

Carroll County, Maryland
Strategic Plan for Alcohol and Drug Abuse
For July 2011 to June 2013

Vision: We envision a Carroll County community where everyone has the tools for living a healthy and effective life, free from the disabling effects of mental illness and addictions.

Mission: To prevent and reduce the impact of behavioral health and addiction's disorders through increased community awareness, public education, enhanced access to quality treatment and involvement in promoting a healthy lifestyle for the citizens of Carroll County.

Priorities:

- a. Promote a system of integrated care where prevention, screening and treatment of substance abuse and mental illness are common practice across the life span.
- b. Educate and assist families in Carroll County to live healthy and drug free lives.

Goal #1: Promote a System of Integrated Care Where Prevention, Screening and Treatment of Substance Abuse and Mental Illness are Common Practice Across the Life Span.

Objective # 1.1: Collaborate with other agencies and service providers to encourage the development of mechanisms to promote integrated healthcare.

Strategy # 1.1.A: The Addictions Bureau and CSA will partner to increase the number of providers that are dual diagnosis capable or dual diagnosis enhanced.

Action Plan: Receive training and consultation on implementation of the Comprehensive Continuous Integrated Systems of Care (CCISC) model and Recovery Oriented Systems of Care model. Utilize the University of Maryland for technical assistance and consultation throughout the process.

Strategy # 1.1.B: Conduct outreach to Primary Care Physician providers within the county.

Action Plan: The Addictions Bureau and CSA will provide resource directories and information on recognition of mental health and substance use disorder symptoms and services available for treatment and support to Primary Care Physician offices.

Strategy # 1.1.C: Promote screening for depression in pregnant women and appropriate referral to treatment.

Action Plan: The Addiction Bureau and CSA will continue to chair the monthly SART (screening, assessment, referral & treatment) Workgroup meetings and will assist with coordinating timely access to treatment for pregnant women.

Progress: The Addictions Bureau and CSA has continued to co-chair the local steering committee for expanding dual diagnosis capability. With consultation from the University of Maryland's Evidence-Based Practice Center, the committee has completed a system-wide assessment of dual diagnosis capability and identified two areas for system level improvement: welcoming and accessibility. The member agencies have each identified a Change Agent and a countywide Change Agent Team has been established. Training for Change Agents and Steering Committee members was provided by NIATx through their Change Leader Academy.

The CSA developed and distributed a survey to Primary Care Physicians to ascertain their level of comfort and interest in providing mental health screening, resources and information to patients presenting for primary care. Only two out of nearly 100 physicians contacted completed the survey. Of the respondents, only one was interested in additional information from the CSA. Literature, depression screening tools and resource information was provided to the office that responded favorably for this material. The Addiction Bureau and CSA will continue to make efforts to outreach primary care physicians to provide information on mental health resources within the community. Access Carroll, the local free health clinic for uninsured and underinsured individuals does participate on several mental health and substance abuse related committees including the BHAAC, Recovery Services Steering Committee, Criminal Justice Diversion Workgroup and the SOAR planning committee. Access Carroll presently screens for mental health and substance use in all patients and refers as appropriate to behavioral health providers for specialty care.

In FY12, the SART planning committee partnered with the local OMHCs to provide expedited appointments for pregnant women seeking mental health treatment. The first biannual data report was recently released in December 2011. The report included data collected from September 5, 2010 through October 14, 2011 and revealed that 1,747 women had been screened using the 4 P's Plus screening instrument during that time period. A total of 67 referrals to the SART Specialist were made following the screening and 91% of those referrals were accepted. However, further analysis of the data demonstrated that approximately 50% of the women received a positive screen, yet only 6% of those women had been referred. The data also reflected that Carroll County had a rather high rate of alcohol and tobacco use prior to pregnancy compared with other states. Future SART efforts will focus on increasing the number of referrals.

Objective #1.2: Empower consumers, families and stakeholders with information to best articulate their needs and protect their right to choose.

Strategy # 1.2.A: Support and promote the programs provided by NAMI, such as Family to Family and Peer to Peer, as an available resource within the community for consumers and families.

Action Plan: Work closely with NAMI to increase their presence in the mental health community. The CSA will encourage and support the application of the local NAMI chapter president to become a member of the BHAAC and to have regular attendance at the Provider Council meetings.

Strategy # 1.2.B: Support and promote the programs offered by DBSA Carroll County, such as weekly support groups and educational seminars, as an available resource in the community for consumers and family members.

Action Plan: The Addictions Bureau and CSA will invite and encourage participation of representatives from DBSA Carroll County to attend the monthly Provider Council meetings hosted by the Addictions Bureau and CSA. CSA staff will provide information and referral information about DBSA's services to the public.

The President of the local NAMI chapter is an active participant on the BHAAC Criminal Justice Diversion Workgroup and attends the quarterly BHAAC meetings as well. NAMI continues to conduct Family to Family and Peer to Peer trainings in the community as well as maintains a warm line for information and referral to services.

The Carroll County chapter of DBSA continues to provide twice monthly support and education groups for the community. Since a change in leadership occurred with the organization approximately one year ago, DBSA has not participated in Provider Council or BHAAC meetings. The CSA will make contact with the new chapter President to invite their participation and request brochures for distribution to the public.

Goal #2: **Educate and Assist families in Carroll County to live healthy and drug free lives.**

Objective # 1.3: Increase knowledge of provider community, schools, courts and other agencies in implementing early screening and assessment tools, and maintain up-to-date referral information for their use.

Strategy # 1.3.A: Ensure quick access and continuity of care to individuals with behavioral health needs.

Action Plan: Create updated directories on resources necessary and available to aid in the recovery process, such as housing, transportation, medical care, etc. Distribute the directories to providers, schools, courts, local hospital, MHA facilities, and local human service agencies.

Strategy # 1.3.B: Promote mental health screening and services for pre-school children.

Action Plan: Participate in the Annual Head Start Fair to distribute information about early childhood mental health.

Strategy # 1.3.C: Work with community partners to increase suicide prevention education and awareness within the community.

Action Plan: The CSA and Substance Abuse Prevention Services will provide consultation to the Carroll County Public Schools regarding the implementation of the Youth Suicide Prevention Grant. The CSA will work together with other agencies and support community efforts to address and implement suicide prevention activities.

The Addiction Bureau and CSA is presently developing an updated resource directory in collaboration with the Carroll County Public Library and the Partnership for a Healthier Carroll County. It is

anticipated that the final product will be published in early spring 2012. Directory information will be made available through the Network of Care www.carroll.md.networkofcare.org), as well as in print form.

The CSA participated in the Head Start Fair and distributed literature and resources to 42 families.

Carroll County is in its third and final grant year for the Garrett Lee Smith Memorial grant. With the funds the local school system has provided training to staff and implemented the Lifelines curriculum into the Health Education classes of all 9th grade students. This two day curriculum addresses the signs and symptoms of suicide as well as provides information to the youth about resources to access, all in a manner that is targeted to their age group. In addition, the school system also used some portion of the funding to contract with a local OMHC to provide same day screening evaluations for students reporting suicidal thoughts or plans.

Objective # 1.4: Collaborate with the local system of care for behavioral health and somatic care to prepare and plan health reform.

Strategy # 1.4.A: The Addiction Bureau and CSA will encourage and support implementation efforts in the local community.

Action Plan: The Addiction Bureau and CSA will monitor and distribute resource information from the Maryland Healthcare Reform Coordinating Council and will participate on local planning committees for the health department as well as other agencies as necessary.

In collaboration the Bureau of Addiction Treatment Services and the CSA facilitated a presentation for local providers on Healthcare Reform 101, presented by the State Program Administrator for Co-Occurring Substance Use and Mental Disorders. Additionally we coordinated a presentation to the Behavioral Health and Addictions Advisory Council on the implementation of the federal parity law provided by the Director of the Maryland Parity Project.

Objective# 2.1: Collaborate with community mental health and substance abuse providers as well as community agencies to jointly address promotion of healthy nurturing families.

Strategy 2.1.A: The Addiction Bureau and the CSA will collaborate to jointly address the prevention of mental illness, promote healthy nurturing families and prevention substance use during the life span.

Action Plan: The Addiction Bureau and the CSA will report to the Behavioral Health and Addiction Council their intent to develop a committee to jointly address prevention and promotion of healthy nurturing families.

Strategy # 2.2.B: The Addiction Bureau and the CSA will form a workgroup in FY12, which will focus on expanding Prevention and Early Intervention efforts for both substance abuse and mental health.

Action Plan: The CSA and Addiction Bureau will do outreach to community providers and ask for participation in the newly formed work group.

The CSA and Addiction Bureau discussed at the quarterly BHAC meeting our intention to develop a work group that would be responsible for the development of prevention and early intervention strategies for the community around mental health and substance abuse issues. Recruitment of representation from community agencies relevant to the proposal was completed. The new work group of the Behavioral Health and Addictions Advisory Council was formed and has had one meeting to date.

Objective# 2.2: Collaborate with community providers, schools, local clubs and organizations to develop and implement the Maryland Strategic Prevention Plan

Strategy 2.2.A: Advertise and promote the objectives of the MSPF in the community.

Action Plan: Work with ADAA and community providers to select a community non-profit who will serve as lead for the Maryland Strategic Prevention (MSPF) initiative.

Strategy 2.2.B: Work with the selected non-profit to address the requirements set out in the MSPF.

Action Plan: Develop a plan to address under-age drinking in Carroll County consistent with MSPF criteria.

The Carroll County Health Department met with the MSPF work group who formulated the initial submission of need, extent of the problem and selection of community ready to change to develop a plan to work with a community non-profit to address under-age drinking. Advertisements were posted in the local newspaper on the internet requesting non-profits interested in developing strategies to address under-age drinking to submit a letter of interest. There were three letters of interest received. One non-profit was found ineligible as they did not have non-profit status. The committee met with the remaining two agencies and selected the Carroll Community Media Center as the vendor to head this initiative.

Work continues with the evaluator to have a finalized plan.