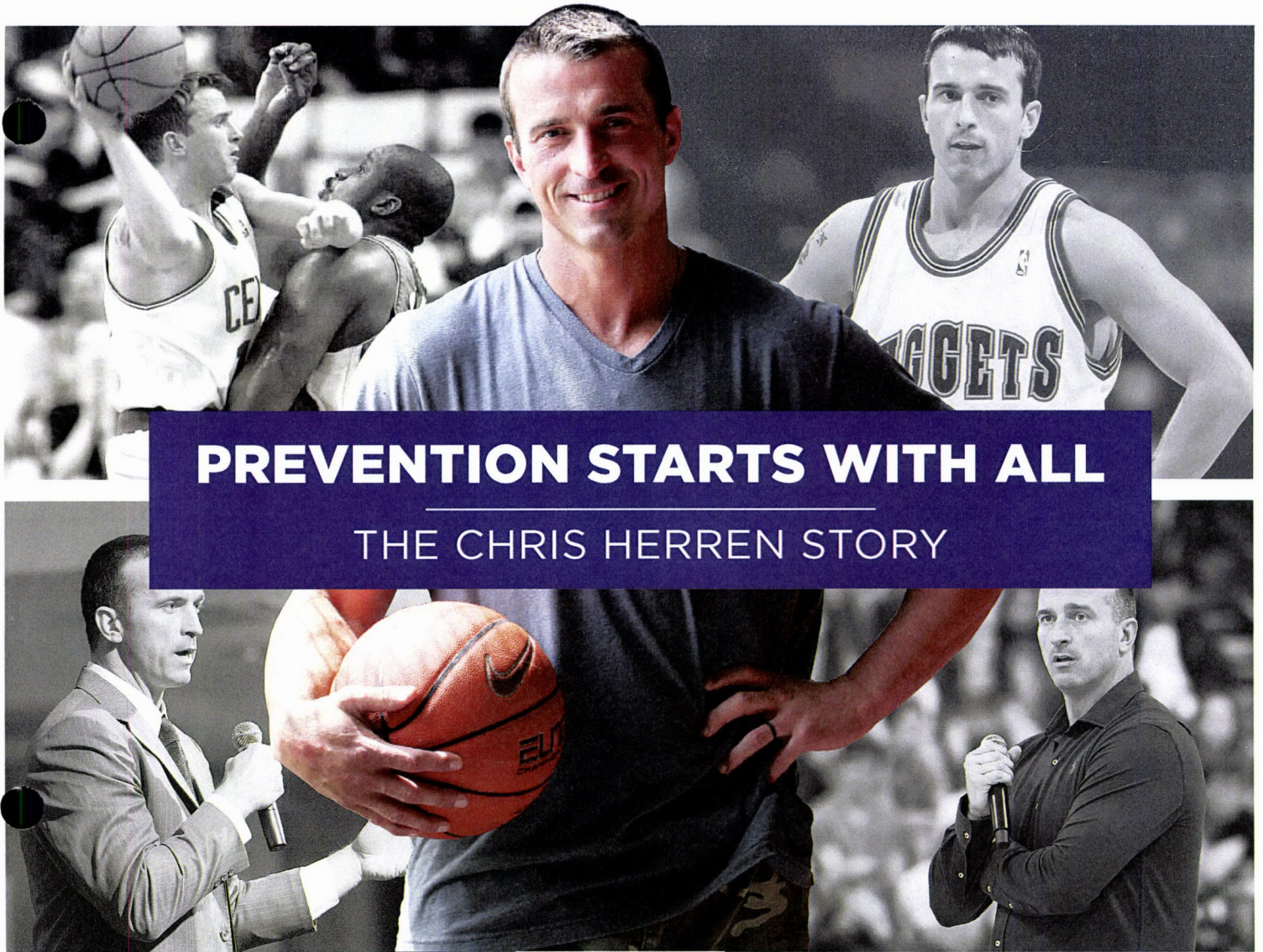


Work Plan

Increase the # of support staff with the training and education to provide activities and services to complement MAT.	Explore the provision of child care at treatment facilities or incentivize family for costs of child care
Recruit and retain rural SUD/ODU providers by providing workforce development opportunities and recruitment incentives through mechanisms such as NHSC.	Provide training support for Peer Recovery Specialists.
Reduce barriers to treatment by using approaches to minimize stigma and other barriers to care.	Provide financial support for home-based crisis services related to SUD/ODU.
	Partner with MAT providers to incentivize regular attendance.
	Provide trauma-informed care training for medical community to promote stigma reduction
Train providers, administrative staff, and other relevant stakeholders to maximize reimbursement for treatment encounters through proper coding and billing across insurance types.	Provide opportunities for participation in training regarding maximum reimbursement
Strengthen collaboration with law enforcement and first responders to enhance their capability of responding and/or providing emergency treatment to those with SUD/ODU.	Provide treatment resource packets to law enforcement and EMS staff to share with clients
	Explore the idea of implementing a STEER Program (Stop, Triage, Engage, Educate and Rehabilitate), an alternative to conventional arrest and booking that diverts potential clients into treatment.
Provide support for pregnant and postpartum women to enter and adhere to family-centered SUD/ODU treatment, reduce risk of relapse, and prevent medical complications in the newborn and other children.	Partner with Early Care home visiting program and Head Start to support their efforts to link families in crisis to SUD/ODU treatment and other family resources.
Recovery	
Activity	Tasks/Deliverables
Enable individuals, families and caregivers to find, access, and navigate evidence-based and/or best practices for affordable treatment and recovery support services for SUD/ODU.	Provide financial support to the community college to facilitate job readiness and job placement for persons in recovery.
	Provide financial support to Legal Aid to assist clients in navigating legal issues
Develop recovery communities, recovery coaches, and recovery community organizations to expand the availability of and access to recovery support services.	Support the addition of a Peer Recovery Specialist to expand access to recovery support services.
Enhance discharge coordination for people leaving inpatient treatment facilities and/or the criminal justice system who require linkages to home and community-based services and social supports.	Support the addition of a Peer Recovery Specialist to assist those leaving the criminal justice system.
Improve availability and coordination of transportation services to connect rural residents to recovery and other support services.	Support the addition of a Peer Recovery Specialist to assist with transportation for recovery services.
Strengthen partnerships to better leverage other SUD and mental health-related community resources. Support referrals between clinical partners.	Develop a “roadmap” of services from prevention to treatment to recovery.
	Continue monthly meetings of Consortium members to strengthen partnerships and leverage resources.

Work Plan

Activity	Tasks/Deliverables
Prevention	
Develop, implement and assess intervention models that leverage OD reversal and increase naloxone availability.	Quarterly overdose response training for inmates and family members.
	Provide overdose response training for Social Services employees.
	Provide overdose response training for Head Start and Early Care families
Provide and assess the impact of culturally and linguistically appropriate education to improve family members', caregivers' and the public's understanding of evidence-based treatments and prevention strategies to eliminate stigma.	Conduct Adverse Childhood Experiences (ACEs) training around the county.
	Community Cafes at multi-unit housing complexes (total of 11 complexes).
	Community anti-stigma campaign
Provide training and other professional development opportunities to increase # of providers who are able to treat for SUD/OD	Grand Rounds presentation for hospital health care providers; provided by expert on SUD/OD treatment Year 2 & 3 Grand Rounds presentation by existing local MAT providers
Increase the # of providers who regularly use PDMP	Grand Rounds presentation by Deputy Health Officer about usefulness of PDMP and available data from the PDMP
Identify and screen individuals who are at risk of SUD/OD and make available prevention, harm reduction, early intervention services, referral to treatment and other supportive services.	Deputy Health Officer train school nurses, college counselors, dentists & hygienists, medical offices and Social Services staff in SBIRT
Track, screen, prevent and refer to treatment patients with SUD/OD who have infectious complications.	Partner with Johns Hopkins Bloomberg School of Public Health on study to assess burden of IV drug users with HIV/HCV in Western MD.
	Engage providers from local health department clinical services to develop screening and referral process between SUD treatment services and STI testing services.
Year round drug take-back programs	Partner with law enforcement to conduct walking take-back in each municipality.
Encourage the use of multidisciplinary team models for the management of pain.	Support Chronic Pain support group by providing funds for training, advertising, program materials and incentives.
	Support costs for health care providers to attend "Moving Beyond Opioids for Chronic Pain" Conference
Engage community and faith-based organizations to use evidence-based messages on prevention, treatment and recovery.	Provide evidence-based messages to community and faith-based groups in order to encourage participation in referrals to services.
Treatment	
Activity	Tasks/Deliverables
Increase the # of providers who are trained, certified, and willing to provide MAT, including by providing opportunities for existing rural providers to obtain DATA 2000 DEA waivers.	Grand Rounds presentation for hospital health care providers; provided by expert on SUD/OD treatment Year 2 & 3 Grand Rounds presentation by existing local MAT providers
	Meet one-on-one with primary care providers to discuss MAT.
	Support the addition of a Peer Recovery Specialist to assist with activities and services to complement MAT.



PREVENTION STARTS WITH ALL THE CHRIS HERREN STORY

ABOUT CHRIS HERREN

Chris Herren, a basketball legend from Fall River, Massachusetts, was an All-American, broke scoring records and was recruited by the nation's top colleges. Herren realized his lifelong dream of playing in the NBA when he was drafted by the Denver Nuggets in 1999 and then traded to his hometown team, the Boston Celtics, before losing his career and almost his family to the disease of addiction.

In long term recovery since 2008, Chris inspires people to start the conversation on wellness and educate themselves on the disease of addiction. It is his hope that strength will be found in the struggle and communities will come TOGETHER to address the issue of substance use disorder, advocate for effective treatment and embrace the power of recovery.

DATE: September 9, 2019

TIME: 7:00 - 8:30 pm

LOCATION: Garrett College
CARC Gymnasium



www.herrentalks.com

Sponsored by Garrett County Behavioral Health Authority.
Sponsored by a grant through Behavioral Health Administration.

31 AUGUST

INTERNATIONAL
OVERDOSE
AWARENESS DAY

TIME TO REMEMBER.
TIME TO ACT!



International Overdose
Awareness Day
Prevention and Recovery

OPIOID OVERDOSE AWARENESS DAY

Stories of Hope & Candlelight Vigil

GLADES PARK PAVILION | AUGUST 31 | 7-9PM



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Funded by MDH and SAMHSA
For additional information, call Sadie at 301-334-7730

