request inclusion to the workgroup listserv.
DOSE	DOSE workgroup meets quarterly. Contact DOSE@CDC.gov for details.
Data Linkage	Data linkage workgroup meets quarterly. Contact od_data_linkage@cdc.gov for details.
Laboratory surveillance for nonfatal overdose (biosurveillance)	Lab surveillance workgroup meets monthly, hosted by the Association of Public Health Laboratories (APHL). Contact OD_lab_surveillance@cdc.gov for details.
OD2A: LOCAL Workgroups	Description
Drug product and paraphernalia testing (Component B)	Drug product and paraphernalia testing (Component B) workgroup meets quarterly. Contact od2aLtest@cdc.gov for details. Subgroups are also going to convene at the beginning of 2024.
Linkage to care surveillance (Component C)	Linkage to care surveillance workgroup meets quarterly. Contact od2a_l_linkage2care@cdc.gov for details.

Resources

DOP Technical Assistance Center (DOP-TAC)

DOP-TAC provides a gateway to a suite of resources to support your OD2A work and connect with your peers. Only funded jurisdictions, their subcontractors, and partner organizations may have access to the DOP-TAC.

NOTE: The DOP-TAC website will be rolled out in early 2024. In the meantime, **please request TA through [this Interim TA Request form](#)**. Expect further communications from both CDC and the TAC team as more resources become available.

What Is Technical Assistance (TA)?

TA, commonly referred to as consulting, is the process of providing targeted support to an organization with a development need or problem. It is an effective method for building the capacity of an organization. TA involves communication between a specialist or consultant and the organization. The specialist should be aware of the organizational culture and any specific circumstances related to the development need. TA can also be delivered over an extended period of time.

The structure of how TA is delivered varies. It can be one-on-one consultation or small-group facilitation. Universal TA can also be offered for larger group events like webinars and communities of practice.

When to Use the DOP-TAC to Request TA

Tracking TA is important for DOP and recipients. Systematically documenting TA assignments and reports helps DOP understand recipient needs, informs TA and resource deployment, and improves efficiency through information sharing.

You certainly do not need to track every supportive interaction with a jurisdiction support team member. Instead, users can expect to request TA in the DOP-TAC that:

- Impact any recipient plans (e.g., work plan, data management plan, evaluation plan).
- May be applicable to other recipients or could be helpful to other DOP staff.
- Require substantial time, research, effort, or multiple consultations by a DOP or external TA provider.

It is advised that you work with your Project Officer to determine when and if these criteria are relevant to your TA request.

DOP-TAC Resources

- **Resource library:** Policies, archived webinars, guidance documents, toolkits, and fact sheets to support your OD2A work. Recipients may also submit resources to be included.
- **Calendar:** Events, webinars, and reporting deadlines. You can add events and browse calendar items by date or filter by type, component, or strategy.
- **Repository of TA subject matter experts and TA information:** TA providers can work with you to devise solutions specific to your jurisdiction's context. TA can occur through a variety of mechanisms, ranging from a telephone consultation and email exchange to a document review. Please work with your OD2A project officer to determine the TA options best suited to your jurisdiction's needs. Award recipients may submit TA requests in the DOP-TAC.
- **Strategy-specific resources:** The DOP-TAC has a dedicated webpage for each strategy within the two NOFOs that include overviews, key resources, CDC guidance, and peer-to-peer connection opportunities. These links will be added to this handbook as the sites are established.



OD2A: S NOFO Strategies and Resources

More information and resources related to State NOFO strategies can be found on [CDC’s Overdose Data to Action in States webpage](#).

Surveillance Component	Prevention Component
<p>Core Required Strategies</p> <ol style="list-style-type: none"> 1. Surveillance Infrastructure 2. Morbidity Surveillance 3. Mortality Surveillance <p>Optional and Competitive Strategies</p> <ol style="list-style-type: none"> 4. Laboratory Surveillance for Nonfatal Overdose 5. Data Linkage 	<p>Required Strategies</p> <ol style="list-style-type: none"> 6. Clinician/Health System Engagement and Health IT/ PDMP Enhancement 7. Public Safety Partnerships/Interventions 8. Harm Reduction 9. Community Linkage to Care

OD2A: LOCAL NOFO Strategies and Resources

More information and resources related to LOCAL NOFO strategies can be found on [CDC’s Overdose Data to Action: LOCAL webpage](#).

Component A	Component B	Component C
<p>Prevention</p> <ul style="list-style-type: none"> • Strategy 1A: Linkage to Care and Retention in Care (required) • Strategy 2A: Harm Reduction (required) • Strategy 3A: Stigma Reduction (optional) • Strategy 4A: Clinician and Health Systems Best Practices (required) • Strategy 5A: Health IT Enhancements (optional) <p>Surveillance</p> <ul style="list-style-type: none"> • Strategy 6A: Overdose Surveillance Infrastructure (required) 	<ul style="list-style-type: none"> • Toxicologic Testing of Drug Product and/or Paraphernalia (optional and competitive) 	<ul style="list-style-type: none"> • Surveillance of Linkage to Care and Retention in Care (optional and competitive)

Harm Reduction TA and National Harm Reduction Technical Assistance Center (NHRTAC)

Harm reduction is a strategic priority in both NOFOs. TA will be delivered by the [National Harm Reduction Technical Assistance Center \(NHRTAC\)](#) in partnership with the DOP-TAC. The DOP-TAC will include resources in its resource library; we will be integrating NHRTAC into the DOP-TAC moving forward. DOP, in collaboration with the National Center for HIV, Viral Hepatitis, STD, and TB Prevention (NCHHSTP) and SAMHSA, supports the NHRTAC to increase capacity for TA provision related to harm reduction and the integration of harm reduction efforts across diverse community settings.

Like the DOP-TAC, the NHRTAC contains a network of TA providers and subject matter experts that can provide support to organizations with a specific need, in this case related to harm reduction. Types of TA can range from consultations to implementation and evaluation support in the following areas:

- Syringe services programs (e.g., use of peers in harm reduction programs)
- Infectious diseases (e.g., strategies to reduce infectious disease transmission among people who inject drugs)
- Naloxone distribution (e.g., addressing community-level stigma around naloxone)
- Drug checking, including fentanyl test strips (e.g., policy-related support)
- Other harm reduction-related topics

OD2A recipients should work with their PO to determine whether their need meets the TA request criteria outlined in the DOP-TAC section above. For harm reduction-related support that requires external assistance, recipients should initiate these requests through the DOP-TAC to be linked to relevant TA providers in the NHRTAC.

In addition, OD2A recipients can access a robust resource library through the NHRTAC that includes fact sheets, guidance documents, toolkits, and webinars supporting harm reduction efforts. Virtual learning communities for OD2A recipients specific to harm reduction topics will also be hosted through the NHRTAC.

CDC's Overdose Prevention Communication Campaign Resources

CDC has invested in developing several communications campaigns that recipients can use to supplement their overdose prevention and response efforts.

Stop Overdose Resources

CDC launched the [Stop Overdose Initiative](#) in August 2021 with a full list of campaign-specific resources, including billboards, video PSAs, pharmacy bags, streaming radio ads, and more. It includes four mini-campaigns aimed to educate younger, at-risk audiences about preventing fatal and nonfatal overdose and substance use-related harms, focusing specifically on:

- Explaining the dangers of fentanyl
- Educating about the risks and consequences of polysubstance use
- Promoting the lifesaving power of naloxone
- Supporting recovery to reduce stigma

The [Stop Overdose webpage](#) features information from all drug overdose prevention campaigns and includes additional federal resources. CDC developed a [Spanish version of the webpage](#) and translates campaign ads and resources into Spanish on an ongoing basis.

Rx Awareness Resources

[Rx Awareness](#) tells the stories of people whose lives were impacted by prescription opioids. Assets include first-person testimonial video and radio PSAs, bus and airport ads, social media assets, and more. The campaign launched in 2017 and focuses on adults ages 25-54 who have taken opioids for medical use or have misused opioids at least once. In 2019, CDC filmed and captured more real stories to focus on audiences heavily impacted by the opioid overdose crisis, including pregnant women, veterans, younger adults (25 to 34-year-olds), middle-aged adults (45 to 54-year-olds), and American Indians/Alaska Natives.

Accessing CDC's Campaign Resources

There are two ways to access CDC's campaign resources depending on what you need:

- CDC-branded campaign materials are available for download through the [Overdose Resource Exchange](#)
- Taggable campaign materials (with a customizable field where health departments can add their logo) are available for download through CDC's [Communication Resource Center](#) (registration information coming soon)

Data Resources

State morbidity and mortality data submissions, as well as other data analysis efforts allow CDC to share aggregate data with the public.

- [SUDORS Dashboard: Fatal Overdose Data](#)
- [DOSE Dashboard: Nonfatal Overdose Syndromic Surveillance Data](#)
- [DOSE Dashboard: Nonfatal Overdose Emergency Department and Inpatient Hospitalization Discharge Data](#)
- [The Fentalog Study: A Subset of Nonfatal Suspected Opioid-Involved Overdoses with Toxicology Testing](#)
(**Note:** although **not** an OD2A dashboard, this could be a useful resource/reference for OD2A recipients)

Evaluation Resources

[OD2A evaluation profiles](#) can help state and local health departments, community-based organizations, medical and healthcare professionals, and program managers determine how well programs and initiatives are being implemented. The profiles contain guidance on the types of evaluation questions, indicators, data sources, and data collection methods that can be used to evaluate the specified topics and activities. Profiles available as of December 2023 focus on eight specific evaluation topics (see below), and other profiles will be released as they are developed and can be made available.

- [TA to Disproportionately Affected Communities](#)
- [Academic Detailing](#)
- [Linkage to Care Initiatives](#)
- [Overdose Communication Campaigns](#)
- [Naloxone Distribution Programs](#)
- [Overdose Fatality Reviews](#)
- [Public Health Surveillance with PDMP Data and Public Dissemination of Results](#)
- [PDMP Data Use to Inform Clinical Practice and Improve Patient Safety](#)

Case Studies

Case studies captured in-depth information from jurisdictions funded by OD2A between 2019 and 2023 and were focused on current and emerging practices related to overdose prevention and response. Six key topic areas were identified for interviews, analysis, and dissemination. Within each topic, specific activities and programs from various jurisdictions are captured as case studies.

- [Adverse Childhood Experiences or ACEs](#)
- [Harm Reduction](#)
- [Linkage to Care in Non-Public Safety Settings](#)
- [Public Safety-Led Post-Overdose Outreach Programs](#)
- [State and Local Integration Activities](#)
- [Stigma Reduction](#)

Resources for Clinician/Health System-Focused Strategies

- [2022 CDC Clinical Practice Guideline on Prescribing Opioids for Pain](#)
- [Healthcare professional trainings on the 2022 CDC Clinical Practice Guideline](#)
- [Resources for healthcare administrators](#)



Other Related Publications

A sample of related publications is below. For more information, please see the [CDC DOP Publications webpage](#) and the [CDC Morbidity and Mortality Weekly Reports by Topic webpage](#).

Example Publications Using SUDORS Data

- O'Donnell J, Tanz LJ, Miller KD, et al. [Drug Overdose Deaths with Evidence of Counterfeit Pill Use — United States, July 2019–December 2021](#). MMWR Morb Mortal Wkly Rep 2023;72:949–956. DOI: <http://dx.doi.org/10.15585/mmwr.mm7235a3>
- Kariisa M, O'Donnell J, Kumar S, et al. [Illicitly Manufactured Fentanyl–Involved Overdose Deaths with Detected Xylazine — United States, January 2019–June 2022](#). MMWR Morb Mortal Wkly Rep 2023;72:721–727. DOI: <http://dx.doi.org/10.15585/mmwr.mm7226a4>
- Tanz LJ, Dinwiddie AT, Mattson CL, O'Donnell J, Davis NL. [Drug Overdose Deaths Among Persons Aged 10–19 Years — United States, July 2019–December 2021](#). MMWR Morb Mortal Wkly Rep 2022;71:1576–1582. DOI: <http://dx.doi.org/10.15585/mmwr.mm7150a2>

Example Publications Using DOSE Data

- Scholl L, Liu S, Pickens CM. Suspected Nonfatal Cocaine-involved Overdoses Overall and with Co-involvement of Opioids. J Public Health Manag Pract 2023 May-Jun;29(3):392-402. DOI: [10.1097/PHH.0000000000001719](https://doi.org/10.1097/PHH.0000000000001719). Epub 2023 Mar 3.
- Stokes EK, Pickens CM, Wilt G, Liu S, David F. County-level social vulnerability and nonfatal drug overdose emergency department visits and hospitalizations, January 2018-December 2020. Drug Alc Depend 2023 Vol. 247 Pages 109889. 37148633 DOI: [10.1016/j.drugalcdep.2023.109889](https://doi.org/10.1016/j.drugalcdep.2023.109889).
- Scholl L, Liu S, Vivolo-Kantor A, Board A, Stein Z, Roehler D, McGlone L, Hoots B, Mustaquim D, Smith H. Development and Validation of a Syndrome Definition to Identify Suspected Nonfatal Heroin-Involved Overdoses Treated in Emergency Departments. J Public Health Manag Pract. 2021 Jul-Aug 01;27(4):369-378. DOI: [10.1097/PHH.0000000000001271](https://doi.org/10.1097/PHH.0000000000001271).

Example Publication Using Both SUDORS and DOSE Data

- Liu S, O'Donnell J, Gladden RM, McGlone L, Chowdhury F. Trends in Nonfatal and Fatal Overdoses Involving Benzodiazepines — 38 States and the District of Columbia, 2019–2020. MMWR Morb Mortal Wkly Rep 2021;70:1136–1141. DOI: <http://dx.doi.org/10.15585/mmwr.mm7034a2>

Award Management

About Your CDC Award

When a recipient accepts a CDC grant or cooperative agreement they must comply with the requirements outlined in the [NOFO](#) and [notice of award \(NoA\)](#). In addition to the information in this section regarding your award requirements, your PO also serves as a resource on your award requirements.

Understanding your award begins with fully understanding your NoA: a legal document that notifies the recipient of an award. Upon receipt of the NoA, you can request funds from the U.S. Department of Health and Human Services (HHS) payment system. You can also begin working on the activities approved in your application. The NoA is issued for the initial budget period and each budget period during the life of the project. General terms and conditions apply to all CDC awards; there may be additional conditions that apply based on the award you have received.

CDC requires the recipient to submit a variety of programmatic and financial reports at specific times during the life cycle of a grant award but, at a minimum, annually. The recipient must submit accurate, complete reports on time.



CDC anticipates that recipients may need to make post-award changes to their award budgets, or other aspects of their approved applications, to accomplish programmatic objectives. Your notice of award will outline the activities that require CDC advance approval, known as prior approval requests. Once you submit a prior approval request this is referred to as a post-award amendment. Prior approval requests for non-research grants must be made in GrantSolutions' GMM. Failure to obtain required prior approval may result in the disallowance of costs, termination of the award, or other enforcement action within CDC's authority. Some post-award amendment types are:

- Budget revision
- Change in key personnel
- Notification of contractor or consultant

Consult with your PO and GMS on post-award changes which require a prior approval request.

Key CDC Resources for Award Management

- [Understanding Your Notice of Award](#)
- [About CDC Grants | Grants | CDC](#)
- [Already have a CDC Grant?](#)
- [Reporting](#)
- [General Terms and Conditions for Non-research Grant and Cooperative Agreements](#)
- [Prior Approval Requests](#)
- [CDC Prior Approvals for Non-research Awards](#)
- [Grants Management Academy](#): The Federal Grants Management Training video series is designed to provide federal grant recipients with the information needed to ensure the successful management of federal grants and cooperative agreements. This page also has links to resources and guidance about existing grants.

Introduction to a Public Health Approach to the Overdose Crisis

The multifaceted nature of SUDs requires broad implementation of prevention and treatment interventions in a wide range of settings. It is important to focus on addressing individual, environmental, and social factors that contribute to SUDs, thus taking a public health approach to the overdose crisis. These resources expand the various factors that must be considered when working on surveillance, prevention, and evaluation of SUDs.

- [The Importance of Public Health Surveillance in Responding to Overdoses](#): This podcast episode discusses why there needs to be a comprehensive response in public health surveillance, around the opioid epidemic. This episode also explores states that are considering novel initiatives to address non-fatal drug overdoses.
- [Introduction to the Shared Risk and Protective Factors Framework](#): ASTHO developed this microlearning to describe how health officials and senior leadership can implement a shared risk and protected factor framework in their health agency's work to achieve better health outcomes.



Overdose Crisis Resources

- [The Opioid Crisis](#): This video is a recorded webinar where presenter Sarah Bacon, PhD discusses the background and impact of the opioid crisis, shared resources, and walks through community-level approaches to prevention and response.
- [Evidence-Based Strategies for Preventing Opioid Overdose: What's Working in the United States](#): This CDC document details ten evidence-based strategies that can be implemented from a comprehensive state response to reduce opioid overdose.
- [Opioid Overdose Prevention Microsite](#): This Microsite offers a customizable version of the broader CDC Opioid Overdose website.
- [Content syndication](#) allows CDC to offer web content to other sites. With just a few lines of code, the microsite appears like a module within your website. The microsite integrates seamlessly so it works like part of your website, and it stays up to date with trusted science-based information from CDC.
- [Stimulant Guide](#): This resource guide contains stimulant overdose prevention strategies, answers to frequently asked questions about stimulants, stimulant use, and stimulant overdose.
- [What You Should Know About Xylazine](#): This webpage provides an overview of xylazine and answers common questions.
- [Overdose Prevention Strategy](#): In 2017, HHS launched a comprehensive 5-Point Strategy to empower local communities on the frontlines.
- [Overdose Prevention Policy Considerations: A Policy Playbook for State and Territorial Health Officials and Agencies](#): This ASTHO resource highlights policy strategies to address overdose at the state level.

Lived Experiences

Research has shown organizations and programs that incorporate perspectives from those with lived experiences are better equipped to make their services more focused, efficient, integrated, culturally appropriate, and sustainable. Watch these two video resources to better understand the importance of engaging with community members with lived experience in SUDs:

- [Plenary: Achieving Health Equity in the Work Ahead](#)
- [Plenary: Why Our Work Matters](#)

Stigma Reduction

Stigma can result in shame and increased reluctance to participate in services. Because of this, barriers to adequate care are enhanced, leading to discrimination and poor health outcomes. Visit the resources below to help inform stigma-related activities in your OD2A work:

- [Stigma Reinforces Barriers to Care for Pregnant and Postpartum Women with Substance Use Disorders:](#)
Created by ASTHO, this resource provides strategies and recommendations for jurisdictions to combat stigma.
- [Language Matters When Discussing Substance Use:](#)
This handout from the National Council for Mental Wellbeing has information on stigmatizing language to help reframe conversations.



Leadership Resources

Interdependent leadership is based on collaboration across boundaries. The basis of effective collaboration is the capacity of the people directly doing the work to productively combine individual and shared work through mutual engagement. These resources are designed to help all recipient staff understand interdependent leadership and how to practice it in OD2A work:

- [Five Collaborative Principles needed for interdependent leadership:](#) This handout details five principles that encourage collaboration and mutual engagement among leaders, partners, and their teams.
- [Developing Interdependent Leadership:](#) This handout provides guidance on ways to develop and promote leadership that is collaborative and interdependent.

Compassion Fatigue Resources

Compassion fatigue can test resiliency in responders and contribute to negative outcomes for those they serve. Through promoting self-care and compassion in health agencies, responders can increase resiliency and combat the negative effects of compassion fatigue, particularly during extended responses to public health crises. This content suite of materials provides helpful information related to mitigating and preventing compassion fatigue:

- [Fighting Compassion Fatigue During Public Health Epidemics](#)
- [A Meditation to Work Through Challenges](#)
- [A Kindness Meditation to Strengthen Compassion](#)