

PREPARING WORLD CLASS STUDENTS

Maryland State Department of Education

Behavioral Health and Substance Abuse Disorder Services Workgroup Meeting #1 SB 1060 (2017)/Chapter 574 August 10, 2017

Opioid Operational Command Center (OOCC) Reginald Burke, M.S.

- Established by Executive Order in January 2017, as part of the Hogan Administration's Heroin and Opioid Prevention, Treatment, and Enforcement Initiative.
- Serves as the coordination entity and facilitates collaboration between federal, state and local health and human services, education, and public safety entities to address the opioid crisis



OOCC Primary Objectives

- Develop strategies to continue implementing the recommendations of the Heroin and Opioid Emergency Task Force;
- Collect, analyze, and facilitate the sharing of data relevant to the epidemic from state and local sources
- Assist and support local agencies in the creation of opioid intervention teams;
- Coordinate the training of and provide resources for state and local agencies addressing the opioid crisis.



OOCC Structure

- The Maryland Emergency Management Agency (MEMA) provides direct oversight of the OOCC.
- The OOCC structure is modeled after the Incident Command System (ICS).
- Agencies and departments from across state government are assigned to lead Sections and Branches and have specific responsibilities for management of goals and objectives.



OOCC Structure (con't)

- Planning Section: creates objectives and operational tasks based on recommendations from the Heroin & Opioid Emergency Task Force.
- Operations Section: ensures coordination and collaboration of state agencies and departments. This Section has five Branches: health and medical, education, social services, public safety, and a local liaison to coordinate between state and local partners.
- Joint Information Center (JIC): coordinates consistent public messaging about the activities and achievements of the OOCC.



2016 Maryland Fatal Overdose Report Highlights

- The number of opioid-related deaths increased by 70 percent between 2015 and 2016, and has nearly quadrupled since 2010.
- Eighty-nine percent of all intoxication deaths that occurred in Maryland in 2016 were opioid-related.
 Opioid-related deaths include deaths related to heroin, prescription opioids, and non-pharmaceutical fentanyl.



2016 Maryland Fatal Overdose Report Highlights (con't)

- Between 2015 and 2016 the number of heroin-related deaths increased by 62 percent (from 748 to 1,212), and the number of fentanyl-related deaths more than tripled (from 340 to 1,119).
- In 2016, the number of prescription-opioid related deaths increased by 19 percent (from 351 to 418); many of these deaths occurred in combination with heroin and/or fentanyl.



"Before Its Too Late"

Web-based statewide portal designed for individuals, educators, families, and health care providers to provide critical resources to address the opioid crisis.

http://beforeitstoolate.maryland.gov/



Heroin and Opioid Education and Community Action Act of 2017 Overview

Key Provisions	Local Implications / State Role
Consultation if there is a change in personnel for School Health Services program	Applies when the school health services staff is hired by the local health department.
Health education – include heroin and opioids, and fentanyl	Adds to existing health education requirements
Naloxone to be available in schools	Requires creation of local policy and reporting to State
Community Action Officials	Grant funds will be available in FY 2019.
Institutes of Higher Education policy and programs	Includes education and availability of naloxone



Behavioral Health and Substance Abuse Disorder Services Workgroup charge:

1. Evaluate programs that provide behavioral and substance abuse disorder services in the public schools in the State.

2. Develop proposals to expand the programs evaluated under item (1) to other jurisdictions, if appropriate, including recovery schools.



Deliverable:

Report findings and recommendations to the General Assembly

December 1, 2017

- Findings and recommendations
 - Programs that provide behavioral and substance abuse disorder services
 - Proposals to expand programs to other jurisdictions



Organization Activity

- Three main categories of programs/services
- □ Prevention
- □ Intervention
- Postvention

Title:		
Prevention	Intervention	Postvention
revention		

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Organization Activity

In your groups:

- Introduce yourself and talk about the programs and services you manage or those for which you have oversight
- Chart out where your program(s)/services
 fall. Be prepared to share your results
- Example: Education programs might fall under prevention



Draft Data Collection Worksheet



Survey Monkey document walk through

Discussion-what other data do we need to collect? What is missing form the draft document?



Collecting data

□ Who?

□ When?

□ August 21, 2017





Recovery Schools



- Rebecca Bonner
 - Head of the Bridge Way School
 - Representative of the Association of Recovery Schools





This chart is not intended to replace a thorough review of each law. It is a guide for LEAs regarding the 2017 legislation that is in effect as of July 1, 2017. All legislation listed below can be found at : http://mgaleg.maryland.gov/webmga/frm1st.aspx?tab=home		
Legislation	Requirements of LEAs	Comments from MSDE
HB 1082, Chapter 573, Heroin and Opiate Education and Community Action Act of 2017 Act		The MSDE is required to expand existing drug addiction and prevention curriculum in specific grades to encompass heroin, opioid and fentanyl use. The MSDE must convene a workgroup on behavioral and substance use disorder services in public schools and submit a report to the General Assembly on or before December 1, 2017
	 Each county board: Consult with a county superintendent before any change in the hiring or termination of personnel in connection with a school health services program 	New requirement Consult with local legal representatives if needed
	 Establish a policy in accordance with school health guidelines and State laws and regulation for the public schools to authorize the school nurse, school health services personnel, and other school personnel to administer naloxone or other overdose-reversing medication to a student or other person located on the school property who is reasonably believed to be experiencing an opioid overdose The policy shall include: Provision requiring all public schools to obtain and store Naxolone or other overdose reversing medication to be used in emergency situations A requirement that each school develop and implement a method for annually notifying parents or guardians 	New requirements Guidelines/Frequently Asked Questions in approval process Maryland Department of Health and MSDE

Heroin and Opioid Act: 2017-2018

	 of the students of the school's policy under this section Except for any willful or grossly negligent act, any of the following individuals who respond in good faithmay not be held personally liable for any act or omission in the course of responding to the emergency: a school nurse, school health services personnel who are licensed or certified to practice a health occupation under the Health Occupations Article or other school personnel 	
The county board or the local health department shall (by local agreement): FY2019	 Hire a sufficient number of either county or regional community action officials or Develop and implement a program that provides the community relations and education functions required to be conducted by community action officials A county or regional community action official shall: Coordinate school-based community forums, in cooperation with local law enforcement and Conduct public relations efforts that include parent contact, electronic media and public service announcements 	New legislation-not funded until FY2018-19 school year FY 2019 The Governor shall include an appropriation of at least \$3,000,000 in general funds in the state budget for the Department (MSDE) for the purpose of awarding grants to county boards to implement the policy an conduct the training required. Once funding is approved in the 2019 fiscal year MSDE shall disburse the grants based on the enrollment count of students in public schools in Maryland
	 Each public school shall submit: On or before October 1 of each year, on the form that the Department requires a report to the Department on each incident at the school that required the use of Naloxone or other overdose-reversing medication 	Form in approval process at MSDE. The Form will be disseminated through Superintendent's Weekly Bulletin and then to local points of contact.

MSDE-The Maryland state Department of Education

SB-Senate Bill HB-House Bill

MDH-Maryland Department of Health, formerly Maryland Department of Health and Mental Hygiene

MARYLAND OPIOID OPERATIONAL COMMAND CENTER

WHAT DOES IT DO?

Brings together state and local partners to support prevention, treatment, and enforcement efforts combating the heroin and opioid crisis in Maryland.

WHY?

Residents of all ages, races, genders, and areas across the state are affected by heroin and opioid misuse. State and local health and human services, education, and public safety officials are working together to develop community-based programs and services to combat this public health crisis.

WHO IS INVOLVED?

The collaborative effort works with local, state, and federal agencies and departments, including:

- Governor's Office of Crime Control & Prevention
- Department of Health and Mental Hygiene
- Maryland Emergency Management Agency
- Maryland State Police
- Maryland State Department of Education
- Department of Human Resources

- Department of Juvenile Services
- Dept. of Public Safety and Correctional Services
- Maryland Institute for Emergency Medical Services Systems
- Maryland Higher Education Commission
- Maryland Insurance Administration
- Office of the Attorney General

GET HELP NOW

Crisis Hotline: 1-800-422-0009 BeforeItsTooLateMD.org



HOW DOES IT WORK?

Governor Hogan declared a State of Emergency on March 1, 2017, increasing federal, state, and local agency response to the heroin and opioid crisis.

By working together in the Opioid Operational Command Center, agencies can share data, information, and ideas, for how to combat this epidemic.

Together, we can reduce the harmful impact of opioid addiction on Maryland communities.

The Opioid Operational Command Center (OOCC) is organized using an emergency management system known as the Incident Command System (ICS). This system functions as a neutral coordinating body to manage objectives, move initiatives forward, and facilitate partnership between state and local agencies and departments. Those agencies and departments lead Sections and Branches (shown below) by managing its goals and objectives.

Planning Section: creates objectives and operational tasks based on recommendations from the Heroin & Opioid Emergency Task Force.

Operations Section: ensures coordination and collaboration of state agencies and departments. This Section has five Branches which make up the common functional areas: health and medical, education, social services, public safety, and a local liaison to coordinate between state and local partners.

Joint Information Center (JIC): coordinates consistent public messaging about the activities and achievements of the Opioid Operational Command Center with the goal of "many voices, one message."

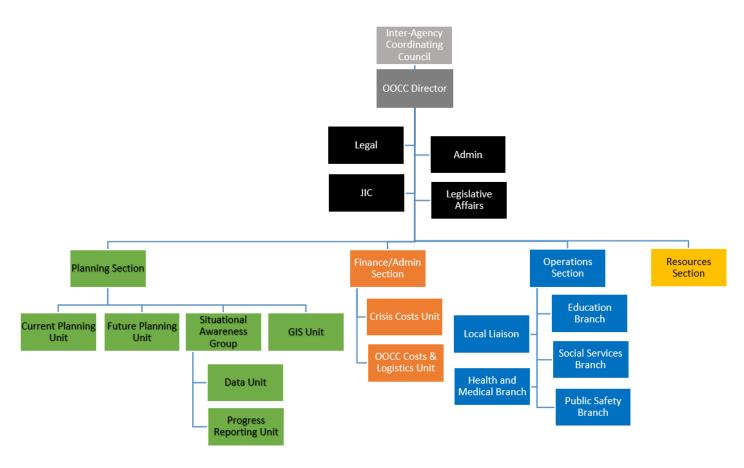


Image: Opioid Operational Command Center Organizational Structure



For immediate release: July 7, 2017 Contact: Katie Kuehn <u>katie.kuehn@maryland.gov</u> <u>443-240-2877</u>

Hogan-Rutherford Administration Announces Over \$22 Million to Fight Heroin and Opioid Epidemic

80% of Funding for Local Jurisdictions and Service Providers, Includes \$2 Million for 24 Hour Crisis Center in Baltimore City

ANNAPOLIS, MD — Maryland's Opioid Operational Command Center, Department of Health, and the Governor's Office of Crime Control & Prevention today announced more than \$22 million to fight the heroin and opioid epidemic. Eighty percent will go to Maryland's 24 local jurisdictions and service providers to fund prevention, enforcement, and treatment efforts throughout the state.

"Finding real solutions to the heroin and opioid crisis that is ravaging our communities is a top priority of our administration and a cause that myself and Lt. Governor Rutherford have been personally committed to since before we took office," said Governor Hogan. "This new funding will make real differences in people's lives as we work together to turn the tide in this deadly fight."

The funding for Fiscal Year 2018 includes the first \$10 million of Governor Larry Hogan's \$50 million commitment to address the crisis announced in March 2017, the first \$10 million from the federal 21st Century Cures Act, and \$2.1 million from the Governor's Office of Crime Control & Prevention.

"With this funding plan, Maryland reaffirms Governor Hogan's commitment to helping equip our local communities as we work together to battle this epidemic throughout the state," said Maryland Department of Health Secretary Dennis Schrader. "For example, \$2 million of the Cures Act funding is being committed to establish a 24-hour crisis center in Baltimore City."

"Here in Maryland, we continue to face a crisis situation with the number of overdoses rising every day. I am confident that with these resources we are announcing today, we have a balanced approach to fighting this epidemic – and we are giving the majority of our resources to the local level where we have the greatest opportunity to save lives," said Clay Stamp, executive director of the Opioid Operational Command Center. "It is important to note our successes will continue to be driven by the significant support and cooperation of our federal and state agencies and local coordinated teams, including key advocacy groups, supporting our important work to combat the opioid crisis."

When Governor Hogan declared a State of Emergency in March, he also announced a supplemental budget of \$50 million in new funding over a five-year period. Twelve state agencies partnering with the Opioid Operational Command Center worked with the command center to develop a work plan and goals, which have shaped how funds will be allocated. The work plan and funding allocations also incorporated feedback from local Opioid Intervention Teams, which coordinate with the community and are led by the jurisdiction's emergency manager and health officer.

The Maryland Department of Health was awarded a \$20 million grant under the 21st Century Cures Act from the U.S. Department of Health and Human Services, administered by the Substance Abuse and Mental Health Services Administration (SAMHSA), to be used for the prevention and treatment of opioid abuse over two years.

"The funds from the Governor's Office of Crime Control & Prevention will be used to continue the collaboration and coordination between federal, state, and local law enforcement," said Glenn Fueston, executive director of the office. "By promoting such collaboration, we feel that we will be in a better position to disrupt the flow of drugs coming into our region."

As Maryland's opioid crisis has evolved, so has the state's response to it, which includes addressing the epidemic from every possible angle. Education and prevention go hand-in-hand with treatment and enforcement, and all are essential components of the state's efforts to turn the tide in this heroin and opioid crisis. Efforts that will receive enhanced funding in FY 2018 include:

Prevention

- \$4 million total distributed to local Opioid Intervention Teams (as noted in table below) for each jurisdiction to determine how best to fight the heroin and opioid epidemic, which may expand on current prevention, enforcement, and treatment efforts
- \$1.4 million for a public awareness campaign to reduce stigma, increase patient-physician communication, and educate Maryland's school children on the dangers posed by opioids, as well as additional support for local jurisdictions' prevention efforts
- \$700,000 to train community teams on overdose response and linking to treatment
- \$200,000 to pilot a program that creates school-based teams for early identification of the problems related to substance use disorders
- \$200,000 to distribute opioid information to health care facilities and providers that offer treatment for opioid use disorder

Enforcement

- \$1.25 million to add to existing efforts to disrupt and dismantle drug trafficking organizations
- \$850,000 to continue heroin coordinator program, which helps to make the link between law enforcement and treatment
- \$450,000 to increase the Department of Health's regulatory oversight of controlled dangerous substances

Treatment

- \$3.2 million to expand treatment beds statewide, as well as a tracking system the Maryland Healthcare Commission will aid in expediting the certificate of need application process for treatment beds
- \$2.7 million to improve access to naloxone statewide
- \$2 million to establish a 24-hour crisis center in Baltimore City
- \$1.6 million to expand use of peer recovery support specialists
- \$1 million to expand Screening, Brief Intervention, and Referral to Treatment (SBIRT) to hospitals and parole, probation, and correctional facilities
- \$780,000 to increase access to medications that support recovery from substance use disorders
- \$183,000 to support the expansion of existing law enforcement assisted diversion programs
- \$143,000 to improve the statewide crisis hotline

Recognizing the immediate need for naloxone in Baltimore City, \$750,000 will be provided to buy 10,000 units (20,000 doses) of the lifesaving drug that can reverse an opioid overdose. The city will receive \$830,429 in individual jurisdictional funding, \$2 million to establish the crisis center requested by city leadership, as well as funding for localized treatment and enforcement initiatives. With the opportunity to apply for grants, Baltimore is eligible for approximately \$6 million in funding. The <u>2016 annual</u> report released by the Maryland Department of Health found that of the 2,089 overdose deaths in Maryland last year, 694 occurred in Baltimore City.

The funding announcement also coincides with the July 1, 2017 roll-out of Maryland Medicaid programs that make substance use disorder treatment options more accessible for Marylanders. Chief among them is the ability of residential treatment centers of a certain size to be able to receive Medicaid reimbursement for treatment – erasing a federal prohibition that had served as an impediment to treatment for many people.

Many of these efforts are possible due to the passage of recent legislation that provided the state with additional tools to respond to the heroin and opioid crisis, such as the **Heroin and Opioid Prevention Effort (HOPE) and Treatment Act of 2017** (HB 1329/SB 967), a bipartisan omnibus bill that contains provisions to improve patient education, increase treatment services, and includes the administration's **Overdose Prevention Act**, which enables all citizens to access life-saving naloxone. The HOPE Act builds on many of the 33 recommendations of the administration's Heroin and Opioid Emergency Task Force, and includes improvements to the statewide crisis hotline for support in making diagnoses and referrals, the assessment of drug court programs to determine how to increase programs in a manner sufficient to meet each county's need, and the establishment of the 24-hour crisis center.

Governor Hogan's State of Emergency declaration activated the governor's emergency management authority and enables increased and more rapid coordination between the state and local jurisdictions. The Opioid Operational Command Center, established by Governor Hogan in January through an Executive Order, facilitates collaboration between state and local public health, human services, education, and public safety entities to combat the heroin and opioid crisis and its effects on Maryland communities.

<u>Before It's Too Late</u> is the state's effort to bring awareness to this epidemic—and to mobilize resources for effective prevention, treatment, and recovery. Marylanders grappling with a substance use disorder can find help at <u>BeforeItsTooLateMD.org</u> and <u>1-800-422-0009</u>, the state crisis hotline.

FY 2018 Funding by Jurisdiction		
Local Opioid Intervention Teams will receive direct funding as noted below for each jurisdiction to determine how best to use to fight the heroin and opioid epidemic. This amount does not include other grants and additional funding distribution.		
Allegany County	\$115,956.49	
Anne Arundel County	\$286,858.61	
Baltimore City	\$830,428.66	
Baltimore County	\$469,737.68	
Calvert County	\$101,676.26	
Caroline County	\$78,182.98	
Carroll County	\$138,067.82	
Cecil County	\$123,326.94	
Charles County	\$108,125.40	
Dorchester County	\$74,037.11	
Frederick County	\$162,021.75	
Garrett County	\$71,273.19	
Harford County	\$170,313.50	
Howard County	\$124,708.89	
Kent County	\$73,115.80	
Montgomery County	\$191,964.17	
Prince George's County	\$189,660.91	
Queen Anne's County	\$79,564.94	
Saint Mary's County	\$74,958.41	
Somerset County	\$90,620.60	
Talbot County	\$79,564.94	

Washington County	\$158,797.18
Wicomico County	\$115,956.49
Worcester County	\$91,081.25
Total	\$4,000,0000