Maryland's Office of
Overdose Response

Overdose Prevention Team

Substance Use Program Inventory

As of the Fourth Calendar Quarter, 2025

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Introduction

Pursuant to Executive Order 01.01.2023.21, Maryland's Office of Overdose Response works closely 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 work to enhance multidisciplinary collaboration at the local level. Each OPT is chaired by a representative from the local health department and has a designated co-chair from a community organization or another local government agency.

OPTs are required to meet at least quarterly and must include representatives from various agencies and organizations, including health, social services, education, public safety (e.g., law enforcement, fire service, and emergency services), harm reduction programs, recovery support programs, substance use treatment programs, community organizations, and faith-based organizations.

Every year, Maryland's Office of Overdose Response distributes $4 million in funding to OPTs through our Block Grant Program. This program helps to ensure that all of Maryland's 24 local jurisdictions receive a base level of funding to support overdose-related programs and initiatives. Funds may be used at the discretion of local partners for any purposes that support Maryland's overdose priority areas of *Prevention*, *Harm Reduction*, *Treatment*, *Recovery*, and *Public Safety*. A summary of block grant awards can be found at StopOverdose.maryland.gov/Grants.

About the Program Inventory

A central component of our work with our local partners involves sharing best practices. To do this, we track the implementation of local-level programs and initiatives that seek to reduce overdose-related morbidity and mortality. Maryland's Office of Overdose Response has identified 118 frequently implemented programs and services, which are detailed below by jurisdiction in our Substance Use Program Inventory. The Program Inventory uses self-reported OPT data, and responses range from "no programming planned" to "substantial programming in place." Interventions are categorized under Maryland's five overdose priority areas.

Please note that some programs may not be applicable in all jurisdictions. For example, programs related to higher education will not apply to jurisdictions without a college or university. As such, instances where programming is not applicable for a given jurisdiction are not color-coded. Additionally, persons reporting from each jurisdiction may not have received timely responses from the appropriate agency when completing this reporting, resulting in an N/A report.

Annual Qualitative Survey

Every year, Maryland's Office of Overdose Response collects qualitative input from OPTs in an annual survey. Through this survey, OPTs highlighted many positive outcomes from collaboration and identified common barriers, such as challenges in coordinating regular OPT meetings, program implementation, and ways our office could better support their efforts.

Positive Outcomes

OPTs shared many positive outcomes from local partner collaboration and programs that they were able to support through funding from our Block Grant Program (which is contingent on OPTs holding regular coordination meetings).

Programmatic Improvements: Many OPTs leveraged their meetings to identify opportunities to tailor programs to meet the specific needs of their communities and members.

- **Baltimore County** included presentations from local and state recipients of Opioid Restitution Fund (ORF) grants during its OPT meetings, allowing participants to learn about new and innovative opioid remediation efforts across Maryland. Participants shared that learning about these new resources benefited their programs.
- **Howard County** utilized its OPT to support a needs assessment project that assessed the availability of services across the continuum of care in the county. This project also helped to address service gaps by demographic group using direct feedback from community members.
- **Allegany County**'s OPT concentrated on strengthening partnerships with problem-solving courts, peer recovery specialists, and other key partners across the county.

Block Grant Funding: Many OPTs identified our Block Grant Program as a difference maker for implementing or expanding programs at the local level.

- Using funds from our Block Grant Program, **Somerset County** has been able to establish public naloxone vending machines.
- **St. Mary's County** used funding to connect residents to resources, honored lives lost, and reinforced person-first, compassionate messaging around substance use and mental health through various community events supported by the Going Purple Initiative.

Common Barriers

The barriers identified by our local partners varied from jurisdiction to jurisdiction based on unique needs and available resources. However, the most commonly identified challenges to OPT meetings were maintaining regular engagement in OPT meetings, attendance from certain groups (such as local community and faith-based organizations), and selecting content for the meetings.

Additionally, barriers to further implementation of programs outlined in the program inventory were highlighted.

Program Inventory Summary

As of the fourth calendar quarter of 2025, Maryland's local jurisdictions continued to make steady progress in implementing programs. As shown in Figure 1, below, 78 percent of programs were reported to be either partially or substantially implemented, while only nine 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. Figure 2, below, shows statewide implementation status by priority area, and Figure 3 shows a heat map depicting the

percentage of programs that are at least partially implemented by jurisdictions. Figure 4, on page 5, shows program implementation status by local jurisdiction.

Figure 1. Statewide Program Implementation

As of the Fourth Calendar Quarter, 2025

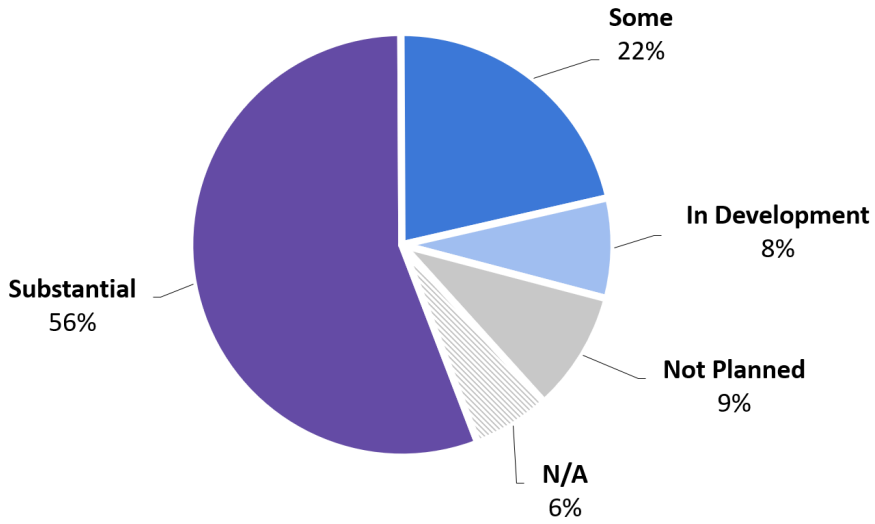
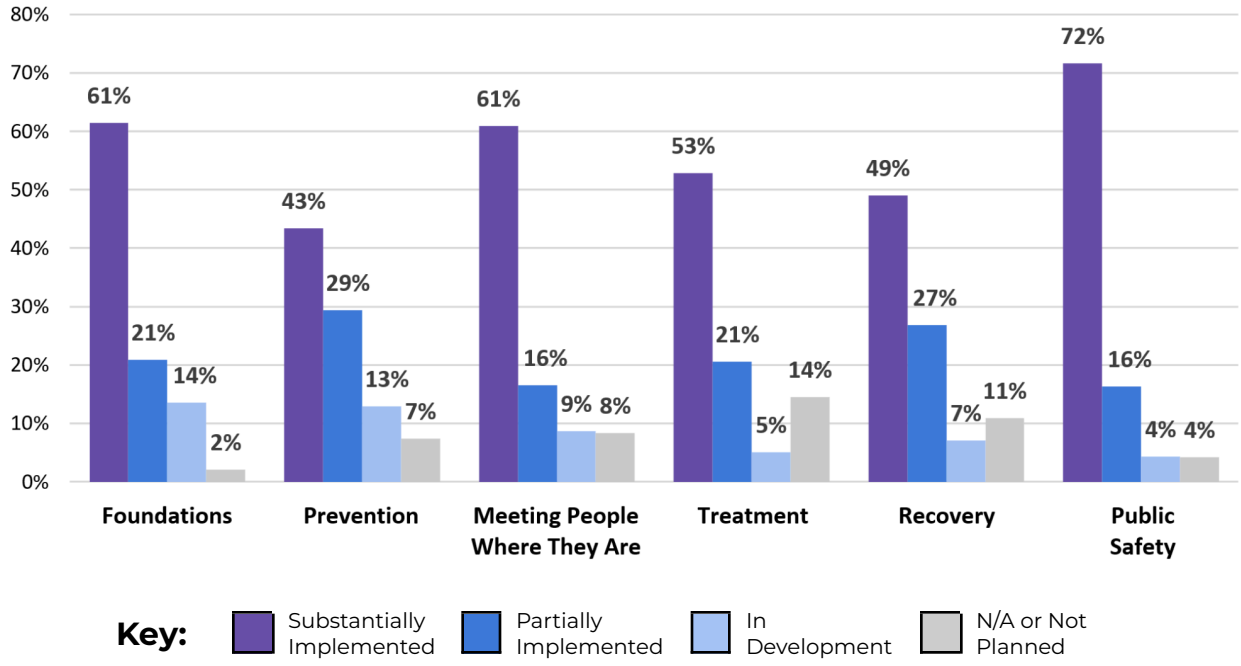


Figure 2. Statewide Program Implementation by Priority Area

As of the Fourth Calendar Quarter, 2025



Note about Key: Categories are presented from left to right for each corresponding priority area in Figure 2. In Figure 3, below, these categories are presented from left to right for each local jurisdiction.

Figure 3. Substantial & Partial Implementation Status by Local Jurisdiction

As of the Fourth Calendar Quarter, 2025

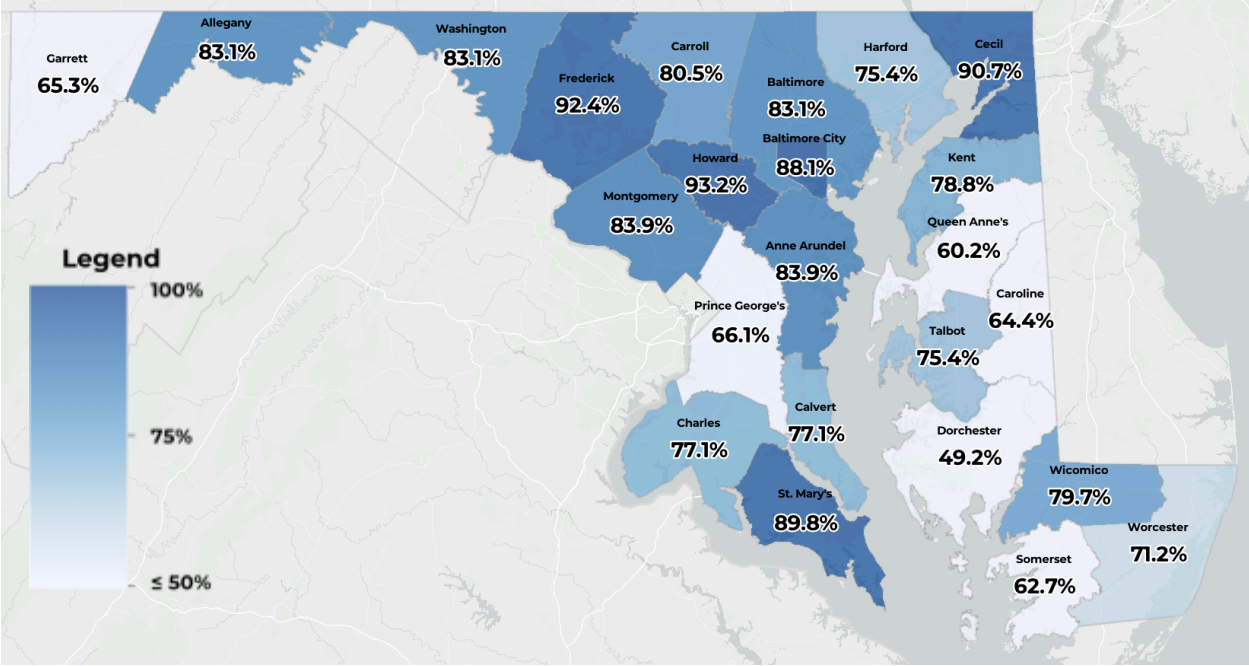


Figure 4. Total Program Implementation by Local Jurisdiction

As of the Fourth Calendar Quarter, 2025

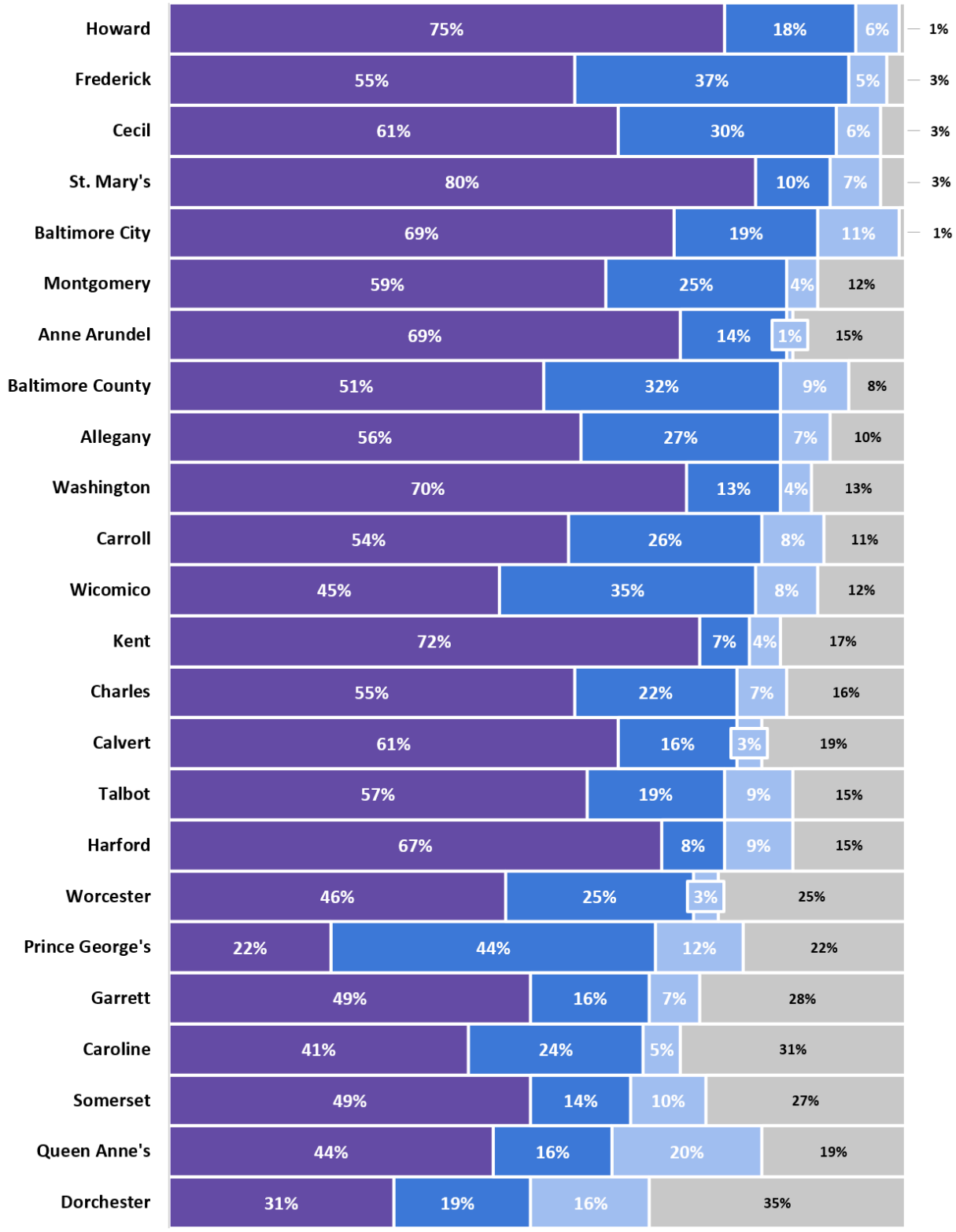


Table 1. OPT Program Inventory

As of the Fourth Calendar Quarter, 2025

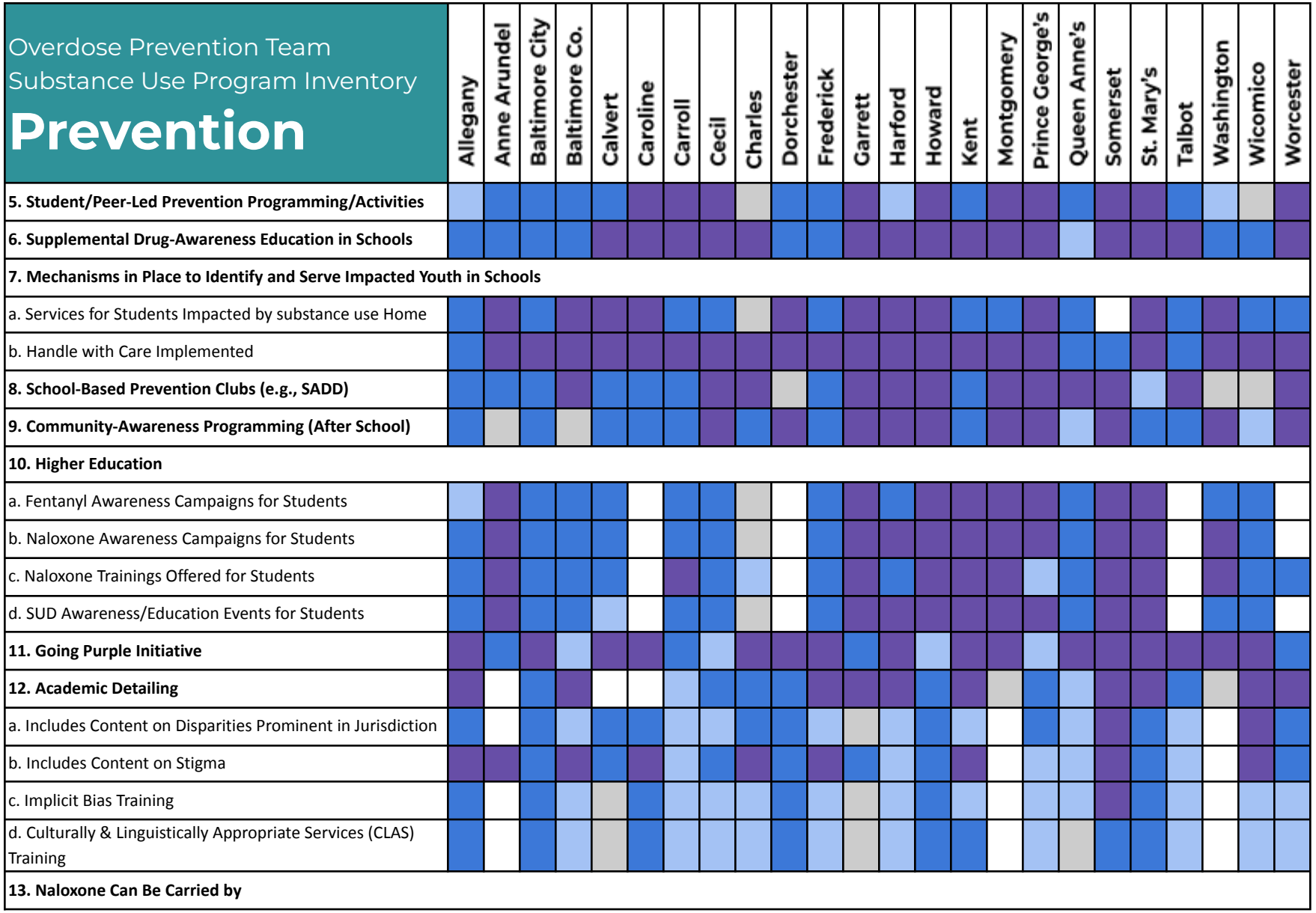
Note: Maryland's Office of Overdose Response evaluates and updates the program inventory on a regular basis, and the number of programs may change. We frequently add new programs that have been shown to be effective and, where appropriate, remove programs that no longer fit our criteria for inclusion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

Overdose Prevention Team Substance Use Program Inventory **Foundations**	Allegany	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
1. OPT Strategic Plan Updated Within Last 3 years	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
2. Health Dept. is Involved in Opioid Restitution Fund (ORF) Local Abatement Plan with Local Govt.	■	■	□	■	■	■	■	■	□	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
3. OPT Includes Local Racial Disparities in Planning	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■
4. OPT Includes Local Age Disparities in Planning	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■	■

Table Key: ■ Substantially Implemented ■ Partially Implemented ■ In Development ■ Not Planned □ Not Applicable

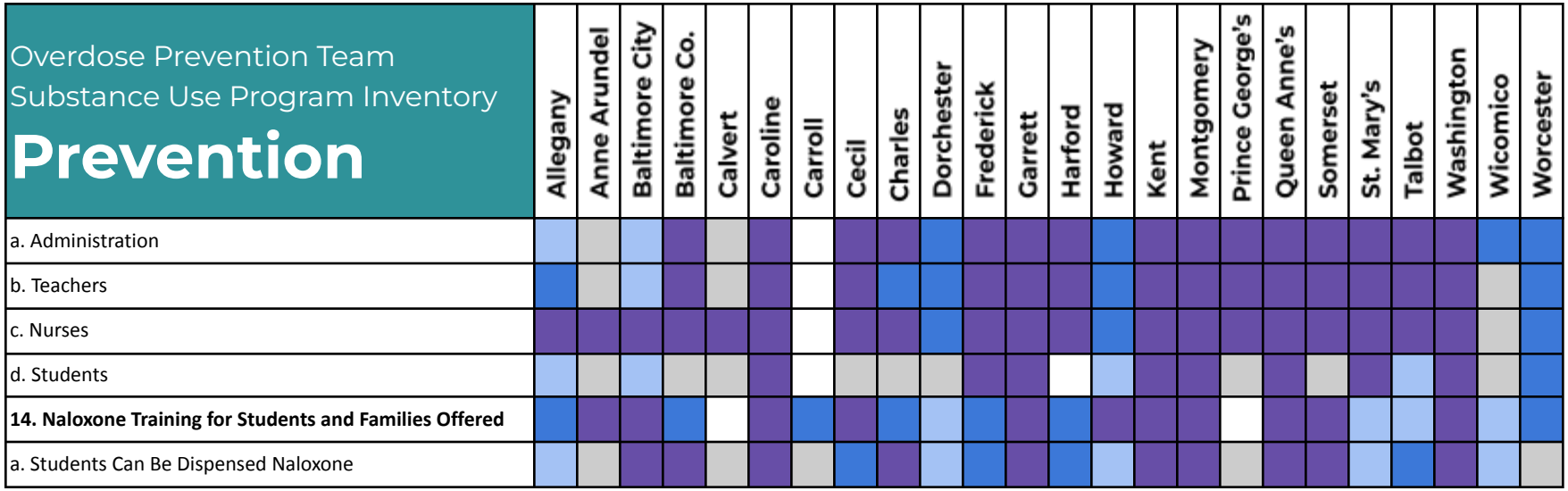
Overdose Prevention Team
Substance Use Program Inventory

Prevention



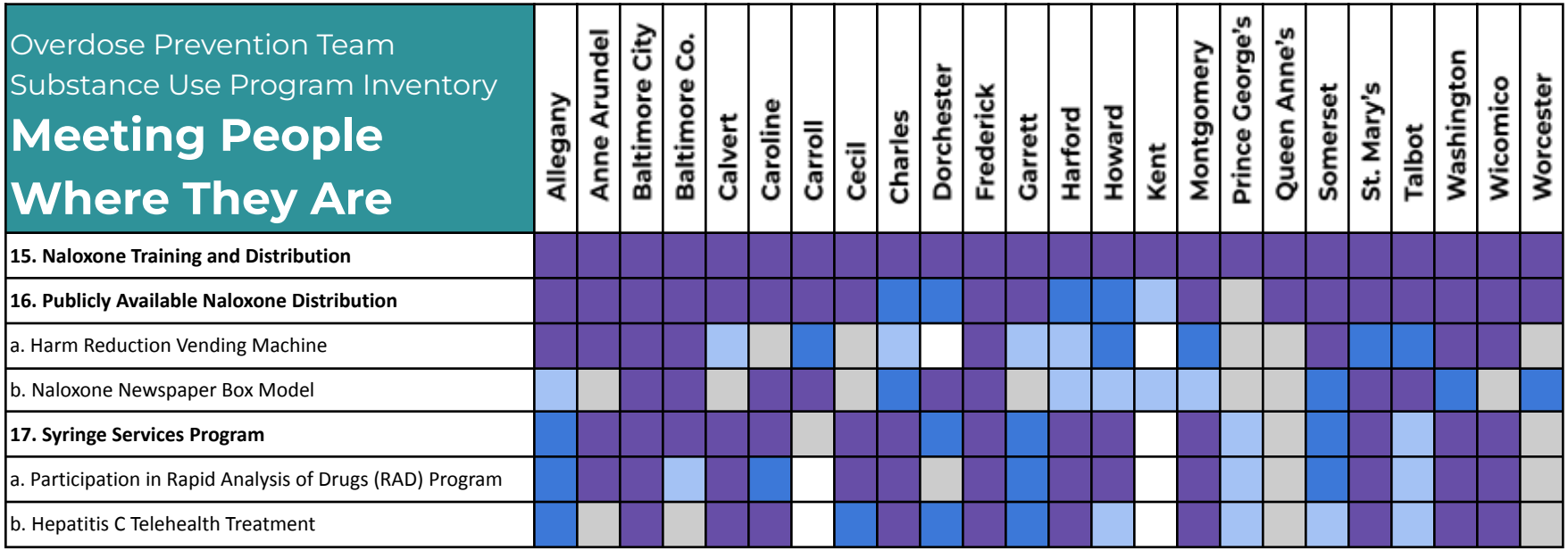
Overdose Prevention Team
Substance Use Program Inventory

Prevention



Overdose Prevention Team
Substance Use Program Inventory

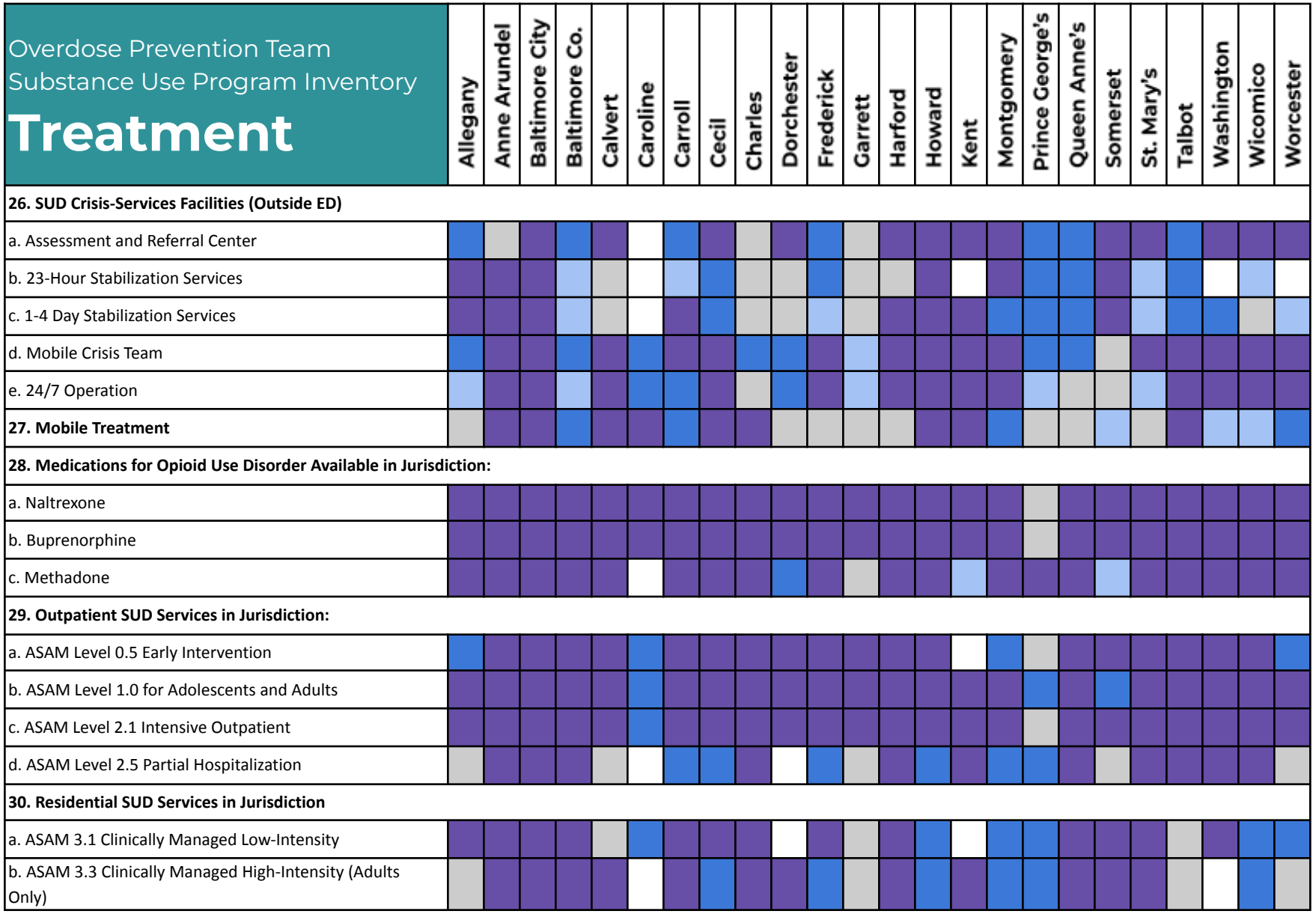
Meeting People Where They Are



Overdose Prevention Team Substance Use Program Inventory **Meeting People Where They Are**	Allegany	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
c. Case Management																								
d. Other Health Services																								
18. Fentanyl Test Strip Distribution																								
19. Xylazine Test Strip Distribution																								
20. Wound-Care																								
a. Wound Care Supplies Distributed																								
b. Hands on Wound Care Available																								
21. Street Outreach Program																								
22. STOP Act Compliance																								
a. Hospital																								
b. Local Correctional Facility																								
c. Probation																								
d. Homeless Services																								
e. Outpatient Behavioral Health Providers																								
23. Emergency Medical Services (EMS) Leave Behind Naloxone																								
24. EMS Transport to Alternative Destination (Non-ED)																								
25. Non-Fatal Post-Overdose Outreach																								

Overdose Prevention Team
Substance Use Program Inventory

Treatment



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Substance Use Program Inventory

Treatment

	Allegany	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
c. ASAM 3.5 Clinically Managed High-Intensity (Adults & Adolescents)																								
d. ASAM 3.7 Medically Monitored Intensive Inpatient																								
e. ASAM 3.7 Medically Monitored Inpatient Withdrawal Management																								
31. A Treatment Facility in Jurisdiction Accepts People with Wounds																								
32. EMS Field Buprenorphine Induction																								
33. SUD Screening and Referral Protocol at Medicaid Enrollment																								
34. Hospital(s)																								
a. Screening, Brief Intervention, & Referral to Treatment in:																								
i. Emergency Department																								
ii. Inpatient Settings																								
b. Dedicated SUD Inpatient Unit																								
c. Buprenorphine Induction in:																								
i. Emergency Department																								
ii. Inpatient Settings																								
d. Warm Hand-Off to SUD Providers/Services in:																								
i. Emergency Department																								
ii. Inpatient Settings																								
e. Naloxone Distribution at Discharge																								

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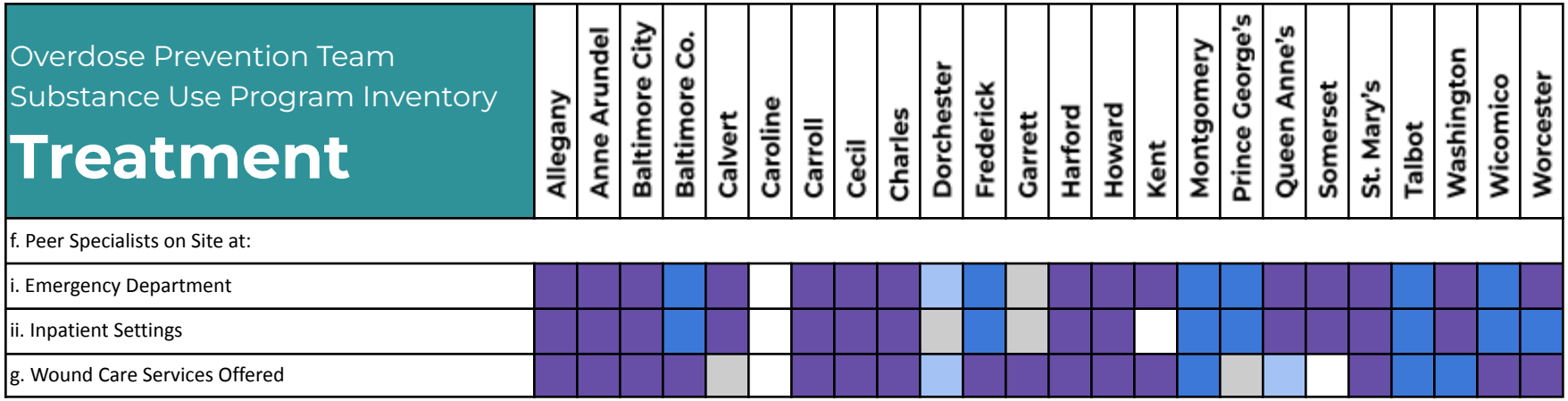
Substance Use Program Inventory

Treatment



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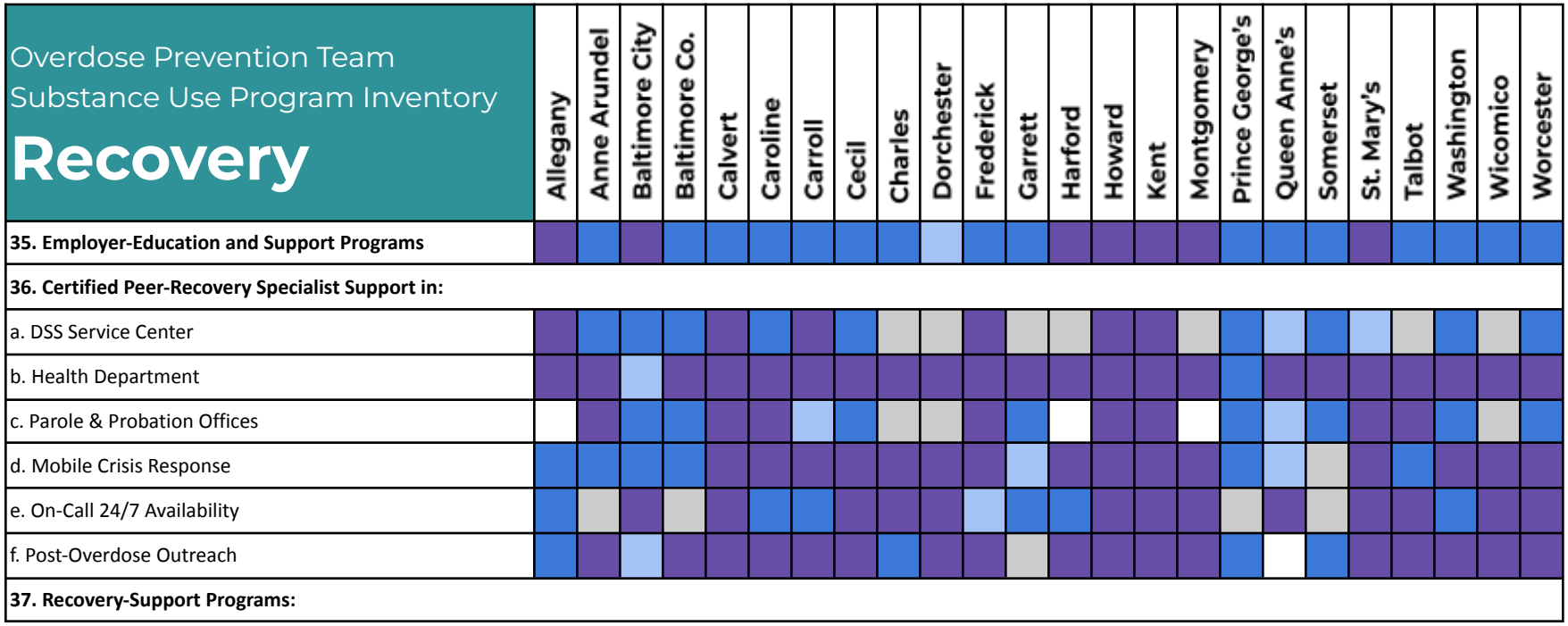
Recovery



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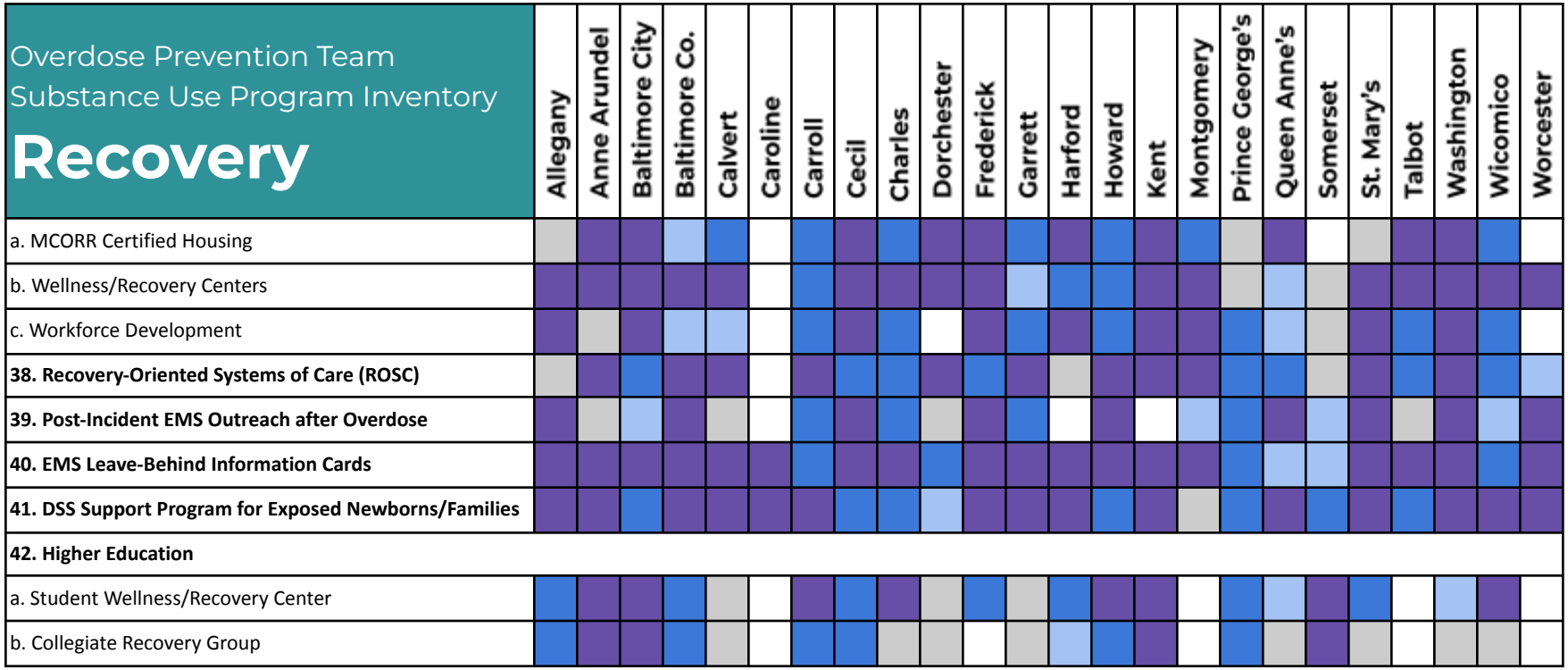

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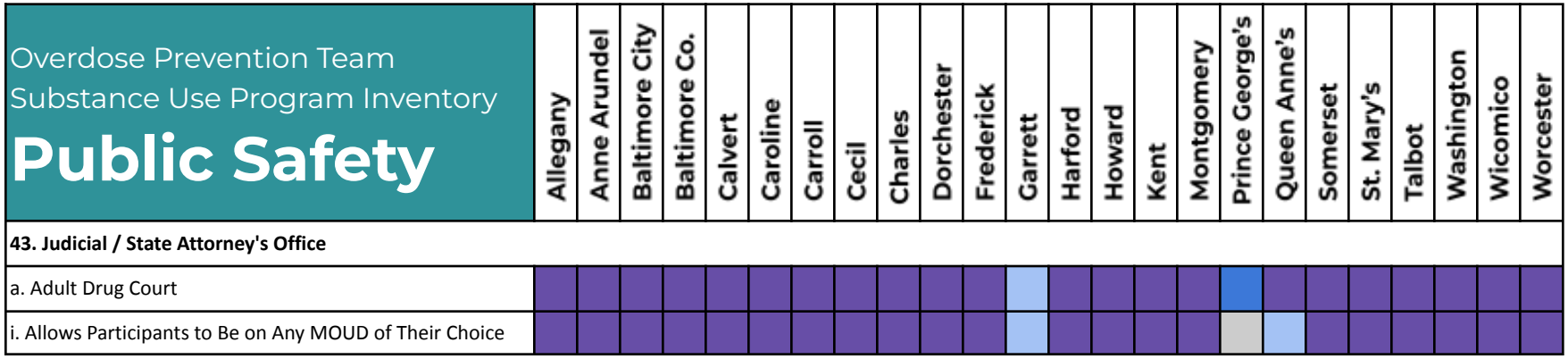
Public Safety



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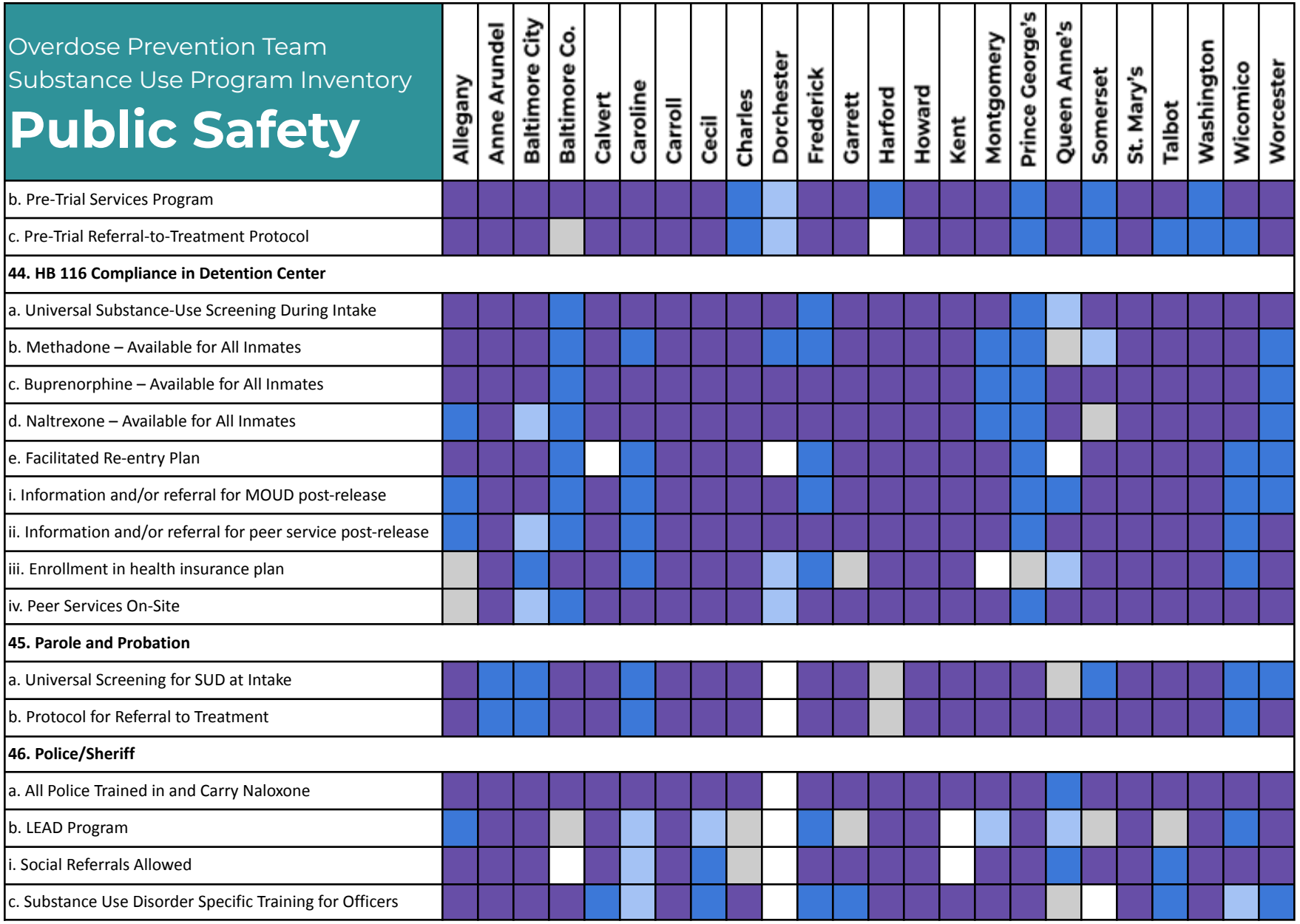

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