

PREVENTION • TREATMENT • RECOVERY



Before it's **too late.**

Maryland Inter-Agency Heroin and Opioid Coordination Plan

Developed by the Opioid Operational Command Center
FY19 Mid-Year Update



From the Executive Director:

Since Governor Larry Hogan declared a State of Emergency to combat the heroin and opioid crisis in March 2017, Maryland's Opioid Operational Command Center has been working with state agencies and local jurisdictions to address the epidemic.

Every day, the state and its federal and local partners are working hard to save the lives of the Marylanders caught in the grips of addiction. We've made progress in expanding access to treatment and recovery services, disrupting and dismantling drug trafficking organizations, and beginning to re-educate our youth on the dangers of drug use – but there is still work to be done in fighting this destructive crisis that is evolving daily.

The Inter-Agency Heroin and Opioid Coordination Plan that follows ensures that partner priorities, strategic planning efforts, and program initiatives are working toward a common statewide vision and shared goals.

We thank our state and local partners, opioid intervention teams, advocates, first responders, law enforcement, and local health departments, as well as the countless Marylanders who have stepped up to fight this crisis.

A handwritten signature in black ink that reads "Clay B. Stamp". The signature is written in a cursive, slightly slanted style.

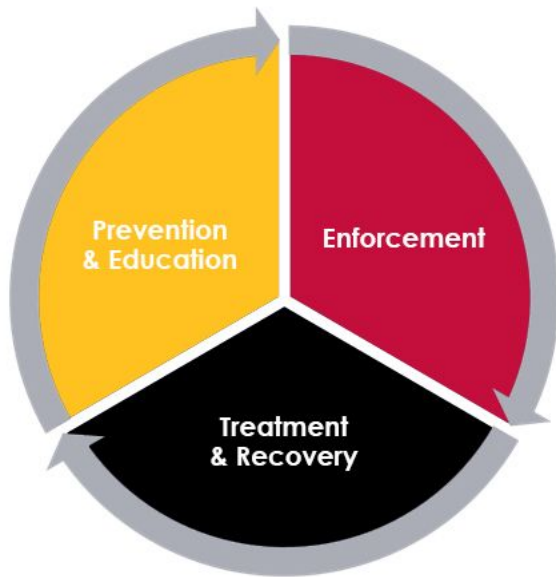
Clay B. Stamp
Executive Director, Opioid Operational Command Center
Senior Emergency Management Advisor to the Governor and Chair of the Governor's
Emergency Management Advisory Council

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Introduction

The heroin and opioid overdose crisis in Maryland cuts across all demographics and geographical settings. Fentanyl, heroin, and prescription opioids have ignited an urgent and growing public health crisis that poses a serious threat to the security and economic well-being of the state. The goal of Maryland's comprehensive heroin and opioid response is to reduce heroin and opioid-related overdoses and overdose fatalities¹



through coordinated prevention, education, enforcement, treatment, and recovery efforts. The Inter-Agency Heroin and Opioid Coordination Plan was developed by the Opioid Operational Command Center (O OCC) to outline the functions and processes that support Maryland's statewide coordination and collaboration of efforts.

The Coordination Plan does not supplant internal partner-specific procedures, plans, and programs. Rather, the Coordination Plan ensures that partner priorities, strategic planning efforts, and program initiatives are working toward a common statewide vision and shared goals. As an emergency

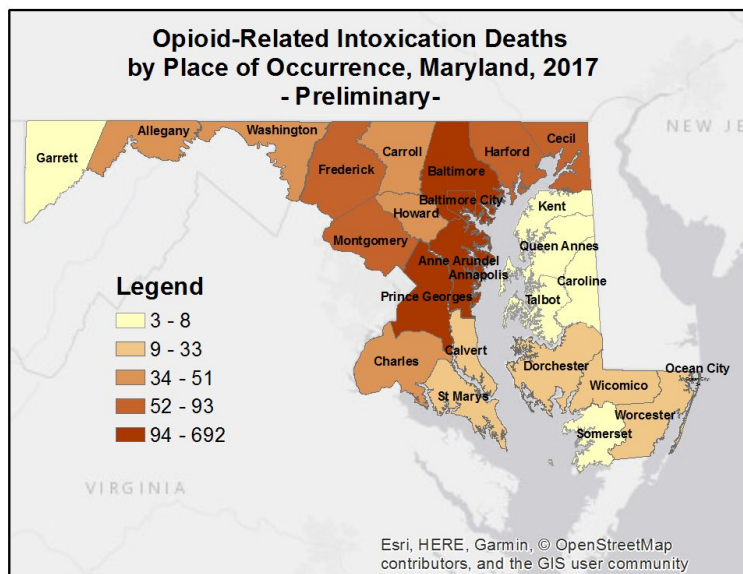
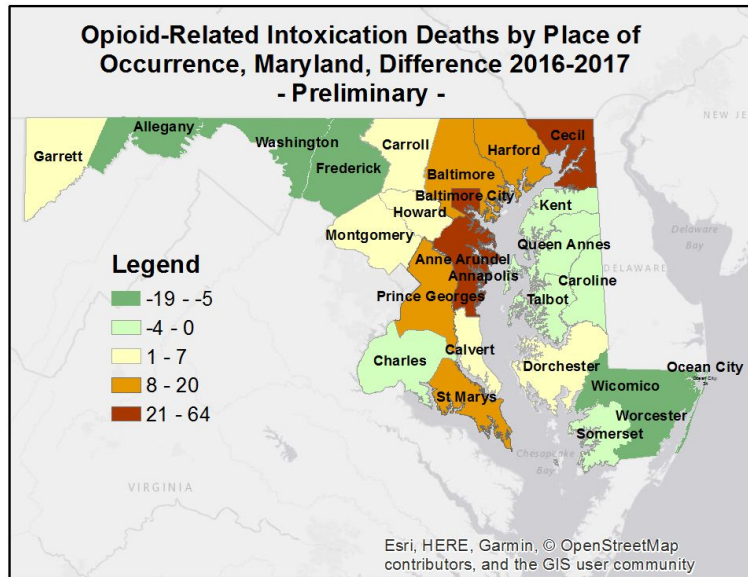
management body, the Opioid Operational Command Center provides centralized direction and control to coordinate statewide response efforts and information-sharing initiatives. The Coordination Plan has been developed by the O OCC with the full collaboration of O OCC strategic partners.

This Coordination Plan seeks to (1) clearly communicate the mission of Maryland's centralized, coordinated response, (2) outline roles and responsibilities of partnering state and local organizations, and (3) provide an overview of statewide response goals, objectives, and performance measures.

¹ Maryland Department of Health. (June 2018). *Unintentional Drug- and Alcohol-Related Intoxication Deaths in Maryland Annual Report 2017*.

Heroin and Opioid Overdose Trends

The Maryland Department of Health's *Unintentional Drug- and Alcohol-Related Intoxication Deaths in Maryland Annual Report*² shows Maryland had 2,282 drug and alcohol-related intoxication deaths in 2017 (a nine percent increase from 2016). Of those deaths, 2,009 (88%) were related to opioids including heroin, prescription opioids, and fentanyl. Fentanyl-related deaths continue to rise, increasing from 1,119 in 2016 to 1,594 in 2017 (+42%). Cocaine-related deaths are also up from 464 in 2016 to 691 in 2017 (+49%). The number of heroin-related and prescription drug-related deaths dropped slightly in 2017 when compared to 2016 (-11% and -1% respectively).



²Maryland Dept. of Health. 2017. *Unintentional Drug- and Alcohol-Related Intoxication Deaths in Maryland Annual Report 2017*.

Core Principles

The following core principles reflect overarching values that should be incorporated into all statewide response strategies and tactics:

- **Whole community engagement³**
- **Culturally competent⁴**
- **Sustainable**
- **Data Informed**
- **Person First focus**

FEMA's Whole Community Planning approach provides a foundation for increasing individual and community engagement in the policy and planning process by actively valuing the voices of community-members in matters that affect their health and communities. Benefits of the whole community approach include:

- Developing a shared understanding of needs and capabilities
- Fostering collective learning
- Empowering the community directly affected by policy and planning
- Integrating community resources and voices

Background

In 2015, recognizing the increasing severity of the heroin and opioid overdose crisis, Governor Larry Hogan established the Heroin and Opioid Emergency Task Force (Task Force) and the Inter-Agency Heroin and Opioid Coordinating Council (Coordinating Council). Governor Hogan charged the Task Force with developing initial recommendations for action; the Task Force concluded its work and published its final report in December of 2015. The Coordinating Council continues to serve as the subcabinet of the Governor responsible for oversight of the statewide response.

In January of 2017, Governor Larry Hogan established the Opioid Operational Command Center (O OCC) within the Coordinating Council and established Opioid Intervention Teams (OITs) in each jurisdiction. Based on the initial findings of the O OCC, the administration signed an executive order on March 1, 2017, declaring a State of Emergency for the Heroin and Opioid Crisis. The State of Emergency activated the Governor's emergency management authority, authorized the O OCC Executive Director to direct the state agency response, and spurred rapid coordination between state agencies and local jurisdictions. *See Appendix A: Executive Orders.*

³ FEMA. (2011). *A Whole Community Approach to Emergency Management: Principles, Themes, and Pathways for Action* (FDOC 104-008-1).

⁴ SAMHSA's Strategic Prevention Framework. (n.d.). Retrieved from <https://www.samhsa.gov/capt/applying-strategic-prevention/cultural-competence>.

Statewide Response Goals

The Coordination Plan guides the statewide response to the heroin and opioid overdose crisis by aligning the efforts of many diverse stakeholders around agreed-upon goals and objectives. The statewide goals are organized around the levels of public health prevention and were collaboratively developed based on the Task Force recommendations and input from subject matter experts in the areas of prevention, education, enforcement, treatment, and recovery.

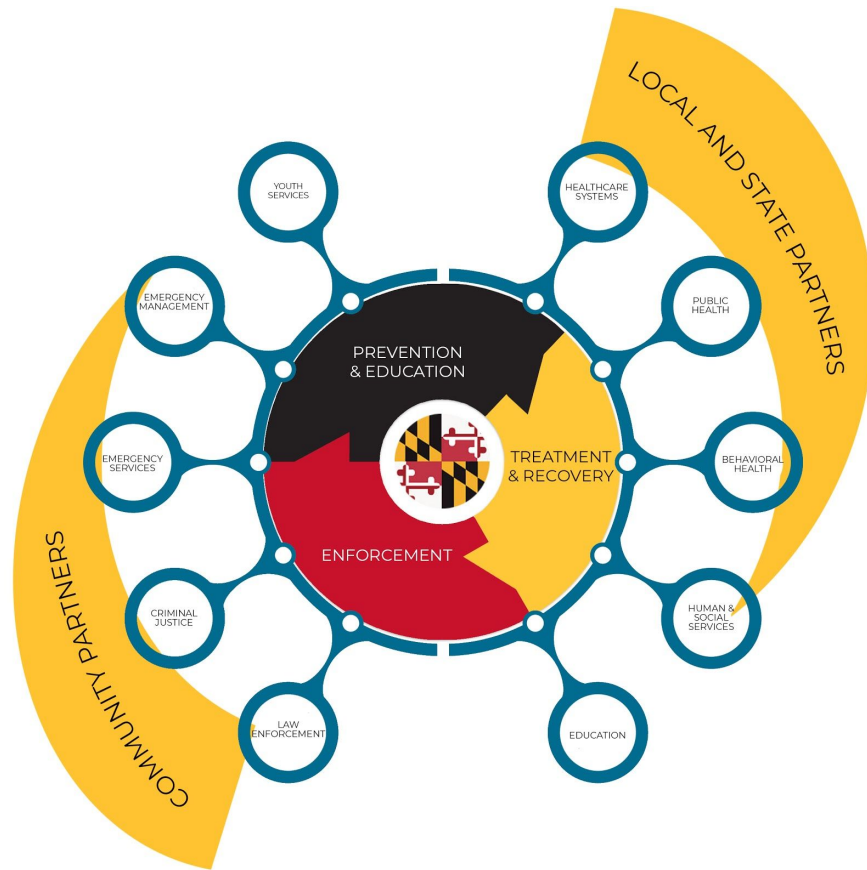


Guided by the four operational goals, OCCC partners identified agency-specific objectives, deliverables, timelines, and performance measures in order to report progress and promote accountability. The Administration’s focus on prevention, education, enforcement, treatment, and recovery are integrated throughout the statewide goals. See *Appendix B: Statewide Goals & Objectives*.



Concept of Statewide Operations

The response framework developed by the Governor’s executive orders emphasizes a multidisciplinary, multi-agency incident management structure to mobilize and coordinate state and local stakeholders under four common, collaboratively-created goals. The OCCC Executive Director has the authority of the Governor to direct the Coordinating Council and all State agencies to assist, engage, deploy, and coordinate available resources to address the opioid crisis.



Management Structures

Inter-Agency Heroin and Opioid Coordinating Council (Coordinating Council)

The Coordinating Council is the executive-level subcabinet of the Governor that develops strategic policy, provides authority for the Opioid Operational Command Center, and advises the Governor’s office. The Coordinating Council, chaired by the Secretary of the Maryland Department of Health, includes representatives from law enforcement and public safety, education, emergency services, and other human and social service departments.

Opioid Operational Command Center (OOCC)

The OOCC serves within the Coordinating Council to coordinate the statewide response using the principles of the National Response Framework. As an emergency management body, the OOCC connects with state and local response partners from all sectors to identify challenges, establish system-wide priorities, and capitalize on opportunities for collaboration.

The OOCC's Core Functions include:

- Coordination & Enhancement of Partner Activities
- Data Collection & Analysis Data
- Funding Oversight
- Communications
- Reporting

Opioid Operational Command Center

The Opioid Operational Command Center facilitates collaboration among state and local partners to reduce the harmful impacts of heroin and opioid use on Maryland communities.

What does it do?

Combat the heroin and opioid crisis in Maryland through education, prevention, treatment, interdiction, and recovery.

Why?

Residents of all ages, races, genders, and areas across the state are affected by heroin and opioid use. 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.

By working together with the Opioid Operational Command Center, partners share data, information, and ideas.

Together, we can reduce the harmful impacts of heroin and opioid use and continue Changing Maryland for the Better.



Inter-Agency Heroin and Opioid Coordinating Council

Chaired by the Secretary of Health, the Coordinating Council is the executive-level subcabinet of the Governor that develops strategic policy, provides authority for the Opioid Operational Command Center, and advises the Governor's office.

State-Level Partners

State Agencies joining together on Heroin and Opioid Prevention, Treatment, and Enforcement Initiative, a multi-pronged and sweeping administrative and legislative effort to continue addressing Maryland's evolving opioid and heroin epidemic.

Local Opioid Intervention Teams

Local Opioid Intervention Teams act as the local multi-agency coordinating bodies within all twenty-four of Maryland's jurisdictions. The OITs are tasked with developing a unified local strategy, conducting operational coordination with all stakeholders, and working cooperatively on program and project implementation and operations.



State-Level Partner Roles and Responsibilities

The OOCC coordinates the statewide heroin and opioid crisis response through state partner agencies from health, human services, education, law enforcement / public safety, and emergency services. State partners serve as subject matter experts on collaborative initiatives and are responsible for program development and implementation, within their agencies. See *Appendix C: Partner Functions*. Non-governmental partners, including healthcare systems and associations, community and faith-based organizations, professional associations, and nonprofits and businesses, play a pivotal role in Maryland’s whole community approach.

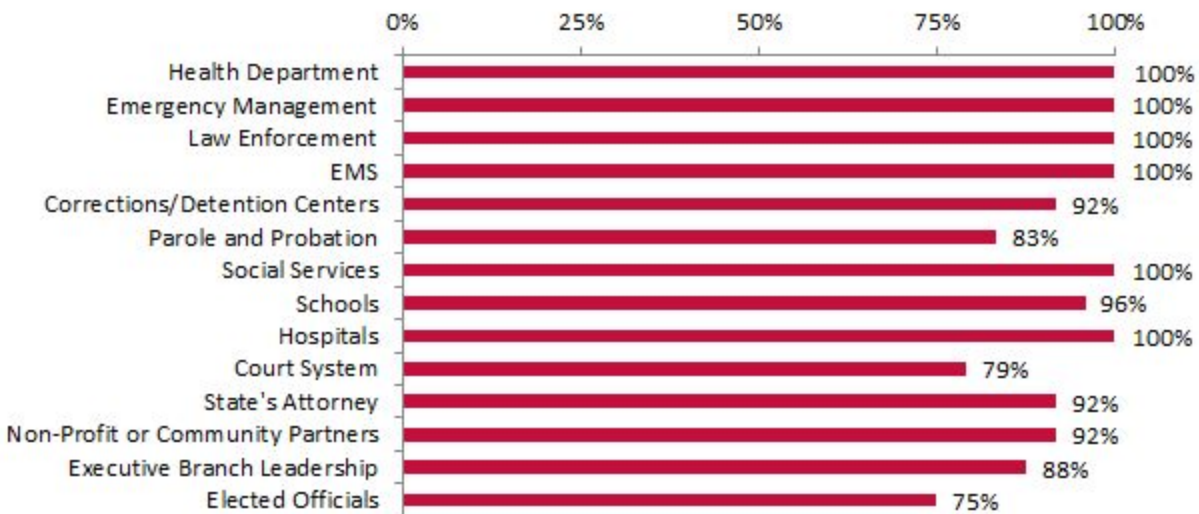


Local Opioid Intervention Teams

A key element of the statewide strategy is encouraging multidisciplinary collaboration and coordination among all levels of government. To provide direction and coordination among stakeholders on a local level, all twenty-four jurisdictions set up Opioid Intervention Teams, which are the local jurisdiction multi-agency coordination bodies. The purpose of an OIT is to bring together representatives from different local agencies to identify gaps and opportunities, coordinate resources. OITs are led jointly by the jurisdiction's health officer and emergency manager and include local government and community partners from local agencies, advocates, and community groups.

OITs are responsible for developing a community strategy to address opioid addiction and misuse in their community, identifying priority areas for programming, and allocating OIT grant funding to those areas. Most OITs meet on a monthly or quarterly basis to discuss progress in priority areas and gaps that need to be addressed. *See Appendix B.*

% of Jurisdiction OIT's that have representation from the following sectors



Information Sharing

A primary function of the OCCC is enhancing communication and information sharing among all response partners. State partners and local OIT members have specialized expertise, capabilities, and data that can be shared to inform a stronger and more coordinated statewide response.

The OOC implements a variety of communication and information sharing strategies, including:

- **Alerts** - Time-sensitive and health/safety-related information
- **Stakeholder Notifications** - Informational resources, funding opportunities, and upcoming events
- **Data Collection & Resources** - Processes and tools that help partners understand the crisis, target resources, and measure their impact
- **Education and Training** - Efforts to improve understanding of the statewide response and share resources available to partner organizations
- **Partner-specific Projects** - Efforts to help partners close identified information gaps

See Appendix D: Information Sharing Calendar which includes details about operational staff meetings, webinars, quarterly Council meetings, reporting requirements, and other information sharing strategies.

Collaborative Multidisciplinary Stakeholder Engagement

Building on the framework of the operational goals and partner-specific objectives, the OOC facilitates strategy-development sessions, workgroups, and workshops to share state and local evidenced-based best practices and develop strategies to support the statewide goals and objectives. The OOC holds regular multidisciplinary coordination sessions as well as focused collaboration sessions when a specific need has been identified or upon request of a partner. The goals of these sessions may include:

- Sharing and maintaining multidisciplinary and multi-jurisdictional situational awareness,
- Identifying specific evidence-based practices and programmatic gaps in the statewide response,
- Developing specific, actionable recommendations to address short-term response gaps, and
- Highlighting long-term strategic priorities.

Appendices

Appendix A: Executive Order Mandates

Appendix B: Statewide Goals & Objectives

Appendix C: Partner Functions

Appendix D: Information Sharing Calendar

Appendix A: Executive Order Mandates

Inter-Agency Heroin and Opioid Coordinating Council

Pursuant to EO 01.01.2015.13, the Council shall update the Governor on each agency's efforts to address the heroin and opioid crisis. The Secretary of MDH chairs the Council overseeing the implementation of the EO and the work of the Council. The specific duties tasked to the Council by mandate are as follows:

- The member state agencies previously listed shall seek opportunities to share data with one another and with the Office of the Governor for the purpose of supporting public health and public safety responses to the heroin and opioid epidemic. The agencies shall share the data in their possession relevant to the epidemic;
- The Council shall develop recommendations for policy, regulations, or legislation to facilitate improved sharing of public health and public safety information among state agencies; and
- On behalf of the Council, MDH shall submit an annual report to the Governor and the public in the form of the Inter-Agency Heroin and Opioid Coordination Plan.

Opioid Operational Command Center

The OOC facilitates collaboration among state and local departments, agencies, and offices across health, human services, education, and public safety entities to reduce the harmful impacts of opioid addiction on Maryland communities. Pursuant to EO 01.01.2017.01, the OOC serves as the operational coordination entity across the state tasked to:

- Develop operational strategies to continue implementing the 33 recommendations of the Heroin and Opioid Emergency Task Force authorized by EO 01.01.2015.12.
- Collect, analyze, and facilitate the sharing of data relevant to the epidemic from state and local sources, while maintaining the privacy and security of sensitive personal information.
- Develop a memorandum of understanding among state and local agencies that provides for the sharing and collection of health and public safety information and data related to the heroin and opioid epidemic.
- Assist and support local agencies in the creation of OITs that will share such data.
- Coordinate the training of and provide resources for state and local agencies addressing the threat to the public health, security, and economic well-being of the State of Maryland.

The following are additional responsibilities the Governor assigned to an individual in the Executive Branch to the MEMA, currently serving as the OOC executive director. This individual is designated to administer the Governor's authority under the Maryland Emergency Management Agency Act and operationally address the heroin and opioid crisis pursuant to EO Declaration of Emergency [01.01.2017.02], including:

- Directing MEMA, MSP, MDH, the Governor's Office of Crime Control and Prevention (GOCCP), and/or any other appropriate state department, agency, and office, including the Heroin and Opioid Emergency Task Force, the Council, and the OOC, to assist, engage, deploy, and coordinate available resources to address the crisis;
- Coordinating the preparation of plans, programs, and infrastructure for emergency management operations of the local political subdivisions of the state, employing their social service, law enforcement, and public health functions;
- Instituting public information and awareness programs;
- Authorizing the procurement of supplies and equipment necessary to control and eliminate the crisis; and
- Taking other necessary steps to address the opioid crisis.

Appendix B: Statewide Goals & Objectives

Goal 1: Prevent New Cases

- 1.1: Reduce inappropriate or unnecessary opioid prescribing and dispensing**
- 1.2: Reduce supply of illicit opioids**
- 1.3: Increase patient knowledge of opioid risk and benefits**
- 1.4: Increase family and youth knowledge of opioid risk and benefits**
- 1.5: Increase public safety knowledge of opioid risk and benefits**

Goal 2: Improve Early Identification and Intervention

- 2.1: Reduce stigma and improve knowledge and understanding about opioid addiction**
- 2.2: Build capacity of healthcare system to identify behavioral health disorders and link patients to appropriate specialty care**
- 2.3: Improve identification of and provision of services to youth at high-risk for opioid addiction and their families**
- 2.4: Identify and target individuals at high risk for fatal overdose for treatment and recovery support services at all contact points with health, safety, and social service systems, with a specific focus upon entry to an emergency department**

Goal 3: Expand Access to Treatment & Recovery Services

- 3.1: Improve access to and quality of evidence-based opioid addiction treatment in the community**
- 3.2: Make overdose education and naloxone distribution available to individuals at high risk for opioid overdose and their families/friends at all contact points with health, safety, and social service systems**
- 3.3: Increase access to harm reduction services to active opioid users**
- 3.4: Expand access to recovery support services**

3.5: Enhance criminal justice services for offenders who are opioid-addicted to prevent re-entry and repeat recidivism into the criminal justice system

Goal 4: Enhance data collection, sharing, & analysis

4.1: Improve understanding of population- and individual-level risk and protective factors to inform prevention initiatives

4.2: Establish a public health surveillance system to monitor indicators of opioid-related morbidity and mortality for informed rapid and actionable response

4.3: Improve prevention program operations and initiatives through data sharing and analysis projects

4.4: Conduct ongoing monitoring and evaluation of response initiatives to ensure successful implementation and outcomes

Appendix C: Partner Functions

Department/Agency	Prevention & Response Roles and Responsibilities
Maryland Emergency Management Agency (MEMA)	<p>Provide operational statewide coordination and support for the overall heroin and opioid response and planning process</p> <ul style="list-style-type: none"> ● Via the OOC, coordinate the overall emergency planning, preparedness, and response of all state departments, agencies, and offices in an emergency, with support from MDH. ● Support local government and state department, agency, and office emergency operations planning. ● Facilitate any Emergency Management Assistance Compact (EMAC) requests. ● Support communications via an in-person or virtual Joint Information Center (JIC) as appropriate.
Maryland Department of Health (MDH)	<p>Provide overarching leadership and coordination for overall heroin and opioid crisis response as lead of the Public Health and Medical State Coordinating Function (SCF).</p> <ul style="list-style-type: none"> ● Coordinate public health surveillance and investigation, including prescription drug monitoring, syndromic and disease outbreak surveillance with appropriate laboratory testing, analysis, and result sharing with federal, state, and local partner agencies. ● Provide technical guidance and resources to the state heroin and opioid coordinating body and LHDs to prevent, respond to, and recover from an opioid-related public health emergency. ● Provide technical guidance and resources to healthcare facilities including hospitals, federally qualified healthcare centers, long term care facilities, and primary care facilities. ● Assess heroin and opioid-related threats/hazards impacting public health and medical partners, as well as the public. ● Communicate with the public to educate Marylanders on public health preparedness steps they can take to prevent, respond to, or recover from an opioid-related emergency. ● Maintain vital records, such as a records of all overdose deaths that occur in Maryland, including toxicology results. ● Maintain health coverage programs, such as Medicaid and substance use disorder treatment services. ● Create and maintain mental and behavioral health

**Governor's Office
of Crime Control
and Prevention
(GOCCP)**

**Maryland State
Police (MSP)**

**Department of
Juvenile Services
(DJS)**

**Department of
Public Safety and
Correctional
Services (DPSCS)**

programs for the treatment of behavioral health conditions, and the prevention, treatment, and recovery from substance use disorders.

- Ensure healthcare professionals are licensed and credentialed, such as enrolled in the controlled dangerous substances registration.
- Regulate healthcare facilities, including hospitals, clinics, nursing homes, primary care, etc.
- Investigate unusual or unattended deaths, properly store deceased remains, and maintain the capacity to surge in the event of mass fatality.
- Coordinate public health and medical volunteer management to support the response as directed.
- Prepare to enhance operations, including activation of the State Emergency Operations Center.
- Support Heroin Coordinators program to facilitate information sharing between law enforcement, LHDs, fire/emergency medical services (EMS), and parole and probation.
- Support medication-assisted treatment re-entry programs in correctional facilities.
- Support law enforcement assisted diversion tools for planning, implementation, and evaluation.
- Coordinate federal, state, and local law enforcement activities as they relate to the opioid crisis through the HIDTA.
- Facilitate training for personnel available to assist with activities such as overdose education and naloxone distribution.
- Facilitate education of law enforcement partners, probation officers, prosecutors, and the public about the Good Samaritan Law.
- Develop and implement comprehensive heroin and opioid abuse screening and control measures to prevent the introduction and spread of heroin and opioid-related abuse within juvenile detention facilities.
- Develop strategies to reduce recidivism of substance abusers upon release.
- Develop strategies to reduce recidivism of substance abusers upon release.
- Develop and implement control measures to prevent the introduction and spread of opioid-related abuse within correctional facilities, to include policies and procedures for strengthening counter-smuggling efforts, expanding segregation addiction programs, and

**Maryland State
Department of
Education (MSDE)**

**Maryland Institute
for Emergency
Medical Services
Systems (MIEMSS)**

**Maryland Higher
Education
Commission
(MHEC)**

**Office of the
Attorney General
(OAG)**

- establishing a recovery unit in facilities.
- Provide guidance to school systems promoting evidence-based prevention strategies that develop refusal skills among students.
- Coordinate with MDH to develop communication protocols between school systems and public health entities at the State and local levels.
- Coordinate with MDH to develop protocols for the training of school faculty and staff to identify signs of addiction and to access support services.
- Provide guidance to EMS operational programs, medical directors and individual EMS providers on the proper care and treatment of patients, including personal protective practices, transportation, and resources available for this response.
- Ensure there are personnel trained and available to deploy to public health emergency incident sites, or impacted counties, to assist with situational awareness and coordination of resources, as necessary.
- Ensure there are adequate EMS resources, including for mass casualty events and evacuation of health/medical facilities, when requested.
- Utilize the statewide EMS electronic patient care reporting system (eMEDS) to collect, compile and analyze statistics to identify injury and illness patterns and trends.
- Develop strategies to incentivize colleges and universities to create collegiate recovery programs.
- Coordinate with MDH to support curriculum development for substance use disorder prevention/treatment to be built into advanced professional education.
- Provide legal advice and opinions in support of MDH heroin and opioid-related operations, to include preparing and reviewing proclamations and special regulations issued by the Governor.
- Prepare memos and/or legal orders for and represent the state on legal issues for heroin and opioid-related public health measures.

**Department of
Human Services
(DHS)**

**Maryland Insurance
Administration
(MIA)**

**High Intensity Drug
Trafficking
Washington/Baltim
ore Area (HIDTA)**

- Coordinate the provision of human services and collaborate with MDH to ensure eligible clients are able to register for health coverage and services, such as Medicaid and Medicare.
- Create and maintain a communications network with local departments of social services, which can push prevention messaging to partners.
- Coordinate human services training for Volunteer Organizations Active in Disasters.
- Provide technical assistance regarding commercial insurance .
- Review actions of commercial insurers to make certain that they are in compliance with Maryland law.
- Provide information to consumers and providers regarding how the Maryland Insurance Administration can assist with the claims process.
- Support partnerships between public health and public safety agencies in order to increase collaborative solutions and data sharing.
- Support efforts to act as the Central Repository for Maryland Drug Intelligence as designated by the Lt. Governor's Task Force Recommendations.

Appendix D: Information Sharing Calendar

Quarterly	<ul style="list-style-type: none">● Inter-Agency Heroin and Opioid Coordinating Council Meetings● Executive Reports (including both state and local performance measures)● OIT Grant Report● Joint Chairmen's Report
Monthly	<ul style="list-style-type: none">● Operational Period Briefings● Webinars● Lieutenant Governor's Report● State partner & OIT Situation Check-ins
Bi-weekly	<ul style="list-style-type: none">● Governor's Report
Ongoing / As Necessary	<ul style="list-style-type: none">● BeforeItsTooLate Resource Hub● Stakeholder Notifications & Alerts● Stakeholder Workgroups● Information-sharing Forums● Press Releases