

**A RESOLUTION BY THE COUNTY OF DURHAM  
TO DIRECT THE EXPENDITURE OF OPIOID SETTLEMENT FUNDS**

**WHEREAS** Durham County has joined national settlement agreements with companies engaged in the manufacturing, distribution, and dispensing of opioids.

**WHEREAS** the allocation, use, and reporting of funds stemming from these national settlement agreements and bankruptcy resolutions (“Opioid Settlement Funds”) are governed by the Memorandum of Agreement Between the State of North Carolina and Local Governments on Proceeds Relating to the Settlement of Opioid Litigation (“MOA”) and the Supplemental Agreement for Additional Funds from Additional Settlements of Opioid Litigation (“SAAF”);

**WHEREAS** Durham County has received Opioid Settlement Funds pursuant to these national settlement agreements and deposited the Opioid Settlement Funds in a separate special revenue fund as required by section D of the MOA;

**WHEREAS** section E.6 of the MOA states that, before spending opioid settlement funds, the local government’s governing body must adopt a resolution that:

- i. Indicates that it is an authorization for expenditure of opioid settlement funds; and,
- ii. states the specific strategy or strategies the county or municipality intends to fund pursuant to Option A or Option B, using the item letter and/or number in Exhibit A or Exhibit B to identify each funded strategy; and,
- iii. states the amount dedicated to each strategy for a specific period of time.

**NOW, THEREFORE BE IT RESOLVED**, in alignment with the NC MOA and SAAF, Durham County authorizes the expenditure of opioid settlement funds as follows:

1. First strategy authorized

- a. Name of strategy: Collaborative Strategic Planning
- b. Strategy is included in Exhibit A
- c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
- d. Amount authorized for this strategy: \$179,532
- e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026
- f. Description of the program, project, or activity: Support for the Opioid Program Manager to coordinate the County’s opioid abatement and remediation strategic planning and activities.
- g. Provider: Durham County Department of Public Health

2. Second strategy authorized

- a. Name of strategy: Recovery Support Services
- b. Strategy is included in Exhibit A
- c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
- d. Amount authorized for this strategy: \$412,873.
- e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026

- f. Description of the program, project, or activity: Hiring of Community Linkages to Care (CLC) Peer Support Specialists: state-certified individuals living in recovery with mental illness and/or substance use disorder who provide support and guidance to individuals struggling with opioid use disorder (contract through local behavioral health facility).
  - g. Provider: Durham County Department of Public Health
- 3. Third strategy authorized
  - a. Name of strategy: Naloxone Distribution
  - b. Strategy is included in Exhibit A
  - c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
  - d. Amount authorized for this strategy: \$320,770
  - e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026
  - f. Description of the program, project, or activity: Support for the Public Health Education Harm Reduction Specialist; provide programmatic & outreach supplies; purchase naloxone to support distribution through the Durham County Department of Public Health Pharmacy and 3 naloxone vending machines; purchase and calibration of 1 naloxone vending machine; and contract staffing to provide outreach by an individual with lived experience.
  - g. Provider: Durham County Department of Public Health
- 4. Fourth strategy authorized
  - a. Name of strategy: Syringe Service Program
  - b. Strategy is included in Exhibit A
  - c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
  - d. Amount authorized for this strategy: \$67,775.00
  - e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026
  - f. Description of the program, project, or activity: Purchase of safer syringe program supplies for DCoDPH pharmacy and community distribution
  - g. Provider: Durham County Department of Public Health
- 5. Fifth strategy authorized
  - a. Name of strategy: Post-Overdose Response Team
  - b. Strategy is included in Exhibit A
  - c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
  - d. Amount authorized for this strategy: \$224,568.
  - e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026
  - f. Description of the program, project, or activity: Support for two additional Community Paramedics will allow the Paramedics to broaden their reach and connect with people at the time of the overdose, as well as have more staff available to connect with patients within 24 to 72 hours post-overdose.
  - g. Provider: Durham County Office of Emergency Services

6. Sixth Strategy Authorized

- a. Name of strategy: Addiction Treatment for Incarcerated Persons
- b. Strategy is included in Exhibit A
- c. Item letter and/or number in Exhibit A or Exhibit B to the MOA:
- d. Amount authorized for this strategy: \$200,000
- e. Period of time during which expenditure may take place:  
Start date: July 1, 2025, through End date: June 30, 2026
- f. Description of the program, project, or activity: Support for an evidence-based approach aimed at addressing opioid use disorder (OUD) within correctional settings. This strategy focuses on early identification, clinical assessment, and the provision of effective, patient-centered treatment during incarceration.
- g. Provider: Durham County Sheriff's Office

The total dollar amount of Opioid Settlement Funds appropriated across the above-named and authorized strategies is \$1,405,518

Adopted this the \_\_\_\_\_ day of \_\_\_\_\_ 2025.

\_\_\_\_\_  
[ \_\_\_\_\_ ], Chair  
[ \_\_\_\_\_ ] County Board of Commissioners

ATTEST:

\_\_\_\_\_  
[ \_\_\_\_\_ ] Clerk to the Board

**COUNTY SEAL**