

Attachment 1

Opioid Treatment Program Quality Improvement Workgroup Charter Document April 26, 2016

Name of the Working Group: Opioid Treatment Program (OTP) Quality Improvement Workgroup

Background Information/Context for Group Formation:

In early 2014, the Department was contacted regarding concerns about the location of opioid treatment programs in the central Baltimore City area. From this early engagement, the Department began meeting with community members and members of the General Assembly to further discuss their concerns about opioid treatment programs. Following this, the Department presented at a legislative briefing on February 2, 2016 before the Health and Government Operations Committee. The briefing included the Department's initial recommendations of strategies to address the application process and improve the quality of care of opioid treatment programs (OTPs).

At the request of Delegate Hammen during the legislative briefing, the Department of Health and Mental Hygiene created an *Opioid Treatment Program Work Plan*, which outlined the Department's plan and timeline for implementing each strategy. While the Department has been primarily strategizing with interested parties in Baltimore City, the work plan is envisioned to have a statewide impact in several strategic areas.

There are two primary areas within this work plan that are identified as priorities and need the expert guidance and input of the Opioid Treatment Program (OTP) Quality Improvement Workgroup: managing a large volume of patients and improving quality of care. The remainder of the work plan activities will be reviewed by the workgroup but, in the interest of time, the workgroup will focus on the two priority areas.

Purpose of the Working Group:

The Opioid Treatment Program (OTP) Quality Improvement Workgroup was created to assist BHA with implementing the *Opioid Treatment Program Work Plan*. There is a focus on two priority areas: managing patient volume and developing quality of care standards intended to improve care provided by OTPs. Other areas to be addressed are: role of the Local Addictions Authority (LAA) with program locations and audits, and improving counselor competence.

Specific tasks for the Working Group:

1. Creation of criteria for new programs related to service capacity.
2. Creation of criteria for existing programs related to service capacity considerations and volume.
3. Creation of quality of care standards and/or regulations for OTPs.
4. Review and provide feedback on additional *Opioid Treatment Work Plan* activities (role of LAA in program locations and audits, and improving counselor competence).

Intended Outcomes:

Development of a set of criteria, regulations, and/or standards that will assist the jurisdiction and OTPs with addressing issues related to patient volume; improving the quality of care provided by OTPs; re-defining the role of the Local Addictions Authority in aligning new service providers with geographic areas of need and with OTP oversight; and with determining ways to improve counselor competence.

Benefits of this Process to Key Stakeholders/Stakeholder Groups:

Enhanced service delivery will be beneficial to service recipients and result in improved relationships with the surrounding community via addressing expressed concerns.

OTP Quality Improvement Workgroup Process Plan/Phases of Work:

Work Timeline	Task/Activity
Kickoff Meeting- April 26 th , 2016	<ul style="list-style-type: none"> • Introduce members; • Review Charter Document for OTP Quality Improvement Workgroup; • Review tasks, timeline and meeting schedule • Determine mechanisms for group communication between meetings • Assign tasks for next meetings
May-July, 2016	Determine set of criteria for new and existing programs related to managing a high volume of patients <ul style="list-style-type: none"> • Review and discuss promising/other states practice information • Discuss parameters related to establishing criteria • Review and finalize draft suggestions for criteria for <i>existing programs</i> • Review and finalize draft suggestions for criteria for <i>new programs</i>
August, 2016	Review progress on <i>Opioid Treatment Work Plan (OTPWP)</i>
September- December, 2016	Develop recommendations for quality of care standards and/or regulations <ul style="list-style-type: none"> • Create list of areas for quality of care improvements • Draft and finalize standards and/or regulations within each agreed upon area

Legislative Reports Due:

- First Interim Report – July 1, 2016
- Second Interim Report – October 1, 2016
- Final Report – January 1, 2017

To Whom is the Working Group Accountable for its Results:

Deputy Secretary, Department of Health and Mental Hygiene

Scope and Constraints of the Workgroup’s Authority:

- Scope of BHA Authority and Behavioral Health Regulations
- Code of Federal Regulations; Confidentiality & OTPs (CFR 42 Part 2), (CFR 42 Part 8)
- DEA Regulations
- Requirement for ADA compliance
- Law enforcement issues
- Zoning laws

Workgroup Member Roles and Responsibilities:

- Attend meetings (Substitutes can be asked to attend in instances when the invited member has a scheduling conflict.)
- Read preparation materials in advance of the planning meetings and complete assignments as requested.
- Provide subject matter expertise to inform DHMH decision making process. Final decisions are determined by the Department.

Stakeholder Workgroup Membership

Kathleen Rebert-Franklin, Chair	Behavioral Health Administration (BHA)
Laura Burns-Heffner, Staff	BHA
Gayle Jordon-Randolph	Department of Health and Mental Hygiene (DHMH)
Christina Trenton	BHA
Barry Page	BHA
Frank Dyson	BHA
Margie Donohue	BHA
Rachael Faulkner	BHA
Rebecca Frechard	MA
Dr. Joseph Adams	Hamden Health Services, MATOD
Minu Aghevli	VA Maryland Health Care System, MATOD
Ray Aramelli	Serenity, MATOD
Howard Ashkin	MedMark, MATOD
Wendy Atkins	Advocate
Dr. Robert Brooner	JH Bayview, MATOD
Marian Currens	CAM, MATOD
Sarah Drennan	Frederick county BBH
Jessica Formicola	Sinai Hospital, MATOD
Dr. Jim Gandotra	Johns Hopkins/Bayview
Christi Halpin	MD Coalition
Darrell Hodge	Advocate
Dr. Babak Imanoel	AA Co. Addictions, Behavioral Health and Northern Parkway Treatment, MATOD
Sister Yeshyah B. Israel	Pimlico Merchants Association, Inc.
Nicole Jones	Advocate
Dana Madden	JH Bayview, MATOD
Nicole McCleaf	Serenity, MATOD
Joe McCray	JH Broadway Center, MATOD
Alan Mlinarchik	Central Baltimore Partnership
Dr. Yngvild Olsen	IBR Reach, MATOD
Jayne Severn	On Our Own MD
Ryan Smith	BHSB (LAA)
Joan Sperlein	IBR Reach, MATOD
Dr. Ken Stoller	JH Broadway Center, MATOD
Dr. Mishka Terplan	BHSB, MATOD
Nancy Turner	Serenity, MATOD

Mary Viggiani	Baltimore Co. BBH (LAA)
Barbara Wahl	Concerted Care Group, MATOD
Vickie Walters	IBR Reach, MATOD
Chuck Watson	BD Health Services, MATOD
Adam Winepol	Advocate
David Zhitnitsky	Advocate