Meeting Minutes

Monday, October 21, 2024 3pm-4pm

Welcome & Introductions

Secretary Keller welcomed the council and public to the last Opioid Restitution Fund Advisory Council meeting of 2024. She did roll call to ensure there was a quorum of members to conduct council business. Secretary Keller provided a brief update on the recent Request for Applications for Opioid Restitution Fund, sharing that award announcements will be made soon (though an exact date is not available at this time).

Discussion of Recommendations

The MOOR team will make the changes discussed during today's meeting and present the recommendations to the Governor and Lt. Governor by November 1st. This document will also be shared on the MOOR website.

Previously, the council voted to build upon the 2023 recommendations, with minor adjustments which are represented in **blue bold**. Purple indicates language that was discussed and approved to be added during the 10/21 meeting. Final recommendations will be posted to the MOOR website.

I. Improve Infrastructure for Opioid Initiatives

- Enhance interagency and interdepartmental data sharing.
- Improve strategic partnerships between state, local, and community organizations.
- Analyze emerging drug trends.

II. Promote Youth Resiliency

While youth substance use rates are not increasing, youth overdose rates in some areas of the state are increasing. Prevention programs that address social determinants of health are vital, as is education on harm reduction measures such as naloxone and fentanyl test strips.

- Raise awareness of adverse childhood experiences (aces) in schools and communities.
- Support and expand evidence-based prevention programming.

- Partner with schools to provide evidence-based substance use awareness training and support for parents (e.g., Night of Conversation, Threat in Plain Sight, etc.).
- Promote engagement of individuals in recovery with prevention programming.
- Support for families.
 - Work with family support and youth prevention coalitions to promote healthy coping mechanisms and address roots of community trauma, such as expansion of prevention clubhouses.

III. Increase Awareness of the Opioid Crisis

- Promote and Disseminate Regrounding our Response (RoR) Curriculum.
- Create accurate and data-driven messaging for the general public.
 - Consider specifying youth awareness & general awareness of available harm reduction, treatment and recovery services (approved by council).

IV. Expand Harm Reduction Services

- Overdose prevention sites.
- Expand targeted naloxone distribution.
- Expand targeted harm reduction outreach.

V. Promote Comprehensive Care Coordination

- Explore opportunities to expand mobile health clinics.
- Improve long-term intensive case management, including youth case management, as
 MD Recovery Net funding only applies to individuals who are 18 years and older.
- Re-entry services from carceral settings.

VI. Expand Maryland's Crisis Response System

- Continue to identify and fill gaps in crisis services, youth and family services.
- Improve Operational Efficacy of Crisis Response System.
- Ensure financial stability and sustainability.
- Youth and family services, including crisis services.

VII. Expand Access to Treatment for Opioid Use Disorder

- Promote buprenorphine MOUD Induction in emergency departments and through EMS.
- Improve primary care provider engagement.
- Expand MOUD to all correctional facilities (SUD treatment and services within detention centers).
- Youth substance use treatment, including funding for treatment for undocumented and uninsured youth.

• Transportation to treatment and recovery services.

VIII. Support Recovery Communities

- Promote opportunities to embed peers in community settings.
 - Reinforce and support the peer workforce, including by fully funding benefits for permanent positions.
- Develop and support recovery community infrastructure.
- Increase access to recovery and permanent supportive housing.
- Access to inclusive recovery resources, including for LGBTQIA+ populations.
- Support recovery community organizations.

IX. Process Recommendations

- Explore a Ryan White model for funding and address language in the statute to allow for any use outlined in Exhibit E.
- Approach funding with an equity lens (CBO vs larger orgs).
- Explore upfront funding.
- Explore ability for for-profit entities to access ORF funds.
- Continue to consider multi-year grants.

Council Discussion

Marcus requested written minutes be posted to the website, in addition to recordings. An update on the recent RFA was requested and provided. Award announcements will be made soon, though an exact date is not available.

Howard believes for profit and non-profit entities should be able to access ORF funds and provided the example that many OTPs are excluded from ORF funding otherwise. Carlos suggested that we look at what other states are doing around the issue of for-profit entities being awarded opioid settlement funds.

Public Comment

Members of the public shared insights, including:

- Individuals with Medicare are highly underserved, especially for case management services.
- Resources for fathers with children are lacking.
- Comments on excitement around the council considering adding MOUD initiation to the recommendations in place of naming buprenorphine specifically.
- The need for workforce development for peers and other behavioral health professionals.