

# DORCHESTER COUNTY DRUG & ALCOHOL ABUSE COUNCIL STRATEGIC TWO-YEAR PLAN

2012-2014

*Six-month update: July-December 2014 (first half of fiscal year 2015)*

## **Vision:**

A safe and drug free Dorchester County

## **Mission:**

*To reduce the incidence and prevalence of alcohol and drug abuse and its consequences to affected individuals, their families and all other Dorchester County residents.*

A **Comprehensive Assessment to identify drug use and the levels of risk and protective factors among youth in Dorchester County** was conducted through a partnership with the local Board of Education, the Partnership for Youth and Families (Local Management Board) and the Health Department. The “Communities That Care” (CTC) youth survey for grades 6 to 12 was completed by 831 Dorchester County public school students in grades 6, 8, 10, and 12 in February of 2013. It was designed to predict problem behaviors such as alcohol, tobacco, and other drug use, poor school achievement, and delinquency using four core measures: past 30-day use, perception of risk, perception of parental disapproval, and perception of friends disapproval. In recognizing at least one of the measures, survey results indicated for the combined grades that 16.8% reported past 30-day alcohol use and as students’ ages progressed, all alcohol use rates showed increases. For example, 3.9% of students in grade 6 reported past 30-day alcohol use, whereas 32.0% of students in grade 12 reported past 30-day alcohol use. While CTC trend data collected from 2002 to 2013 indicated that, at least, past 30-day use of substances per grade has declined, the trend data also indicated that the use of alcohol, tobacco, and marijuana were the primary drugs used through the adolescent years. The data across year and grade level correlations indicate alcohol as the “drug of choice” by far for Dorchester County students. In February of 2013 a “Youth Risk and Behavior Survey” (YRBS) was conducted, and the results are pending. Meanwhile, in consideration of the most recent CTC data, County prevention efforts that address underage drinking have been determined to continue as a priority.

According to the 2013 Maryland Kids Count Data, rankings with the 22 other counties and Baltimore City found Dorchester: 3<sup>rd</sup> highest of children living in poverty; 2<sup>nd</sup> lowest in 8<sup>th</sup> grade reading achievement and 5<sup>th</sup> lowest in 8<sup>th</sup> grade math achievement; 3<sup>rd</sup> in suspension rates; 3<sup>rd</sup> in juvenile arrests; 2<sup>nd</sup> in teen births; 4<sup>th</sup> highest in drop-out rates; and 3<sup>rd</sup> lowest in graduation rates.

More needs to be done in Dorchester County to deter youth from experimentation and abuse of alcohol, tobacco, and other drugs of addiction, which is known to have a direct correlation to crime and negative school performance. Prevention efforts are critical toward that end. However, an analysis of the local continuum of care reveals a lack of adequate funding for the provision of prevention services in Dorchester County. Data reveals that while Treatment receives 96% of funding from the Maryland Alcohol and Drug Abuse Administration, Prevention only receives 4% of funds. Research-based prevention programs have shown to be cost-effective. Similar to earlier research,

recent research shows that for each dollar invested in prevention, a savings of up to \$10 in treatment for alcohol or other substance abuse can be seen (Aos et al. 2001; Hawkins et al. 1999; Pentz 1998; Spoth et al. 2002a).

Towards that end, Dorchester County's two-year plan seeks to address these prevention-related concerns, while reinforcing the goals initially established and expanded by the Council since 2005.

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*The following goals have been selected by the Dorchester County Drug & Alcohol Abuse Council for the upcoming FY2014-2016 two-year plan. This plan, initiated in 2005, has become a work in progress as certain countywide goals & objectives have been or are being met and/or revised and other issues and concerns move to the forefront.*

## **Goal 1: PREVENTION/INTERVENTION/TREATMENT: Adapt to Health Care Reform**

Objective 1: *Integrate Addictions and Mental Health services providers into a "Behavioral Health" care system*

Objective 2: *Integrate Behavioral Health care with Somatic care*

**Goal 1 Performance Target:** *(What are we attempting to accomplish with this goal, what overall effect are we trying to achieve)*

**Improve the ability to assist in the provision of a full range of Dorchester County resident's health needs (body, mind & spirit)**

**Progress:** *(What steps have been accomplished towards achieving this goal, has our performance target been met? How have we measured our progress?) To be reported as applicable every six months.*

The Mid-Shore Behavioral Health Services Network's **Integration Workgroup** continues efforts towards achieving their two established goals:

The **goals** of the project are 1) To become, at a minimum, a Dual Diagnosis-Capable provider 2) to improving client outcomes through integrated care, and 3) service coordination and network building with Mid-Shore Mental Health and Addiction providers.

Mental Health & Substance Use Disorder providers within Dorchester County are all engaged in integrative efforts to varying degrees.

A number of Dorchester and Caroline County agencies including the Dorchester County Health Department and the Dorchester County Addictions Program continue participating in a **Health Enterprise Zone (HEZ)** grant that is building significant bridges

between Somatic and Behavioral Health. Mental Health & Addiction Peers, Community Health Outreach Workers, the Mobile Crisis Team, School-Based Wellness Program, and many others are providing coordinated integrated health care services to create a reduction in behavioral health emergency department (ED) visits and hospitalization rates for hypertension, and obesity prevention.

Efforts have been widely undertaken through the Health Department to take advantage of Medicaid expansion- allowing for greater numbers of Dorchester residents to become insured and eligible not only to be covered for substance abuse disorder and mental health treatment, but for somatic care as well.

**Estimated Dollar Amount needed to achieve goal:**

Medicaid Expansion: No direct cost involved  
HEZ year one budget: \$755 thousand.

**Goal 2: PREVENTION/INTERVENTION/TREATMENT Incorporate the Recovery Oriented System of Care (ROSC) model as the overarching framework that addresses Dorchester County substance abuse concerns. *This initiative shall be known as the “Dorchester Recovery Initiative” (DRI).***

Objective 1: *Inform and educate all county participants involved in the delivery of substance abuse-related services re: the ROSC concept.*

Objective 2: *Encourage peer support/volunteerism.*

Objective 3: *Expand recovery support services.*

**Goal Performance Target:** Fully embrace the paradigm shift from singular and episodic treatment encounters to a model that recognizes that addiction is chronic, progressive, incurable, potentially fatal, and in which relapse is not uncommon. This model will more fully address the whole continuum of care and provide greater support for sustained recovery.

**Progress:**

The Dorchester Drug & Alcohol Jurisdiction Coordinator/ROSC Coordinator continues actively attending and participating in various local, regional, and statewide meetings, workshops, and committees to better understand and help shape the ROSC framework.

The **DRI-DOCK Recovery & Wellness Center** moved to a new and more suitable location on the fall of 2014. This dwelling is directly on Route 50 in the center of Cambridge, is much more visible, accessible, and spacious than our previous location, and offers a full commercial kitchen.

Dri-Dock continues offering a wide variety of recovery support services and activities for those with mental health, co-occurring, and substance abuse concerns. DRI-DOCK offers Alcoholics Anonymous, Narcotics Anonymous, Chemical Dependents Anonymous meetings, as well as Smoking Cessation, STD/HIV reduction, Veterans services in addition to a 6-person computer lab. Discussions are underway to offer a Celebrate Recovery meeting as well.

Peer outreach efforts include regular visits to the local residential addictions treatment provider, Warwick Manor, and a weekly peer presence has been established at the Dorchester County Addictions Program. We also look to offer peer services as part of a prisoner reentry service to those with behavioral health issues being released from the local Detention Center.

The Dri-Dock ([www.dri-dock.org](http://www.dri-dock.org)) and Facebook (<https://www.facebook.com/pages/Dri-Dock-Recovery-Wellness-Center/183481638334041?ref=hl>) websites are being routinely updated and maintained.

A number of our Drug & Alcohol Abuse Council members are also involved with other local collaborative ventures such as the Communities Mobilized for Change on Alcohol (CMCA), the Dorchester Substance Abuse Committee, and the Partnership for a Drug Free Dorchester (PDFD) and work to partner with various local religious and social groups and organizations.

A new round of Access To Recovery (ATR)-like services are now being offered to support recovery efforts.

A Christmas Dance was held at our new location and a Valentine's Day dance is planned for the spring coordinated by Chesapeake Voyagers, Inc.

Funding was gifted to Dri-Dock by the National Council on Alcoholism & Drug Dependence-Maryland (NCADD-MD) to get our kitchen compliant with the Health Department. Discussions are underway with recovery partners to open a "Recovery Café" and possibly offer a Culinary Arts school practicum via the Chesapeake Community College, Social Services, & a local faith-based program (Anchor Point).

**Estimated Dollar Amount needed to achieve goal:**

\$150 thousand provided by the Behavioral Health Administration for the DRI-DOCK, Care Coordination, Peer Support, & Recovery Housing.

\*\$1,000 to get kitchen to state of readiness.

**Goal 3: PREVENTION: Develop and maintain a broad and consistent mechanism for the reduction of underage alcohol, tobacco and other drug (ATOD) use.**

Objective 1: *Increase annual number of youth access enforcements in each related place of business within the county.*

Objective 2: *Increase annual number of shoulder-tap enforcements within the county.*

Objective 3: *Develop procedures, policies and/or legislation to deter Social Provision of alcohol and tobacco to minors.*

Objective 4: Secure Strategic Prevention Framework funding through the efforts of Partnership for a Drug Free Dorchester (PDFD) in order to accomplish the above objectives and meet this goal.

**Goal 3 Performance Target:** *(What are we attempting to accomplish with this goal, what overall effect are we trying to achieve)*

**Reduce the number of underage users of alcohol and tobacco products in Dorchester County.**

**Progress:** *(What steps have been accomplished towards achieving this goal, has our performance target been met? How have we measured our progress?) To be reported as applicable every six months.*

As a result of prior compliance checks in June 2014, Show Cause Hearings held by the local Liquor Board on September 15, 2014: Pep-Up #14 fined \$100; and hearings on December 15, 2014: Sandy Hill Wine & Spirits fined \$100, K-2 Beverage fined \$250, Short Stop fined \$500, and Cambridge Wine & Spirits fined \$1000.

Cambridge Police Department conducted 10 compliance checks on December 3, 2014, resulting in 2 citations (owner and clerk) to Zip Mart, and conducted 5 compliance checks on December 16, 2014, resulting in 2 citations (retail owner and clerk) to Portside Seafood Restaurant. Maryland State Police conducted 29 compliance checks on December 21, 2014, resulting in 2 citations (retail owner and clerk) to Linkwood Deli and 2 citations (retail owner and clerk) to Old Salty's Restaurant.

**Estimated Dollar Amount needed to achieve goal:**

Efforts will be made to advance the achievement of this goal despite absence of adequate funding.

**Goal 4: PREVENTION: Inform Dorchester County residents of the consequences of substance abuse and promote the benefits of healthy and drug free lifestyles.**

Objective 1: *Expand available local data by administering the Communities That Care Survey in Dorchester County Public Schools on 'odd' years (i.e., 2011, 2013), for the purpose of complementing the Maryland Adolescent Survey.*

- Objective 2: *Use appropriate evidence-based prevention programs in community settings.*
- Objective 3: *Incorporate Search Institutes' 40 Developmental Assets into appropriate Programming.*
- Objective 4: *Utilize evidence-based environmental strategies to change individual and community norms.*

**Goal 4 Performance Target:** *(What are we attempting to accomplish with this goal, what overall effect are we trying to achieve)*

**Provide information about substance abuse prevention strategies to at least 10,000 Dorchester County residents.**

**Progress:** *(What steps have been accomplished towards achieving this goal, has our performance target been met? How have we measured our progress?) To be reported as applicable every six months.*

Partnership for Drug Free Dorchester (PDFD) held 6 coalition meetings, with 4 new members, to continue planning and implementing evidence-based environmental strategies.

PDFD members, including 3 adults and 7 youth (Youth Action Council), attended CADCA Mid-Year Conference from July 21 – 25, 2014 in Orlando, Florida.

PDFD participated in National Prescription Take Back Day on September 27, 2014 with approximately 120 lbs. collected at 2 sites, in partnership with the Dorchester County Sheriff's Office, Cambridge Police Department, Hurlock Police Department, and Craig's Drug Store.

PDFD, in partnership with the Cambridge Police Department in December 2014, secured a permanent prescription drop box in the Department's lobby for the community to safely discard unwanted/expired medication.

PDFD published 4 articles addressing the 40 Developmental Assets, and advertisements/promotion (print, local television and radio interview with participation from Cambridge Police Department's Sgt. Justin Todd) regarding the local Prescription Take Back Day event,

Media Committee managed PDFD's social media accounts: You-Tube (over 470 views) and Facebook (over 300 likes), and "Be the Parent on the Scene" website (over 1880 views) and Facebook (over 900 views); and posted Show Cause Hearing results and "Celebrate Safely" article in December 2014.

Media Committee placed "Be the Parent on the Scene", "I'd Rather" ...Part 2, and "Don't Be a Party to Binge Drinking" 30-second commercials shown alternately at Cambridge Premier Cinema from July 2014 through June 2015, and a "Be the Parent on the Scene" printed 30-second message shown at Cambridge Premier Cinema July 2014 through

September 2014. “Be the Parent on the Scene” and “Don’t Be a Party to Binge Drinking” commercials were aired on Comcast Cable TV’s ESPN 1 for the College Bowls (29 games) and Xfinity stations for the month of December 2014. “Be the Parent on the Scene” commercial was posted on “Be the Parent on the Scene” webpage in July 2014.

Media Committee acquired accounts for Linked-in, Twitter and Instagram, and “went live” in December 2014.

Media Committee placed printed advertising for PDFD and “Be the Parent on the Scene” campaign in Cambridge-South Dorchester High School’s Athletic Program (400 printed) for September through December 2014. “Be the Parent on the Scene” printed advertising was shown on the school’s stadium scoreboard from August 23 to November 28, 2014.

Youth Action Council (YAC) has 8 participating youth members. YAC conducted 4 meetings to plan activities, etc. Also, Council continues to engage the community for recruitment and promotion efforts.

YAC members presented a workshop at the Victoria Jackson-Stanley Inspiration Center on July 15, 2014 with 15 students participating.

YAC members presented local prevention efforts during a youth leadership session at the CADCA Mid-Year Conference on July 24, 2014.

YAC members, guided by PDFD, provided an information table at “National Night Out” (sponsored by the Cambridge Police Department) at the Cambridge City pool on August 5, 2014, where over 700 youth and adults attended.

YAC, guided by PDFD, sponsored “Back to School Play Day” on September 19, 2014 at Sojourner Douglass College (Cambridge campus) with 29 youth in attendance, and promoted anti-substance abuse messages.

YAC provided an information table at Judy Center’s “Movie Night” on October 8, 2014 with over 20 parents and youth in attendance, and promoted anti-substance abuse messages.

YAC, guided by PDFD, sponsored “Back to School Play Day” on October 24, 2015 at Hurlock Elementary School with 20 youth in attendance, and promoted anti-substance abuse messages.

CMCA held 6 coalition meetings to continue environmental strategy efforts.

CMCA continued compliance checks with Cambridge Police Dept., Sheriff’s Dept. and MD State Police. Dept. of Natural Resources continued their assignment of saturation patrols for community boating events and waterways. The funds and contracts are provided through the Local Management Board (LMB)

CMCA/PDFD members attended 2 trainings provided by Behavioral Health Administration (BHA), and a conference hosted by Maryland Association of Prevention Professionals and Advocates (MAPPA) for strategic planning and implementation practices.

CMCA conducted 6 environmental scans at community events to determine best practices used deterring alcohol access to persons under 21 years old.

CMCA partnered with the Regional Highway Safety Office to provide materials regarding underage drinking and designated drivers to 4 local alcohol retailers during the Christmas/New Year holiday season in November and December 2014.

Under the DCHD's Cigarette Restitution Fund Program:

Under the DCHD's Cigarette Restitution Fund Program from July – December 2014:

\*79 adults participated in the Cessation Program (unduplicated)

\*11 received Nicotine Patches

\*14 received Chantix

\*26 participants (unduplicated) participants of Cessation Program reported mental health concerns and/or a history of alcohol or drug addiction.

\*The DCHD Cessation Program has experienced an increase in pregnant women seeking cessation services during this reporting period, with a total of five pregnant women.

\*39 educational presentations/trainings were conducted

\*Four outreach/awareness events (i.e. health fairs)

\*A commercial regarding youth and smoking (that 90% of Maryland teens do not smoke) was developed and aired for one month on local television stations, then ran for several months at the County's only movie theater (before every movie shown), and was also placed on the Partnership for a Drug Free Dorchester's Facebook page.

Under the Enforcement component of the CRFP grant, two non-government organizations (NGO) received community contracts to conduct face to face education to fifteen vendors/retailers which included Maryland's tobacco laws, and state and county resources (total of 30 retailers); and the Cambridge Police Department received a contract and is currently conducting compliance checks with at least twenty tobacco retailers which will be completed by February 16, 2015.

Prevention Services partnered with 3 community organizations which provided Second Step and/or Dorchester County Freedom Writers sessions and or supportive activities to 75 students, aged 4 to 17.

Eastern Shore Regional Media Campaign continued in fall 2014 for anti-underage drinking prevention messages focused on social availability thru local television/cable stations, radio stations, newspapers, and Comcast Cable website

Prevention Services disseminated educational materials at 5 community events.

Prevention Services partnered with the Regional Highway Safety Office to conduct surveys regarding responsible driving practices in November and December 2014.

**Estimated Dollar Amount needed to achieve goal:**

Efforts will be made to advance the achievement of this goal despite absence of adequate funding.

## **Goal 5: PREVENTION: Develop and maintain a broad and consistent mechanism for the reduction of Opioid Overdoses**

- Objective 1: *Increase annual number of First Responders and Others trained and certified in responding to a potential Opioid overdose*
- Objective 2: *Increase awareness of Opioid-dependent treatment participants in Overdose Prevention protocols*
- Objective 3: *Ensure availability of Medication Assistance Therapy for Opioid-dependent treatment recipients.*
- Objective 4: *Administration of Prescription Drug Take-Back Program*

**Goal 3 Performance Target:** *(What are we attempting to accomplish with this goal, what overall effect are we trying to achieve)*

**Reduce the number of fatal and near-fatal Opioid Overdoses in Dorchester County.**

**Progress:** *(What steps have been accomplished towards achieving this goal, has our performance target been met? How have we measured our progress?) To be reported as applicable every six months.*

*A Naloxone Training program is under development as a joint partnership effort between the Dorchester County Emergency Management System and the Dorchester County Health Department.*

*Clients receiving treatment for Opioid addiction are provided with information re: Overdose Prevention.*

*Medication Assistance Therapy for Opioid-dependent treatment recipients is becoming increasingly available and broadly covered through health insurance and medical services paid for in some cases by grant funding.*

*The Partnership for a Drug-Free Dorchester is coordinating efforts on an ongoing basis to offer regular Prescription Drug Take-Back opportunities in key county community locations. Cambridge now has a permanent drug take-back location at the Public Safety Building.*

*Regional efforts are underway for Dorchester County to spearhead a joint effort between Talbot, Caroline, Queen Anne's, Kent, and Dorchester Counties to create an Opioid Misuse Prevention program. Dorchester will be fiscally responsible and host a program Coordinator.*

**Estimated Dollar Amount needed to achieve goal:**

*Approximately \$5,000 for Naloxone training funded through the Behavioral Health Administration. Opioid Misuse Prevention program: \$160,000 per county annually.*