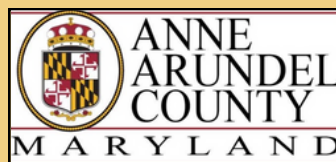


STRATEGIC PLAN FY2026–FY2029



Anne Arundel County
Annapolis City
Anne Arundel County Department of Health

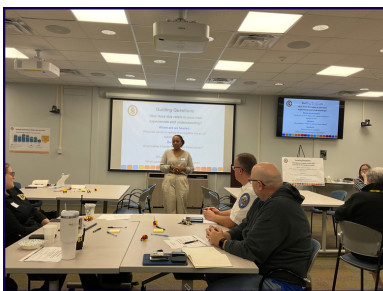


EXECUTIVE SUMMARY

The Overdose Prevention Team (OPT) is an ongoing collaboration of Anne Arundel County and Annapolis City agencies, organizations and community members dedicated to decreasing the negative health outcomes associated with substance use and overdose.

In the past year, opioid-related overdose and overdose deaths have decreased both nationally and here in Anne Arundel County. Multiple factors, including comprehensive prevention, harm reduction, treatment and recovery services have contributed to this decrease. While we celebrate this positive trend, we also recognize that sustained health improvements for our residents depends on the continuation and expansion of these programs.

As the landscape of substance use evolves, so too must our response. The OPT remains dedicated to consistent collaboration, research and the implementation of evidence-based programs. This commitment ensures we meet the unique needs of our communities, and the families and individuals affected by substance use, ultimately building our greatest resource against future challenges.



Photos from the November 2024 OPT Strategic Planning Meeting

OVERDOSE PREVENTION TEAM LEADERSHIP



Tonii Gedin, DNP, RN
Health Officer
Anne Arundel County Department of Health



Kevin Simmons
Director
Annapolis City
Office of Emergency Management



Preeti Emrick, JD
Director
Anne Arundel County
Office of Emergency Management



ANNE ARUNDEL COUNTY OPT STRUCTURE

HEALTH OFFICER



SENIOR POLICY GROUP

Composed of senior-level stakeholders, and provides guidance and strategic oversight as the Steering Committee for the OPT.

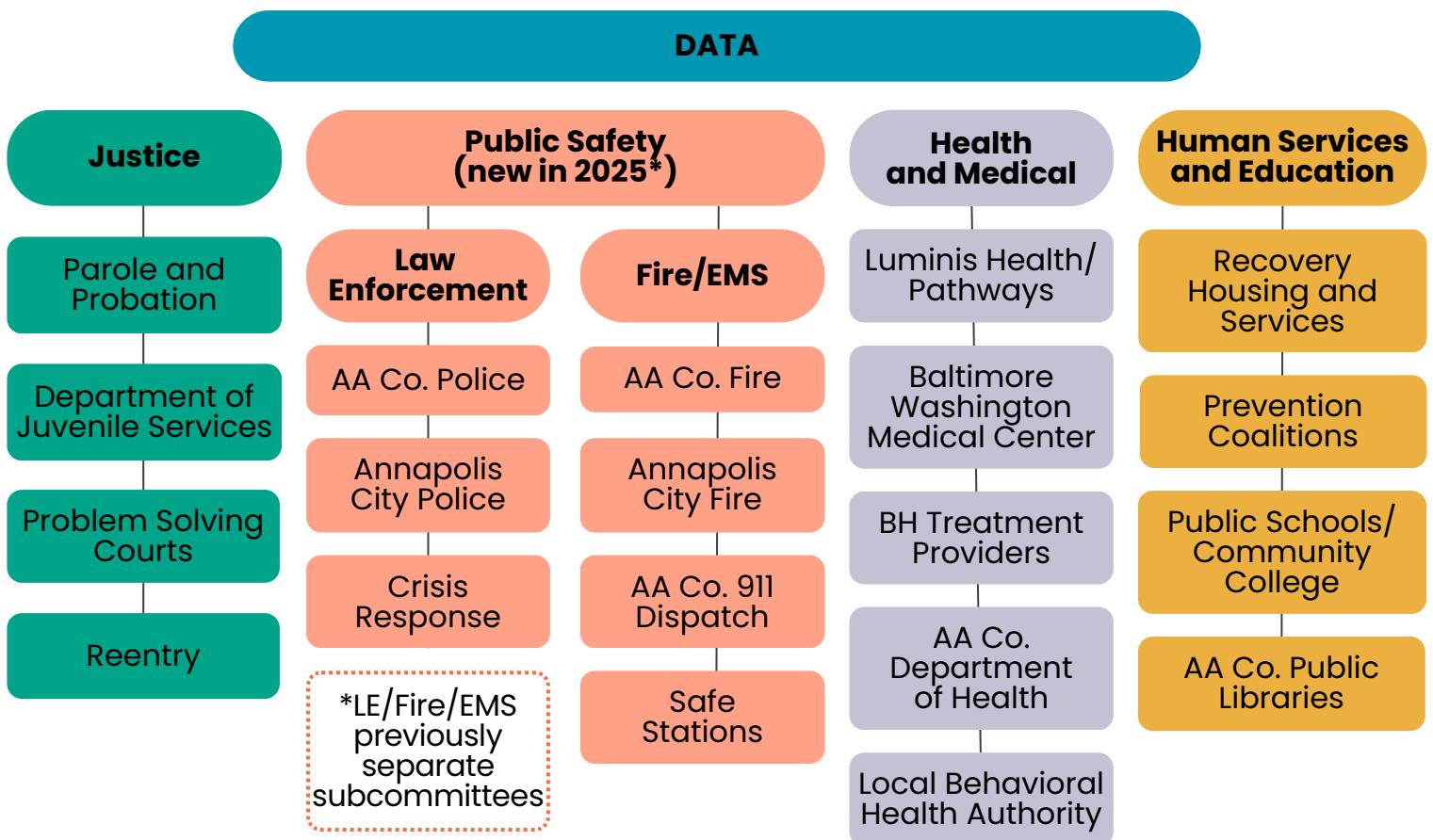


OVERDOSE PREVENTION TEAM

Representatives from various local agencies that work collaboratively to identify gaps in resources, share relevant data, and develop and implement strategies related to overdose and substance use.



SUBCOMMITTEES



OVERDOSE PREVENTION TEAM NEW SUBCOMMITTEE STRUCTURE BEGINNING WITH FY26-29 STRATEGIC PLAN



Public Safety

Battalion Chief Raymond McRae
Annapolis City
Fire Department

Captain Chad McFarlane
Anne Arundel County
Police Department



Justice System

Paula Fish
Circuit Court Drug Court



Health and Medical

Jason Lassalle
Anne Arundel County
Department of Health



Human Services and Education

Angel Traynor
Serenity Sistas

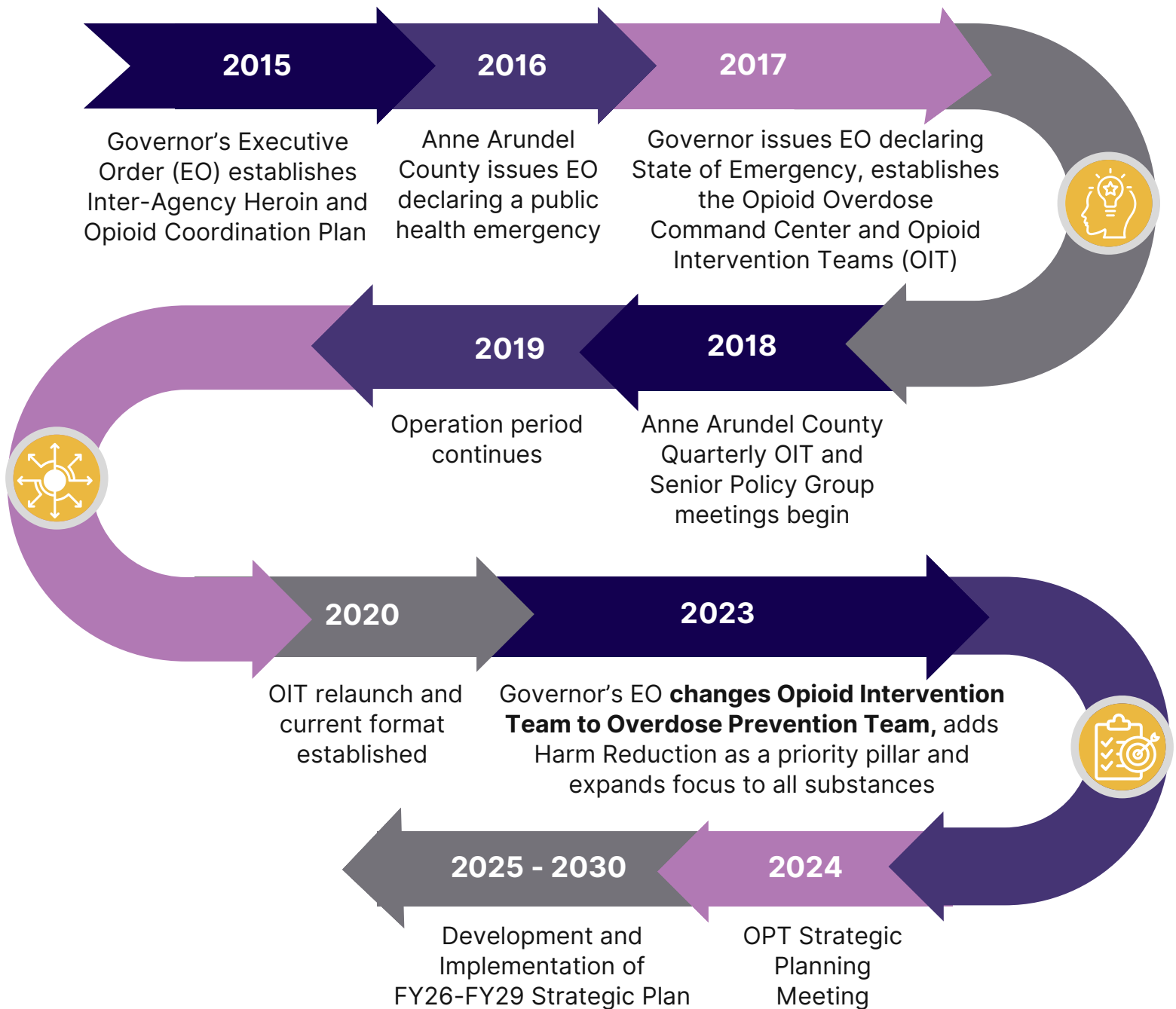
Katie Wargo
NLASA Prevention Coalition



Data

Chelsey Epperly
Anne Arundel County
Department of Health

HISTORY



OVERDOSE PREVENTION TEAMS: A BROADER APPROACH TO SUBSTANCE USE

In December 2023, Opioid Intervention Teams were renamed Overdose Prevention Teams (OPT) to reflect a growing focus on polysubstance overdose. This change acknowledges the rise in overdoses involving multiple substances, not just opioids.

This expanded scope also considers the impact of legalized recreational cannabis (July 2023), particularly its use among youth, and ongoing concerns about alcohol use, especially within the Hispanic community.

While polysubstance, alcohol and cannabis use are not new issues in Anne Arundel County, the OPT is broadening its strategy beyond the opioid crisis to address these substances comprehensively. The strategic plan's goals and strategies use broad terms like "substance use" or "overdose" to encompass all substances that may harm residents and communities.





VISION

A community where every individual and family impacted by substance use has the opportunity for healing and ability to thrive sustained by a comprehensive framework of community resources and support.



MISSION

To implement a collaborative approach to addressing substance use that promotes health equity and prioritizes saving lives to allow all Anne Arundel County residents to thrive.

CORE VALUES



Person and Community Centered



Stigma Reduction



Collaboration



Informed Action

STRATEGIC GOALS

The Maryland Office of Overdose Response (MOOR) Executive Order 01.01.2023.21 identified new Priority Pillars: Prevention, Harm Reduction, Treatment, Recovery and Public Safety. The Anne Arundel County Department of Health Overdose Prevention Team incorporates these pillars and corresponding goals, with the addition of Data as a key strategic area.

Strategic goals for FY2026 – FY2029 are:



OPT STRATEGIC PRIORITIES



Guiding Strategies

The following principles will be applied across all strategic priorities:

- Use of trauma-informed approaches across all services
- Apply harm reduction principles in education, prevention, and care
- Foster community engagement through listening sessions and coalitions
- Incorporate the voices of consumers
- Develop data systems to track equity and outcomes



Equity for Impacted Communities

Populations Impacted:

- Black/African American Communities
- Hispanic/Latino Communities

Challenges:

- Language barriers
- Cultural Stigma
- Churches and Community organizations resistant to engagement
- Mistrust of Law Enforcement
- Lack of Child Care for Treatment Access

Strategies:

- Offer multilingual services and materials
- Partner with culturally trusted community organizations
- Decrease child care as a barrier through on-site services, vouchers or similar programs
- Engage community leaders to co-create solutions



Youth Education and Prevention

Challenges:

- Outdated and inconsistent substance use education
- Lack of early education on substance use
- Cannabis and synthetic derivatives (Delta 8, 9, 10) not included in curriculum
- Barriers to students carrying naloxone

Strategies:

- Revise and update K-12 curriculum with evidence-based content
- Begin substance use education in elementary school
- Include cannabis and synthetic derivatives in curriculum
- Champion policies that allow students to carry naloxone
- Create messaging for parents educating on Substance Use Disorder (SUD) and youth topics



Decrease Stigma

Challenges:

- Cultural stigma in Black and Hispanic/Latino communities
- Mistrust of law enforcement when seeking help
- Churches resistant to overdose training
- Stigmatizing language by individuals and institutions
- Messaging excludes non-opioid users

Strategies:

- Conduct anti-stigma campaigns with culturally competent messaging
- Train providers and community leaders on person-first language
- Engage faith-based organizations in harm reduction education
- Promote normalization of non-use behaviors



Access to Treatment On-Demand

Challenges:

- Limited 24/7 treatment and Medications for Opioid Use Disorder (MOUD) induction
- Single parents lack child care during treatment
- Lack of insurance or underinsurance limits access

Strategies:

- Continue and Expand 24/7 treatment access points
- Expand EMS and ER-initiated MOUD
- Create child care supports within and adjacent to treatment and recovery programs
- Increase insurance and treatment enrollment assistance for uninsured populations



Workforce Development

Challenges:

- Insufficient diversity in behavioral health workforce
- Lack of trauma-informed and harm reduction training in early professional education

Strategies:

- Integrate harm reduction, trauma-informed care and MOUD education into professional training
- Offer incentives and scholarships for diverse students entering behavioral health fields
- Provide continuing education for current providers
- Curate internship experiences for students in clinical and nonclinical fields (clinical, biostat, peer support, recovery services)



Prevention

Goal



Interrupt Pathways to Substance Use Disorder:

Expand efforts that address the social determinants of substance use and overdose risk while disrupting intergenerational cycles of trauma and promoting protective factors across the lifespan.

Strategies



- Develop culturally relevant and universally accessible communications that address all SUDs, including polysubstance
- Promote protective factors across the lifespan and acknowledge the impact of trauma on substance use initiation
- Reduce stigma related to SUD and encourage adoption of anti-stigma language
- Support programs that interrupt and mitigate harmful effects of intergenerational cycles of trauma and/or SUD

Actions



- Provide and utilize anti-stigma training and resources for staff, clients and the community that meet the needs of the community
- Use universal substance use prevention language instead of opioid specific, when appropriate
- Collaborate with schools to provide updated SUD curriculum content, including cannabis, vaping and polysubstance use
- Provide education on Adverse Childhood Experiences (ACEs) with emphasis on protective factors (Benevolent Childhood Experiences [BCEs] and Positive Childhood Experiences [PCEs])
- Provide trauma-informed training for behavioral health workforce and other organizations/agencies
- Support programs focused on families dealing with substance use



Harm Reduction (HR)

Goal



Improve Health and Safety for People Who Use Drugs:

Provide people with the tools and knowledge to stay safe while building relationships that make it easier to make connections to care.

Strategies



- Low and no-threshold services that reach people where they are
- Focused overdose education and naloxone distribution and other harm reduction activities
- Develop opportunities for whole person care to co-locate with harm reduction services

Actions



- Expand HR services and overdose response training
- Train youth-involved community members (teachers, coaches, etc.) in overdose response/naloxone
- Champion state and local efforts to allow students to carry naloxone
- Engage with community and faith leaders to provide overdose response education and learn the HR needs of the community
- Provide focused HR outreach and services that reflect community trends, including services such as safe snorting kits
- Combine overdose response training with existing community events
- Facilitate warm hand-offs to provide wound care, HIV/Hep C testing, blood pressure readings and other feasible health services with harm reduction efforts
- Partner with existing health care providers to co-locate harm reduction services



Treatment

Goal



Make Evidence-Based Treatment Accessible for People with Substance Use Disorder:

Expand equitable access to evidence-based treatment for individuals with substance use disorder to ensure that anyone seeking treatment can access it whenever they need it regardless of circumstance.

Strategies



- Improve equitable and timely access to treatment, including MOUD
- Increase understanding and awareness of treatment options among health care providers
- Promote sustained well-being and whole-person care
- Reduce barriers to care, such as a lack of transportation or culturally sensitive treatment options

Actions



- Expand mobile services to close identified gaps in treatment engagement
- Prioritize developing 24/7 treatment access points, such as EMS and ER-initiated MOUD
- Broaden academic detailing for health care providers, including cannabis, polysubstance use, MOUD and alcohol treatment options
- Provide easy and accessible resources for health care providers to share with patients
- Partner with health care providers to facilitate warm hand-offs
- Develop opportunities for providers in behavioral health treatment, health care and recovery to meet and collaborate on how to best meet the whole-person needs of PWUD



Recovery

Goal



Build and Sustain Community Infrastructure That Promotes Recovery Capital:

Reinforce that long-term recovery is achievable and increases with strong social bonds and access to essential resources.

Strategies



- Provide support for recovery-friendly workplaces
- Support community organizations in providing programs that build recovery capital and promote well-being
- Strengthen connections to resources and support networks for individuals navigating recovery

Actions



- Seek collaboration with Anne Arundel County Workforce Development and Anne Arundel Community College
- Provide training on stigma and substance use for employers utilizing State and Federal recovery-friendly workplace guides
- Increase the number of designated Recovery Friendly Workplaces
- Seek or provide grants for community organizations to provide recovery-related activities in the community
- Partner with organizations to provide information at outreach and community events
- Provide programs at Community Centers that focus on activities, such as wellness and engagement
- Create a Recovery Tool Kit with short-term and long-term resources, including those in the event of a return to use
- Utilize Recovery Community Centers, mutual aid programs and other meeting places to disseminate information
- Expand activities offered by Recovery Community Centers



Public Safety

Goal



Improve Outcomes for PWUD Who Encounter the Criminal Legal System:

Improve outcomes for PWUD involved in the criminal justice system through reducing stigma, building community trust and ensuring seamless reentry pathways.

Strategies



- Support activities and programs that build trust between public safety and the community
- Promote a reentry framework that ensures seamless connection to community resources and supports that meet their specific needs
- Foster a Stigma-Free, Supportive and Trauma-Informed Culture within Public Safety and Justice System agencies

Actions



- Increase public safety and recovery community events
- Consider public safety/recovery community pairings for overdose training
- Utilize public safety personnel who can connect with community members through shared language or experience
- Establish a standard of care for individuals upon reentry to receive support and services, including medication, at time of release
- Expand peer connections upon reentry
- Integrate people with lived experience to provide public safety and justice system trainings on substance use, trauma and similar topics



Data

Goal



Use Data to Improve Health Outcomes:

Use data to make informed decisions that improve program outcomes, strategically locate programs in areas where they are most needed and ensure equitable access for those who will benefit the most.

Strategies



- Broaden quantitative and qualitative data sources and collection methods
- Utilize hotspot data for focused outreach, intervention and messaging

Actions



- Partner with agencies and organizations to look at data in new ways: hospitals, recovery community centers or treatment centers
- Gather information about stigma and misperceptions to inform focused education and outreach
- Develop tools to assess attitudes and perceptions of stakeholders and the community
- Data collection by ZIP code, microarea, census tract, intersection, block or street... identifying emerging trends in substance use
- Collect, analyze and report on data on all substances, including alcohol

KEY PERFORMANCE INDICATORS



Performance Indicator	Measure	Source	Equity Lens
Number of overdose related deaths	Decrease in fatal overdose rates	Annapolis City and AA Co. police data	Decrease in fatal overdose rates across communities
MOUD treatment rate	Increase in MOUD treatment engagement	MD Medicaid, MD Medicare CCW, Commercial and Medicare Advantage from MCDB	Increase in MOUD treatment in under engaged communities
Youth ER visits for substance use or overdose	Decrease in youth ER visits for substance use or overdose	ESSENCE	Decrease in youth ER visits across communities
Change in attitudes and perceptions of PWUD	Decrease in negative perception of PWUD	Surveys	Decrease in negative perception across communities
Rate of substance use (see figure below)	Decrease in rates of substance use	ESSENCE	Decrease in rates across communities

Emergency Room (ER) Visits for Suspected Non-Fatal Overdose, Anne Arundel County, 2020-2024

Overdose Type	Total ER Visits	ER Visit Rate (per 100,000)	Change (2024 vs 2020)
All Drugs	10,166	347	↓
Opioids	3,627	123.8	↓
Heroin	891	30.4	↓
Stimulant	425	14.5	↑
Cocaine	335	11.4	↑
Alcohol	17,285	590	↑
Cannabis*	ER Visits in AA County with principal diagnosis of cannabis use saw a 33% increase from 2022 to 2023.		↑



*Cannabis was legalized in Maryland for recreational, adult use in 2023. Cannabis Data Source: 2016-2024 HSCRC Outpatient Data, Ran on principal diagnosis. All other data ER Visits for Suspected Non-Fatal Overdose - Anne Arundel County, 2020-2024 from ESSENCE.

OVERDOSE PREVENTION TEAM PARTNERS

- | | |
|--|---|
| <ul style="list-style-type: none">• Annapolis City Fire Department• Annapolis City Mayor's Office• Annapolis City Office of Emergency Management• Annapolis City Police Department• Anne Arundel Community College• Anne Arundel County Circuit Court• Anne Arundel County District Court• Anne Arundel County Department of Aging and Disabilities• Anne Arundel County Department of Health• Anne Arundel County Department of Juvenile Services• Anne Arundel County Department of Social Services• Anne Arundel County Fire Department• Anne Arundel County Mental Health Agency | <ul style="list-style-type: none">• Anne Arundel County Office of the County Executive• Anne Arundel County Office of Emergency Management• Anne Arundel County Parole and Probation• Anne Arundel County Police Department• Anne Arundel County Public Libraries• Anne Arundel County Public Schools• Baltimore Washington Medical Center• Brightwell Health• Community Advocates• Luminis Health• Partnership for Children, Youth and Families• Recovery Anne Arundel• Serenity Sistas• Substance Use Prevention Coalitions of Anne Arundel County |
|--|---|

Thank you for your dedication to the OPT!