



Governing Board Agreement

The Volusia County Overdose Fatality Review (OFR) Governing Board is convening to review deaths of individuals who fatally overdosed to identify missed opportunities for prevention and intervention across health, social, and criminal justice systems for individuals at risk of overdose, with the goal of reducing preventable overdose mortality in Volusia County, Florida. This is a voluntary initiative in which key identified organizations and leaders will work collaboratively to closely examine overdose deaths, develop recommendations and lead action in Volusia County. Members of the Governing Board agree to the terms of participation in the Volusia OFR as follows:

I agree that all parties are vested with the authority to promote and protect the public health and safety of the citizens of Volusia County by recommending changes to practice, policy and improve collaboration to prevent future overdose deaths.

I agree that the objective of the Volusia OFR will be the identification of preventable overdose deaths and recommendation of intervention and prevention strategies.

I agree to serve on the Governing Board or to designate an alternative who will represent my organization.

I agree that the OFR Case Review Team process is enhanced by case-specific sharing of records, and that confidentiality is inherent in many of the involved reports. There will be clear measures taken to protect confidentiality, and no case review will occur without all present abiding by the confidentiality agreement.

I will designate one staff member to be the primary point of contact (POC) for the OFR Case Review Team. I will also designate one secondary point of contact who will be covered under the terms of this Agreement. These points of contact will receive the confidential information pertaining to the decedents and be responsible for consulting all relevant agency systems in order to determine if the decedent had engaged with the agency at any point. If so, the POC will gather and prepare relevant information that can be shared at the OFR Case Review Team confidential meetings.

I hereby designate the following as the primary and secondary points of contact for the OFR Case Review Team:

Primary Point of Contact Name/Title

Phone Number

E-mail

Secondary Point of Contact

Name/Title

Phone Number

E-mail

Organization

Printed Name and Title of Authorized Agency Official

Signature

Date