



Opioid Operational Command Center

at the State Emergency Operations Center



To: OOCC State and local partners

Through: OOCC Planning Section

From: Clay Stamp

Re: Opioid Operational Command Center (OOCC)

Date: May 12, 2017

Completed Action Items (May 4, 2017 - May 10, 2017):

- On 5/5/2017 - Compiled and synthesized Opioid Intervention Team Situation Reports (22 out of 24) from across Maryland to describe promising practices and lessons learned in their jurisdictions
- On 5/5/2017 - Received all signed signatures for the second amended MIEMSS and DHMH data sharing use agreement to receive confidential health information of emergency medical services run data to share with local health departments [Partners: DHMH, GOCCP, MIEMSS]
- On 5/5/2017 - DHMH hosted an Employee Opioid Overdose Awareness and Prevention Town Hall with over 150 attendees and panelists from the Maryland Institute for Emergency Medical Services System and across DHMH programs (Public Health Services, Behavioral Health Administration, Medicaid, and the Office of Preparedness and Response)
- On 5/5/2017 - Completed analysis of naloxone administration trends by EMS providers statewide and broadly shared to partners via the Office of Preparedness Public Health Situational Awareness Report [Partners: DHMH, MIEMSS, GOCCP, MEMA] – Attachment 1
- On 5/8/2017 - Facilitated broad distribution of DHMH Clinician letter regarding carfentanil deaths & provider treatment recommendations to all OOCC partners, including but not limited to over 19,000 practitioners through the Health Alert Network (Physicians: 15,781; Nurse Practitioners: 2,783; Pharmacists: 1,299) – Attachment 2
- On 5/9/2017 - Launched “Before It’s Too Late” campaign, website, social media pages, and corresponding hand out materials
- On 5/9/2017 - Participated and presented on five panels during the



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MD/VA/DC Regional Opioid and Substance Abuse Summit

- On 5/10/2017 - Filmed OOC Welcome clip at MEMA State Emergency Operations Center for “Before It’s Too Late” website launch

Planned Actions Items (May 10, 2017 - May 17, 2017):

- On 5/15/2017 - Integrate the Governor’s Office of Community Initiatives into OOC organizational structure under the local liaison branch
- On 5/23/2017 - Present proposed statewide overdose related fields in the eMEDS system based on the current Baltimore City field to MIEMSS Steering Committee members
- On 5/26/2017 - Convene round-table with federal, state, and local law enforcement leaders to discuss strategic initiatives hosted by HIDTA
- On 5/30/2017 - Plan OOC Planning Development workshop at the 2017 MEMA Symposium to receive feedback and comment on the OOC Strategic Plan from local partners perspective
- Develop OOC reporting process to support state and local situational awareness
- Receive survey results from the Maryland Hospital Association regarding the standardization of ED discharge protocols to incorporate substance use disorder screening, naloxone dispensing, and direct referral to treatment

OOC Coordinated meetings

The OOC continues the mobilization phase (0 - 120 days) to engage partners at the state and local level working on heroin and opioid-related initiatives, including but not limited to the following meetings:

- On 5/3/2017 - Convened the Governor's Emergency Management Advisory Council members for their quarterly meeting, with agenda items including discussion of FEMA’s Disaster Deductible Concept, the OOC, and Maryland’s emergency management system vision and focus [25 Individuals]
- On 5/5/2017 - Convened OOC Public Information Officer representatives in-person to review and discuss media monitoring, current news articles, and situational awareness of opioid and heroin crisis [25 Individuals]
- On 5/8/2017 - Convened Interagency Council via conference call [18



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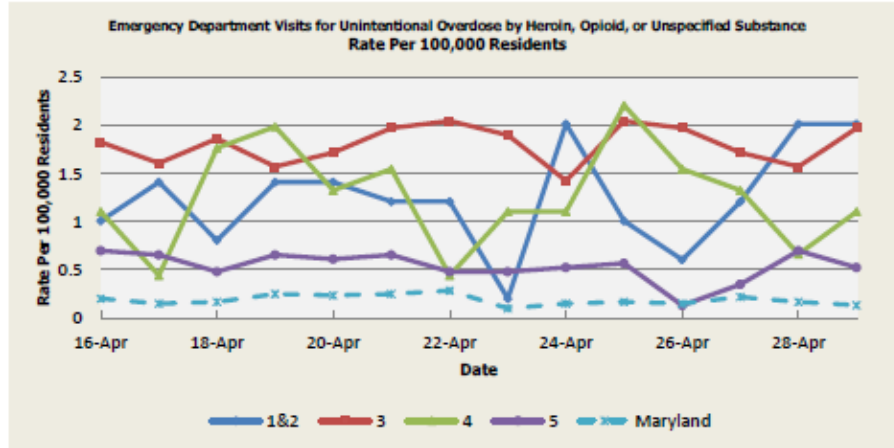
individuals] to provide progress updates and discuss benchmarks and targets [Partners in attendance: DHMH, OOCC, MIEMSS, OAG, Grants, GOCCP, GOHS, GOV, DJS, MSDE, MIA, DHR, MSP, MEMA]

- On 5/8/2017 - Participated in a “Drug Overdoses Continue to Rise in Maryland: How Can We Respond?” panel discussion hosted by the Bloomberg American Health Initiative Addiction and Overdose Workgroup with the Baltimore City Health Commissioner and Frederick County Health Officer
- On 5/8/2017 - Presented and participated in the standing advisory committee meeting for the Maryland Syringe Services Programs to better understand the statewide infrastructure for providing harm reduction services to active opioid users
- On 5/10/2017 - Coordinated multiple OOCC Finance/Admin Spend Plan Development meetings to align funding streams and the OOCC planning process, including but not limited to the HOPE Act and Substance Abuse and Mental Health Services Administration Cures grant, for submission to the Lt Governor for review
- On 5/11/2017 - Coordinated agendas and participated in a series of events during the regional cabinet meeting in Carroll County to engage local leadership and partners, including a visit to the Carroll County Hospital, Access Carroll, a Recovery Support Services program, and the Maryland Heroin/Opioid Educational Forum hosted by the Lt Governor

Public Health Preparedness and Situational Awareness Report: #2017:17 Reporting for the week ending 4/29/17 (MMWR Week #17)

SYNDROMIC OVERDOSE SURVEILLANCE

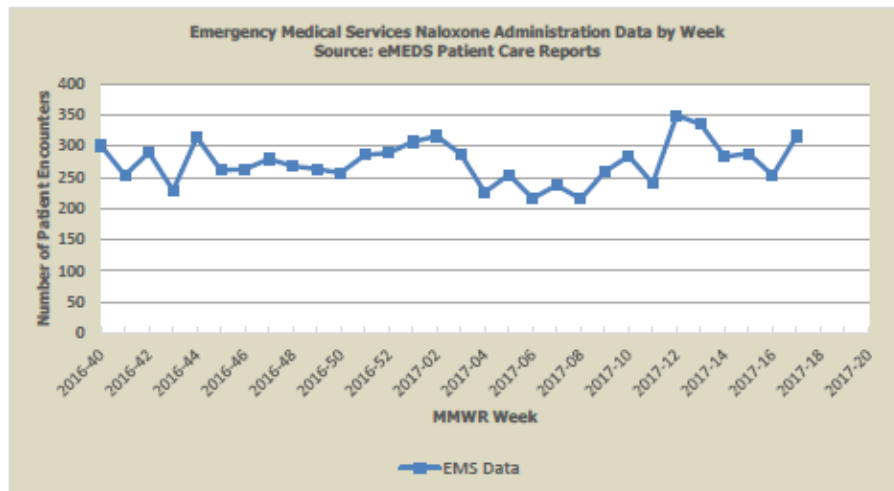
The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose by Heroin, Opioid or Unspecified substance include those with medical and non-medical use of a prescription Opioid or where the substance is not specified, given evidence that the majority of fatal overdoses are Opioid-related.



Disclaimer on ESSENCE Overdose related data: ESSENCE chief complaint and discharge diagnosis query for overdose-related illness includes but is not limited to the following terms: heroin, opioid, speedball, dope, fentanyl, naloxone, narcan, and overdose.

Non-fatal Overdose ED Visit Baseline Data January 1, 2010 - Present					
Health Region	1&2	3	4	5	Maryland
Mean Rate*	0.33	0.42	0.37	0.15	0.30
Median Rate*	1.01	1.32	1.10	0.48	0.99

* Per 100,000 Residents



Disclaimer on eMEDS naloxone administration related data: These data are based on EMS Pre-hospital care reports where the EMS provider has documented that they administered naloxone. The administration of naloxone is based on the patient's signs and symptoms and not on any diagnostic tests. These data are reported for trending purposes only.