CECIL COUNTY DRUG AND ALCOHOL ABUSE COUNCIL

PLANS, STRATEGIES AND PRIORITIES FOR MEETING THE IDENTIFIED NEEDS OF THE GENERAL PUBLIC AND THE CRIMINAL JUSTICE SYSTEM FOR ALCOHOL AND DRUG ABUSE EVALUATION, PREVENTION, AND TREATMENT

JULY 2011 THROUGH JUNE 2013

Submitted: July 15, 2011
Updated: March 29, 2013

VISION:

A community free from substance abuse and dependence.

MISSION:

To reduce substance abuse and dependence and related consequences through development and implementation of an integrated and comprehensive prevention, early-intervention and treatment service system which meets the needs of the general public and the criminal justice system.

DATA DRIVEN ANALYSIS OF JURISDICTIONAL NEEDS:

In 2009, a large number of Cecil County residents reported that they were “very concerned” about their children using alcohol (46.8%) or drugs (50.3%). These concerns were substantiated by data collected in the 2006 Maryland Behavioral Risk Factor Surveillance Survey which showed that, among Maryland jurisdictions, Cecil County has the 3rd highest number of residents reporting binge drinking. Further, over 25% of Cecil County households with children have reported the presence of at least one binge drinking adult annually.

Similarly, illicit drug use in the county ranks among the highest in the state of Maryland. The average number of people reporting current illicit drug abuse or dependence in Cecil County (4.4%) exceeds the state average (2.88%) and 29.1% of young adults, aged 18 to 24, report a history of illegal drug use. The 23 drug-related deaths in Cecil County in 2006 accounted for 3% of all deaths

1 The Cecil County Community Health Survey 2009 Report. Cecil County Health Department, Elkton, Maryland, May 2010.
3 Maryland Epidemiological Profile: Consequences of Illicit Drug Use, Alcohol Abuse, and Smoking. The Alcohol and Drug Abuse Administration and the Center for Substance Abuse Research, University of Maryland, College Park, March 14, 2008.
4 The Cecil County Community Health Survey 2009 Report, op. cit.
in the county that year. The only jurisdiction in Maryland with a higher percentage of deaths attributed to illicit drug use was Baltimore City. Similarly, Cecil County has the 2nd highest drug-induced death rate in Maryland at a rate of 23.1 per 100,000 fatalities. Cecil County also ranks high among Maryland jurisdictions in other consequences of illicit drug use: the rate of drug-related burglaries in Cecil County was 266.3 per 100,000 population (the 6th highest in Maryland), and the rate of drug-related motor vehicle thefts in Cecil County was 22.1 per 100,000 population (5th highest in Maryland). The rate of drug-related public school suspensions in Cecil County is the 8th highest in the state of Maryland (359.3 per 100,000 students).  

Reducing substance abuse and related consequences, and preventing the onset and escalation of substance use by adolescents are critical goals for the Cecil County community. The strategic plan identified below is the result of work from the Cecil County Drug and Alcohol Council, a local group of concerned community members and service providers. The plan, developed by the local group, identifies the service needs of the general public and the criminal justice system, and is in response to the Council’s review of available federal, state, local, and private funds used for evaluation, prevention, and treatment services. Successful implementation the following plan is contingent upon receipt of sufficient funding.

**GOALS:**

The goals of the jurisdictional plan for Cecil County are:

1) Establish an accessible and integrated continuum of substance abuse treatment services for adult residents of Cecil County.
2) Establish and enhance resources and programs to address the substance abuse concerns among individuals referred by the criminal justice system.
3) Establish an accessible and integrated continuum of substance abuse prevention, intervention and treatment services for the adolescents and their families of Cecil County.
4) Educate and assist families in Cecil County to live healthy and drug free lives.
5) Decrease perceived obstacles to prevention and treatment programs.
6) Develop a recovery-oriented systems approach that build on the strengths and resilience of individuals, families, and communities to take responsibility for their sustaining health, wellness, and recovery from alcohol and drug problems.
7) Decrease the number of drug exposed newborns born in Cecil County.
8) Establish an accessible and integrated continuum of gambling prevention, intervention and treatment services.

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5 Maryland Epidemiological Profile, op. cit.
OBJECTIVES, ACTION PLAN, ACTUAL OUTPUTS:

GOAL 1: Establish an accessible and integrated continuum of substance abuse treatment services for adult residents of Cecil County.

Objective A: Improve access to residential treatment services.

Objective B: Increase capacity to treat co-occurring disorders.

Objective C: Improve transitional housing services for individuals in need of ongoing long-term substance abuse care.

Objective D: Implement an emergency room diversion program for individuals experiencing mental health crises with or without coexisting substance abuse concerns.

Objective E: Increase the availability of buprenorphine and methadone treatments for persons addicted to opioids.

Performance Target: Increased quality and quantity of treatment modalities accessible to Cecil County residents.

Estimated Dollar Amount Needed to Achieve Goal: $850,000

January 2012 Update: The Health Department’s purchase of care program facilitated access to detoxification services for individuals who were uninsured or underinsured. During the first six months of FY12, the program purchased 304 days of inpatient detoxification for 52 clients.

July 2012 Update: The Cecil County Health Department’s purchase of care program facilitated access to detoxification services for individuals who were uninsured or underinsured. During FY12, the program purchased 633 days of inpatient detoxification for 105 clients.

The jurisdiction increased the availability of buprenorphine and methadone treatments during the Spring of 2012. The Health Department initiated a pilot Suboxone program, and admitted thirteen adult patients during the fiscal year. Additionally, the jurisdiction welcomed a new treatment provider, Serenity Health-Elkton. During the fiscal year, the new provider admitted 112 patients to its Opioid Maintenance Therapy program.
**GOAL 2:** Establish and enhance resources and programs to address the substance abuse concerns among individuals referred by the criminal justice system.

- **Objective A:** Enhance and expand the Adult Drug Treatment Court Program within the Circuit Court for Cecil County.

- **Objective B:** Expand treatment and re-entry aftercare programs for residents of the Cecil County Detention Center and the Community Adult Rehabilitation Center.

- **Objective C:** Increase treatment capacity for clients referred through the criminal justice system.

- **Objective D:** Expand utilization of a victim impact panels for DUI offenders.

**Performance Target:** Improved substance-abuse related resources for individuals involved with the criminal justice system.

**Estimated Dollar Amount Needed to Achieve Goal:** $400,000

**January 2012 Update:** During FY12, the Adult Drug Treatment Court announced an award of additional federal funding to facilitate a program expansion from 50 to 100 participants.

**GOAL 3:** Establish an accessible and integrated continuum of substance abuse prevention, intervention and treatment services for the adolescents and their families of Cecil County.

- **Objective A:** Improve access for adolescents and families to residential treatment services.

- **Objective B:** Expand evidenced-based counseling and case management services for the families of at-risk children and adolescents.

- **Objective C:** Extend the benefits of the drug court treatment model to adolescent offenders and their families.
Objective D: Expand adolescent offender participation in criminal justice diversion programs and neighborhood youth panels.

Objective E: Raise awareness about consequences of drug use among youth in Cecil County

Objective F: Increase the number of Cecil County youth who participate in evidenced-based prevention and early-intervention programs.

Performance Target: Increased number of adolescents accessing integrated prevention, intervention and treatment services.

Estimated Dollar Amount Needed to Achieve Goal: $525,000

January 2012 Update: During FY12, the Health Department and a local coalition was award $33K from the Alcohol and Drug Abuse Administration to implement outcomes-based prevention within Cecil County via the Maryland Strategic Prevention Framework. The coalition goals include (1) a reduction of alcohol use by Maryland youth under 21, and (2) a reduction of alcohol related crashes involving youth.

July 2012 Update: The Cecil County Maryland Strategic Prevention Coalition reported progress toward development of a local strategic plan for a reducing alcohol use by youth under 21. The Coalition adopted the Logic Model for planning, developing, implementing, and evaluating the strategic plan.

GOAL 4: Educate and assist families in Cecil County to live healthy and drug free lives.

Objective A: Utilize multi-media initiatives to change individual and community norms.

Objective B: Increase the percentage of healthcare providers who routinely screen for substance abuse, and refer for further assessment/treatment for those patients at-risk.

Performance Target: Reduced prevalence of high risk substance abusing behaviors among residents as indicated by Cecil County Community Health Survey and Maryland Adolescent Survey.

Estimated Dollar Amount Needed to Achieve Goal: $165,000
July 2012 Update: Several community presentations entitled “Drug Awareness Forums: A Conversation on Substance Abuse in Cecil County” were organized by the Cecil County Drug and Alcohol Abuse Drug Council, Cecil County Government, the Cecil County Health Department, the Cecil County Department of Social Services, the Cecil County Drug Task Force, the Cecil County Local Management Board, Cecil County Public Schools, Cecil County Sheriff’s Office, Elkton Treatment Center, Haven House, Maryland State Police and Town Police Departments, and Union Hospital. Forum presentations included discussions on medication assisted drug treatment, gangs and related drug activity, and prevention practices for parents.

March 2013 Update: Organized by the Cecil County Drug and Alcohol Abuse Drug Council, the Cecil County community celebrated National Alcohol and Drug Addiction Recovery Month during September 2012, with a proclamation by the County Commissioners. This year’s theme, “Join the Voices for Recovery: It’s Worth It,” emphasized that while the road to recovery may be difficult, the benefits of preventing and overcoming mental and/or substance use disorders are significant and valuable to individuals, families, and communities. Additional Cecil County Recovery Month events recognized people in recovery and those who help them (including their families), and encouraged others to seek treatment. On September 29, 2012, community education occurred during the County’s Second-Annual 5K Twelve-Step Recovery Walk, which included distribution of treatment resource and prescription drug addiction information, and testimonials from those in recovery from addiction.

Multiple community drug awareness forums entitled “A Conversation on Substance Abuse in Cecil County” were conducted during FY13. Topics included "6 Parenting Practices to Help Reduce the Chance Your Child will Develop a Drug or Alcohol Problem,” “A Discussion on Prevention, Detection, Enforcement, and Treatment of Substance Abuse,” “Heroin Alert” and others. Events were held at the Cecil County Administration Office, the Rising Sun High School, and the Cecil County Public Library Rising Sun Branch, and other locations.
Additional initiatives to change individual and community norms were also evidenced, including additional prescription drug take back events. Successful prescription drug take back events (safe options for disposal of unused medications) occurred during the FY13, including new programs developed in partnership with the Cecil County Public Library at the North East Branch Library with the North East Police Department, and the Perryville Branch Library by the Perryville Police Department on September 29, 2012. Additionally, Household Hazardous Waste Day (with medications acceptance) occurred on October 7, 2012, at the Cecil County Central Landfill.

GOAL 5: Decrease perceived obstacles to prevention, early-intervention and treatment programs.

Objective A: Establish new transportation resources for Cecil County residents seeking prevention, early-intervention and treatment services.

Objective B: Evaluate viable locations for new satellite community-based programming.

Objective C: Improve services for non-English speaking community members.

Performance Target: Increased attendance and participation of those community members in need of services.

Estimated Dollar Amount Needed to Achieve Goal: $370,000

July 2012 Update: The Health Department obtained supplemental funding to employ a patient driver/community health outreach worker. The incumbent assisted patients with recovery efforts, and facilitated travel to substance abuse counseling, medical appointments, half-way and recovery housing, educational programs, and other relevant recovery-related meetings.
GOAL 6: Sustain a recovery-oriented systems approach that build on the strengths and resilience of individuals, families, and communities to take responsibility for sustaining health, wellness, and recovery from alcohol and drug problems.

Objective A: Develop a comprehensive menu of services and supports that can be combined and readily adjusted to meet the individual’s needs and chosen pathway to recovery.

Objective B: Develop an ongoing process of systems-improvement that incorporates the experiences of those in recovery and their family members.

Objective C: Coordinate with multiple systems to develop responsive, outcomes-driven approaches to care.

Performance Target: Increased recognition, growth and system collaboration of recovery oriented processes and resources.

Estimated Dollar Amount Needed to Achieve Goal: Undetermined

July 2012 Update: The Health Department’s Alcohol and Drug Recovery Center accelerated Continuing Care enrollments. [Continuing Care is a level of service available to all patients who successfully complete outpatient treatment. Key components of this voluntary program include phone-based aftercare counseling and risk assessment, face-to-face sessions, and linkages to case management services. The program is expected to help provide early identification of difficulties in the recovery process, prevent challenges from leading to relapses, and enable patients to quickly re-enter treatment if necessary.] Eighty-three patients were enrolled in Continuing Care on June 30, 2012.

Additionally, the Health Department hired three Peer Recovery Advocates to provide community outreach, and help others establish and maintain recovery lifestyles. The Advocates are individuals who identify as persons in recovery from substance abuse, who intentionally share personal recovery stories as appropriate, and who model as a source of hope and inspiration for prospective and active patients. The Advocates also help ensure that those seeking to change behavior become familiar and comfortable with available recourses, including but not limited to self-help programs and other individuals with quality recovering lifestyles.
March 2013 Update: The Health Department’s Alcohol and Drug Recovery Center continued to encourage voluntary patient enrollment in Continuing Care. The program proved extremely valuable for maintaining connections between program participants and their counselor after the formal treatment ended. The service helped sustain patient positive progress and recovery, and allowed the Center to quickly re-admit to treatment a few patients who relapsed to substance use. 118 patients were enrolled in Continuing Care on December 31, 2012.

During the fourth quarter of FY12, a workgroup of representatives from the Cecil County Drug and Alcohol Abuse Council reviewed the substance abuse related priorities identified by the Local Health Improvement Coalition (Cecil County Community Health Advisory Committee) and developed target areas for immediate action. Target area initiatives recommended by the Workgroup focused on four goals: (1) Research and Study, (2) Prescription Drug Take Back, (3) Community Education, and (4) Physician Training.

In reference to recommendations for research and study, an independent consultant (Health Resources in Action) was selected by the Cecil County Health Department during the second quarter of FY13, to complete a comprehensive analysis of, and recommend solutions for Cecil County’s substance abuse problem. The consultant is expected to release a summary report before or during the first quarter of FY14.

Progress toward education for health professionals and community members on the effects of prescription drug abuse in Cecil County was also evidenced. On June 6, 2012, DHMH Deputy Secretary for Public Health Services and the DHMH Chief Medical Officer delivered a detailed presentation on "Prescription Overdose" to Union Hospital medical staff. Additionally, on December 12, 2012, a Delaware Public Health Program Administrator met with the Cecil County DAAC to share information on Delaware efforts to "Reduce Addiction, and Doctor Shopping."
GOAL 7: Decrease the number of drug exposed newborns born in Cecil County.

Objective A: Identify resources, barriers to care and gaps in services for drug exposed newborns and their families.

Objective B: Increase physician/obstetrician screening for substance abuse and respective referrals for substance abuse assessments and treatment.

Objective C: Expand the menu of services and supports for parents who use and abuse alcohol and other drugs of abuse.

Objective D: Develop a comprehensive menu of services and supports for infants and children affected by parental substance use.

Performance Target: Decreased number of drug exposed newborns. Decreased premature birth, miscarriage, low birth weight, and the variety of behavioral and cognitive problems associated with prenatal and postnatal drug exposure.

Estimated Dollar Amount Needed to Achieve Goal: $425,000

GOAL 8: Establish an accessible and integrated continuum of gambling prevention, intervention and treatment services.

Objective A: Implement problem gambling prevention and early-intervention programming throughout Cecil County.

Objective B: Raise awareness about consequences of problem-gambling among youth and adults in Cecil County.

Objective C: Recruit and train workforce to provide competent problem gambling assessment, intervention and counseling.

Objective D: Integrate problem gambling screening within all substance abuse assessments.

Objective E: Expand access to evidenced-based problem-gambling services. Identify barriers to care and gaps in services for problem gamblers and their families.
**Performance Target:** Increased number of individuals accessing integrated prevention, intervention and treatment services.

**Estimated Dollar Amount Needed to Achieve Goal:** $650,000

**July 2012 Update:** Substance abuse treatment providers within the jurisdiction are screening for pathological gambling utilizing the Lie-Bet, and the South Oaks Gambling Screen instruments.

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