

**Heroin and Opioid Education and Community Act of 2017 (HB 1082, Chapter 573)**  
**Start Talking Maryland**  
**Behavioral and Substance Abuse Programs and Services Workgroup**

Thursday, September 7, 2017  
9:00 a.m. to 11:30 p.m., 8<sup>th</sup> Floor, Conference Room 4  
Nancy S. Grasmick State Education Building  
Maryland State Department of Education  
200 West Baltimore St., Baltimore, MD 21201

**Purpose:** Chapter 573 requires the State Department of Education to convene a workgroup of local health officers, behavioral and substance abuse disorder counselors and therapists, representatives of the Maryland Association of Boards of Education, the Public School Superintendents Association of Maryland, the Maryland State Education Association, AFT-Maryland and other interested stakeholders to:

- Evaluate (Review) programs that provide behavioral and substance abuse disorder services in the public schools in the State
- Develop proposals to expand the programs evaluated (reviewed) to other jurisdictions (school systems), if appropriate, including recovery schools
- On or before December 2017 report its findings and recommendation to the General Assembly

***Meeting #3***

**Meeting Outcomes:**

- Evaluate (Review) results of the survey of programs that provide behavioral and substance abuse disorder services in the public schools in the State
- Review the criteria for proposal to expand the programs evaluated (reviewed) to other jurisdictions (school systems), if appropriate, including recovery schools
- Develop proposals for the expansion of programs to other jurisdictions, including recovery schools.

**Agenda:**

- Welcome, Introductions, Minutes and Agenda Overview (9:00 am – 9:05 am)
- Purpose—Rationale, Activities, Outcomes (9:05 am-9:10 am)
- Discussion /Reviewing programs and services data-the big picture (9:10 am-9:20am)
- Reviewing criteria for expansion of programs (9:20am 9:35 am)
- Small group work to examine data to inform decisions for proposals for the expansion of programs (9:35 am-10:15 am)
- Small group work to create proposals for expansion of programs (10:15-10:45)
- Reporting out of proposals (10:45-11:00)
- Public Comments (11:00 am-11:20 am)
- Wrap Up / Next Steps (11:20 am-11:30 am)

## **Meeting Minutes:**

*Members in attendance:* Barbara Brookmyer, Frederick County Health Department; Denise Gomez, Family Services, Inc.; Earl Stoner, Washington County Health Department; Jenelle Meyer, Allegany County Health Department; Meenakshi Brewster, St. Mary's County Department of Health; Rebecca Bonner, The Bridge Way School; Lynne Muller, the MSDE; Reginald Burke, the MSDE; Walter Sallee, the MSDE; Jonathan Turner, the MSDE; Deborah Nelson, the MSDE; Maura Taylor, Maryland State Education Association; Ed Singer, Carroll County Health Department, Michelle Daley, the MSDE; Kara Aanenson, DJS; Carol Beck, the MSDE; Deborah Somerville, Baltimore County Public Schools; Kirsten Roller, the MSDE; John Woolums, MABE; and Shanna Wideman, Maryland Department of Health

*Members of the Public:* Izzy Kovach, Rachael Faulkner, Janice Royal, George Slater, Dan Moseboch, and Lenora Painter

### **Welcome, Introductions, Minutes and Agenda Overview**

Dr. Muller welcomed the workgroup and officially opened the meeting at 9:11 AM. She led a round of introductions with the entire workgroup and explained that the meeting was open and subject to the Open Meeting Act. She reviewed the primary charges and tasks of the workgroup for the meeting.

The workgroup was asked to review the meeting minutes from the second meeting in order to vote on their approval. The meeting minutes were voted on and approved by the workgroup.

Dr. Muller reviewed the agenda for the meeting identifying key topics and presenters.

### **Discussion / Reviewing programs and services data-the big picture**

Dr. Muller divided the workgroup into two smaller groups distributing a selection of survey responses for each small group to review and discuss any perceived gaps in the data, including who and is not receiving the services?; where are the programs and services being provided and where are they not?; which tiers of intervention are being addressed and which are not?; are the programs evidence-based?; what programs or services might be recommended?; what are the other findings?

The small groups reviewed the survey responses while various members from the Maryland State Department of Education's (MSDE) Division of Student, Family, and School Supports facilitated conversations around the responses. Each small group reported out on their perceived gaps in the data. Identified gaps and other noteworthy findings from the workgroup include:

- Not a lot of trauma-informed care and mental health services at the elementary level
- Rural areas are not receiving the same type of support and resources as the larger, urban areas and districts
- drug intervention services should reflect continuation in middle school through high school
- More early prevention at the elementary school level to better identify high-risk students
- Focus on interventions but not as much on maintaining recovery

- Recommendation for law enforcement and emergency services to share information to schools to better support students and identify early, at-risk students

### **Reviewing criteria for expansion of programs**

Dr. Muller asked the workgroup members to review the suggested list of criteria listed below for the expansion of programs/services and select the most essential five.

1. Programs/services should be based on assessed needs and match the community needs in which it will reside.
2. Programs/services should be evidence or research-based and have a proven track record of success.
3. Program/service implementation should have full commitment from the jurisdiction to be delivered with fidelity of the model proven to be effective.
4. Programs/services should have clear outcomes with planned measures of success including process, outcome and impact data.
5. Programs/services should include a continuum of services that is team based in the schools and includes community partners licensed in the area of substance abuse. Data sharing agreements and restrictions should identified and agreed upon.
6. Programs/services should cover all substances and mental health disorder signs and symptoms as well as stigma reduction.
7. Programs/services should be sustainable.

### **Recovery School Proposals**

Dr. Muller referenced folder materials pertaining to Recovery Schools and asked the workgroup to review the provided articles and documents. The Recovery School documents and all other meeting documents can be found at the website for the Workgroup for Behavioral and Substance Abuse Programs and Services

<http://marylandpublicschools.org/programs/Pages/BSASW/index.aspx>.

Dr. Muller asked the workgroup to discuss and consider the different Recovery School models in order to provide considerations and recommendations for the State. The group reconvened into their small groups to review the information and discuss considerations. The small groups reported out to the entire workgroup on their considerations. Noteworthy criteria and special considerations suggested for Recovery Schools included:

- Cost and sustainability
- Transition and integration plans
- Voluntary enrollment
- Location of the recovery school sites with respect to transportation
- Funding
- Staffing, training, and qualifications
- Family engagement component
- Referral sources
- Equitability in the admissions process
- Length and terms of stay
- Partnerships

### **Public Comments**

Izzy Kovach spoke on behalf of the Phoenix Rising Recovery School advocates, elaborating on the preventative aspects of recovery schools.

*Please note that Phoenix Rising Recovery School is not currently in operation.*

### **Wrap Up / Next Steps**

Walter Sallee, Directory of Student Services and Strategic Planning for the MSDE thanked the workgroup for their participation and provided an overview of the next steps, including:

**Next Steps:    Compiling work into the Report for the General Assembly**

**Draft copy of the Report sent to members of the Workgroup for feedback**

**Final draft to MSDE staff for editing and approval**

**Presentation to the State Board on October 24, 2017**

### **Adjournment**

Dr. Muller thanked the workgroup for their participation and officially dismissed the meeting at 11:24 AM.

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*The Workgroup on Behavioral and Substance Abuse Programs and Services is pleased to receive oral public comment at each of its meetings. The total time allotted to public comment will generally be limited to thirty (30) minutes. Individuals seeking to speak to the Workgroup will be given three (3) minutes each. Persons desiring to speak are asked to call (410-767-3678) or e-mail ([carol.beck@maryland.gov](mailto:carol.beck@maryland.gov)) to register to speak. Registration will be accepted on a first come, first served basis. In order to make the limited time available most effective, speakers are urged to provide multiple written copies of their comments or other material amplifying their views.*

Upon request, appropriate accommodations will be provided for individuals with disabilities. To allow time to arrange accommodations, five (5) business days notice prior to the meeting is requested. Please contact Carol Beck at (410) 767-3678 or [carol.beck@maryland.gov](mailto:carol.beck@maryland.gov) if you wish to request accommodations or have questions regarding the meeting.

For copies of agendas, minutes, and resources, please refer to the website for the Workgroup for Behavioral and Substance Abuse Programs and Services

<http://marylandpublicschools.org/programs/Pages/BSASW/index.aspx>.