



**Frequently Asked Questions:  
Coronavirus Disease 2019 (COVID-19) and Behavioral Health Administration Partners**

Updated March 20, 2020

The Maryland Department of Health (MDH) Behavioral Health Administration (BHA) continues to develop coordinated prevention and response plans for COVID-19. BHA will provide regular updates and accurate information for behavioral health providers, partners, and the greater community. For the latest COVID-19 information and resources, visit the [BHA website](#) or [coronavirus.maryland.gov](https://coronavirus.maryland.gov).

**We expect ongoing referrals from BHA, but what should we do if a BHA referral arrives with a high fever and seems symptomatic for COVID-19? Would BHA expect us to allow the client in?**

As a prerequisite for final acceptance of referrals to residential settings, referral sources with health care staff (emergency departments (ED), clinics, detention centers, inpatient units, residential treatment centers (RTC), etc.) should screen the client referred for possible COVID-19, as per the [Centers for Disease Control and Prevention \(CDC\) guidelines](#).

In addition to symptom questions, the screening should include a temperature check. The temperature check should be daily beginning with the initial referral until the time of their last contact with the client and should be communicated to the receiving program. The receiving program should also screen per the CDC guidelines immediately upon arrival, whether there has been previous screenings. Clients and referral sources should understand that admission to a program may be denied if there are positive findings in screenings before or upon arrival. The decision to deny admission should be made in consultation with medical staff. If a medical decision is unable to be made until arrival, an alternative plan should be established for the client that is consistent with CDC recommendations, including transportation.

For facilities who serve older adults please see MDH's [Recommendations for Infection Control & Prevention of COVID-19 in Facilities Serving Older Adults](#).

**Is it possible that BHA will stop all placement activity for a period and there will be no new intakes?**

Any possible COVID-19 mitigation strategy designed to protect medical health would have to be carefully thought through if it potentially puts behavioral health at risk.

**Does BHA have a position on temporarily limiting or restricting visits for residential treatment centers? For example, declining an overnight visit from a patient's children and approving an abbreviated visit instead.**

We support this particular visit restriction plan, because it replaces the overnight visits with an abbreviated visit, balancing the risk versus benefit for the family. Following CDC guidelines, as part of the visit, the children should be screened for COVID-19, as should all visitors to a residential health care setting. The use of phones or other technology for videoconferencing should also be considered as appropriate to replace visits, especially if visits have to be suspended. If consents are in place for other agencies already involved, such as Child Protective Services, as appropriate they should be notified about changes in the visits.

**What emergency plan should we follow if there is a community outbreak or surge?**

Jurisdictions are advised to use their All Hazards Plan and Continuity of Operations Plan (COOP) which includes a list of essential functions. Please be sure the essential functions include the primary person responsible for carrying out the function and what information is needed to maintain operations. It is the responsibility of the local addictions authority (LAA), core service agency (CSA), and local behavioral health authority (LBHA) to work with their local health department regarding closures and alternative arrangements, if any. BHA will provide a copy of the BHA Surge Plan to an LAA/CSA/LABHA, if requested.

**Providers have expressed staffing concerns with houses staffed 24/7. Are there resources for outsourcing care to community agencies for Certified Nursing Assistant (CNA) support?**

As of March 19, the CDC allows asymptomatic healthcare personnel (HCP) with an exposure to continue to work under specific circumstances if they wear a mask. The [CDC guidelines](#) state, "Updating recommendations regarding HCP contact tracing, monitoring, and work restrictions in selected circumstances. These include allowances for asymptomatic HCP who have had an exposure to a COVID-19 patient to continue to work after options to improve staffing have been exhausted and in consultation with their occupational health program."

Both LBHAs/CSAs and Residential Rehabilitation Program (RRP) agencies are required to have an All Hazards Plan and COOP which anticipate staffing shortages in the event of an emergency. It is critical that the LBHAs/CSAs coordinate their planning efforts with residential providers within their jurisdictions to ensure that contingencies are in place for staff coverage. In an emergency, not all staff functions are critical; thus, agencies should plan for alternative coverage by cross training their staff members. For example, if the on-site psychiatric rehabilitation program (PRP) is closed, PRP day program staff can be redeployed to staff the RRP. This is the time to build on the strengths and natural supports of residents who are doing relatively well (e.g., residents of General Level RRP) so that more staff time can be allocated to residents who are vulnerable and most at risk.

Providers are encouraged to develop innovative staffing models to meet immediate and short-term staffing needs. This may include pooling or sharing of staff across health care programs or providers or enlisting agency volunteers or Board members to serve in administrative or supportive roles in order to free up staff to provide direct care. The LBHA and CSAs should continue to engage RRP providers to assess staffing needs and to identify community resources. If a jurisdiction anticipates that a certain RRP will no longer be able to provide 24/7 staffing coverage, the BHA Clinical Services Division should be immediately notified. If a resident is subject to conditional release and is required by judicial order to have 24/7 coverage, then any staffing reduction may not occur without judicial consent. It is BHA's expectation that RRP providers work collaboratively with the LBHA/CSA and, as applicable, the MDH Office of Court Ordered Evaluation and Placement to ensure that RRP residents receive needed services and that such services fulfill any requirements that may exist as part of a resident's conditional release orders.

**What should a provider do if clinicians do not present to work due to illness or care for family members or children with potential school closure?**

Clinicians have an ethical obligation not to abandon their clients. If a clinician is unable to continue to provide needed care to a client, the clinician should facilitate a warm transfer to another clinician. Clinicians are expected to triage their caseload to determine the nature and intensity of services needed.

**Is there service delivery support on medication-assisted treatment (MAT) prescribing?**

The State Opioid Treatment Authority is providing guidance to opioid treatment programs (OTP) and working closely with the Maryland Association for the Treatment of Opioid Dependence (MATOD). The [Substance Abuse and Mental Health Services Administration \(SAMHSA\)](#) has also provided guidance for OTPs.

**Clinic suspension or limited hours?**

This is determined by the LBHA/CSA/LAA and clinic provider. Any suspension must include the transfer of clients to another program or alternative manner of providing services to clients in crisis. If a licensed program closes or suspends operations, the BHA Office of Licensing must be notified.

**For group therapy sessions, are there recommendations for ratio or size?**

On March 16, 2020, the [White House](#) provided guidance that social gatherings should not exceed 10 people. However, if groups are held, they should be smaller than 10 people in order to be carried out in compliance with the [CDC guidelines](#) that include social distancing of six feet.

**Will it be communicated that there is mandatory social distancing for providers that are offering round the clock care?**

There is already guidance in effect from the [CDC](#), [SAMHSA](#), and [MDH](#).

**Will BHA suspend fidelity reviews for dates of services delivered for evidence-based practices during the state of emergency?**

CMS announced that it is suspending non-emergency survey inspections in order to focus on the most serious health and safety threats like infectious diseases and abuse. BHA will likewise suspend all fidelity reviews for evidence-based practices.

**Will providers have to submit their emergency preparedness plan for COVID-19 to Maryland Association of Behavioral Health Authorities (MABHA)?**

The LBHA/CSA/LAA in cooperation with the local health department should be working with their providers to ensure that an emergency preparedness plan is in place and up to date. As to avoid multiple and sometimes contradictory messages, the provider should communicate directly with the local behavioral health authority.



## **Recovery and Wellness Support Resources for the COVID-19 Outbreak**

Updated March 24, 2020

The Maryland Department of Health (MDH) Behavioral Health Administration (BHA) continues to develop coordinated prevention and response plans for COVID-19. BHA will provide COVID-19 updates as they become available and accurate information for behavioral health providers, partners, and the greater community. For the latest COVID-19 information and resources, visit the [BHA website](#) or [coronavirus.maryland.gov](https://coronavirus.maryland.gov). For additional questions or concerns, contact your Local Behavioral Health Authority.

### Online Resources to Help Mitigate the Spread of COVID-19

It is highly recommended that individuals who are seeking or living in recovery utilize peer groups and other recovery support services to maintain their wellness and aid in their recovery process. Traditionally these groups meet in person and require individuals to be in close proximity to one another. The COVID-19 pandemic is a significant societal stressor that can affect anyone who is in recovery, or seeking recovery. We encourage people in recovery to stay connected to treatment resources, even if their treatment/support/recovery programs are either closed or offering reduced support. This can be a very vulnerable time for people in recovery, as it is for those who are not.

To assist people seeking support during this time, we have compiled the digital resources identified below, which offer diverse online support to individuals seeking connection and engagement during times of social distancing. Please use them and share them with your networks. (Please note the inclusion of these resources is not necessarily an endorsement.)

### **Smart Recovery**

[Self-Management And Recovery Training \(SMART\)](#) is a global community of mutual-support groups. At meetings, participants help one another resolve problems with any addiction (to drugs or alcohol or to activities such as gambling or over-eating). Participants find and develop the power within themselves to change and lead fulfilling and balanced lives guided by SMART's science-based and sensible 4-Point Program®.

## **Digital Recovery Meetings**

[Unity Recovery + WEconnect + Alano Club](#) are now offering free virtual recovery meetings during the COVID-19 pandemic. They are now offering online recovery support groups which will be available five times daily at 9AM, 12PM, 3PM, 6PM, and 9PM EST. They are also offering one daily family and loved one recovery support meeting at 8PM EST. All recovery meetings are non-denominational, agnostic to any specific recovery pathway, and are open to anyone.

- Video is optional but can be used
- Real names do not have to be used and are not required
- Audio can be muted and you are not required to share
- Please be respectful of all participants just as you would in any other meeting or recovery space – we are all in this together

## **In The Rooms**

[In The Rooms](#) is a free online recovery tool that offers 130 weekly online meetings for those recovering from addiction and related issues. In The Rooms embraces multiple pathways to recovery, including all 12 Step, Non-12 Step, Wellness and Mental Health modalities.

## **Narcotics Anonymous Online Meetings**

Narcotics Anonymous (NA) is a global, community-based organization with a multilingual and multicultural membership. NA was founded in 1953, and members hold nearly 67,000 meetings weekly in 139 countries today.

| Day/Time     | Meeting ID  | Meeting Format             |
|--------------|---|----------------------------|
| Mon 7AM EST  | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | JFT/Topic                  |
| Mon 12PM EST | <a href="https://bluejeans.com/375933012">https://bluejeans.com/375933012</a> | Rotating                   |
| Tue 12PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | Topic/Spiritual Principles |
| Fri 10PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | Rotating                   |
| Fri 11PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | Ask It Basket              |
| Fri 12PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | Step Working Guide Study   |
| Sat 12PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | JFT/Topic                  |
| Sun 12PM EST | <a href="https://zoom.us/j/756488015">https://zoom.us/j/756488015</a>         | Steps & Principles         |

## **Additional NA Virtual Meetings**

[CPRNA Meeting Schedule](#) - NA is a nonprofit Fellowship or society of men and women for whom drugs had become a major problem. They are recovering addicts who meet regularly to help each other stay clean. This is a program of complete abstinence from all drugs. There is only one requirement for membership, the desire to stop using.

## **Alcoholic Anonymous (AA) Online Meetings**

[Alcoholics Anonymous](#) is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from alcoholism. The only requirement for AA membership is a desire to stop drinking. There are no dues or fees for AA membership; they are self-supporting through their own contributions. AA is not allied with any sect, denomination, politics, organization or institution; does not wish to engage in any controversy; neither endorses nor opposes any causes. Their primary purpose is to stay sober and help other alcoholics achieve sobriety.

## **Cocaine Anonymous**

[Online Services for CA](#) - Cocaine Anonymous is a fellowship of men and women who share their experience, strength and hope with each other that they may solve their common problem and help others to recover from their addiction. The only requirement for membership is a desire to stop using cocaine and all other mind-altering substances. There are no dues or fees for membership; they are fully self supporting through their own contributions. CA is not allied with any sect, denomination, politics, organization, or institution. They do not wish to engage in any controversy and we neither endorse nor oppose any causes. Their primary purpose is to stay free from cocaine and all other mind-altering substances, and to help others achieve the same freedom.

## **LifeRing**

[LifeRing Secular Recovery](#) is an organization of people who share practical experiences and sobriety support. There are as many ways to live free of drugs and alcohol as there are stories of successful sober people.

## **Marijuana Anonymous**

[District 13](#) is an online fellowship of people who share their experience, strength, and hope with one another to solve common problems and help others to recover from pot addiction.

## **Reddit Recovery**

[A place for redditors in recovery](#) to hang out, share experiences, and support each other. This is

a place where individuals can discuss the various ways to achieve and maintain a life free from active addiction. Everyone is welcome.

### **Refuge Recovery**

[Refuge Recovery](#) is grounded in the belief that Buddhist principles and practices create a strong foundation for a path to freedom from addiction. This program is an approach to recovery that understands: All individuals have the power and potential to free themselves from the suffering that is caused by addiction.

### **SoberoCity**

[Soberocity](#) could be a great solution for individuals that are looking for an online community that occasionally has live events across the country.

### **Sobergrid**

[Sobergrid](#) is a platform to help anyone get sober and stay sober. Some join to get support, others to give it. Each free download, post, and connection create an opportunity to stay sober while helping others do the same. **Soberistas**

[Soberistas](#) is an international online recovery community, which makes it easy to connect with like-minded women who are friendly, non-judgmental, and helping each other kick the booze and stay sober.

### **Sober Recovery**

[Sober Recovery](#) consists of forums that are a great place for people with substance use disorders to find assistance and helpful information. The community has more than 168,000 people who are recovering from substance use disorders and/or codependence, as well as their friends and family.

### **We Connect Recovery**

[We Connect Recovery](#) are online recovery support groups that are available daily. They are open to anyone who is dealing with substance use, mental health concerns, disordered eating, as well as any other quality of life concerns. Everyone is welcome no matter their pathway to recovery or recovery status.



### **Gambler's Anonymous**

The telephone conference call platform they are using has local access telephone numbers for 74 different countries. If calling from a foreign country, please use the appropriate email address to request the local calling numbers.

| Day/Time    | Call In Number | Access Code | Questions?   |
|-------------|----------------|-------------|--|
| Sun 9PM EST | 712-770-5338   | 836083#     | <a href="mailto:Sunday9PMHelp@gmail.com">Sunday9PMHelp@gmail.com</a>       |
| Mon 9PM EST | 712-770-4925   | 554671#     | <a href="mailto:Monday9PMHelp@gmail.com">Monday9PMHelp@gmail.com</a>       |
| Tue 9PM EST | 712-770-4943   | 253824#     | <a href="mailto:Tuesday9PMHelp@gmail.com">Tuesday9PMHelp@gmail.com</a>     |
| Wed 9PM EST | 712-770-4160   | 611704#     | <a href="mailto:Wednesday9PMHelp@gmail.com">Wednesday9PMHelp@gmail.com</a> |
| Thu 9PM EST | 712-770-4981   | 872853#     | <a href="mailto:Thursday9PMHelp@gmail.com">Thursday9PMHelp@gmail.com</a>   |
| Fri 9PM EST | 712-770-4996   | 565094#     | <a href="mailto:Friday9PMHelp@gmail.com">Friday9PMHelp@gmail.com</a>       |
| Sat 9PM EST | 712-770-5335   | 491301#     | <a href="mailto:Saturday9PMHelp@gmail.com">Saturday9PMHelp@gmail.com</a>   |

### **NAMI Support**

The [NAMI Helpline Coronavirus Information and Resources Guide](#) may be a helpful resource for those with **mental health conditions**. This resource provides information about the pandemic, resources for support, warm line phone numbers, etc.

### **Online Resources from Hazelden Betty Ford**

“[Tips for Staying Connected and Safeguarding Your Addiction Recovery](#)” by Hazelden Betty Ford (HBF) contains online support meetings, podcasts/blogs, mobile apps, social media groups, and movie/video suggestions. HBF also has [The Daily Pledge](#) which is an online support community with chat rooms and places to hang out virtually with friends in recovery.

## **Shatterproof**

[“How I’m Coping with COVID-19 and Social Isolation as a Person in Long-Term Recovery”](#)

provides helpful suggestions of what to do (exercising, reaching out, praying, meditating, focusing on breathing, listening to music, doing projects you’ve been putting off) and what NOT to do (extended time on social media, negative self-talk, eat too much unhealthy food, watch the news 24/7).

## **Peer Support Warm Lines hosted through Maryland’s Wellness and Recovery Center Networks**

Maryland’s Wellness and Recovery Centers offer warm line services for the individuals who have non-urgent behavioral health needs in their jurisdiction. The warm lines are maintained by Peer Recovery Specialists who are able to provide peer support services over the phone.

| <b>Jurisdiction/Program</b>             | <b>Warm Line Hours</b>                        | <b>Phone Number</b> |
|---|---|---------------------|
| <b>(Allegany) Hope Station</b>          | Mon–Fri 8AM–4PM EST                           | (240) 362–7168      |
| <b>(Carroll) OOO Carroll Co</b>         | Mon–Fri 9AM–5PM EST<br>Sat & Sun 10AM–4PM EST | (443) 372–2800      |
| <b>(Frederick) OOO Frederick County</b> | Mon–Sat 12PM–6PM EST                          | (301) 620–0555      |
| <b>(Garrett) Mountain Haven</b>         | Mon–Fri 9AM–5PM EST                           | (301) 334–1314      |
| <b>(Kent) Recovery in Motion</b>        | Mon–Fri 9AM–5PM EST                           | (443) 282–4611      |
| <b>(Montgomery) Silver Spring WRC</b>   | Mon–Sat 1PM–6PM EST                           | (240) 278–2621      |
| <b>(Wicomico) Lower Shore Friends</b>   | Mon–Fri 10AM–5PM EST                          | (410) 334–2173      |
| <b>(Washington) Soul Haven</b>          | Mon–Fri 11AM–5PM EST                          | (301) 707–6267      |