

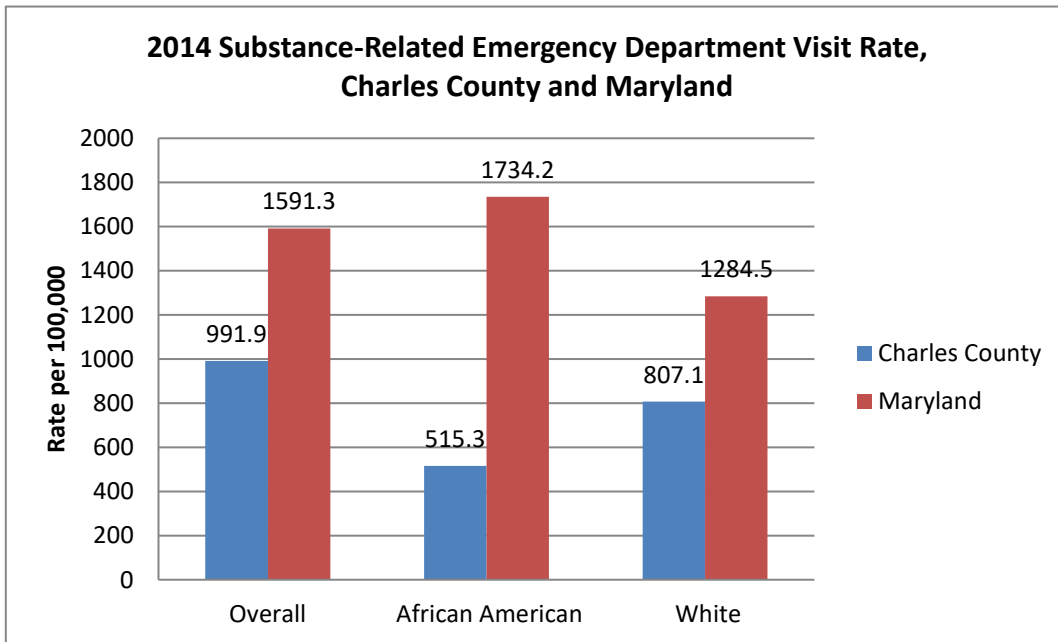
FY2019 Charles County Opiate Intervention Team Plan

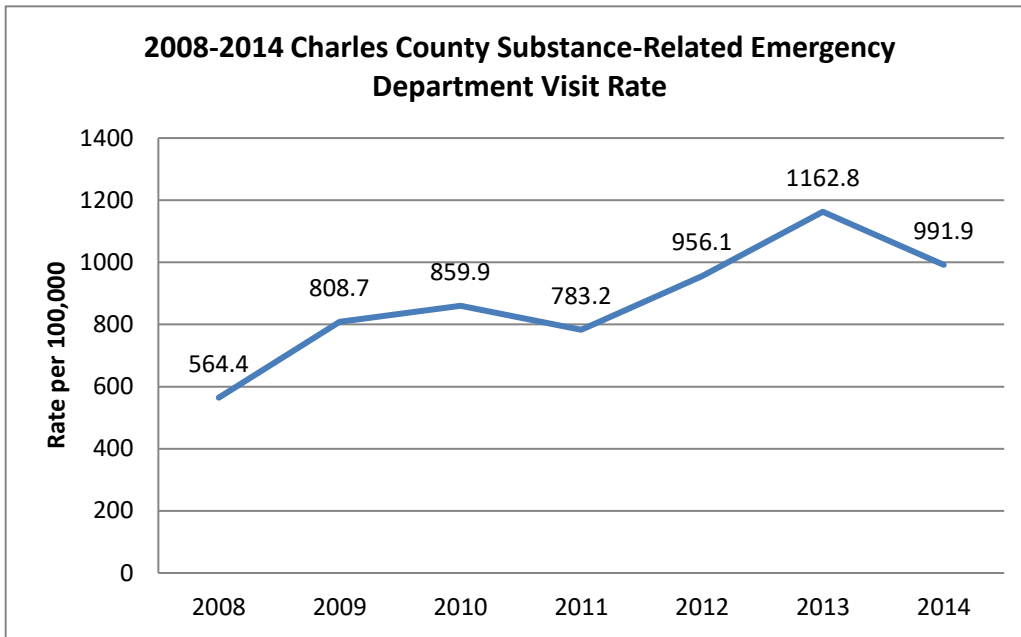
Section 1: Review and Analysis of Data

Substance Use Disorder Hospitalization and Emergency Department Visit Rates:

This indicator shows the rate of emergency department visits related to substance abuse disorders* (per 100,000 population). Substance abuse problems can place a heavy burden on the healthcare system, particularly when persons in crisis utilize emergency departments instead of other sources of care when available. In Maryland, there were 66,383 emergency department visits for substance related disorders in 2010.*Diagnoses include alcohol-related disorders and drug related disorders. The 2016 Charles County emergency department visit rate for addiction-related conditions was 991.9 per 100,000. This rate is below the state average rate of 1591.3 per 100,000. The county rate is highest among Non-Hispanic Whites with an ED visit rate of 807.1 compared to 515.3 for Charles County Blacks.

The Charles County Addiction-related ED visit rate has continued to climb each year from 564.4 in 2008 to 1162.8 in 2013. 2014 saw a small decline to 991.9 per 100,000.





Substance use related ED visit rates have increased from 2009-2013 for all Charles County available zip codes with the exception of Bryans Road (20616). Rates could only be calculated for zip codes with a population greater than 5000 people. Disparities can be seen in substance use ED visits rates by zip code of residence. The highest rates of addictions related emergency department visits are among those living in the zip codes of La Plata (20646) and Indian Head (20640). The zip code with the greatest increase from 2009 to 2013 was La Plata (20646). This may be due to the fact that the county hospital is located within this zip code.

ED Visits for Addictions Related Conditions per 100,000 Population, 2009-2013

Zip Code	2009	2010	2011	2012	2013
20601	675.5	884.4	690.2	1083.5	1249.5
20602	815.8	970.4	850.9	971.5	1207.8
20603	460.9	409.0	395.9	601.6	605.0
20613	622.8	556.4	593.7	719.4	1094.1
20616	987.2	987.4	1066.5	917.6	770.5
20637	756.1	625.4	755.4	829.4	894.6
20640	1053.2	1102.2	1136.7	1262.9	1539.4
20646	1049.0	1130.3	1015.1	1293.9	1865.3
20695	683.0	879.7	1011.5	880.5	1072.3

Source: Maryland HSCRC Outpatient Files 2009-2013

Charles County Drug-Induced Death Data:

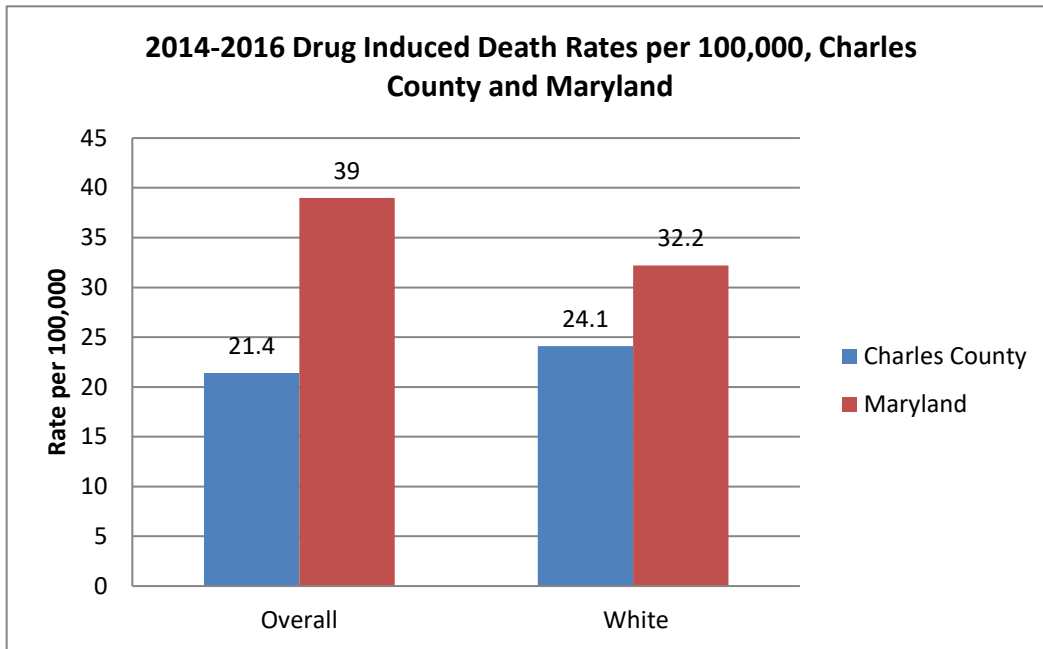
From 2007-2016, Charles County saw 174 deaths due to drug intoxication. 77 of those deaths were opiate-related. That represents 90% of the drug intoxication deaths for the county. There was a large jump in intoxication from 22 in 2015 to 45 in 2016. A large number of those deaths were due to heroin and fentanyl. Heroin deaths went from 8 in 2015 to 22 in 2016. Fentanyl went from 4 deaths in 2015 to 17 deaths in 2016.

The 2011-2015 age-adjusted unintentional intoxication death rate for Charles County was 11.7 per 100,000. This was the 5th highest rate among the Maryland jurisdictions.

Charles County Drug Intoxication Deaths 2007-2016	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Total Drug and Alcohol Related Deaths	13	16	11	13	11	13	9	21	22	45
Heroin-Related Deaths	2	5	3	6	6	5	5	10	8	22
Prescription Opiate Related Deaths	6	6	7	4	5	7	5	9	8	10
Cocaine-Related Deaths	3	3	2	2	1	1	0	0	2	4
Alcohol-Related Deaths	5	5	1	4	3	2	4	5	4	12
Fentanyl-Related Deaths	0	0	0	0	1	1	3	1	4	17

The 2014-2016 average Charles County age-adjusted drug induced death rate was 21.4 per 100,000 population. This rate is less than the Maryland state average rate of 24.1 per 100,000 population. The 2014-2016 Charles County White drug-induced death rate was 39.0 per 100,000 and was higher than the Maryland state average rate of 32.2 per 100,000. Rates for other races were not calculated on a county level due to small case counts.

The Charles County drug induced death has increased greatly since the previous needs assessment. The 2010-2012 Charles County drug induced death rate was 11.2 per 100,000 and has now risen to 21.4 for 2014-2016. The Charles County White drug induced death rate also rose from 17.3 in 2010-2012 to 39.0 in 2014-2016.



Maryland Youth Risk Behavior Survey:

Charles County middle and high schools students participated in the 2016 Maryland Youth Risk Behavior Survey (YRBS) to determine any changes in the percentage of children engaging in high risk behaviors that can lead to chronic and infectious disease conditions. All responses have been weighted to reflect the county's school aged population.

Charles County middle and high school students were asked if they have ever tried substances one or more times in their life. The most commonly used substances for both middle and high schools students were alcohol (26.4% middle and 54.1% high school) and marijuana (9.3% middle and 33.0% high school).

Alcohol was the most commonly reported substance for high school students (54.1%). Lifetime usage percents increased for those in 12th grade (67.2%) and Whites (63.5%).

Marijuana is the second most commonly reported substance for high school students (33.0%). Lifetime usage percents increased for students 18 years of age and older (45.9%) and those in the 12th grade (47.7%).

Substance Lifetime Usage Rates, 2016 Charles County YRBS	High School Percent Reporting	Middle School Percent Reporting
Alcohol	54.1	26.4
Marijuana	33.0	9.3
Cocaine	7.9	4.3

Sniffed glue, aerosol cans, paint	NA	8.0
Heroin	5.9	NA
Methamphetamine	7.1	NA
Ecstasy	6.9	NA
Steroids	NA	2.2
Prescription drugs without a prescription	17.0	5.0
Injectable illegal drugs	5.0	NA

NA: Not applicable. The question was not asked on the middle school survey.

Section 2: Planned Interventions/Initiatives

Opioid Outreach and Awareness Public Events

This project centers around public awareness of opioid substance use disorders with the aim of decreasing stigma, increasing knowledge on prevention and treatment, and increasing community willingness to engage in treatment and prevention.

The Charles County Department of Health (CCDoH) will host 6 opioid outreach events to the public in FY19. Two events will be held at the health department. Four will be out in the community in different regions of the county. The purpose of the events is to conduct outreach and education on opioids to community members. Knowledge about the scope of the opioid crisis and ways that the community can get involved with lead to decreased stigma toward substance use disorders and a better prepared community to address the crisis collectively.

Performance Measures	Target/Estimate for Award Period
Number of community events held	4
Number of events held at health department	2
Number of parents in attendance	50
Number of students in attendance	50
Number of county partner agencies worked with the Department of Health on events	6
Number of people trained in Narcan at events	25

Charles County Welcome Wagon

The Charles County Department of Health proposes the development of a welcome wagon. The welcome wagon will go out into the most vulnerable communities and educate people on high risk behaviors. The wagon will go to places identified by the Charles County Sheriff's Office as places where

homeless and substance users reside and hangout. They will also go to the places that have received multiple 911 calls for overdose. The health department plans to pass out bags, food, drinks, condoms, and educational materials at the welcome wagon. Other health department programs can be there to evaluate wounds, provide HIV/Hep C screening and testing, sign people up for HIV pre-exposure prophylaxis medication. Assisting those with substance use disorders and helping them to address their basic needs will increase trust for the health department and hopefully lead to increased numbers of people in treatment when they are ready for help.

Performance Measures	Target/Estimate for Award Period
Number of times the welcome wagon going out into the community	40
Number of people educated at the welcome wagon on opioid prevention and treatment	500
Number of people referred for SUS treatment	20

First Responder Narcan Availability

Increase the number of doses of Narcan available to the community. Most of the doses will be set aside for first responders. Charles County Emergency Medical Services has seen a large increase in the number of Narcan deployments each year. Therefore, we propose to purchase enough Narcan to handle the growing issue in Charles County. Additional doses will be used to train community members, friends and family of high risk populations, and community agencies/non-profit organizations who wish to be trained in the administration of Narcan. Some agencies include the Department of Social Services, Hospice, Jude House, and Lifestyles of Maryland. The purpose of Narcan saturation in the community is to increase the opportunity to reverse opioid overdose and thereby decrease county opioid deaths.

Performance Measures	Target/Estimate for Award Period
Number of Narcan doses purchased	500: 300 first responder 200 community
Number of people trained on the administration of Narcan	50

Grief Counseling

Opioid use and overdose affects the whole family, not just the substance users. When an opioid-related death occurs, there can be children involved. They may have witnessed the overdose, or they may have been the one to find the parent. It is a traumatizing event in a child's life. The Charles County Department of health plans to partner with Hospice of Charles County to provide grief counseling for surviving children of opiate overdose deaths. Hospice will run 2 grief counseling programs in the year. The 8 session programs will be lead by a grief counselor trained in providing evidence-based therapy to children.

Performance Measures	Target/Estimate for Award Period
Number of grief counseling programs conducted by Hospice	2

Charles County Increased Overdose Response Capacity

The purpose of this project is to hire an additional Alcohol and Drug Counselor at the Charles County Department of Health within the Substance Use Services Clinic. This new staff member will be available to respond to the emergency room for nonfatal overdoses. She/he will also be able to respond in the field to first responders when there are multiple overdoses or situations where the peer recovery specialist needs assistance. When requested, they will provide Narcan training and Narcan to family and friends at the scene of nonfatal overdoses. This employee will also assist with Narcan training of other community members. The employee will become a member of the OIT/OFRT and assist with chair and epidemiologist with reports. These services are not billable and are not reimbursed by any source. The addition of a new staff member will increase the capacity to perform initial assessments on a client walking in the door who is ready to begin treatment. This position will be available to conduct substance use outpatient treatment services. This will lead to an increase in the number of available client services and a decrease in the client wait time for services. OIT funds will be used to fund position functions that are not eligible for reimbursement by the state's Administrative Services Organization or another source.

Performance Measures	Target/Estimate for Award Period
Number of new staff members hired	1
Number of people trained on the administration of Narcan	50
Number of initial assessments completed by the Alcohol and Drug Counselor	72
Average length of treatment among Charles County Department of Health clients	9
Number of clients presenting for an assessment who engage in treatment	40

Other Interventions supported by the Charles County Opiate Intervention Team include:

1. Charles County Peer Recovery Specialists: Peer support services are delivered by individuals who have common life experiences with the people they are serving. People with mental and/or substance use disorders have a unique capacity to help each other based on a shared affiliation and a deep understanding of this experience. In self-help and mutual support, people offer this support, strength, and hope to their peers, which allows for personal growth, wellness promotion, and recovery. Research has shown that peer support facilitates recovery and reduces health care costs. Peers also provide assistance that promotes a sense of belonging within the community. The ability to contribute to and enjoy one's community is key to recovery and well-being. Another critical component that peers

provide is the development of self-efficacy through role modeling and assisting peers with ongoing recovery through mastery of experiences and finding meaning, purpose, and social connections in their lives.

The Charles County Department of Health currently employs 5 peer recovery specialists are able to assist local law enforcement, emergency medical services, and the local hospital in engaging and supporting individuals who are ready for treatment.

2. Charles County Sheriff's Office: The Charles County Sheriff's Office has purchased and outfitted a trailer as a teaching tool for parents. The trailer resembles a teenager's bedroom. Officers are able to educate parents on where to look for drugs and substances as well as how to talk to their children about the risks and dangers of substance use. The trailer will be out in the community at events where it will receive high visibility.