



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 19, 2017

Completed Action Items (May 11, 2017 - May 17, 2017):

- On 5/11/2017 - Began distribution of emergency treatment/resource cards for EMS providers to leave with patients who are treated at the scene but refuse transport [MIEMSS]
- On 5/12/2017 –
 - Developed and presented summary report of survey of all the 24 local school systems to highlight best practices and gaps in addressing the opioid epidemic [MSDE]
 - Developed and presented summary report of survey of 42 Maryland colleges and universities on Naloxone administration policies and procedures and drug addiction prevention and intervention programs [MHEC]
 - 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]
- On 5/15/2017 -
 - Launched “Before It’s Too Late” web portal and social media page at the beginning of SAMHSA’s National Prevention Week, an effort to increase public awareness and encourage action regarding substance abuse and mental health [Partners: Governor's Office, DHMH, MEMA]
 - Finalized OOCC one-pager and two-pager and broadly distributed to partners
 - Integrated the Governor’s Office of Community Initiatives into OOCC organizational structure
- On 5/16/2017 – Received first data file transfer from MIEMSS to DHMH including confidential health information of emergency medical services run data to share with local health departments [Partners: DHMH, MIEMSS]

Planned Actions Items (May 17, 2017 - May 24, 2017):

- On 5/22/2017 - Present draft OOC Plan and corresponding Spend Plan to Lieutenant Governor
- 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 - Conduct OOC Planning Development workshop at the 2017 MEMA Symposium to receive feedback and comment on the OOC Strategic Plan from local partners perspective
- On 5/19/2017 – Convene partners to develop Maryland Opioid Addiction Indicators dashboard to be shared via “Before It’s Too Late” website audiences [Partners: DHMH, DoIT]
- 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

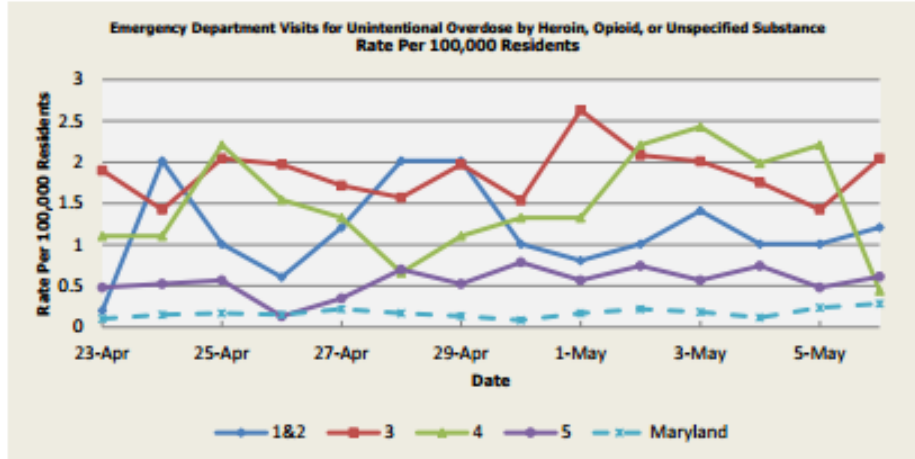
The OOC continues the mobilization phase (0 - 120 days) to engage partners at the state and local level working on heroin and opioid-related initiatives, including but not limited to the following meetings:

- On 5/12/2017 - OOC Director recorded WYPR interview describing what resources have been mobilized by the state of emergency
- On 5/10 & 5/12/2017 - Coordinated multiple OOC Work Plan Development meetings to align funding streams and the OOC 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 5/15/2017 - Convened OOC Operational staff [24 individuals] to begin a new two-week operational period with nine objectives and over fifty tangible tasks to complete by 5/29/2017
- On 5/17/2017 - OOC Director provided an overview of Maryland’s approach to tackling the opioid crisis during SAMHSA’s National Prevention Week Webinar on Opioid Addiction and Prevention, to 200+ participants listening in from around the country
- On 5/17/2017 – OOC Director attending the Hispanic Commission meeting as a guest speaker

Public Health Preparedness and Situational Awareness Report: #2017:18 Reporting for the week ending 5/06/17 (MMWR Week #18)

SYNDROMIC OVERDOSE SURVEILLANCE

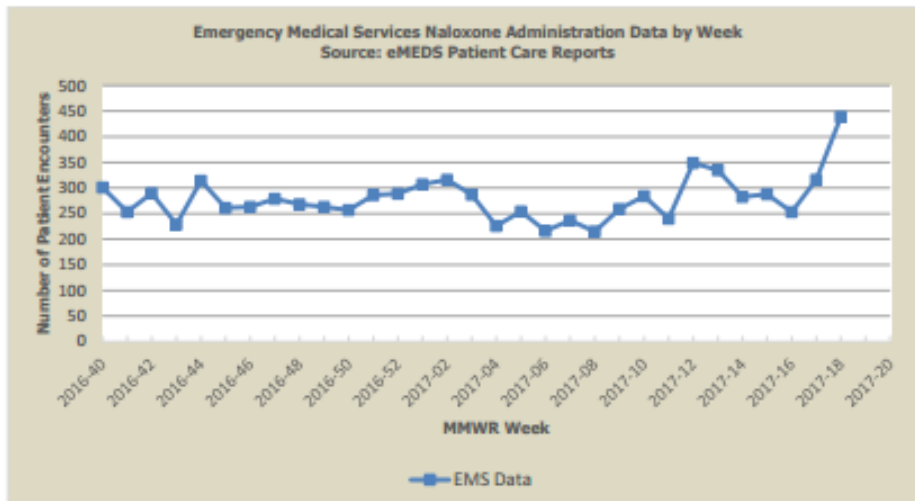
The purpose of this section is to characterize non-fatal ED visit trends for acute unintentional overdose by Heroin, Opioid or Unspecified substance among Maryland residents captured by ESSENCE data, including chief complaint and discharge diagnosis. ED visits that are identified as unintentional overdose 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, naran, 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.