



Recommendation for Action

File #: 22-3367, Agenda Item #: 15.

11/3/2022

Posting Language

Approve an ordinance amending the Fiscal Year 2022-2023 Austin Public Health Department Operating Budget Special Revenue Fund (Ordinance No. 20220817-004) to accept and appropriate \$260,000 in additional grant funds from the National Association of County and City Health Officials with support from the Centers for Disease Control and Prevention's National Center for Injury Control and Prevention for the Implementing Overdose Prevention Strategies at the Local Level Grant.

Lead Department

Austin Public Health.

Fiscal Note

Funding in the amount of \$260,000 is available from the National Association of County and City Health Officials, with the support from the Centers for Disease Control and Prevention. A City funding match is not required. A fiscal note is attached.

For More Information:

Adrienne Sturup, Director, 512-972-5010; Cassandra DeLeon, Assistant Director, Disease Prevention Health Promotion Division 512-972-6760; Janet Pichette, Chief Epidemiologist/Assistant Director, Epidemiology and Public Health Preparedness Division 512-972-5486, Stephanie Helfman, Manager, Chronic Disease & Injury Prevention Program, 512-972-5222; Estella Kirscht, Administrative Specialist, 512-972-4423.

Additional Backup Information:

The Austin Public Health Department (APH) has been awarded the Implementing Overdose Prevention Strategies at the Local Level Grant from the National Association of County and City Health Officials, with support from the Centers for Disease Control and Prevention. This project will improve APH's surveillance of fatal and non-fatal overdose data and ensure the sharing of information to understand the burden of this condition within the community and implement policy and prevention strategies. The project leverages APH's relationship with Austin/Travis County EMS by evaluating non-fatal encounter data. Fatality data from APH's Office of Vital Records will be analyzed and reported on a quarterly basis. The Austin Public Health Department currently leads a Substance Use/Misuse Disorder Data Workgroup to engage key stakeholders in identifying additional data sources or innovative ways to analyze and share information. The project will formalize this workgroup and support the engagement of stakeholders, who may have data or insight on gaps that would support a cohesive substance use disorder (SUD) response. APH's Epidemiology and Public Health Preparedness Division will continue to focus on using traditional surveillance and syndromic surveillance to better inform policy, prevention, and response decisions. Data from other sources will be evaluated to support the development of a public SUD dashboard and a quarterly Drug Overdose Surveillance Report.

APH will partner with Texas Harm Reduction Alliance through a subaward to expand harm reduction activities, such as training. The training will provide individuals with the knowledge, skills and self-efficacy to administer naloxone in case of emergency. The Texas Harm Reduction Alliance will hire two full-time peer overdose prevention coordinators to educate high-risk individuals, and staff of organizations and businesses that may interact with high-risk individuals, on harm reduction strategies. APH will implement the RX Awareness

campaign or another locally created campaign to increase awareness of the dangers of prescription opioids to address communication gaps about the causes of SUD in Travis County. Additional communications strategies may focus on fentanyl awareness and the important use of naloxone for overdose reversals. The grant period is November 1, 2022 to July 31, 2023. Contingent on the Centers for Disease Control and Prevention approving a no-cost extension, the project will continue to run through January 31, 2024.

The General Fund will not be required to contribute additional funds beyond those currently budgeted to this grant. When the grant funds expire, the Austin Public Health Department's need for continued funding will be evaluated and may be denied.

Strategic Outcome(s):

Health and Environment.