
**OPIOID OPERATIONAL COMMAND CENTER
ORF Targeted Abatement Grant Program
Local Abatement Plan**

IMPORTANT NOTE: Please review the instructions provided in the Call for Proposals document prior to completing this form.
The application package should be submitted via Smartsheet Form to the link below.
<https://app.smartsheet.com/b/form/7abd36feaa304e9dad2e776c198e857f>

Jurisdiction/subdivision:

Point of Contact:

First/Last Name: Celene Steckel
Position: Director, Citizen Services

Phone: 410-386-3611
Email: csteckel@carrollcountymd.gov

Mailing Address:
10 Distillery Drive
Westminster, MD 21157

Total Allocated Funds \$1,159,591.76

Primary [State Finance and Procurement Article 7-331/Chapter 270](#) Legislative Provision Local Abatement Plan will fulfill (click here to review these legislative bills):

Please select the ORF provision which most accurately represent the primary focus/foci of the local abatement plan (you may identify more than one).

- (i) Improving access to medications proven to prevent or reverse an overdose;
- (ii) Supporting peer support specialists and screening, brief intervention, and referral to treatment services for hospitals, correctional facilities, and other high-risk populations;
- (iii) Increasing access to medications that support recovery from substance use disorders;
- (iv) Expanding the Heroin Coordinator Program, including for administrative expenses;
- (v) Expanding access to crisis beds and residential treatment services for adults and minors;
- (vi) Expanding and establishing safe stations, mobile crisis response systems, and crisis stabilization centers;
- (vii) Supporting the behavioral health crisis hotline;
- (viii) Organizing primary and secondary school education campaigns to prevent opioid use, including for administrative expenses;
- (ix) Enforcing the laws regarding opioid prescriptions and sales, including for administrative expenses;
- (x) Research regarding and training for substance use treatment and overdose prevention, including for administrative expenses; and
- (xi) Supporting and expanding other evidence-based interventions for overdose prevention and substance use treatment

I. PLAN SUMMARY *The plan summary must provide a clear summary of the projects to be funded and the activities that will be conducted in service of the Local Abatement Plan, and clearly tie to the provisions of the legislation identified above.*

Carroll County has established the required Local Abatement Fund as a special revenue fund within our accounting system. All settlement revenue including interest earned will be tracked separately and expenses will be restricted to the approved uses. Carroll County surveyed partner agencies and held listening sessions to develop the priorities for the Local Abatement Plan. Partner agencies included the Carroll County Health Department and Behavioral Health Authority, the Department of Social Services, the Carroll County Sheriff, the Carroll County State’s Attorney, Carroll County Public Schools, treatment providers, recovery support providers, community and faith-based organizations, harm reduction programs and municipalities.

The priorities for funding were presented, discussed, and approved by both the Carroll County Senior Opioid Policy Group and the Board of Carroll County Commissioners. Carroll County will utilize the Local Abatement Plan to fund MAT services (ORF Provision iii) in the Carroll County Detention Center. There is currently no local funding budgeted for MAT services at the Detention Center. MAT services have been recognized as an evidenced-based treatment, when combined with counseling and when patients have access to all three FDA approved medications (methadone, buprenorphine and naltrexone). The Carroll County Detention Center has adopted these principles, fully implementing the “whole-patient” approach to treating those with an opioid use disorder.

The Carroll County Detention Center (CCDC) launched the MAT program per the requirements of HB116 in January 2023 utilizing one time grant funding. This service is currently not included in the CCDC operating budget. The CCDC has a history of working with a variety of community partners to support incarcerated individuals while incarcerated and at release and the MAT program is no exception. With an average census of approximately 150 incarcerated individuals, nearly 1/3 are currently enrolled in MAT services. This includes incarcerated individuals that were being treated prior to incarceration as well as those who required induction after incarceration.

Goals include:

1. Qualified medical providers conduct assessment of substance use status of each incarcerated individual at intake and determine appropriate treatment plan
2. Qualified medical provider administers medications to incarcerated individuals for the treatment of OUD to include all FDA- approved medications
3. Behavioral health providers implement needed mental health services including access to peer recovery specialists
4. Continue safe operations within the CCDC while offering the services associated with MAT
5. Plan for re-entry prior to the release of an incarcerated individual to include access to medication, peer recovery specialists, behavioral health therapies and enrollment in health insurance

II. PLAN PROBLEM STATEMENT *The problem statement section describes why the plan is needed and identifies the most significant issues, problems, trends, or opportunities that will be addressed by the Local Abatement Plan.*

Since 2016 Carroll County has been severely impacted by the opioid crisis. According to data collected by the local Health Department, in 2018, fatal overdoses related to opioids hit an all-time high at 105. Over 700 non-fatal overdoses were reported. When analyzing demographics, more males than females in Carroll experience both fatal and non-fatal overdoses. Additionally, 71.5% of all opioid related non-fatal overdoses occurred in those aged 25-44. Males aged 25-44 represent 59% of the population inside the Carroll County Detention Center.

However, since 2020, both non-fatal and fatal opioid overdoses have decreased drastically. Fatal overdoses declined from 94 in 2020 to a low of 34 in 2022. Contributing factors include efforts by the Health Dept., Law Enforcement, and community partners to aggressively distribute naloxone, provide harm reduction strategies, add Peer Recovery Support staff. Walk-in substance use assessment services and outpatient treatment (including MAT), and prevention campaigns in schools have also increased.

While the impetus for the establishment of MAT in the CCDC was HB116, the Sheriff and staff recognize the critical and lifesaving benefits of offering both continuing OUD treatment and initiating such treatment. As noted in *The Impact of The Opioid Crisis On U.S State Prison System* “the risk of death from opioid overdose is particularly high in the immediate period following release from prison” (1). The same article also details the long-term benefits, including a reduction in recidivism for those provide with MAT while incarcerated. With 1/3 of the current population in the CCDC receiving MAT services, it is clear that both the need is high, and this program can save lives. In 2023, 230 incarcerated individuals participated in MAT in the Carroll County Detention Center; the average time in the program varied widely depending on the nature of the sentence.

Three of the largest barriers to the implementation of the MAT program to date were the required sworn personnel, adequate secure space and the additional cost associated with medical services, required behavioral health services and medications. The CCDC, like many correctional facilities across the state, face barriers to fully staffing regular operations, so adding the labor-intensive requirements of a MAT program has been a challenge. For example, Incarcerated individuals need to be safely escorted by sworn correctional officers to and from services and monitored during services. The second obstacle is the lack of space in the facility and the inadequate space in the medical suite. Finally, with a significant percentage of incarcerated individuals requiring MAT, about 1/3 of the population, the cost of the required and behavioral health services combined with the increasing costs of medications is well beyond what the CCDC or the County can absorb.

Despite those challenges the CCDC is providing services to the majority of those incarcerated who qualify. Medical contracts have been awarded, equipment purchased, and internal protocols established. In addition, partnerships have been established with a community behavioral health provider to establish relationships prior to release and continue to deliver the medical and behavioral services needed at release to be successful in both their recovery and reintegration into the community. While facility and sworn staff constraints require a waitlist at times – the CCDC has worked diligently to keep those waiting for service to a minimum.

The Local Abatement Plan will continue the work of the one-time, start-up grants secured by the Sheriff's Office and fund:

- Overtime costs for CCDC Correctional Officers to escort incarcerated individuals to and from medical and behavioral health treatment
- Salary and fringe for PT MAT Program Coordinator – scheduling, tracking, ordering, reporting required by the MAT program
- Medical contract for oversight of the program, nursing, assessments, medication administration, medication costs and behavioral health services
- Supplies and equipment
- Facilities modifications as needed (i.e. lighting, flooring)

1) [The impact of the opioid crisis on U.S. state prison systems | Health & Justice | Full Text \(biomedcentral.com\)](#)

III. PLAN GOALS AND OBJECTIVES *Program Goals and Objectives should define the central aim and principal goals of the Local Abatement Plan that will be addressed by the project activities, and clearly tie to the provisions of the legislation identified.*

Goal 1: Provide MAT to all eligible incarcerated individuals at the Carroll County Detention Center

Objective 1: From July 1, 2024 to June 30, 2030, assess all incarcerated individuals at intake for OUD including need for MAT continuation or induction

Objective 2: From July 1, 2024 to June 30, 2030, refer all eligible incarcerated individuals to MAT services to be provided during incarceration.

Objective 3: From July 1, 2024 to June 30, 2030, in preparation for release from incarceration, provide warm handoff and connections to community-based services for all incarcerated individuals provided with MAT during incarceration.

IV. PLAN PROGRAM MEASUREMENT/PERFORMANCE INDICATORS

What you will use to measure (a) the effectiveness of the plan's support of the selected Goal/Strategy, (b) how it fills a gap in the region, and (c) how it serves its intended demographic. These measures may be quantitative (numeric) and qualitative (descriptive). These performance measures must be reported on annually, by project and ORF provision.

	Measure of Effectiveness	How it fills a gap?	How it serves the intended demographic
<p>Goal 1: Provide MAT to all eligible incarcerated individuals at the Carroll County Detention Center</p>	<p>% of incarcerated individuals who are assessed for MAT</p>	<p>Medical services are provided through the Detention Center without any insurance reimbursement – without this source of funding there is no local funding available to provide MAT to incarcerated individuals.</p>	<p>1/3 of CCDC Incarcerated individuals were eligible for MAT in the first year of operation at the Carroll County Detention Center – a rate 3 times the prevalence of OUD in MD (1)</p>
	<p>% of qualified incarcerated individuals who are provided continuation MAT</p>		
	<p>% of qualified incarcerated individuals who are provided induction MAT</p>		
	<p>% of incarcerated individuals in the MAT program provided behavioral health services</p>		
	<p>% of incarcerated individuals in MAT connected to on-going behavioral health services prior to release</p>		
<p>% of MAT participants escorted to and from MAT services</p>			

V. PLAN TIMELINE

Enter project information as necessary

Goal(s)	Key tasks/activities	Person(s) responsible	Progress Measurement	Begin date	End date
<p><i>Goal 1: Provide MAT to all eligible incarcerated individuals at the Carroll County Detention Center</i></p>	<p><i>1. Assess all incarcerated individuals at intake for OUD and eligibility for MAT using certified medical professional</i></p> <p><i>2. Contract with medical provider to administer assessments, MAT treatment and medications</i></p> <p><i>3. Contract with medical provider to provide supportive behavioral health services</i></p> <p><i>4. Establish partnership with Behavioral Health provider to connect incarcerated individuals with services and staff prior to release</i></p> <p><i>5. Ensure safety and security within the Detention Center using established protocols and</i></p>	<p><i>Carroll County Sheriff</i></p>	<p><i>1. % of incarcerated individuals who are assessed</i></p> <p><i>2. % of qualified incarcerated individuals who are provided continuation MAT</i></p> <p><i>3. % of qualified incarcerated individuals who are provided induction MAT</i></p> <p><i>4. % of incarcerated individuals in the MAT program provided behavioral health services</i></p> <p><i>5. % of incarcerated individuals in MAT connected to behavioral health services prior to release</i></p> <p><i>5. % of MAT participants escorted to and from MAT services</i></p>	<p><i>July 1, 2024</i></p>	<p><i>June 30, 2030</i></p>

APPENDIX I

	<i>correctional officers assigned to the MAT program</i>				
--	--	--	--	--	--

VI. SPEND PLAN DESCRIPTION *Detailed explanation of planned expenses*

Description	Annual cost
Personnel	
Correctional Officers: Supervision and escort of incarcerated individuals to and from MAT medical and behavioral health services. Overtime cost for 93 hours per week at an average hourly OT wage of \$46.11 plus payroll taxes of 8%	\$240,826
Part Time MAT Program Coordinator 25/hrs. per week at \$25/hour plus payroll taxes of 8%	\$35,100
Contractual	
Medical Contract – Nursing: 1 FT and 1 half time position required to cover 8 hour daily shifts. Salary plus payroll taxes	\$178,588
Medical Contract - Per Diem: \$8/day per incarcerated individual in MAT	\$165,000
Medication (Methadone)	\$125,000
Other MAT medications	\$20,000
Medical Disposal	\$5,000
Equipment	
Computer/Monitor/Phone for MAT Program Coordinator (one time)	\$5,000
Equipment Replacement: Storage; Carts; Medication Safes	\$30,000
Printer Lease/Fees	\$2,500
Supplies	
Medical Supplies	\$10,000
Bottled Water	\$3,000
Office Supplies	\$1,000
Total	\$821,014

APPENDIX I

To the best of my knowledge, I certify that all the information provided herein is true and correct.

IX. AUTHORIZED OFFICIAL SIGNATURE: Kenneth A. Kiler Date: 2/29/2024
Printed Name: Kenneth Kiler
Title: President, Board of Carroll County Commissioners

REVIEWED BY: Timothy A. Dign
COUNTY ATTORNEY'S OFFICE FOR
CARROLL COUNTY
DATE: 2-29-24

X. ADDITIONAL SIGNATURES

The signatures below serve to convey the coordination of other local entities or government partners involved in the local abatement plan. Additional signatures should be added as necessary

Signature: Susan M. Doyle, RN
Printed Name: Susan M. Doyle, RN
Title: Carroll County Health Officer

Signature: [Handwritten Signature]
Printed Name: Sheriff Jim DeWees
Title: Sheriff, Carroll County Sheriff's Office

Signature: Valerie D. Hawkins
Printed Name: Valerie Hawkins
Title: Emergency Manager
Director, Carroll County Department of Public Safety
Co-Chair, Carroll County Senior Opioid Policy Group

Signature: [Handwritten Signature]
Printed Name: Celene Steckel
Title: Director, Carroll County Department of Citizen Services

Signature: [Handwritten Signature]
Email: vhawkins@carrollcountymd.gov

Signature: Susan M. Doyle
Susan M. Doyle (Feb 28, 2024 16:17 EST)
Email: sue.doyle@maryland.gov