



# Maryland's Office of Overdose Response

PREVENTION • HARM REDUCTION • TREATMENT • RECOVERY • PUBLIC SAFETY



## Overdose Prevention Team Program Inventory

*Fourth Calendar Quarter, 2023*

## INTRODUCTION

Pursuant to Executive Order 01.01.2023.21, Maryland's Office of Overdose Response (formerly the Opioid Operational Command Center) consults regularly with the Overdose Prevention Teams (OPTs) in each of Maryland's 24 local jurisdictions to promote a comprehensive and coordinated response to the overdose crisis in all parts of the state. OPTs are multi-agency coordinating bodies that seek to enhance multidisciplinary collaboration at the local level. Each OPT is chaired by the local health officer and is required to have representatives from various other agencies and organizations, including law enforcement, social services, education, and community groups.

A central component of our work with local partners involves sharing best practices. To do this, we survey and track all programs and initiatives that are being supported by OPTs to address the opioid crisis. We have identified 142 frequently implemented programs and services designed to reduce overdose-related morbidity and mortality at the local level, and we are working to help our partners establish and expand these services to the greatest extent possible. These programs are listed in detail by jurisdiction in our OPT Program Inventory, which is updated using self-reported data. Table 1, beginning on page three below, depicts the implementation status of each program by jurisdiction. Responses range from "no programming planned" (red) to "substantial programming in place" (dark green).

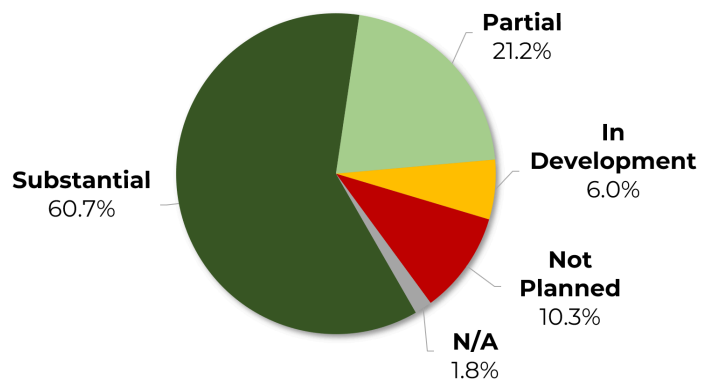
Please note that some programs may not be applicable in all jurisdictions. For example, programs having to do with higher education will not apply to a jurisdiction without a college or university. As such, instances where programming is not applicable for a given jurisdiction are not color-coded.

## SUMMARY

As of the fourth calendar quarter of 2023, Maryland's local jurisdictions continued to make steady progress in implementing programs. As shown in Figure 1, 81.9 percent of programs were reported to be either partially or substantially implemented while only 10.3 percent remained unplanned. Thus, while local jurisdictions have made substantial progress in expanding programming in recent years, ample opportunities remain for program expansion across all jurisdictions.

All jurisdictions reported having at least half of the 142 programs either partially or substantially implemented, and all jurisdictions reported plans to expand programming.

**Figure 1. Statewide OPT Program Implementation**  
As of the Fourth Calendar Quarter, 2023



**Figure 2. Program Implementation Status by Jurisdiction**  
Fourth Calendar Quarter 2023

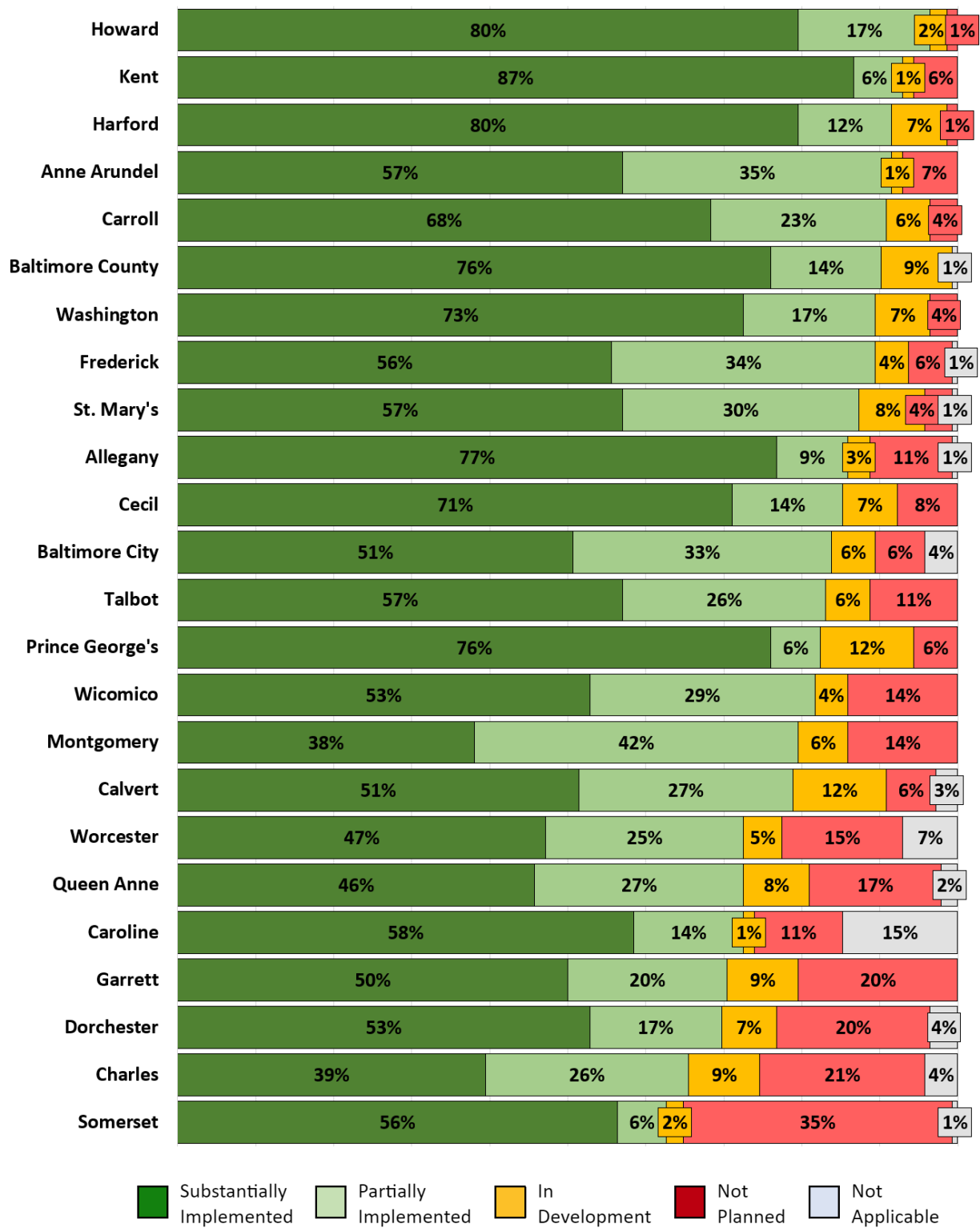


TABLE 1. OPT PROGRAM INVENTORY: FOURTH CALENDAR QUARTER, 2023

OPT Program Inventory Fourth Calendar Quarter, 2023	Allegany	Anne Arundel	Baltimore City	Baltimore County	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester	
<b>Public Health</b>																									
<b>1. Harm-Reduction Programs:</b>																									
Naloxone Distribution	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Naloxone Training	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Syringe-Service Program	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Fentanyl Test-Strip Distribution	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Wound-Care Program	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>2. Information Campaigns (PSAs):</b>																									
Access to Treatment	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Anti-Stigma	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Fentanyl	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Good Samaritan	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Naloxone	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Safe-Disposal	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Talk to Your Doctor	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>3. Local Hotline to Access Treatment</b>																									
4. RV/Truck-based SUD Support Services (Non-Treatment)	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
5. Prescriber Education/Academic Detailing	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
6. Safe-Disposal Program/Drop Boxes	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
7. Employer-Education and Support Programs	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>Behavioral Health</b>																									
<b>8. Assertive Community Treatment (ACT) Program</b>																									
<b>9. SUD Crisis-Services Facilities (Outside of the ED)</b>																									
Assessment and Referral Center	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Allow Walk-ins	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
23-Hour Stabilization Services	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
1-4 Day Stabilization Services	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Mobile Crisis Team	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
24/7 Operation	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
10. RV/Truck-based Treatment Program (Dispensing, etc.)	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>11. MOUD in Jurisdiction:</b>																									
Naltrexone	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Buprenorphine	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Methadone	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>12. Certified Peer-Recovery Specialist Support:</b>																									
Commissioner's Office	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
DSS Service Center	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Health Department	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Hospital ER	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Jail	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Parole & Probation Offices	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Mobile Crisis Response	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Walk-in Center	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
On-Call 24/7 Availability	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
Post-Incident Outreach	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■

Substantially Implemented
  Partially Implemented
  In Development
  Not Planned
  Not Applicable

OPT Program Inventory Fourth Calendar Quarter, 2023		Behavioral Health (cont'd)																								
		Allegany	Anne Arundel	Baltimore City	Baltimore County	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester	
<b>13. Outpatient SUD Services in Jurisdiction:</b>																										
ASAM Level 0.5 Early Intervention		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
ASAM Level 1.0 for Adolescents and Adults		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
ASAM Level 2.1 Intensive Outpatient		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
<b>14. ASAM Level 2.5 Partial Hospitalization</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>15. SUD Residential and Inpatient Treatment Programs:</b>																										
3.1 Lic. Clinically Managed Low-Intensity		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
3.3 Lic. Clinically Managed High-Intensity for Adults Only		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
3.5 Lic. Clinically Managed High-Intensity for Adults &		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
3.7 Lic. Medically Monitored Intensive Inpatient		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
3.7 WM Lic. Medically Monitored Inpatient Withdrawal		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>16. Recovery-Support Programs:</b>																										
Sober-Living/Recovery Housing		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Wellness/Recovery Centers		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Workforce Development		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>Care Coordination</b>																										
Housing Assistance		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Transportation Assistance		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Nutrition Assistance		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>17. Recovery Oriented Systems of Care (ROSC)</b>																										
<b>Judiciary/States Attorney</b>																										
<b>18. Specialized Courts:</b>																										
Adult Drug Court		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Adolescent Drug Court		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>19. Public-Messaging Program</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>20. Pre-Trial Services Program</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>21. Pre-Trial Referral-to-Treatment Protocol</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>22. Information Cards Provided by Commissioners</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>23. State's Attorney Is Engaged in the OPT</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>Corrections</b>																										
<b>24. Screening, Brief Intervention, and Referral to Treatment</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>25. Universal Substance-Use Screening During Intake</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>26. Pre-Trial Referral to Treatment</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>27. Drug-Treatment Programs While Incarcerated:</b>																										
Methadone - available for all inmates		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Buprenorphine - available for all inmates		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Naltrexone - available for all inmates		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Outpatient (1.0) or equivalent		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Intensive Outpatient (2.1) or equivalent		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>28. Day-Reporting Center</b>		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
<b>29. Facilitated Re-Entry Programs:</b>																										
Employment-Transition Support		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Naloxone Provided at Release		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Recovery-Housing Referral		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	
Treatment-Program Referral/Warm Hand-Off		■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	

Substantially Implemented
  Partially Implemented
  In Development
  Not Planned
  Not Applicable

OPT Program Inventory Fourth Calendar Quarter, 2023		Allegany	Anne Arundel	Baltimore City	Baltimore County	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester	
<b>Corrections (cont'd)</b>																										
30. Access to Local Re-Entry Programs for State Inmates																										
31. Organized Planning for HB 116																										
32. Department of Corrections Is Engaged in the OPT																										
<b>Parole and Probation</b>																										
33. Universal Screening for SUD at Intake																										
34. Protocol for Referral to Treatment																										
35. Protocol for Requesting a Special Condition																										
36. Treatment Monitoring Program																										
37. SUD Services On-Site at Parole & Probation Offices																										
38. Parole & Probation Is Engaged in the OPT																										
<b>Emergency Medical Services</b>																										
39. Post-Incident EMS Outreach after Overdose																										
40. Leave-Behind Information Cards																										
41. Leave-Behind Naloxone																										
42. Transport to Alternative Destination (Non-ED)																										
43. EMS Is Engaged in the OPT																										
<b>Police/Sheriff</b>																										
44. All Police Trained in Naloxone																										
45. All Police Carry Naloxone																										
46. Leave-Behind Information Cards																										
47. Post-Incident Police Outreach after Overdose																										
48. Community-Awareness SUD Programming																										
49. Organized Pre-Arrest SUD Diversion/Referral Program																										
50. Crisis Intervention Team (CIT) Trained Officers																										
51. Heroin/Overdose Coordinator																										
Use ODMAP																										
Receive Spike Alerts																										
52. Heroin Coordinator Is Engaged in the OPT																										
<b>Social Services</b>																										
53. SUD Screening and Referral Protocol at Enrollment:																										
SNAP (Food Stamps)																										
TCA (Temporary Cash Assistance)																										
Medicaid																										
54. Support Program for Exposed Newborns/Families																										
55. DSS Is Engaged in the OPT																										
<b>Hospitals in Jurisdiction</b>																										
56. Screening, Brief Intervention, & Referral to Treatment																										
Emergency Department																										
Inpatient Settings																										
57. Dedicated Behavioral Health/SUD Emergency Room																										
58. Dedicated SUD Inpatient Unit																										
59. Buprenorphine Induction																										
Emergency Department																										
Inpatient Settings																										

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		Hospitals in Jurisdiction (cont'd)																								
<b>60. Warm Hand-Off to SUD Providers/Services</b>																										
Emergency Department																										
Inpatient Settings																										
<b>61. Naloxone Distribution at Discharge</b>																										
<b>62. Peer Specialists on Site</b>																										
Emergency Department																										
Inpatient Settings																										
<b>63. Prescribing Guidelines for Staff</b>																										
<b>64. Prescribing Patterns Tracked</b>																										
<b>65. Hospital Is Engaged in the OPT</b>																										
<b>Education</b>																										
<b>66. Let's Start Talking Grade 3 -12 Prevention Education</b>																										
<b>67. Supplemental Drug-Awareness Education</b>																										
<b>68. Behavioral Health Professionals on Staff (Non-Sp. Ed.)</b>																										
<b>69. School Nurses Program:</b>																										
Mental Health First-Aid Training																										
Naloxone Available in Health Room																										
Assist with Prevention Education																										
<b>70. "Safe Place" Identified within the School</b>																										
<b>71. Mechanisms in Place to Identify/Serve Impacted Youth</b>																										
Services for Students Impacted by SUD at Home																										
Handle with Care Implemented																										
<b>72. School-Based Prevention Clubs (e.g., SADD)</b>																										
<b>73. Community-Awareness Programming (After School)</b>																										
<b>74. Department of Education Is Engaged in the OPT</b>																										
<b>Higher Education</b>																										
<b>75. Substance Misuse Information Campaigns for Students</b>																										
<b>76. Student Wellness/Recovery Center</b>																										
<b>77. Host SUD Events for Community</b>																										
<b>78. The Local College Is Engaged in the OPT</b>																										
<b>OPT</b>																										
<b>79. Organized in Manner Consistent with Governor's Order</b>																										
<b>80. OPT Meets at Least Bi-Monthly</b>																										
<b>81. Updated Strategic/Implementation Plan</b>																										
<b>82. Co-Chaired by Health Officer and Emergency Manager</b>																										
<b>83. Emergency Manager Is Cabinet-Level Officer</b>																										
<b>84. Elected Officials Participate Regularly in OPT Meetings</b>																										
<b>85. Dedicated SUD Programming Coordinator</b>																										

Substantially Implemented
  Partially Implemented
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**Note:** Maryland’s Office of Overdose Response evaluates and updates the program inventory on a regular basis, and the number of programs may change from quarter to quarter. We frequently add new programs that have been shown to be effective and, where appropriate, remove programs that no longer fit our criteria for inclusion due to the dynamic nature of the opioid crisis.

As of the third calendar quarter of 2023, awareness efforts regarding “211 press 1” were removed from the program inventory as the State of Maryland adopted the use of 988, the National Suicide & Crisis Lifeline, statewide.