

STEPHANIE GARRITY M.S., HEALTH OFFICER WWW.CECILCOUNTYHEAITH.ORC

## CECIL COUNTY DRUG AND ALCOHOL ABUSE COUNCIL **MEETING MINUTES FOR June 26, 2014**

**Meeting Location:** Cecil County Health Department, Bow Street, Elkton

Members In Attendance: Elaine Barclay, John Bennett, Diana Broomell, Sean Cannon, Ken Collins, Jack Foreaker, Kelly Frost, Stephanie Garrity, Tyra Kenly, Tom Klenk, Rebecca Larson, Sherri Lazarus, Mike Massuli, Tonia McMillan, Walter Rozanski, Nancy Turner

Others in Attendance: Kathy Barakat, Daria Brown, Sean Burke, Jenny Burris, Beth Creek, Erica Davis, Bill Defrietas, David DeWitt, Christy Ferguson, Robert Fisher, Joe Fisona, Keegan Hackman, Jackie Hartman, Robert Hodge, Shaelun Jackson, Patricia Jones, Lisa Joyce, Dorothyanne LeFore, Donna Lewis, Kyle Longeway, Megan Lopez, Glenn McCurry, Step Mika, Carrie Miller, Tari Moore, Stephanie Palko, Gwen Parrack, Richard Raftery, Donna Runkles, Mary Schuller, Jenny Shields, Linda Shroyer, Shirl Stoops, Jennifer Tuerke, Robin Waddell, Karl Webner, Joe Zurulo

John Bennett called the meeting to order at 3:00 p.m. Call to Order:

**Review of Minutes:** Minutes from the December 11, 2013 meeting were reviewed and approved.

#### Opening Comments, Members of the Cecil County Board of Health

- Tari Moore distributed Maryland Health General Code, Annotated § 8-1001, for the establishment of local Drug and Alcohol Abuse Councils (DAAC). Reaffirmed that said statute outlines the responsibilities for the DAAC.
- Robert Hodge expressed hope that the DAAC and community will be able to work together in a very positive way. Stated that all need to re-commit to solving this problem together.
- Diana Broomell reported intention to stay involved in substance abuse issues. Requested that DAAC meet monthly. Reported that she had been deceived as to how the group was supposed to operate. Asserted that the DAAC need to make recommendations for solutions.
- Stephanie Garrity expressed appreciation to all for attending, and stated that there is no organization that can do this alone. The Health Department needs the help of everyone attending this meeting. Stated that on March 25, 2014, she explained the DAAC history and processes to members of the Board of Health. The explanation is available as oral testimony on the County Council website.

### **DISCUSSION TOPICS:**

Progress - Reports on progress toward the Cecil County "Plans, Strategies and Priorities for Meeting the Identified Needs of the General Public and the Criminal Justice System for Alcohol and Drug Abuse Evaluation, Prevention, and Treatment for FY14-FY16"

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• Goal 1: Establish an accessible and integrated continuum of substance abuse treatment services for adult residents of Cecil County.

Ken Collins spoke to efforts to <u>improve transitional housing services for individuals in need of ongoing long-term substance abuse care</u>. Reported that representatives from the Oxford House planned to establish two recovery houses in Cecil County.

Christy Ferguson, Oxford House representative, identified recovery housing options available in Delaware and the program plans to expand services within Maryland.

Jack Foreaker commented on the difference between a half-way house and a recovery house. Haven House is half-way house which is a certified level III treatment facility with certified counselors.

Mike Massuli addressed efforts to increase the availability of buprenorphine treatment for persons addicted to opioids. Reported that the Maryland Alcohol & Drug Abuse Administration (ADAA) selected the Health Department for a pilot project to develop Suboxone telemedicine services. The project aims to expand access to medication assisted substance abuse treatment for Cecil County residents.

Diana Broomell questioned how a telemedicine program is different from a clinic. Stated that there is a deficiency in detoxification and inpatient services.

Nancy Turner advised Diana Broomell that information she is requesting would be available from CARF.

• Goal 2: Establish and enhance resources and programs to address the substance abuse concerns among individuals referred by the criminal justice system

Sherri Lazarus and Tom Klenk addressed efforts to <a href="enhance">enhance</a> and expand the Adult Drug</a>
<a href="Treatment Court Program within the Circuit Court for Cecil County">Treatment Court Program within the Circuit Court for Cecil County</a>. Eighty-six participants are currently enrolled in the Cecil County Adult Drug Treatment Court program. The program received a federal grant to expand program capacity to 100 participants. Requirements for graduation are different throughout Maryland. Criteria for completion of the Cecil County program had been set very high. The graduation rate is 32%.

Diana Broomell asked if people who test positive for drugs can remain in the Drug Court program. Reports that she has observed a Drug Court proceeding and thinks that participants are given too many chances.

Sherri Lazarus explained that every decision in Drug Court is a team decision.

 Goal 3: Establish an accessible and accessible and integrated continuum of substance abuse prevention, intervention and treatment services for adolescents and their families of Cecil County.

Step Mika addressed efforts to <u>raise awareness about consequences of drug use among youth of Cecil County</u>. Reported that Cecil County-Maryland Strategic Prevention Framework (MSPF) will soon enter its final year of federal funding. During the last 3 quarters of 2013 and the 1<sup>st</sup>

quarter of 2014, MSPF funding supported 52 saturation patrols, 247 traffic stops, 8 DUIs, 14 traffic citations, 3 underage drinking citations and 6 drug arrests. There were 400 compliance checks of liquor establishments.

Beth Creek reported on efforts to <u>increase the number of Cecil County youth who participate in evidence-based prevention and early-intervention programs</u>. Discussed efforts to provide 300 at risk students with a ten week life skills training.

Ken Collins spoke regarding developing of a pilot adolescent early-intervention initiative. The new services will employ evidenced based Motivational Enhancement Therapy/Cognitive Behavioral Therapy (MET/CBT-5) for recently arrested substance-involved adolescents. Also discussed an encore presentation of "Heroin Alert" by Marie Allen. The most recent event was held on June 24, 2014, at the Health Department and over 140 attended.

#### • Goal 4: Educate and assist families in Cecil County to live healthy and drug free lives.

Step Mika spoke on efforts by Cecil-MSPF to <u>reduce adolescent alcohol use utilizing media</u> <u>messaging</u>. The MSPF invited youth to participate in a contest to develop billboards with universal prevention messages. The winning messages were posted on billboards in Cecilton and Elkton.

Diana Broomell stated that a community broadcast channel would be very effective and should be one of the initiatives.

Mike Massuli addressed efforts to <u>increase percentage of healthcare providers who routinely</u> screen for substance abuse, and refer for further assessment/treatment for those patients at risk. Union Hospital emergency room currently screens all patients. The screening process supports referral of identified patients to peer recovery advocates and substance abuse treatment.

# • Goal 5: Decrease perceived obstacles to prevention, early intervention and treatment programs.

Ken Collins identified negative stigma associated with addiction as an obstacle for seeking and participating in services. Addressing this obstacle, the Health Department hosted multiple public screenings of "The Anonymous People," a feature documentary film about individuals living in long-term recovery. A discussion on substance abuse followed each screening. The film and discussion helped to increase understanding of addiction disease, elevate visibility of recovery, and decrease the related negative stigma. Greg Williams, the film's director attended the most recent screening and panel discussion at Cecil College. Combined attendance for all screenings exceeded 1,000 people.

Jennifer Tuerke spoke in reference to perceived obstacles to recovery, and introduced a new community based initiative entitled "Voices of Hope for Cecil County" (VOHCC). The volunteer group was established to support and promote recovery in Cecil County. Participants include those in active recovery, and their family members. VOHCC currently advocates for a Cecil County detoxification program, a recovery community center, and increased mentoring for youth. VOHCC meets every Wednesday at the Health Department.

• Goal 6: Sustain a recovery-oriented systems approach that build on the strengths and resilience of individuals, families, and communities to take responsibility for sustaining health, wellness, and recovery from alcohol and drug problems.

Mike Massuli addressed efforts to <u>develop an ongoing process of systems improvement that incorporates the experiences of those in recovery and their family members</u>. The reach of Peer Recovery Advocates (PRA), was extended through all floors of Union Hospital. (PRAs are individuals who identify as persons in long term recovery from substance abuse.) PRAs participate in multi-disciplinary meetings at the hospital, meet patients at bedside, and upon discharge from the hospital, connect individuals to community resources and treatments.

Incorporating the experiences of former patients, the Health Department also implemented "Treatment on Demand." The process-improvement significantly reduced wait times for appointments, and facilitated immediate access to community based services.

Goal 7: Decrease the number of drug exposed newborns born in Cecil County

Ken Collins referenced efforts to <u>increase physician screening for substance abuse and respective referrals for substance abuse assessments and treatment</u>. Future plans include connecting peer recovery advocates to the offices of primary care physicians.

 Goal 8: Establish an accessible and integrated continuum of gambling prevention, intervention and treatment services.

Jack Foreaker and Ken Collins addressed efforts to <u>integrate problem gambling screening within all substance abuse assessments</u>. County treatment providers currently screen for problem gambling utilizing the Lie-Bet, and the South Oaks Gambling Screen instruments

Goal 9: Reduce incidence of fatal and non-fatal overdoses in Cecil County

Karl Webner addressed efforts to increase overdose prevention education and related outreach to individuals and groups identified as high risk. Two community forums on overdose prevention were held in February and March 2014. The events were facilitated by Haven House, Inc., Serenity Health LLC, and the Health Department. In April 2014, the Health Department initiated overdose response training and distribution of overdose rescue kits with naloxone. To date, one hundred individuals have been certified in Narcan administration and two lives have been saved by community members who received said training. Similar training will be shared with law enforcement personnel.

During the winter of 2014, the Cecil County Local Overdose Fatality Review Team (LOFRT) was established by the Health Department to <u>elevate review and consideration of local overdose incidents</u>. The LOFRT meets monthly and includes twenty three multi-disciplinary team members.

Meeting adjourned at 4:45pm due to prolonged off-topic conversation and members' refusal to yield. Next Meeting: TBD

Submitted by Alicia O'Connor