



# Opioid Settlement Advisory Committee Meeting (OSAC)

**Meeting Minutes – November 10, 2025**

**Time:** 5:00 – 6:38 PM

**Location:** Zoom

**Facilitator:** Jaeson Smith, Opioid Settlement Manager

## Purpose of OSAC

The Opioid Settlement Advisory Committee (OSAC) serves as an advisory body to Durham County leadership in the strategic use of opioid settlement funds. The committee's role is to evaluate priorities, review funded initiatives, and recommend strategies that advance prevention, treatment, harm reduction, and recovery support services. OSAC is committed to promoting equitable and sustainable approaches that address the impacts of the opioid crisis in Durham County.

## Meeting Overview

The Opioid Settlement Advisory Committee meeting focused on selecting co-chairs and reviewing the effectiveness of syringe services programs and post-overdose response efforts in Durham County. The committee discussed challenges in accessing opioid treatment, particularly for pregnant women and minority communities, and reviewed a mobile healthcare program providing medication-assisted treatment. The conversation ended with a review of draft bylaws, discussion of an interactive data dashboard, and planning for future funding decisions and strategic planning processes.

*The following sections summarize key presentations, discussions, and decisions from the meeting.*

## Summary

### Opioid Committee Co-Chair Selection & October 2025 Minutes Approved

The Opioid Settlement Advisory Committee meeting began with Jaeson calling the meeting to order and reviewing the agenda, which included approving minutes from the previous meeting and selecting co-chairs. The minutes were approved without additions.

Jaeson explained the role of co-chairs, who will help facilitate the committee's strategic plan recommendations and guide meetings. Volunteers were asked to serve as co-chairs, with Jaeson indicating that if two volunteers emerged, they would serve, and if more than two volunteered, a voting or polling system would be used. Brittany, Shelisa, and Dawn volunteered to serve as co-chairs of the Opioid Settlement Advisory Committee, highlighting their relevant experience in public health, community health, and recovery courts. Jaeson clarified that only committee members were eligible for the co-chair positions and conducted a poll for voting. The conversation ended with a request for participants to vote on the co-chairs from the committee list. Jaeson announced the election results for co-chairs, with Brittany Price and Shelisa Howard Martinez selected with one additional candidate Dawn Bazton.



Jennifer Carroll provided data on the effectiveness of syringe services programs as a pathway to treatment, citing CDC studies that highlight their role in connecting individuals to medication treatment for opioid use disorder.

## Meeting Presentations

### Post-Overdose Response Team

Helen Tripp, the EMS Program Manager, presented on the post-overdose response team, highlighting their work since 2018 when they started distributing Narcan to EMS responders. She noted that the program has evolved, with additional resources available in the community compared to eight years ago. Helen discussed the challenges of covering all overdose incidents, especially during peak hours, and explained how the addition of two new community paramedics has improved their ability to respond effectively. She also shared statistics on the number of follow-up attempts, Narcan kits distributed, and new MOUD inductions, emphasizing the importance of their work in supporting individuals who have overdosed.

Helen presented data on overdose response efforts in Durham County, highlighting the impact of adding two new community paramedics in February 2025. She noted that while the number of unique overdose patients remained similar, the team was able to increase follow-up contacts by 69% due to additional staffing. Helen also discussed the demographic trends in overdose cases, with the 35-44 age group experiencing the highest rates, particularly among Black males. Kay, a long-time observer of these trends, confirmed that the age distribution has shifted slightly, with more cases among both younger and older individuals compared to previous decades.

Helen presented data on opioid-related calls, noting that most involve overdose cases but also include withdrawal symptoms. Jamie inquired about the team's response to opioid withdrawal, which Helen confirmed includes both post-overdose and separate cases. Helen explained that new induction numbers for medication-assisted treatment (MAT) may appear lower due to gaps in appointments or referrals, rather than a lack of interest. Paul asked about reasons for refusal and whether people declining MAT were doing so permanently or temporarily, as well as how many individuals in existing MAT programs still experience events. Helen responded that while some patients decline due to past negative experiences, most refusals stem from fear or concerns about withdrawal, and the team uses motivational interviewing to educate and encourage participation in treatment.

### Informal Discussion

The committee discussed challenges in accessing opioid treatment, particularly for pregnant women and minority communities. Helen and her team were praised for their work in providing medication-assisted treatment, including high-dose buprenorphine and methadone, which is particularly useful for patients with fentanyl use. Jamie suggested that the project could serve as a model for creative care delivery and requested feedback on clinical gaps and patient



responses to treatment. The team has been involved in faith-based outreach efforts to educate communities about opioid use disorder.

The meeting focused on discussing a mobile healthcare program that provides medication-assisted treatment for opioid use disorder, with Helen explaining their approach of bringing treatment to patients rather than requiring them to travel to clinics. Kay raised concerns about patients with chronic pain being denied medication, which Helen acknowledged as an issue they need to better track through patient interviews during initial inductions. Jaeson announced that he would forward additional questions to Alan and noted that future discussions would include data analysis with John Paul Zitta regarding overdose patterns and census tract data.

### **Opioid Settlement Fund Bylaws Review**

The meeting focused on reviewing and explaining the draft bylaws for the Opioid Settlement Advisory Committee. Jaeson, the county staff liaison, outlined the committee's mission, roles, and responsibilities, emphasizing its focus on guiding the allocation of settlement funds. He clarified the committee's structure, including membership requirements, meeting frequency, and decision-making processes. Kay raised a question about the quorum requirement, which Jaeson confirmed as six members. The group discussed the need for virtual meetings due to the ongoing pandemic and agreed to review and potentially amend the bylaws as needed. Jaeson also emphasized the importance of members completing required conflict of interest training.

### **Committee Planning and Budget Review**

The committee discussed improving the bylaws and agreed to add this to the agenda for their next meeting. Jaeson presented an interactive data dashboard compiled by John Paul Zitta in Public Health, which tracks programs like naloxone distribution and SSP, and the committee agreed to have JP join the December meeting to discuss the dashboard further. Brittany raised the possibility of starting the RFP process, and Jaeson shared a timeline for committee recommendations, aiming for February 2026, with funding decisions potentially by mid-March. Karen requested a finance session to clarify existing budget commitments and identify gaps, which Jaeson agreed to organize. The committee was informed of a \$1.4 million annual funding limit and encouraged them to consider strategic funding priorities within this constraint. Jaeson also offered to fund professional development and training for committee members to aid in their strategic planning process.

### **Action Items / Next Steps**

- **Document Distribution & Agenda Prep:** Jaeson will distribute the committee bylaws and expected deliverables timeline, schedule the data dashboard presentation, and add both the bylaws approval and RFP process discussion to the December meeting agenda. Kay will send Jaeson the White House syringe services program funding document for distribution.



- **Member Responsibilities:** Committee members will review the bylaws before the next meeting, prepare input on RFP priorities and funding allocation, and ensure conflict-of-interest training is completed within six months.
- **Program & Data Efforts:** Helen Tripp will begin collecting patient history-of-use data during inductions, improve tracking of treatment refusal reasons, and coordinate with the Morse Clinic regarding use of the 72-hour rule.
- **Planning for Future Meetings:** Jaeson will meet with Brittany and Shelisa to support development of upcoming meetings.

### **Next Meeting**

The next meeting is scheduled for Wednesday, December 10, 2025, at 5:00 PM.