

**QUEEN ANNE’S COUNTY
STRATEGIC PLAN
ALCOHOL AND DRUG ABUSE SERVICES**

2016 – 2018

INTRODUCTION

Local councils are established under Chapters 237 and 238 of the Acts of the General Assembly of Maryland of 2004, which provided for each county to have a local Drug and Alcohol Abuse Council. Their purpose is to develop the plans, strategies, and priorities of each county for meeting the identified needs of the general public and the criminal justice system for alcohol and drug abuse evaluation, prevention, intervention and treatment.

Critical to a successful strategic plan is the on-going implementation of evidence-based practices, data driven decision-making, accountability measures, and the coordination of core social services that deliver addiction services. The plan will need to address issues that transcend any one agency or organization. While the tasks of the council sound ambitious and challenging, it represents a great opportunity to ensure that Queen Anne’s County is providing the most effective, and cost efficient prevention, intervention, and treatment services to its citizens.

VISION

Our community will enjoy a healthy, safe, substance-free Queen Anne’s County.

MISSION

To ensure the availability of high quality behavioral health services across the continuum of prevention, intervention, and treatment resources for all citizens of Queen Anne’s County.

PRIORITIES

1. To provide prevention strategies/services to effect reduction in the harmful effects of the abuse of drugs and alcohol.
2. To facilitate community involvement to remove barriers to successful recovery and develop a county-wide supportive environment to ensure positive outcomes.
3. To provide a working environment that is open/effective communication between stakeholders – a council which is dedicated to coordinating and identifying gaps within existing resources. Working then to assist each other in filling these gaps.

GOAL #1

(Prevention)

Reduce/eliminate prescription opiate and heroin misuse by preventing the onset of addiction of prescribed opiates and heroin by youth and adults.

Objective #1 Educate primary care and emergency room physicians/nurses about the importance of discussing the potential addiction to prescribed opiates and the withdrawal symptoms.

TARGET: Increase the number of primary care and emergency room physicians/nurses who discuss and hand patients/families educational literature about addiction and withdrawal symptoms related to prescribed opiates (best practices).

TARGET: Identify funding to purchase and distribute/display educational information about prescribed opiate addiction and withdrawal symptoms for doctors and dental offices, emergency room, emergency responders and law enforcement.

Objective #2 Educate pharmacists about the importance of discussing addiction and withdrawal symptoms with their customers when filling opiate prescriptions.

TARGET: Increase the number of pharmacists who discuss and hand their customers information about prescribed opiate addiction and withdrawal symptoms.

TARGET: Identify funding for prescribed opiate addiction and withdrawal literature for placement in pharmacies.

Objective #3 Educate the community about the addiction to prescribed opiates and heroin.

TARGET: Identify funding to saturate the community via media about prescription opiate addiction, heroin addiction and withdrawal symptoms.

Objective #4 Increase community awareness of the consequences/harm of prescribed opiate addiction versus heroin addiction.

TARGET: Identify funding for the “I Wish I Knew” media campaign and related educational materials to reach 25% of QAC households.

Objective #5 Increase the community’s awareness about treatment options/locations for addiction to heroin/opiates.

TARGET: Identify funding to create and distribute literature about heroin/opiate treatment resources.

Objective #6 Increase the community awareness of the proper disposal of unwanted and/or unused prescribed opiates and other addictive drugs.

TARGET: Identify funding/location for an additional permanent prescription drop-off box.

Objective #7 Support and encourage “Drug-Free Queen Anne’s Coalition” activities.

TARGET: Engage in the identification of funding to implement and support its opiate/heroin activities.

GOAL #2

(Intervention)

Undertake a comprehensive review of issues surrounding the identification and/or treatment of adolescent substance use within the jurisdiction.

Objective #1 Convene a workgroup of relevant partners to review current services and practices related to adolescent substance use services.

TARGET: Identify appropriate partners (e.g. DJS, BOE, DSS, State’s Attorney’s Office, District, Family, and Circuit Courts) and set action plan and timetable.

Objective #2 Request that all partners who currently provide any related substance use service or which refers to such provide written protocols for their activity.

TARGET: Evaluate the efficacy of each activity.

Objective #3 Develop a Memorandum of Understanding that incorporates the roles and activities of each partner agency.

TARGET: Have all partners sign the MOU

GOAL#3

(Treatment)

Respond to the needs of those suffering with and affected by substance use disorders to include appropriate screening, assessment, referral, and care management

Objective #1:

Sustain the current American Society of Addiction Medicine levels of service within the jurisdiction given limited private providers.

TARGET: Queen Anne's County will have available for its citizens the current level of substance abuse/dependency treatment, including assessment, Level I and Level 11.1, treatment services, services for those with Co-occurring disorders, and, as appropriate, referrals to higher levels of care, provided by public, private non-profit, and/or private-for-private entities.

Objective #2:

Ensure the medically appropriate response to persons affected by the use/misuse of opioids.

TARGET: Work with agency partners to ensure the availability of medications designed to address opioid overdoses, opioid dependence, and to assist with sustained recovery from dependence.

Comply with findings and recommendations resulting from the Lt. Governor's Task Force Report (due December, 2015).

Objective #3:

Continue to develop community resources designed to facilitate referrals for and success to supportive, sober housing to enhance the individual's opportunity to engage in and sustain a recovering lifestyle (Recovery Oriented Systems of Care).

TARGET: Play a leadership role in the development of sober housing programs in and around the jurisdiction.

MID-SHORE OPIOID OVERDOSE PREVENTION PLAN

(Caroline, Dorchester, Kent, Queen Anne's & Talbot Counties)

The two goals established in the Mid-Shore Opioid Overdose Prevention Plan (decrease Opioid-related overdoses and deaths and reduce accessibility to prescription medications) cite 2016 as the target date.

>Prescription Drug Take-Back: two annual take back events continue to be utilized in Queen Anne's County; additionally, a permanent drop-off site is in place for citizens to dispose of unused medications at the local sheriff's department.

>Queen Anne's County, under the medical supervision of the health officer (who is also the medical director for EMS) has trained a number of deputies in the sheriff's office on the use of Narcan, which they now carry as part of their standard equipment. All EMS personnel are also trained.

>In anticipation of the Prescription Drug Monitoring Program's identification of issues related to over-prescribing, "doctor-shopping", and/or the use by individuals of multiple pharmacies to access medications, each jurisdiction along with various state authorities need to prepare a response plan.

>January '15: Counties can each apply for up to \$160,000 for an "Opioid Misuse Prevention Grant Program". Since the Mid-Shore prepared its Opioid Overdose Prevention Plan as a region, the five counties applied for these funds as a region with Dorchester County serving as the primary recipient.

Strategic Plan / 2016 – 2018 Plan

6/5/15