
OPIOID OPERATIONAL COMMAND CENTER
ORF Targeted Abatement Grant Program
Local Abatement Plan

IMPORTANT NOTE: Please review the instructions provided in the Call for Proposals document prior to completing this form.

The application package should be submitted via Smartsheet Form to the link below.

<https://app.smartsheet.com/b/form/7abd36feaa304e9dad2e776c198e857f>

Jurisdiction/subdivision: Cecil County, Maryland

Point of Contact:

First/Last Name: David Trolio

Position: Director of Community Services

Phone: 410-996-8435

Email: dtrolio@cecilcountymd.gov

Mailing Address:

200 Chesapeake Blvd

Elkton, MD 21921

Total Allocated Funds \$1,438,495.93

Primary [State Finance and Procurement Article 7-331/Chapter 270](#) Legislative Provision Local Abatement Plan will fulfill (click here to review these legislative bills):

Please select the ORF provision which most accurately represents the primary focus/foci of the local abatement plan (you may identify more than one).

Currently, Cecil County anticipates focusing on provisions (I), (II), (III), (V), (VIII), (X) and (XI), with the understanding that as Cecil County's plan continues to evolve, so too will the focus on additional provisions.

- (i) Improving access to medications proven to prevent or reverse an overdose;
- (ii) Supporting peer support specialists and screening, brief intervention, and referral to treatment services for hospitals, correctional facilities, and other high-risk populations;
- (iii) Increasing access to medications that support recovery from substance use disorders;
- (iv) Expanding the Heroin Coordinator Program, including for administrative expenses;
- (v) Expanding access to crisis beds and residential treatment services for adults and minors;
- (vi) Expanding and establishing safe stations, mobile crisis response systems, and crisis stabilization centers;
- (vii) Supporting the behavioral health crisis hotline;
- (viii) Organizing primary and secondary school education campaigns to prevent opioid use, including for administrative expenses;
- (ix) Enforcing the laws regarding opioid prescriptions and sales, including for administrative expenses;

- (x) Research regarding and training for substance use treatment and overdose prevention, including for administrative expenses; and
- (xi) Supporting and expanding other evidence-based interventions for overdose prevention and substance use treatment

PLAN SUMMARY *The plan summary must provide a clear summary of the projects to be funded and the activities that will be conducted in service of the Local Abatement Plan, and clearly tie to the provisions of the legislation identified above.*

Cecil County's Local Abatement Plan is largely based on Cecil County's Opioid Response plan completed by the Opioid Prevention Team, formerly the Opioid Intervention Team, and its subcommittees over a two-year period. The plan illustrates strategies and objectives targeted at addressing seven overarching goals which are listed below. Before providing an overview of the plan, it is important to both describe the process that led to the development of the plan as well as the foundational pillars used to shape the goals and the subsequent strategies and objectives. Since the onset of the epidemic, the Cecil County Health Department has served as the lead agency in addressing the opioid crisis through the development and provision of innovative services and initiatives based on the foundational pillars of public safety, treatment, recovery, prevention, harm reduction and community support. A brief description of each of the foundational pillars is provided below.

Public Safety: Refers to the welfare and protection of the general public related to substance use disorder (SUD), including law enforcement agencies, emergency services and programs administered through those agencies.

Treatment: Refers to medical, behavioral and psychological care provided to persons in active addiction.

Recovery: Refers to programs, services and/or initiatives that support sobriety such as recovery support programs, recovery houses and Certified Peer Recovery Specialists.

Harm Reduction: Refers to a range of public health policies and programs designed to lessen the negative social and/or physical consequences associated with substance use.

Prevention: Refers to primary, secondary and tertiary prevention campaigns, initiatives, and programs.

Community Support: Refers to ancillary initiatives such as assistance for children and family members impacted by SUD, education, training and support for 1st

responders experiencing vicarious trauma and initiatives to improve access to resources.

Following a Community Summit hosted by Cecil County Government in Spring of 2021 which explored both barriers and opportunities related to addressing the opioid epidemic in Cecil County, a reestablished Opioid Prevention Team met to discuss and ultimately, create seven overarching goals related to addressing the opioid epidemic in Cecil County. Following the creation of the goals, the Opioid Prevention Team's Senior Policy Group convened four subcommittees consisting of representatives from government agencies, nonprofit organizations, healthcare providers, as well as members of the general public. The four workgroups were Treatment & Recovery, Data & Communications, Community Engagement, and Prevention & Support. Each workgroup focused on one or two of the overarching goals and developed strategies and objectives to achieve these goals. These plans were presented to the Opioid Prevention Team Senior Policy Group which then integrated the workgroup recommendations into a comprehensive, countywide Strategic Plan for Overdose Response.

As indicated, the plan focuses on the strategies and objectives necessary to achieve the identified goals, through various priority areas with specific activities and initiatives defined. The goals are as follows:

1. *Reduce the number of overdose deaths in Cecil County;*
2. *Increase the number of people receiving evidence-based treatment and recovery services;*
3. *Foster a culture of health including mental wellness and substance use prevention;*
4. *Develop a comprehensive data management and program evaluation system to inform services and track outcomes;*
5. *Improve access to treatment programs, recovery services, and support for families and professionals;*
6. *Reduce the stigma associated with mental health conditions and substance use; and,*
7. *Improve and enhance collaborative efforts between community partners and systems.*

Subsequently, the comprehensive plan was presented to the Opioid Prevention Team membership and, in August of 2023, in collaboration with the Maryland Office of Overdose Response, Cecil County Government hosted a town hall to provide an update on efforts to

address overdose in the jurisdiction including an update on implementation of the strategic plan. While important progress has been made on several of these goals, the targeted local abatement funds remain critical to Cecil County's efforts to develop additional programming, expand upon successful strategies currently being implemented, and provide long-term support for programs mandated by state law that do not have sustainable funding.

In Section III of this application, the Opioid Prevention Team's Strategic Goals and Objectives are listed in detail in an effort to demonstrate their alignment with Section 7-331 of the State Finance and Procurement Article, the legislative provision that each local abatement plan is obligated to fulfill.

To more effectively articulate the County's Abatement Plan/Strategic Plan for Overdose Response, Cecil County synthesized the capacious Strategic Plan and associated objectives into three succinct priority areas. These priority areas are:

1. Access to Care to include treatment and recovery;
2. Prevention and Community Support; and,
3. Communication and Data.

Examples of programs and/or services and initiatives that fall under these priority areas include but are not limited to:

- Expanded Narcan distribution;
- Expanded access to Certified Peer Recovery Specialists in the community;
- Expanded recovery and treatment options;
- Expanded youth prevention programming;
- Increased support initiatives; and,
- Increased medication-assisted treatment options.

The ORF Abatement grant funds will be used to advance these priorities and initiatives and will be directly aligned with Section 7-331 of State Finance and Procurement Article.

I. PLAN PROBLEM STATEMENT *The problem statement section describes why the plan is needed and identifies the most significant issues, problems, trends, or opportunities that will be addressed by the Local Abatement Plan.*

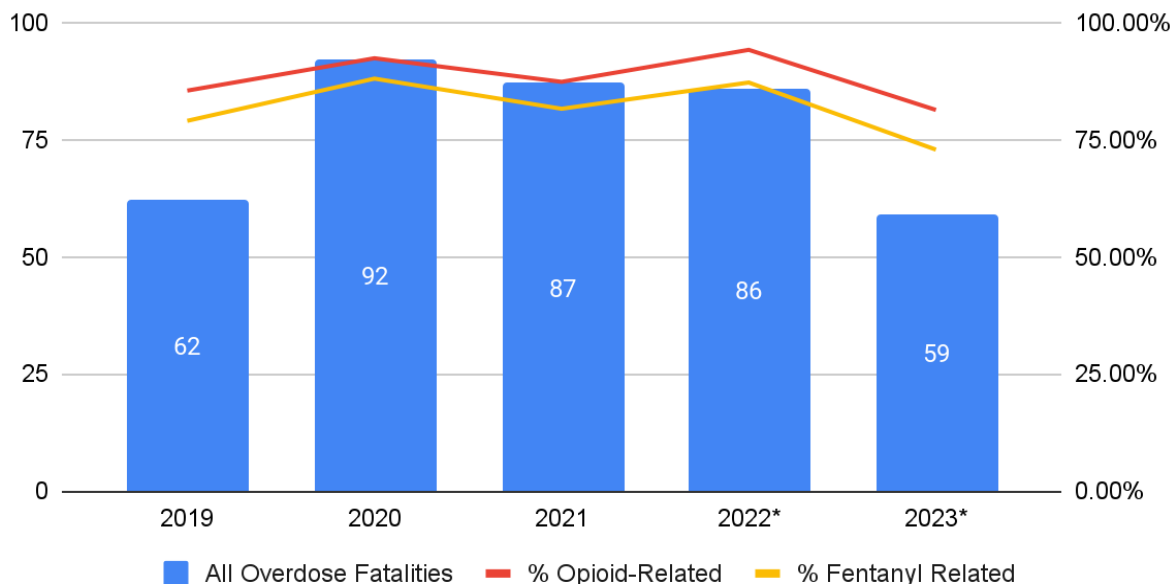
For more than a decade, the opioid epidemic has exacted a staggering toll on Cecil County. Historically, Cecil County has had one of the highest overdose fatality rates per capita in Maryland. Although overdose rates began to plateau in 2019, the onset of the COVID-19 pandemic in 2020 resulted in a record-high number of overdoses in the county.

Eighty-seven overdose deaths were confirmed in CY2021; 92 deaths in CY2020, and 62 deaths in CY2019. In CY2023, 81% of all drug overdoses were due to opioid-related intoxication; for CY2022, 94% of overdoses were opioid-related. Fentanyl plays an outsize role in overdose deaths in Cecil County. Based on a review of official and preliminary data, from CY2019 through CY2023, between 79% and 84% of all drug overdose deaths in Maryland were associated with fentanyl.

Based on preliminary data from the Maryland Vital Statistics Administration, 59 fatal overdose deaths occurred in Cecil County during CY2023, a decrease of 31% from the provisional count of 86 deaths in CY2022.

Cecil County - Overdose Fatalities

**preliminary data from Maryland Department of Health, Vital Statistics Administration*



III. PLAN GOALS AND OBJECTIVES *Program Goals and Objectives should define the central aim and principal goals of the Local Abatement Plan that will be addressed by the project activities, and clearly tie to the provisions of the legislation identified.*

The attachment below is Cecil County’s Opioid Prevention Team’s Strategic Plan Goals and Objectives Overview/Abatement Plan. The objectives directly address each of the seven goals referenced in Section I of this application. Although these goals were developed prior to the legislation outlining the requirements for use of the opioid restitution funds, there is

significant overlap in the planned strategies to achieve these goals and the priority areas identified in the State Finance and Procurement Article 7-331.

Opioid Prevention Team Proposed Strategic Plan Goals and Objectives Overview		
<i>Goal 1: Reduce the number of overdose deaths in Cecil County</i>		
Objective 1.1	Elevate community awareness on how to identify and respond to an overdose.	
	Strategy 1.1.1	Increase naloxone distribution and overdose response training
	Strategy 1.1.2	Promote overdose response training and related resources via social media, billboards, local newspapers, printed collateral, and stakeholder websites.
Objective 1.2	Decrease harm associated with substance use and decrease potential for opioid overdose, with expanded enrollment within local harm reduction programs.	
	Strategy 1.2.1	Expand harm reduction program outreach in the community to increase enrollment.
Objective 1.3	Coordinate public communications efforts among partner organizations.	
	Strategy 1.3.1	Establish communications team (i.e. OIT Joint Information Center) among partner agencies.
	Strategy 1.3.2	Create a county-wide advertising campaign
	Strategy 1.3.3	Coordinate external messages
	Strategy 1.3.4	Develop a tool to share data with the public in an easily digestible format.
	Strategy 1.3.5	Identify communication strengths and opportunities of each partner organization to maximize efforts.

Goal 2: Improve access to evidence-based treatment and recovery programs to increase the number of individuals served.

Objective 2.1	Ensure immediate access (within one to six hours) to mobile crisis response, withdrawal management, and Medication for Opioid Use Disorder (MOUD) / Medication Supported Recovery (MSR) treatment (includes methadone, buprenorphine, vivitrol, naltrexone, etc.)	
	Strategy 2.1.1	Create a workgroup of stakeholders within Cecil County to identify suitable locations for a behavioral health crisis stabilization center facility in Cecil County.
	Strategy 2.1.2	Explore resources for additional funding to extend mobile crisis staff and response
	Strategy 2.1.3	Coordinate with local and regional providers to provide withdrawal management and MOUD (MSR) treatment-on-demand.
Objective 2.2	Increase capacity of residential inpatient and withdrawal management services.	
	Strategy 2.2.1	Create a workgroup of stakeholders within Cecil County to identify suitable locations for a residential treatment facility in Cecil County.
	Strategy 2.2.2	Publish a Request for Expression of Interest (REOI) to regional and national residential treatment organizations for development of a residential program in Cecil County.
	Strategy 2.2.3	Stakeholder workgroup to develop criteria and deliverables to ensure quality treatment program is developed, delivered and maintained.
Objective 2.3	Ensure that individuals with Medicaid have access to the full continuum of behavioral health services	
	Strategy 2.3.1	Create a workgroup of stakeholders within Cecil County to conduct behavioral health needs assessment for Medicaid recipients
	Strategy 2.3.2	Identify barriers in accessing behavioral health services and propose solutions.
Objective 2.4	Increase treatment capacity and access with focused efforts to attract and retain a talented and professional behavioral health workforce	
	Strategy 2.4.1	Increase educational opportunities to encourage pursuit of behavioral health degrees.
	Strategy 2.4.2	Provide financial incentives to retain behavioral health workforce.
Objective 2.5	Elevate community awareness of existing portals / create new entry points to behavioral health treatment and recovery support resources	

	Strategy 2.5.1	Ensure that all medical, criminal justice, faith-based and other social service systems are knowledgeable and capable of linking individuals to treatment and recovery support services.
	Strategy 2.5.2	Promote entry points for behavioral health services.
	Strategy 2.5.3	Create additional entry points for consumer access to behavioral health services.
	Strategy 2.5.4	Promote existing behavioral health/treatment resource directories and websites.
Goal 3: Foster a culture of health including mental wellness and substance use prevention		
Objective 3.1	Expand Cecil County's youth participation in prevention work	
	Strategy 3.1.1	Extend prevention work into the middle schools.
Objective 3.2	Increase mental wellness opportunities	
	Strategy 3.2.1	Provide semi-annual mental wellness events at the county high schools
	Strategy 3.2.2	Increase community-wide awareness and understanding of self-care practices
Objective 3.3	Increase opportunities for alternative activities to reduce negative social influences that contribute to mental health, wellness and substance use.	
	Strategy 3.3.1	Provide activities to create a supportive atmosphere that promotes connection and healthy lifestyles.
	Strategy 3.3.2	Incorporate evidence-based programming/messaging about the value of connection in preventing addiction in organized youth activities.
Objective 3.4	Leverage existing programs to identify high risk families and provide targeted outreach and resources.	
	Strategy 3.4.1	Identify community programs currently targeting high risk youth and/or families
	Strategy 3.4.2	Assess capacity of existing programs to enhance wraparound services to high-risk youth and families

Goal 4: Develop a comprehensive data management and program evaluation system to inform services and track outcomes		
Objective 4.1	Develop and execute data sharing agreements between partner organizations.	
	Strategy 4.1.1	Contract with UMD to develop data use agreement templates.
	Strategy 4.1.2	Conduct a data survey/audit among partner organizations.
Objective 4.2	Determine logistics for data system to collect data from all partners	
	Strategy 4.2.1	Designate partner to serve as lead agency for development, implementation, and ongoing maintenance of data system.
	Strategy 4.2.2	Identify funding to create the data system.
	Strategy 4.2.3	Hire Program Manager to coordinate development and implementation of the data system.
Objective 4.3	Create and implement data system.	
	Strategy 4.3.1	Determine scope of work; issue and execute RFP.
	Strategy 4.3.2	Develop standard operating procedures for data entry and reporting.
	Strategy 4.3.3	Identify reports needed for program action and evaluation.
	Strategy 4.3.4	Determine system users and user levels.
	Strategy 4.3.5	Establish regular stakeholder meetings as a quality assurance and evaluation team for the data warehouse.
Goal 5: Improve access to support for families and professionals		
Objective 5.1	Establish pop-up/satellite support service locations to increase access, reduce transportation burdens, normalize the need for family supports and reduce scheduling pressures at provider offices.	
	Strategy 5.1.1	Form workgroups with partnering agencies to assess the feasibility of satellite support sites.
	Strategy 5.1.2	Develop promotion strategy for pop-up venues through a collaborative partner effort.
	Strategy 5.1.3	Evaluate cost/benefit of initiative.
Objective 5.2	Stabilize network of providers by strengthening provider resilience and decreasing burnout.	
	Strategy 5.2.1	Establish a “local provider care team” to raise awareness of available self-care and professional team building resources.
Objective 5.3	Increase the county’s awareness, access to, and understanding of local, regional and on-line support services through literacy-level appropriate communications and access to vetted resources.	

	Strategy 5.3.1	Identify gaps in existing support services, barriers to care, and propose solutions.
	Strategy 5.3.2	Share literacy-level appropriate vetted resources across partner public-facing resources.
Goal 6: Reduce the stigma associated with mental health conditions and substance use		
Objective 6.1	Develop messaging that addresses specific reasons stigma exists in Cecil County	
	Strategy 6.1.1	Perform outreach within the community to better understand why stigma exists
	Strategy 6.1.2	Develop an action plan from the outreach to address issues that contribute to stigma.
Objective 6.2	Increase understanding of substance use disorder and recovery	
	Strategy 6.2.1	Facilitate a county-wide behavioral health symposium
	Strategy 6.2.2	Offer training for the community on substance use disorder and other behavioral health conditions
	Strategy 6.2.3	Engage local leaders to support these initiatives to increase participate and openness to change from their staff and community
	Strategy 6.2.4	Incorporate education about substance use disorder and other behavioral health conditions early in school and elsewhere to promote accurate understanding at a young age
Objective 6.3	Increase community appreciation and understanding that treatment is effective, and that “people can and do recover” from substance use disorders.	
	Strategy 6.3.1	Elevate the visibility of behavioral health recovery and treatment accomplishments.
	Strategy 6.3.2	Create a “Treatment Works, People Do Recover” speakers bureau to facilitate community presentations on addiction and the multiple paths to recovery.
	Strategy 6.3.3	Develop message sharing partnerships with visible and respected partners in the community that have influence and access to diverse audiences.
Goal 7: Improve and enhance collaborative efforts between community partners and systems		
Objective 7.1	Enlarge advocate base of those involved in behavioral health initiatives	

	Strategy 7.1.1	Engage additional governmental representatives
	Strategy 7.1.2	Expand network of community-based organizations involved in the county's opioid response efforts.
Objective 7.2	Increase outreach and reduce barriers to involvement in behavioral health efforts	
	Strategy 7.2.1	Use data to identify areas most in need of access to information and collaboration (law enforcement run/incident data, overdose incidents, etc.)
	Strategy 7.2.2	Extend promotion of and access to substance use disorder resources to areas of the county outside of Elkton and the Route 40 corridor
	Strategy 7.2.3	Identify and partner with local champions who can bring attention and interest to behavioral health meetings, events, issues, etc.
Objective 7.3	Increase collaboration among local behavioral health providers to improve service to the community	
	Strategy 7.3.1	Perform outreach/education to service providers to educate about available behavioral health resources
	Strategy 7.3.2	Enhance connections between local service providers.
	Strategy 7.3.3	Facilitate a county-wide behavioral health provider symposium. Include high-profile speakers to attract participation.
Objective 7.4	Promote a resource directory that is up-to-date and accessible to the community	
	Strategy 7.4.1	Identify RewriteYourScript.org as the "go-to" substance use disorder resource.
	Strategy 7.4.2	Encourage existing online resource directories to include a link to the identified substance use disorder directory.
	Strategy 7.4.3	Research how best to produce a hard copy resource directory for those without access to the internet. Incorporate into existing directories - DCS, Town of Elkton, etc.

IV. PLAN PROGRAM MEASUREMENT/PERFORMANCE INDICATORS

What you will use to measure (a) the effectiveness of the plan's support of the selected Goal/Strategy, (b) how it fills a gap in the region, and (c) how it serves its intended demographic. These measures may be quantitative (numeric) and qualitative (descriptive). These performance measures must be reported on annually, by project and ORF provision.

The effectiveness of the plan's goals and strategies will be measured through both process and outcome measures. For example, for Goal 1: Reduce the number of overdose deaths in Cecil County, continuous data monitoring is underway including quantitative measures from the Drug Intoxication Death Reports from the state Office of the Chief Medical Examiner as well as data collected by Cecil County's Heroin Coordinator/Opioid Awareness and Prevention Coordinator. Qualitative data is also being monitored from the Cecil County Health Department's Outreach to Survivors of Overdose Program as well as the Cecil County Prevention and Overdose Response Team (PORT). The PORT Team was developed in an effort to fill identified needs related to supports for family members of individuals who have experienced an overdose. As the county's Strategic Plan for Overdose Response evolves, the County will work closely with the Overdose Prevention Team to update progress on priorities and ensure appropriate data is collected for each effort funded with the targeted abatement grant funds.

Performance measures may include, but are not limited to, the following (listed by allowable uses under 7-331):

1. Naloxone Access: Improving access to naloxone medications proven to prevent or reverse an overdose
 - County Narcan saturation rate (number of people who died of opioid overdose in the jurisdiction x 20)
 - Number of individuals trained in Narcan administration
2. Peer Support and Referrals: Supporting peer support specialists and screening, brief intervention and, referral to treatment services for hospitals, correctional facilities, and other high-risk populations.
 - Number of peer support referrals by setting (local health department, recovery community organizations, local hospital)
 - Cecil Addiction Treatment Coordination Hotline data: total number of calls, warm handoffs to treatment, recovery support and harm reduction services
3. Access to Medication: Increasing access to medications that support recovery from substance use disorders
 - Number of individuals initiating medications for opioid use disorder (MOUD) while detained in the Cecil County Detention Center
 - Percentage of eligible individuals enrolled with a community MOUD provider upon release

- Percentage of eligible individuals enrolled with a community MOUD provider upon release

V. PLAN TIMELINE

Enter project information as necessary

Below we have outlined the initial steps for fund disbursement. The trustee group will periodically meet with the Overdoes Prevention Team (ORT) in an effort to gather recommendations regarding Cecil County's ongoing efforts and strategies to advance and evolve their response to the opioid epidemic. The ORT will routinely confer with the Behavioral Health Advisory Council regarding strategies as well and, will review the Behavioral Health Landscape Study/Assessment (currently underway, final report expected by October 1, 2025), to aid in developing and updating the County's response over the next five years.

Goal(s)	Key tasks/activities	Person(s) responsible	Progress Measurement	Begin date	End date
<i>Establish funding mechanisms for opioid settlement funds</i>	<i>Convene the trustee group to establish funding decision criteria, funding application mechanism, agency responsible for application processing, review, and contract monitoring</i>	<i>County Executive, Trustee Group,</i>	<i>Funding decision criteria established Funding eligibility criteria determined Application review committee established</i>	<i>September 2024</i>	<i>December 2024</i>
<i>Issue Request for Proposals</i>	<i>Draft a request for proposals based on identified goals, strategies, and objectives aligned with legislative mandates</i>	<i>To be determined by County Executive and Trustee Group</i>	<i>RFP solicitation released</i>	<i>January 2025</i>	<i>March 2025</i>
<i>Disburse funds to agencies, community-based organizations, etc. engaged in work to address priority areas</i>			<i>Funds disbursed Programs/activities initiated Periodic data collection and</i>	<i>March - May 2025</i>	<i>2029</i>

			evaluation underway		
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I. SPEND PLAN DESCRIPTION *Detailed explanation of planned expenses*

In October 2020, the Cecil County Council introduced and subsequently passed legislation at the request of the County Executive to establish the “Cecil County, Maryland Opioid Litigation Settlement Trust Fund” under the terms and conditions set forth in a Trust Agreement to be entered into by the County and the Trustees of the Fund. The purpose of the Trust Fund was to preserve and protect the Trust Fund’s assets and to assist the County in providing and supporting programs that prevent, and treat opioid addiction in Cecil County, Maryland. The legislation granted the Trustees full power and authority to invest and manage the assets of the Trust Fund in accordance with the Trust Agreement.

The Trustee Group is made up of eight positions, or their respective designees, within the County. These include the County Executive, the Directors of Finance, Community Services and Emergency Services for the County, the State’s Attorney, the Health Officer, the Cecil County Sheriff, and the County Council President.

At the time of the passage of the legislation, Cecil County had previously initiated litigation in Federal court against certain manufacturers and distributors of prescription opioid pharmaceutical products. Moreover, at the time of the passage of the legislation, a settlement had yet to be reached, but it was believed that if and when a settlement were to occur, funds awarded as a result of the settlement, could be significant and disbursed in a single payment.

Following the settlement, the existing Trust Agreement needed to be amended to better reflect both the scope and disbursement timeline of the settlement funds. As such, legislation was passed in April of 2024 amending the existing Trust Agreement to better reflect the settlement agreement.

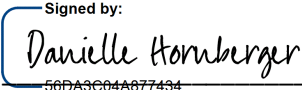
The Trustee Group is tasked with determining the amount of funding disseminated on an annual basis as well as the methodology by which the funding will be distributed. The Trustee Group has held several meetings to date to discuss fund management and mechanisms for distribution to the community. Any disbursement from the Opioid Restitution Targeted Abatement Grant Funds will align with the legislative provisions reflected in Section 7-331 of the State Finance and Procurement Article.

All funding determinations will be guided by the priority areas, strategies, and objectives described in the county’s Strategic Plan for Overdose Response. Community input will also be prioritized. Through the strategic planning process, the Overdose Prevention Team has

solicited community feedback and active engagement in the planning process from a diverse group of stakeholders. This model will continue with the Targeted Abatement Funds. The Trustee Group will work closely with the Overdose Prevention Team, the Local Behavioral Health Authority, and the Behavioral Health Advisory Council (the combined Drug and Alcohol Advisory Council and Core Service Advisory Council).

Based on current data and programming needs in the county, Targeted Abatement Funds may be used to support the continued provision of medications for opioid use disorder (MOUD) in the Cecil County Detention Center, expansion of peer recovery specialists in the emergency department of ChristianaCare Union Hospital as well as other community settings, strengthening ongoing primary prevention efforts focused on county youth, and continued efforts to reduce the stigma associated with substance use disorder and harm reduction. As previously indicated, all efforts will be keenly aligned with the mandated legislative provisions.

To the best of my knowledge, I certify that all the information provided herein is true and correct.

Signed by:

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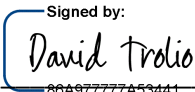
IX. AUTHORIZED OFFICIAL SIGNATURE: _____ Date: September 13, 2024

Printed Name: Danielle Hornberger

Title: County Executive

X. ADDITIONAL SIGNATURES

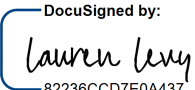
The signatures below serve to convey the coordination of other local entities or government partners involved in the local abatement plan. Additional signatures should be added as necessary

Signed by:

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Signature: _____

Printed Name: David Trolio

Title: Director, Cecil County Department of Community Services

DocuSigned by:

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Signature: _____

Printed Name: Lauren Levy

Title: Cecil County Health Officer

Signature: _____

Printed Name: _____

Title: _____