

**Howard County
Opioid Community Crisis Council
December 1, 2021, via Zoom**

In attendance: Barbara Allen, Joan Webb Scornaienchi, Candace Ball, Robin Bartko, Claudia Lempges, Sean Hughes, Shereen Bentley, Teron Powell, Jama Acuff, Kaymisha Knight, Cindy Johnson, Beth Harbinson, Beth Schmidt, Jack Matthews, James LeMon, Sarah Blankenship, Sarah McCoy, Laura Torres, Theresa Thomas, Liesele Wood, John Way, Mimi Matthews and Shelby Rehn.

Everyone introduced themselves.

The November minutes were presented and will be voted on at the January meeting since they were just sent out today. Barbara asked for corrections

Kayla Kress will join us to replace Theresa Collins.

Announcements

Shereen presented announcements on behalf of the Health Department:

Collaboration with Long Reach HS in support of an upcoming event a talk – real talk about substance misuse. Presentations to students were done Nov. 22 and 23 at the school.

- Several others on the OCCC have been involved in this program at Long Reach and other high schools have expressed interest.
- Beth H asked if this could be made available at all schools. James said it is available if they want this. Beth advocated that this be mandated across all HCP high schools.
- Tammy Wagner will be taking the lead in the County for schools to be more proactive and involved in this way.
- December 8th is tentative date for a parent program; details re time will be forthcoming.

Working to expand crisis bed placement for adults in the county by 8 beds. In the final stages of reviewing final offers from 2 potential vendors and begin implementation for mental health residential mental health crisis short term

New Fentanyl awareness PSA released last week. On opioid contact page and on social media pages. PLEASE repost and share. (See link further in this document.)

Working to implement peer expansion to provide additional peer support in opioid centers in OTP facilities.

Barbara mentioned that the OCCC (under Lt. Governor Rutherford) was running a Stop Overdose Strategy (SOS) Town Hall series. Barbara went to the first one in Baltimore. It was open mic for people to express their concerns. People want more peer recovery specialists and better pay for the peers. A third topic was to educate the public and officials that recovery was not a 30-day event. This is a long-term need, on going process requiring wrap around services.

Veterans Day parade table was supported by Beth Harbinson, Barbara and Tom Allen, John Way and Liesele Wood along with Kaymisha Knight and two of the peers – Aaron and Juan. Provided Narcan,

Narcan training and coffee! We need to consider OCCC approach next year; set up is very early vs when folks from the parade actually arrive. What can we modify if we choose to participate again?

Funding for recovery housing is available. There is a little over \$2.1M that will run through Community Development Block Grants from the Housing Authority of Maryland along with BHA. This is specifically set aside for purchasing recovery houses for women and children. Taking public comments December 13 and 14. Funds will be allocated through the County in connection with the subcontractor (owner).

988 Update – Laura Torres

Laura ran through several slides from the presentation. 988 is a new number to serve people with a wide range of crisis situations including SUD and mental health/suicide but not limited to these issues. 988 will be universal across the US as a crisis hotline. Much work is going on to determine how to implement, how to integrate with existing systems including 911 and 211 press 1.

Here is the link to the slides from the MD988 webinar <https://www.bhsbaltimore.org/wp-content/uploads/2021/12/MD988-Advocacy-Webinar-11.30.21.pdf>

- 6 months away from launch. Requirements are that no one be placed on hold, they need to be staffed 24/7. Capability for text and chat. 211-1 tie in means that it will be merged.
- GBRICS – once this is up and running will meet 20% of the state's need for crisis stabilization.
- MD988 Coalition is in place and what they have done is to see what is needed to make this plan work in July. \$8M cost to get it up and running but Vibrant (US wide provider of 911 system) anticipates \$10 – 17 M will be needed.
- Several partners have already signed a commitment (the hospital is one of them) that says we agree we need to have 988 and we want a fund developed to set aside monies for its operation over time.
- What can we do? Endorse the resolution that Laura will forward to us. Reach out to partners to encourage them to be part of it. Assist in educating legislators about this initiative.
- www.fund988.org
- Barbara mentioned that there could be a small surcharge (about \$1) to people's phone bill, but they don't want that to be an issue. So, for now no surcharge is expected in Maryland.

Plan for OCCC 2022

Last meeting, we discussed Business and Community Engagement and Law Enforcement/Adjudication.

Mental Health Support – HC Detention Center: Jama requested we consider another issue of importance. The Detention Center has noticed an increase in the number of people coming to jail with serious mental health problems. Talked with architects and facility staff for possible expansion on site. Plan is to take existing space to be remodeled into a unit with group rooms, quiet rooms, rooms intended to have several people in them for observation. A financial budget request has been submitted to do this next fiscal year. Architect has experience with designing mental hospitals and has learned about how to implement in the jail. 3 years before this is done.

Because they cannot wait, they have come up with a plan to alter existing housing that will be better than what they have now because these folks cannot be in the general population. Three small housing units to serve as a step-down facility until they can go back into general population.

Asking the OCCC to support this. Someone asked if this issue of mental health creates a revolving door situation for the detention center. It can be but many of these people should not be in jail; often they have burned bridges with family and other places and are not candidates for the ER.

We must do what we can to have these people staying in the community but not committing crimes.

Barbara asked Jama for a paragraph to include in our recommendations to the county.

AOT – Katie Fry-Hester is very involved in this initiative for our county., Barbara will connect she and Jama.

Barbara mentioned this is not a unique problem in our county. These tend to be people with more complex conditions (psychosis) versus depression or anxiety.

Barbara also mentioned that there are conversations going on statewide regarding potential for laws for involuntary commitment for SUD as well as updates for emergency petitions for mental health.

Recommendations Across the State for Committee Consideration – Communications Committee

Sean Hughes looked at the recommendations and suggested we keep it simple. Barbara talked about the new movie *Tipping the Pain Scale* that can be shown at local theaters. Commitment needs to be for selling a certain number of tickets. Discussion and Q&A would follow the showing. Barbara has submitted a request for us to consider a showing.

New PSA from MDH is excellent and is available on the link Before It's Too Late.

<https://beforeitstoolate.maryland.gov/public-service-announcements-psas/>

Teron wrote – “I wanted to reflect that today is World AIDS Day. A portion of the population we serve are substantially impacted by the issues stemming from HIV/AIDS. This also tracks with our conversation about harm reduction and how the term is getting a lot more traction. The recent, unfortunate statistic of 100k overdose deaths is a continued call to action for us to consider an all-hands-on deck approach in adopting many of the principles of harm reduction. Much of the work touches on healthcare, public health, public safety, communication, and education. I shared a report with Barb about safe consumption sites. Not that I'm in one boat or another, but the general information offered about addiction, mortality, public safety, anti-stigma, education, etc. are topics germane to the OCCC.”

Barbara mentioned that Baltimore City has a new Overdose Prevention Site (OPS), the first in the US. Vancouver has a site and Spain has had sites open as well. They are sites where a person brings in their substance of choice, come into a “safe site” check in (no name required), get a cubicle and supplies for a safe injection. Move to a different room for observation to ensure they do not overdose. Also, within these sites, they use the opportunity to talk to them about how things are going in their life. Better than trying to talk to people who are dope sick. Get to know repeat clients. Offer help to reduce dependence or get help. Treat the people as human beings and work on their goals. To save a life – harm reduction methodology. This service meets people where they are.

Beth asked if drugs coming into OPS' were tested. Clinics typically offer fentanyl test strips.

We are over 100,000 overdoses this year and of course, new stuff is on the street all the time.

One of SAMSHA's models is ROSC – Recovery Oriented Systems of Care – Harm Reduction is considered a ROSC as are OPS'.

New York just opened their first site - <https://www1.nyc.gov/office-of-the-mayor/news/793-21/mayor-de-blasio-nation-s-first-overdose-prevention-center-services-open-new-york>

Other uses for Health Department van?

- Kaymisha said we really needed to find new locations for this service.
- Beth mentioned that she had approached The Alano Club to ask them to consider having the van and Narcan training. Waiting to hear back.

Next meeting, we will open with a conversation about Harm Reduction and Barbara will update the suggestions to our recommendation to the County for the OCCC to review. There is no limit to what we can recommend.

Barbara ended with a story. Jack and Scott shared that a guy came to the van looking for help that is outside the scope of harm reduction. They were not able to help but hopes we can share other stories about those who come and actually receive help from the services they offer.

Sean Hughes moved to conclude the meeting. Robin Barko seconded

Barbara thanked everyone and adjourned the meeting at 6:53 pm.

Respectfully Submitted,

Beth Harbinson

Chat addition:

From Teron to Everyone 06:33 PM

I wanted to reflect that today is World AIDS Day. A portion of the population we serve are substantially impacted by the issues stemming from HIV/AIDS. This also tracks with our conversation about harm reduction and how the term is getting a lot more traction. The recent, unfortunate statistic of 100k overdose deaths is a continued call to action for us to consider an all-hands-on deck approach in adopting many of the principles of harm reduction. Much of the work touches on healthcare, public health, public safety, communication, and education. I shared a report with Barb about safe consumption sites. Not that I'm in one boat or another, but the general information offered about addiction, mortality, public safety, anti-stigma, education, etc are topics germane to the OCCC. Just giving some thoughts about how we look ahead. Have a great evening and stay safe.