



MAYOR AND COUNCIL

MEETING NO. 22-20
Monday, July 13, 2020 – 7:00 PM

AGENDA

Agenda item times are estimates only. Items may be considered at times other than those indicated.

Any person who requires assistance in order to attend a city meeting should call the ADA Coordinator at 240-314-8108.

Rockville City Hall is closed due to the state directives for slowing down the spread of the coronavirus COVID-19 and continue practicing safe social distancing.

Viewing Mayor and Council Meetings

To support social distancing, the Mayor and Council are conducting meetings virtually. The virtual meetings can be viewed on Rockville 11, channel 11 on county cable, livestreamed at www.rockvillemd.gov/rockville11, and available a day after each meeting at www.rockvillemd.gov/videoondemand.

Participating in Community Forum & Public Hearings:

If you wish to submit comments in writing for Community Forum or Public Hearings:

- Please email the comments to mayorandcouncil@rockvillemd.gov by no later than 2:00 p.m. on the date of the meeting.
- All comments will be acknowledged by the Mayor and Council at the meeting and added to the agenda for public viewing on the website.

If you wish to participate virtually in Community Forum or Public Hearings during the live Mayor and Council meeting:

1. Send your **Name, Phone number, the Community Forum or Public Hearing Topic and Expected Method of Joining the Meeting (computer or phone)** to mayorandcouncil@rockvillemd.gov no later than **9:00 am on the day of the meeting**.
2. On the day of the meeting, you will receive a confirmation email with further details, and two Webex invitations: 1) Optional Webex Orientation Question and Answer Session and 2) Mayor & Council Meeting Invitation.
3. Plan to join the meeting no later than 5:40 p.m. (approximately 20 minutes before the actual meeting start time).
4. Read for <https://www.rockvillemd.gov/DocumentCenter/View/38725/Public-Meetings-on-Webex>
5. meeting tips and instructions on joining a Webex meeting (either by computer or phone).
6. If joining by computer, **Conduct a WebEx test:** <https://www.webex.com/test-meeting.html> prior to signing up to join the meeting to ensure your equipment will work as expected.
7. Participate (by phone or computer) in the optional Webex Orientation Question and Answer Session at 3 p.m. the day of the meeting, for an overview of the Webex tool, or to ask general process questions.

Participating in Mayor and Council Drop-In (Mayor Newton and Councilmember Myles)

Drop-In Sessions will be held by phone on Monday, August 3 from 5:30-6:30 p.m. **Please sign up by 2 p.m. on the meeting day using the form at:** <https://www.rockvillemd.gov/formcenter/city-clerk-11/sign-up-for-dropin-meetings-227>

- 6:00 PM 1. **Convene in Open Session to vote on motion to go into Closed Session pursuant to Section 3-305(b)(1)(i) of the General Provisions Article of the Annotated Code of Maryland to discuss the appointment, employment, assignment, promotion, discipline, demotion, compensation, removal, resignation, or performance evaluation of the City Clerk/Director of Council Operations and City Attorney, an employee over whom the Mayor and Council has jurisdiction.**
2. **Closed Session**
- 7:00 PM 3. **Reconvene into Open Session**
4. **Pledge of Allegiance**
5. **Agenda Review**
- 7:05 PM 6. **City Manager's Report**
- 7:15 PM 7. **COVID-19 Update**
- 7:30 PM 8. **Proclamation**
- A. **Proclamation Recognizing Peace Day 2020 in Honor of Mattie J. Stepanek (CM Myles)**
- 7:40 PM 9. **Community Forum**
- Any member of the community may address the Mayor and Council for 3 minutes during Community Forum. Unless otherwise indicated, Community Forum is included on the agenda for every regular Mayor and Council meeting, generally between 7:00 and 7:30 pm. Call the City Clerk/Director of Council Operation's Office at 240-314-8280 to sign up to speak in advance or sign up in the Mayor and Council Chamber the night of the meeting.
10. **Mayor and Council's Response to Community Forum**
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- 8:00 PM 11. Public Hearing
- A. Public Hearing on Scope of Review of the Rockville City Charter by the Charter Review Commission
- 8:20 PM 12. Consent
- A. Telework Policy for COVID-19 Pandemic
- 8:25 PM 13. Discussion, Instruction, Possible Introduction and Possible Adoption of an Ordinance to Adopt the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment as an Amendment to the Adopted and Approved Comprehensive Master Plan for the City of Rockville, Maryland
- 8:55 PM 14. Rockville Goes Purple Update
- 9:40 PM 15. 2021 Maryland Municipal League Legislative Action Requests
- 9:50 PM 16. Mayor and Council Discussion on Holding Meetings by Conference Call or Other Media Platforms and Possible Adoption of an Amendment to the Rules and Procedures for the Mayor and Council of Rockville
- 10:20 PM 17. Review and Comment - Mayor and Council Action Report
- A. Action Report
18. Review and Comment - Future Agendas
- A. Future Agendas
19. Old/New Business
- 10:40 PM 20. Adjournment
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The Mayor and Council Rules and Procedures and Operating Guidelines establish procedures and practices for Mayor and Council meetings, including public hearing procedures. They are available at: <http://www.rockvillemd.gov/mcguidelines>.



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Proclamation and Recognition
 Department: City Clerk/Director of Council Operations Office
 Responsible Staff: Jacqueline Mobley

Subject

Proclamation Recognizing Peace Day 2020 in Honor of Mattie J. Stepanek

Recommendation

Staff recommends that the Mayor and Council read, approve and present the proclamation to Jeni Stepanek, PhD., CEO of the Mattie J.T. Stepanek Foundation.

Discussion

Mattie J. T. Stepanek, who was a young poet and peacemaker hero, passed away on June 22, 2004, from a rare form of muscular dystrophy. This year marks the 15th anniversary of his passing. Mattie's poems of peace and hope have touched millions of lives, and his "Heartsongs" continues to reach out to people of all ages around the world.

Mattie chose to live in Rockville and loved his neighbors in the King Farm Community and his many friends throughout the City. Shortly after Mattie's death, his friends and neighbors in King Farm established the Mattie J.T. Stepanek Foundation with the mission of spreading Mattie's message of hope and peace. Mattie's Foundation offers educational and recreational programs, activities, and resources that encourage peacemaking and support the understanding of peace for individuals and our world.

In 2014, a congressional resolution was passed to declare July 17 (Mattie's birthday) as "National Peace Day" to honor Mattie's life and peace legacy. The Mattie J. T. Stepanek

Mayor and Council History

On July 2, 2018, the Mayor and Council declared July 17 each year, as Mattie T.J. Stepanek Peace Day in the City of Rockville.

Public Notification and Engagement

Celebrate Mattie's 30th birthday with a virtual Peace Walk & Roll or a "30 for 30 Peace Choice" activity.

Walk/Roll/Bike/Skate 30 miles during July

Wave to 30 neighbors

Watch 30 minutes of peace programming

Offer acts of kindness for 30 days

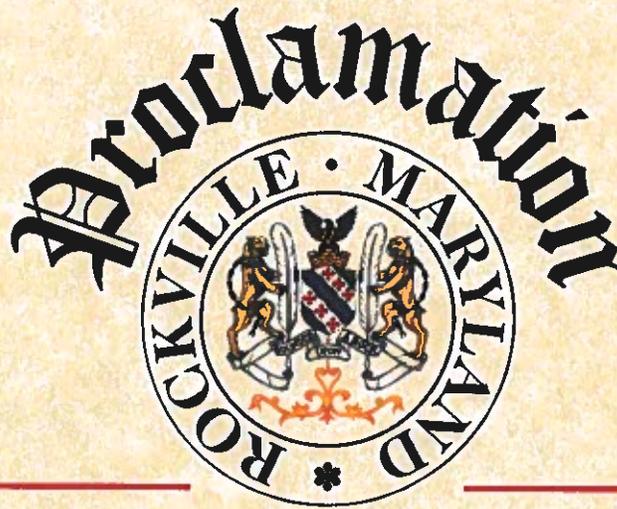
You choose YOUR 30 acts for peace to honor Mattie's 30th birthday!
Join Mattie's virtual 30th Birthday Party July 17 4-5 pm with Featured Toastmaster Nile Rodgers.

Attachments

Attachment 8.A.a: 2020 Mattie J.T. Stepanek Peace Day(PDF)

Attachment 8.A.b: 2020 Mattie J.T. Stepanek Peace Day Flyer (PDF)


Sara Taylor-Ferrell, City Clerk/Director of Council Operations 7/8/2020



WHEREAS, Mattie J.T. Stepanek was an American poet, ambassador, and advocate for peace in our world; and

WHEREAS, at the age of 3, Mattie started to write poetry, which he referred to as his "Heartsongs," enabling him to cope with a rare and fatal form of muscular dystrophy, a disease which also claimed the lives of his sister and two brothers; and

WHEREAS, the message contained in Mattie's "Heartsongs" touched the lives of people around the world, reaching individuals of all ages, races, nationalities, faiths, abilities, and aspirations; and

WHEREAS, after his death on June 22, 2004, Just Peace, a collection of essays on peace and Mattie's correspondence with former President Jimmy Carter, was published and awarded the Independent Publisher Gold Medal Award for the Outstanding Book of the Year in 2007 in the Peacemaker Category; and

WHEREAS, chose to live in Rockville. He loved his City, neighbors and friends; and

WHEREAS, on October 18, 2008, the City of Rockville honored Mattie J.T. Stepanek for his remarkable contributions to his community and to people all over the world by naming 26 acres of park in the King Farm community for him; and

WHEREAS, in honor of Mattie's 30th birthday and 15th anniversary, the Mattie J.T. Stepanek Foundation will hold virtual choose peace activities with family and friends, #Walk4Peace with people and pets, #Party4Peace or #Toast4Peace and the #KindnessCampaign.

NOW THEREFORE, the Mayor and Council of Rockville do hereby proclaim July 17, 2020 as Mattie Stepanek Peace Day and July 25, 2020 as Mama Peace Day and encourage all members of the community to recognize the many contributions of Mattie J.T. Stepanek by **thinking gently, speaking gently and living gently**, the motto by which this courageous young man lived his life.



Bridget Donnell Newton
Bridget Donnell Newton, Mayor

Monique Ashton
Monique Ashton, Councilmember

Beryl L. Feinberg
Beryl L. Feinberg, Councilmember

David E. Myles
David Myles, Councilmember

Mark Pierzchala
Mark Pierzchala, Councilmember

July 13, 2020

Peace Day(s) 2020



Celebrate Mattie's 30th birthday with a virtual WALK & ROLL and PEACE CHOICES throughout July!



REFLECT:

- How can you/your family/business show/celebrate peace?

RESPOND:

- Choose a "30 activity" for July (self/family/group)
- Examples... walk/roll/bike/skate 30 miles during July, 30 minutes of peace-related media programming, 30 smiles, 30 neighborly waves, 30 photos/messages of kindness...

REACH OUT:

- Register for Peace Day(s) 2020
 - Registration \$30 (includes free t-shirt or bandana)
 - Additional t-shirts \$25 each; people/pet bandanas \$15 each
 - Share a photo of your walk/choices for Mattie's website!
- #PeaceMatters #HeartsongsMatter #JustShowUp #WithPurpose



Registration link:
www.MATTIEONLINE.com

#Partners4Peace



Attachment 8.A.b: 2020 Mattie J.T. Stepanek Peace Day Flyer (3133 : Proclamation Recognizing Peace Day 2020 in Honor of Mattie J. Stepanek)



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Public Hearing
 Department: City Clerk/Director of Council Operations Office
 Responsible Staff:

Subject

Public Hearing on Scope of Review of the Rockville City Charter by the Charter Review Commission

Recommendation

Hold Second Public Hearing.

Discussion

The Mayor and Council is in the process of determining the scope of review for the Charter Review Commission and are seeking applicants for the Commission.

The Mayor and Council is seeking input from the public on what elements of the City's Charter the Charter Review Commission should review and make recommendations.

The Charter is a legal document similar to a constitution. It establishes the City's corporate limits and outlines how the City is organized and conducts business, such as holding elections, levying taxes, adopting ordinances, and providing services.

You can review the Mayor and Council's discussion about the Charter review process on the Jan. 13 Mayor and Council agenda at www.rockvillemd.gov/AgendaCenter

The City's Charter can be found at

https://library.municode.com/md/rockville/codes/code_of_ordinances?nodeId=CH

Mayor and Council History

At the Mayor and Council's meeting on January 13, 2020, the Mayor and Council established a commission to review the City's Charter.

Public Notification and Engagement

This is the second Public Hearing on the Charter Review Commission, you can review the discussion of the first hearing of June 1, 2020 Mayor and Council agenda at

https://www.rockvillemd.gov/AgendaCenter/ViewFile/Agenda/_06012020-5907

Next Steps

The Mayor and Council will discuss the scope of the work of the Charter Review Commission and make selection of appointments to the commission on July 20.


Sara Taylor-Ferrell, City Clerk/Director of Council Operations 7/8/2020



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Consent
 Department: Human Resources
 Responsible Staff: Karen Marshall

Subject

Telework Policy for COVID-19 Pandemic

Recommendation

Staff recommends that the Mayor and Council approve the Telework Policy for COVID-19 Pandemic.

Discussion

Teleworking, or working remotely, is a critical element of the City's continued provision of services throughout the pandemic. Many City employees are able, with support from the Department of Information Technology, to continue their job duties from home. Services across all City departments have continued successfully during this period of time by using this method of working. While the City's Personnel Policies and Procedures Manual presently includes a policy and procedure on teleworking, the attached policy further addresses City telework operations during the COVID-19 pandemic.

Mayor and Council History

On July 6, 2020, the Mayor and Council discussed the COVID-19 Telework Policy. In response to suggestions provided by the Mayor and Council, the following processes have been revised in the attached COVID-19 Telework Policy:

- 1) The appeal process if an employee's request to telework is denied.
- 2) The process for rescinding the COVID-19 Telework Policy.
- 3) The timeline for employees completing the Cyber Security User Awareness Training.

Next Steps

Upon approval by the Mayor and Council, the Policy will be distributed to employees to support their continued telework activity until returning to their workplace.

Attachments

Attachment 12.A.a: RD Approved Telework Policy for COVID-19 Pandemic Redline_ (PDF)

Attachment 12.A.b: RD Approved Telework Policy for COVID-19 Pandemic Final(PDF)


Rob DiSpirito, City Manager 7/9/2020



Telework Policy for COVID-19 Pandemic

Purpose

The City’s telework policy, during the COVID-19 pandemic, was developed based on guidance from the CDC, State of Maryland, and consideration of telework practices implemented by neighboring jurisdictions and other governments throughout the country. The purpose is to provide for a consistent understanding and application of this policy by employees and supervisors. The telework policy is not intended to replace, but rather to supplement the City’s telework policy in the Personnel Policies and Procedures Manual, during the COVID-19 pandemic. To better assist supervisors and employees in managing the COVID-19 pandemic challenges, this temporary city-wide telework policy is being implemented to enact and encourage social distancing strategies in the workplace.

Under the COVID-19 telework (working remotely) policy, employees will essentially perform the same work that they would in the workplace, in accordance with performance expectations and other terms determined by their supervisors.

Remote work arrangements will not be feasible in all cases and should not compromise the continuity of operations and essential functions of each office and department. Teleworking is neither a right nor an entitlement, but a tool to allow flexible work options during this health emergency. ~~If an employee feels they could telework, but they are not allowed to, the employee should contact the Human Resources Manager. If an employee’s request to telework is denied by their Department Director, they may appeal to the City Manager. After consulting with the Director of Human Resources, the City Manager will render the final decision.~~

Scope

This policy will allow employees to work from home while ensuring the continuity of City business operations. This policy may be updated periodically, with approval by the Mayor and Council. ~~This policy will remain in effect until the Governor rescinds the state of emergency associated with COVID-19. This policy will remain in effect until such time as when it is rescinded by the Human Resources Department.~~ This policy will remain in effect until the City Manager, in consultation with the Director of Human Resources, rescinds the Telework Policy for COVID-19 Pandemic.

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Requirements

Telework is effective immediately for employees whose positions are telework eligible (“eligible employees”), meaning employees whose work can be effectively performed remotely and who have received supervisor approval.

- [All employees hired before July 13, 2020 are required to take and pass the Cyber Security User Awareness Training no later than July 30, 2020. Employees hired July 13, 2020 and after will take the Cyber Security User Awareness Training during the onboarding process. Employees who do not pass the training, during the onboarding process, will be required to re-take and pass the training within 14 days of the date of hire. If employees do not pass the training within the stated timeframe, their network privileges will be revoked.](#)
- Employees’ obligations, duties, responsibilities, and terms and conditions of employment are unchanged.
- Employees shall perform all job duties at a satisfactory level or above.
- Employees must comply with all City and departmental policies and procedures while working a telework schedule.
- Employees will maintain the agreed-upon work schedule and be accessible via telephone, email, and virtual platforms as required during telework hours.
- Employees’ performance will continue to be monitored and evaluated as stated in the existing telework policy.
- Employees should work with the Department of Information Technology (IT) to ensure that they have access to 1) Outlook, 2) all the documents they need on OneDrive and SharePoint, i.e., Office 365, IT systems and networks as may be necessary, and 3) Virtual Private Network (VPN), if needed. The hours of support to teleworkers are based on the regular business hours of the Department of Information Technology, 8:30 AM to 5:00 PM, Monday – Friday.
- Employees may take home their work-issued laptop and technology accessories for the purpose of telework. [Please reference the Computer and Electronic Communications Policy in the Personnel and Procedures Manual on details for use of apps, personal emails, etc.](#)
- A limited number of laptops and technology accessories are available to employees who require them for teleworking; contact the Department of Information Technology.
- All “loaned” equipment will be tracked in the IT Asset Management System and checked out to employees. A printed copy of the “checked out” receipt may require employees’ signature.
- Use of personal computers for Telework is currently permitted. [All teleworkers using personal computers must abide by the policies and procedures established by the City, including those established by the Department of Information Technology, for the purposes of maintaining security and integrity of the City’s network system and supporting infrastructure.](#)
- Teleworkers should have a minimum bandwidth of at least a 100/100 Mbps subscription with their service provider.
- Teleworkers will be expected to communicate with their supervisors if anything occurs during teleworking that prevents them from completing their assigned work and/or working within the agreed-upon work schedule.

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- Requests to work overtime or use leave balances (i.e., sick, vacation, compensatory time, or other types of leave) must be pre-approved by the teleworkers' supervisor in the same manner as when working in the office.
- Teleworkers will be accessible during the agreed-upon work hours, regardless of telework location, and/or as may be defined by the teleworker and his/her supervisor.
- Teleworkers will provide a contact number to their supervisor, as well as to other department and City staff.
- Employees' salary, retirement, benefits, and City-sponsored insurance coverage will remain unchanged during telework.
- Employees and their supervisor remain obligated to comply with all Federal, State and City of Rockville rules, regulations, policies and procedures, including the Fair Labor Standards Act (FLSA).
- Teleworkers should consult with their tax advisor for information and advice regarding the ability to write off expenses for working at home.

Hours of Work

The amount of time and work hours that an employee is expected to work will not change due to temporary remote work. Hours of work should remain the same unless a change is agreed upon with an employee's supervisor. The employee agrees to conduct work and be available to communicate with their co-workers, supervisor(s), and others during work hours. Normal procedures will be followed for the approval of overtime, compensatory time, and the use of leave.

City Policies

Employees must comply with City policies and understand that violation of such may result in the termination of the temporary remote work arrangement and/or disciplinary action, up to and including dismissal.

Security of Information and Records

Employees approved for telework are responsible for the security of information, documents, and records in their possession or used during teleworking. Restricted-access material should not be accessed or removed from the worksite without written consent from the employee's supervisor. Employees approved for telework must apply appropriate safeguards to protect confidential information from unauthorized disclosure or damage. They must comply with all privacy and security protocols and requirements implemented by the City.

Equipment, Software and Supplies

- The employee is responsible for the maintenance and care of the equipment they use. When City equipment is used at the City or at a remote workplace, the employee is financially responsible for that equipment if it is lost, stolen or damaged because of that employee's negligence, misuse, or abuse.
- Equipment provided by the City for the purpose of facilitating teleworking may be used: 1) only by employee; and 2) only for City business.
- The employee is responsible for maintaining and repairing employee-owned teleworking equipment at personal expense and on personal time. The City is not responsible, unless other arrangements are approved in advance. Equipment and materials provided by the City for use at the teleworking location remain the property of the City. The City is responsible for maintaining, repairing, and replacing City- owned equipment issued to teleworkers.
- In the event of equipment malfunction, the teleworker must notify his/her supervisor immediately. Teleworkers must take the necessary steps and precautions to safeguard City equipment and materials.
- In the event of any delay in repair or replacement of City equipment, or other circumstances that would make it impossible for the employee to telework, departments may assign other work, request that employee be moved to another work location, or request that employee return to his or her primary work location.
- Employees will “check out” all supplies needed for the teleworking assignment by contacting the appropriate office staff.

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Expenses

The City will not pay for, or reimburse, the following expenses:

- Operating costs (such as electric bills, internet, etc.), home maintenance, or other costs incurred by employees in the use of their homes as alternate work locations.
- Costs associated with the occupation of the home/offsite work location.
- Out-of-pocket expenses for supplies that are regularly available at the City office (unless approved in advanced and in writing by the employee's supervisor).

[Dependent Care](#)

[This temporary city-wide telework policy is being implemented to enact and encourage social distancing strategies in the workplace; teleworking is not a substitute for dependent care.](#)

Questions about this policy may be directed to Colette Anthony, Deputy Director of Human Resources, at canthony@rockvillemd.gov or 240-314-8473.



Telework Policy for COVID-19 Pandemic

Purpose

The City's telework policy, during the COVID-19 pandemic, was developed based on guidance from the CDC, State of Maryland, and consideration of telework practices implemented by neighboring jurisdictions and other governments throughout the country. The purpose is to provide for a consistent understanding and application of this policy by employees and supervisors. The telework policy is not intended to replace, but rather to supplement the City's telework policy in the Personnel Policies and Procedures Manual, during the COVID-19 pandemic. To better assist supervisors and employees in managing the COVID-19 pandemic challenges, this temporary city-wide telework policy is being implemented to enact and encourage social distancing strategies in the workplace.

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Scope

This policy will allow employees to work from home while ensuring the continuity of City business operations. This policy may be updated periodically, with approval by the Mayor and Council. This policy will remain in effect until the City Manager, in consultation with the Director of Human Resources, rescinds the Telework Policy for COVID-19 Pandemic.

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Dependent Care

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Questions about this policy may be directed to Colette Anthony, Deputy Director of Human Resources, at canthony@rockvillemd.gov or 240-314-8473.



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: D & I, Possible Introduction & Possible Adoption
 Department: PDS - Comprehensive Planning
 Responsible Staff: Andrea Gilles

Subject

Discussion, Instruction, Possible Introduction and Possible Adoption of an Ordinance to Adopt the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment as an Amendment to the Adopted and Approved Comprehensive Master Plan for the City of Rockville, Maryland

Recommendation

Staff recommends that the Mayor and Council review and discuss testimony from the June 8, 2020 public hearing and direct staff to make any desired revisions to the Planning Commission draft of the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment (Attachment A).

If the Mayor and Council concludes its discussion and reaches decision on any desired revisions, it may consider introducing the ordinance and proceeding to adoption at the same meeting. In such case, the ordinance should first be introduced, then a motion should be made to waive the layover period. If the motion to waive the layover period is approved by an affirmative vote of four or more members of the Mayor and Council, a motion to adopt the ordinance can then proceed.

Change in Law or Policy

If approved, the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment would, for the subject area:

1. Change the land use designations on the Planned Land Use Map, and
2. Amend applicable text in the 2002 Comprehensive Master Plan, the 2001 Town Center Master Plan, the 2004 East Rockville Neighborhood Plan, and the 2007 Lincoln Park Neighborhood Plan.

Discussion

Background

The Park Road and North/South Stonestreet Avenue area is one of the key opportunity areas identified in the 2018 Stonestreet Corridor Study (2018 Study), which can be viewed on the City's website at <http://www.rockvillemd.gov/2004/Stonestreet-Corridor>. The 2018 Study

included a robust year-long community engagement process that outlined land use, design, and infrastructure improvement recommendations for each of the opportunity areas.

On July 8, 2019, the Mayor and Council authorized staff to initiate a comprehensive master plan amendment for the Park Road and North/South Stonestreet Avenue area. The Planning Commission completed its review of the plan amendment on February 12, 2020 and transmitted its recommended document (Attachment A) to the Mayor and Council on March 25. On June 8, the Mayor and Council conducted a virtual public hearing to hear testimony on the draft document. The transcript of the public hearing is included as Attachment B to this memo. The public record for written testimony remained open until close of business on June 15. The written testimony is included as Attachment C.

Planning Commission Review Process

Following up on Mayor and Council direction, Planning and Development Services (PDS) staff presented a draft of the plan amendment to the Planning Commission on October 23, 2019. The Planning Commission approved, with refinements, the release of the draft and set its public hearing date for January 8, 2020. Prior to the January 8 public hearing, written testimony was received by several residents, the Maryland Department of Planning, and the East Rockville Civic Association (ERCA). At the public hearing, twelve individuals provided testimony. Several individuals who spoke at the public hearing followed up with written testimony prior to closing the public record on January 15.

The Planning Commission held a work session on February 12 to discuss the oral and written testimony and directed staff to make revisions based on input received. Staff outlined the major themes from the testimony for the Planning Commission to consider and discuss potential changes to the public hearing draft document. A summary of the revisions can be found later in this report within the Boards and Commissions Review section.

At that same February 12th meeting, the Planning Commissioners voted four to one to approve the plan amendment document as the Planning Commission draft, subject to the directed modifications, for transmittal as a recommendation to the Mayor and Council. Staff has made the directed modifications, and Attachment A is the resulting Planning Commission draft plan amendment. The Planning Commission Resolution (Attachment E) certifies and attests, as required by the State Land Use Article, the Planning Commission recommendation for approval.

State of Maryland Requirements and Legislative Body Deadlines

The State Land Use Article requires that the Mayor and Council act on the Planning Commission's draft within 90 days after the date that the Planning Commission certifies an attested copy of the recommended plan to the Mayor and Council. The Planning Commission Resolution, certifying its recommended plan, was transmitted to the Mayor and Council on March 25, 2020, along with all the testimony submitted to the Planning Commission. The date of transmittal established the initial deadline to act as June 23, 2020. If the Mayor and Council had not acted by the deadline, the Planning Commission's recommended plan amendment would have become part of Rockville's Comprehensive Master Plan.

Under State Law, however, if this deadline is not feasible, the Mayor and Council may extend, by resolution, the 90-day deadline. The Land Use Article allows one 60-day extension, to a maximum 150 days after a plan is certified. Due to the COVID-19 public health emergency, a time extension was required in this case to ensure that sufficient options were established to provide testimony at virtual public hearings. On June 22, the Mayor and Council voted to approve a resolution to extend the time for the Mayor and Council to act on the plan through August 22, 2020.

Summary of Mayor and Council Public Hearing Testimony

Prior to the June 8 public hearing, written testimony was received from several residents within East Rockville. At the public hearing, three individuals called in to the virtual meeting to testify. The first caller was in favor of more density around the Rockville Metro Station and recommended that, for the properties on the west side of N. Stonestreet Ave, (which are adjacent to the rail lines), the current language in the plan that places limits on residential development, be removed. The second caller spoke of property outside of the subject plan amendment area, and her concerns will be addressed through the Rockville 2040 process. The third speaker was the President of the East Rockville Civic Association (ERCA), who is supportive of the Stonestreet Corridor project as a whole, but not the language in the current draft that would allow up to a six-plex on Park Road.

Written testimony was received by email from 11 individuals prior to the close of the public record on June 15. The testimony was almost an even mix of support for the draft plan amendment as currently proposed, and opposition to certain elements of the proposal. For those in favor of the Planning Commission draft, they expressed support for more housing options and density across from the Rockville Metro Station. They liked the recommendations for improved walkability and pedestrian safety and thought the proposal would strengthen the neighborhood. Those who expressed opposition were primarily focused on the language that would allow the possibility for up to a six-plex residential development on Park Road. Concerns included increased traffic congestion, threat to the neighborhood character, incompatibility with adjacent and nearby single-family homes, stormwater management, and safety. One resident was also concerned about permitting more retail and office in the area given the area's proximity to Town Center and its existing challenges with vacancies; while others thought the focus for development should be on the commercial areas and that the residential areas should be left alone. Others wrote in about more general topics that included questions about whether racial and socio-economic impacts of the plan were considered, and a recommendation to integrate the plan amendment area into a larger study area in order to take into account potential Rockville Metro Station upgrades and redevelopment. Finally, the property owner on N. Stonestreet Ave, at Park Road and adjacent to the rail lines, wrote in to ask that the building height allowance match the height recommended for the properties on the east side of the street. Full copies of all written testimony are included in Attachment C.

Testimony by Key Issue

The following summary of testimony is organized by topic and highlights key issues that staff recommends for further discussion or clarification by the Mayor and Council, though the Mayor and Council are free to discuss and raise questions about any issue related to the plan amendment.

Land Use and Design

Summary of Testimony: As mentioned in the previous section, there was testimony submitted in opposition to permitting up to a 6-plex where it has been recommended in the Planning Commission’s approved draft report, including from the President of ERCA, though some testimony is opposed to any change in land use in the areas where there currently is single-family detached housing. The testimony about a six-plex specifically, and more density in general, was about half in favor and half opposed. Those in support thought that more housing options next to the Rockville Metro Station was appropriate and needed, and those opposed felt that increased density would be incompatible with the neighborhood and would negatively impact character.

Testimony was also provided about the properties within Area 1, on the west side of N. Stonestreet Ave, adjacent to the rail lines. The property owner requested that his properties be given the same height consideration as the properties across the street. One of the speakers at the public hearing also recommended that the language currently included in the plan (page 7, number 1) specific to residential development, be removed to allow more options to respond to tight and changing markets.

Staff Response: Given the various testimony, staff proposes that the following items be further discussed by the Mayor and Council. Full written testimony can be viewed as part of Attachment C. Please refer to the text on plan amendment document page 7 and to maps 3 and 4, “land uses as currently adopted and as proposed” on page 8 of Attachment A to reference each of the items below.

Area 4, Park Road, Inclusion of a Six-plex

The draft plan currently states that “a small multiplex with up to six units may be appropriate at the southeast corner of Park Road and South Stonestreet Avenue and on the north side of Park Road if the building fronts on Park Road” (plan amendment document page 7, number 4, first bullet). This area is part of Area 4 on the proposed land use map (Map 4 page 8), for which the Residential Attached land use classification is recommended.

The Residential Attached land use definition, refined and approved by the Planning Commission in 2019 as part of their review of the Rockville 2040 Comprehensive Plan update, includes the potential for a multi-plex of up to six units, but also allows for detached residential homes, rowhouses, duplexes, triplexes and fourplexes. With the range of housing types allowed in the Residential Attached land use category, staff took

an updated look at the recommendations for the plan amendment area and applied language that would allow for the possibility of a six-plex on Park Road near the corner with S. Stonestreet Avenue, a location directly across the street from the Rockville Metro Station. This recommendation was based on the City's policy to promote a greater mix of uses and housing types near the city's Metro stations, the City's interest in attracting missing middle housing so as to be a more inclusive community, and professional best practices.

Furthermore, a small multi-plex had been presented as part of an illustrative site test concept during the Stonestreet Corridor Study community engagement process, though the number of units was not specified in that illustration. As part of the Rockville 2040 community engagement process, staff also did a housing workshop on a Saturday morning in 2017 with the East Rockville community. At that workshop, participants identified the areas north and south of Park Road, near the Metro station, as locations where modest increases in residential density would be appropriate. As in the Stonestreet process, however, the number of units was never specified.

Given the concern about including language to allow up to a six-plex, the City Manager and staff propose an option for the Mayor and Council to consider that would remove the option for a six-plex along Park Road. The Mayor and Council may choose to limit the number to 4 units in "a small multiplex" in this area, consistent with the other Residential Attached areas. Although it would be a lesser number of units, it would still allow for the potential to incorporate different housing types in this transit-proximate area. It would also be consistent with the community input received during the Stonestreet Corridor Study community engagement process, as well as the Rockville 2040 community process.

Area 1, West Side of N. Stonestreet Ave, Adjacent to the Rail Lines

These properties are currently zoned MXB, Mixed Use Business, which has a maximum height limit of 55 feet. One of the zoning classifications being considered for these properties is MXNC, Mixed Use Neighborhood Commercial. The MXNC limits height to 45 feet, unless otherwise stated in a plan, in which case heights up to 65 feet may be recommended. Area 2, on the east side of N. Stonestreet Ave, includes text that states that building heights of up to 4-5 stories, or 50-65 ft, are recommended for this area (plan amendment document page 7, number 2). To be consistent, the Mayor and Council could consider including the same language for the properties in Area 1.

Regarding the language for residential development in this area, the Planning Commission discussed this topic at their meetings and decided to leave in some guidance about residential uses but revise the language to be less restrictive than what staff had initially proposed. The language currently states that "residential as the sole use is not encouraged at this location given site constraints due to shallow lot depths and the abutting rail lines. If residential units are proposed as a component of a larger

project, specific consideration should be given to ensure that negative impacts from the abutting rail lines are mitigated” (plan amendment document page 7, number 1, bullet 2). Staff understands the concern about changing markets and allowing enough flexibility to respond to future unknowns; however, both staff and the Planning Commission had concerns about accommodating residential uses in that area given the shallow depth of the properties and their adjacency to the rail lines. The Mayor and Council may wish to revisit that approach.

Traffic and Street Infrastructure

Summary of Testimony: There is already too much traffic in the area and the existing infrastructure cannot accommodate new development.

Staff Response: New development will be required to undergo a process through which the impacts of the development will be analyzed. This process includes assessing the existing infrastructure to determine whether it can support additional development. If new development exceeds what can be accommodated by existing infrastructure, improvements will be necessary for a project to move forward.

Pedestrian Safety and Access

Summary of Testimony: There has been a mix of testimony about pedestrian safety and access. Some have testified that the area is currently unsafe for pedestrians, particularly crossing Park Road, and that new development would exacerbate the issue. Others believe that new transit-oriented development will help shape a more pedestrian- and bicycle-friendly area and ultimately improve access and safety.

Staff Response: This area feeds directly into the Rockville Metro Station and is within walking distance of the Town Center. During the Stonestreet Corridor Study process, many people expressed frustration about the area’s lack of safe and complete pedestrian and bike infrastructure. There was also concern about a lack of lighting around the Metro station and safety for those walking home in the evening. Infrastructure improvements to North Stonestreet Avenue, Park Road, and the intersection of South Stonestreet Avenue and Park Road have been programmed into the City’s capital improvements program. These improvements will address sidewalks, lighting, landscaping, road alignment and crosswalks. New development and activity will also bring more “eyes on the street,” ideally creating a safer feeling for people walking or biking in the area at night. The Design Guidance section of the plan amendment (pages 8 and 9) also includes recommendations for public realm improvements as new development occurs.

Mayor and Council History

On July 8, 2019, the Mayor and Council authorized staff to initiate a comprehensive master plan amendment for the subject area. The Planning Commission completed its review of the plan

amendment on February 12, 2020 and transmitted its recommended document to Mayor and Council on March 25. On March 30, the Mayor and Council approved the release of the Planning Commission draft for public testimony and set the Mayor and Council public hearing date for May 4. At their meeting on April 27, they decided to postpone the public hearing to provide additional time to establish a series of public comment options for virtual meetings, in alignment with state directives to slow down the spread of COVID-19. With protocols in place, the public hearing was rescheduled for the June 8 meeting, and the public record was kept open until June 15, one week after the public hearing. On June 22, the Mayor and Council approved a resolution to extend the time to act on the plan amendment by 60 days, until August 22, 2020.

Options Considered

This plan amendment is another step toward implementing recommendations from the 2018 Stonestreet Corridor Study. Initially, the Mayor and Council decided to implement the recommendations for this area as part of the Rockville 2040 process. Members of the East Rockville Civic Association expressed a desire for quicker implementation and, as a result, the Mayor and Council directed staff to proceed with this process ahead of Rockville 2040.

Public Notification and Engagement

The community was kept informed about the plan amendment during the Planning Commission process through newspaper postings, updates in Rockville Reports, messages to the email list that was developed as part of the Stonestreet Corridor Study process that includes the East Rockville and Lincoln Park Civic Association, residents, business owners, local agencies and other interested parties, notifications on the ERCA Facebook page and the association webpage, and staff attended the ERCA meeting on February 11 to provide a status update on the Plan Amendment, as well as answer questions about recommendations and process.

The Mayor and Council public hearing provided another opportunity for input on the plan amendment. Notice of the June 8 public hearing was published twice in the Washington Post, prior to the meeting. Staff updated the East Rockville and Lincoln Park Civic Associations about the public hearing, and ERCA added information about the meeting to its webpage. Staff also sent notification through Nextdoor and to the Stonestreet Corridor Study community listserv. Staff will continue to keep the Stonestreet community stakeholders updated throughout the Mayor and Council process.

Previously, the community was engaged intensively during the development of the Stonestreet Corridor Study, which involved five public meetings and many additional meetings with neighborhood and business stakeholders.

Boards and Commissions Review

At their meeting on February 12, the Planning Commission discussed testimony that was received at the public hearing and during the open record period. The topics addressed with

the Planning Commission are similar to the testimony received as part of the Mayor and Council public hearing process.

After lengthy discussion about the testimony, the majority of the Planning Commissioners (four to one) largely supported the recommendations in the Plan Amendment with the following revisions:

1. Area 1 on the land use maps (Maps 3 and 4, plan amendment page 8):

The property owners were concerned that the previous language was too specific about limiting residential uses next to the rail lines and requested more nuanced language to address the concerns about residential development near the rail lines. Staff recommended the following language, which was accepted by the Planning Commission: “Residential as the sole use is not encouraged at this location given site constraints due to the shallow lot depths and the abutting rail lines. If residential units are proposed as a component of a larger project, specific care should be given to ensure that negative impacts from the abutting rail lines are mitigated. For additional guidance, see Section C. Design Guidance, item g. Rail Line Impact Mitigation” (plan amendment page 9).

2. Area 4 on the land use maps (Maps 3 and 4, plan amendment page 8):

The Residential Attached land use classification is recommended for this area. Due to concerns from residents regarding allowing multiplexes up to six units, staff had presented an option to the Planning Commission to remove the six-plex from the proposed plan amendment. Ultimately, the majority of the Planning Commission agreed with the plan as originally proposed but requested the inclusion of language that highlights concern about stormwater management in the area. The following was added: “Particular consideration should be given to how stormwater is managed for any new development on the south side of Park Road. The area is lower in elevation, and residents have raised concerns about backyard flooding, under current conditions” (plan amendment page 7).

Also, in response to concerns about the impacts of potential new development on existing neighbors, the Planning Commission requested the inclusion of a statement within the design guidance section about spill-over lighting. Language was added to the recommendations under a. Neighborhood Transitions, to read: “Exterior lighting for new buildings should utilize a cut-off design to minimize light spillover onto surrounding properties” (plan amendment page 8).

3. The Planning Commission also agreed that it was their preference to remove the illustrative concept, originally used as part of the 2018 Stonestreet Corridor Study, that represented one potential redevelopment example for the area. Residents had concerns about the graphic illustration and Commissioners agreed to have it removed from their approved document.

4. A final revision was a recommendation by staff to include additional guidance about potential future options for the vacant properties identified on the land use maps as Area 3. A new “bullet” was added to the language under number 3 on page 7 of the document to read: “Explore options for the City to facilitate the development of these properties consistent with plan goals. Street improvements for the Park Road and South Stonestreet Avenue intersection have been proposed for inclusion in a future Capital Improvements Program, and the City may also want to consider options to coordinate the development of these properties with any future street reconstruction.”

The revisions that were requested by the Planning Commission have been incorporated into the attached Planning Commission recommended draft (Attachment A) of the plan amendment.

Next Steps

In order to stay within the State of Maryland’s required timeframe for acting on a plan, the Mayor and Council must act on the plan amendment on or before its August 3 meeting. To adopt the plan amendment, the Mayor and Council must adopt an ordinance (Attachment D). After discussing the plan amendment at its July 13 meeting, the Mayor and Council may choose to:

1. Introduce and vote on the ordinance to adopt the plan amendment, with any desired revisions, on July 13. Adoption of the ordinance at the same meeting it is introduced requires the affirmative vote of four or more members of the Mayor and Council to waive the layover period.
2. Introduce the ordinance to adopt the plan amendment without voting on the ordinance. The Mayor and Council would then vote on the ordinance at its August 3 meeting.
3. Hold an additional meeting to further discuss the draft plan amendment and potential revisions, prior to introduction and adoption of an ordinance to adopt the plan amendment. In this case, the item would be scheduled for the August 3 Mayor and Council meeting, and the Mayor and Council would have to both introduce and adopt the ordinance on August 3, requiring a vote on August 3 to waive the layover period.

Once the Mayor and Council adopts the ordinance to adopt the plan amendment, staff will work on developing zoning text and map amendments consistent with the adopted land use to bring back to the Mayor and Council at a future meeting. The staff zoning text draft will be presented to the Mayor and Council to authorize the zoning amendments, which will include a separate community engagement and public process.

Attachments

- Park Road-Stonestreet Plan Amendment Planning Commission Draft (PDF)
- Park Road-Stonestreet Mayor and Council Public Hearing Transcript (PDF)
- Park Road-Stonestreet Mayor and Council Written Testimony (PDF)
- Park Road-Stonestreet Mayor and Council Ordinance (PDF)
- Park Road-Stonestreet Planning Commission Resolution (PDF)

Attachments

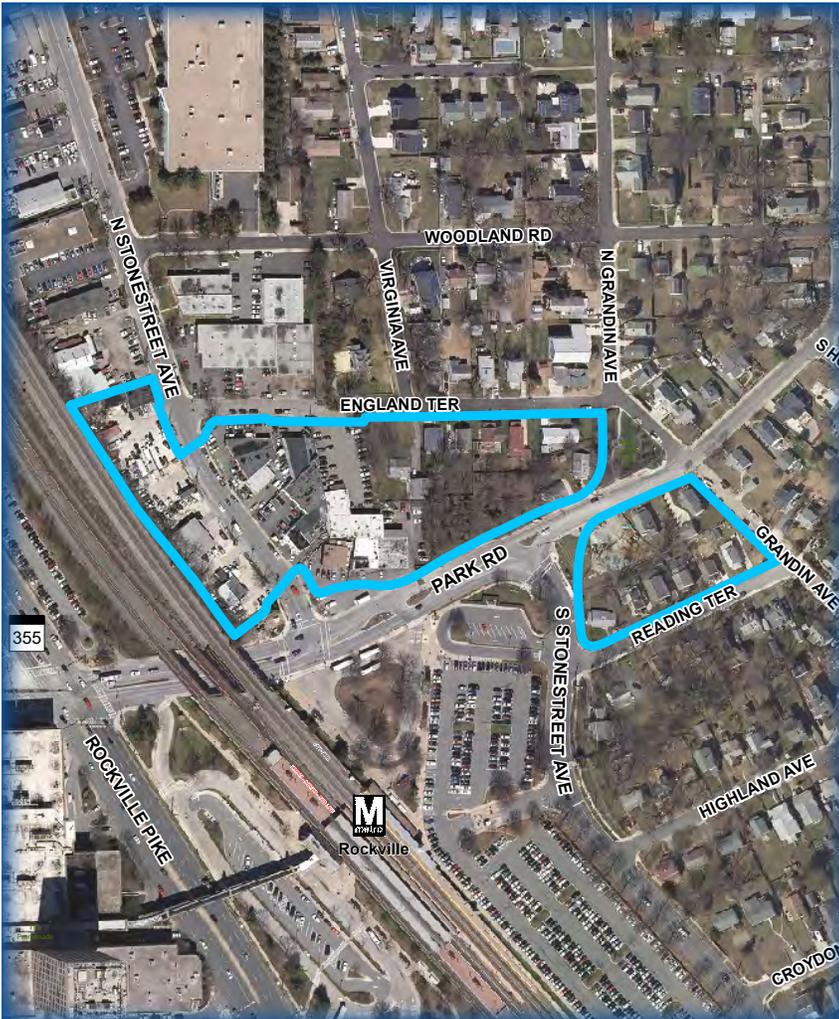
- Attachment 13.a: Park Road-Stonestreet Plan Amendment Planning Commission Draft (PDF)
- Attachment 13.b: Park Road-Stonestreet Mayor and Council Public Hearing Transcript (PDF)
- Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (PDF)
- Attachment 13.d: Park Road-Stonestreet Mayor and Council Ordinance (PDF)
- Attachment 13.e: Park Road-Stonestreet Planning Commission Resolution (PDF)


Rob DiSpirito, City Manager 7/9/2020



PARK ROAD AND NORTH/SOUTH STONESTREET AVENUE AREA

Comprehensive Master Plan Amendment Planning Commission Draft



February 12, 2020



CITY OF ROCKVILLE
MARYLAND

CITY OF ROCKVILLE

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1.1 SUMMARY

The purpose of this amendment to the 2002 Comprehensive Master Plan for the City of Rockville is to change the Planned Land Use for a specific set of properties around the intersection of Park Road and North Stonestreet Avenue, between the rail lines to the west and North Grandin Avenue to the east (see Map 1), and provide additional design guidance for redevelopment. The properties north of Park Road are bound on the west by the rail lines and on the east by North Grandin Avenue, extending north to England Terrace. The properties south of Park Road are bound by South Stonestreet Avenue on the west and North Grandin Avenue on the east, extending south to Reading Terrace.

Through the 2018 Stonestreet Corridor Study (2018 Study) public engagement process and planning analysis, key issues along the corridor were identified and confirmed. Park Road near its intersection with North Stonestreet Avenue is the first introduction to the east side after passing under the railroad overpass from the west. The Rockville Metro station is located on the south side of Park Road, a significant advantage for any future east side transit-oriented development. As in previous plans, the 2018 Study recognized this area as a priority for a transition to a more walkable and neighborhood-oriented place. This plan amendment reflects an updated vision for the subject area.

Specifically, this amendment:

- Changes the Planned Land Use classifications for a set of properties that have been, until now, designated for a mix of commercial and service industrial uses as well as detached residential to designations that promote a walkable, transit-oriented mix of residential and commercial development (page 7).
- Provides additional design guidance that includes placing the more intense development nearest the Rockville Metro Station and appropriately scaling down new development that would be adjacent to the existing residential areas (page 8).

Map 1: Subject Area Aerial + Existing Land Uses



1.2 BACKGROUND

On February 6, 2017, the Mayor and Council approved a Scope of Work for the Stonestreet Corridor Study, which was completed in July 2018. The 2018 Study area included approximately 145 acres of land, generally encompassing the east and west sides of North and South Stonestreet Avenues, from the northern boundary at Westmore Road, south to where South Stonestreet Avenue terminates. The process for the 2018 Study was community-driven and resulted in recommendations for land use, zoning, and infrastructure in five key opportunity areas within the Corridor.

This plan amendment area (subject area) was one of the five key opportunity areas identified by the 2018 Study (see Map 2, Area 1). On August 1, 2018, the Mayor and Council directed staff to expedite three of the five opportunity areas: the MCPS and County sites (Area 2); the North Stonestreet Avenue infrastructure improvements (Area 4); and the Park Road and South Stonestreet Avenue infrastructure improvements (Area 5). At that time, it was also

decided that the remaining two opportunity areas, 1000 Westmore Avenue (Area 3) and Park Road and North Stonestreet Avenue (Area 1) would be addressed as part of the Rockville 2040 Comprehensive Plan Update.

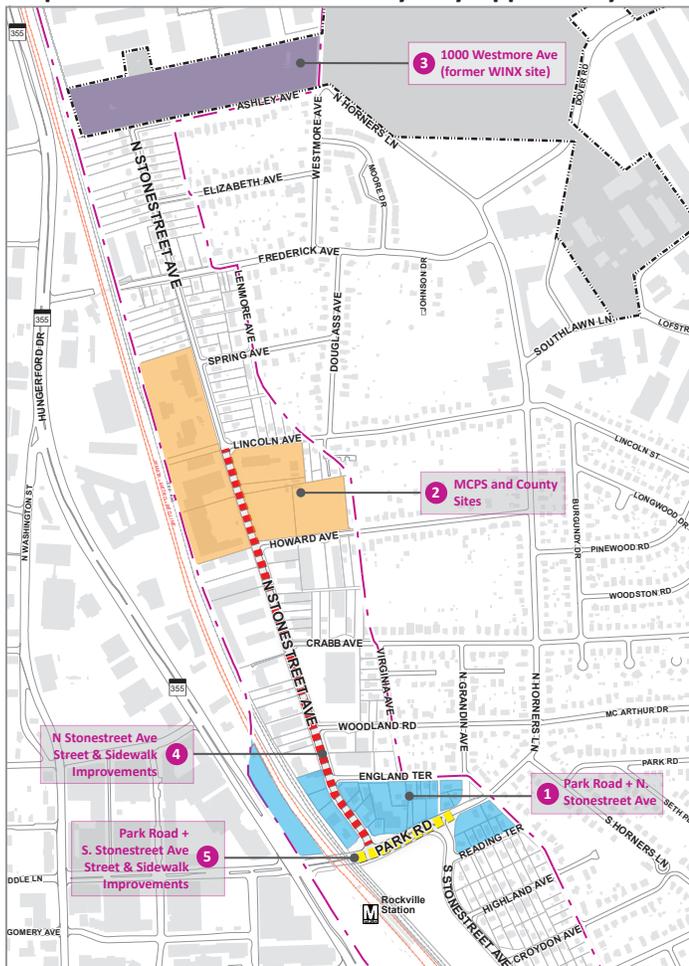
Shortly after receiving Mayor and Council direction, Planning staff submitted the Comprehensive Master Plan Amendment for the MCPS and County properties to Planning Commission for their review and approval. On March 25, 2019, after following the formal process, the Mayor and Council adopted the plan amendment, which laid a foundation for a future rezoning to allow a mix of uses, should the properties become available for redevelopment. In addition to the plan changes, progress has also been made on the recommended infrastructure improvements for North and South Stonestreet Avenues and Park Road. On May 6, 2019, the Mayor and Council adopted the FY 2020 budget, which includes capital improvement funds for the design of the North Stonestreet Avenue streetscape project and the reconfiguration of the intersection at Park Road and South Stonestreet Avenue.

In early summer 2019, representatives from the East Rockville Civic Association expressed concern at a Mayor and Council Community Forum about the timing of the Park Road and North Stonestreet Avenue area land use recommendations. In response, at their meeting on July 8, Mayor and Council directed staff to initiate the plan amendment process for this key opportunity area from the Stonestreet Corridor Study.

1.3 PLANNING FRAMEWORK

Recommendations for the subject area have been a component of several plans, including the 2001 Town Center Master Plan; the 2004 East Rockville Neighborhood Plan (2004 ERNP); the 2007 Lincoln Park Neighborhood Plan (2007 LPNP); and the 2002 Comprehensive Master Plan. Both the 2004 ERNP and the 2007 LPNP

Map 2: Stonestreet Corridor Study: Key Opportunity Areas



called for changes to the North Stonestreet Avenue corridor. They sought to add community-serving uses to the existing light industrial base, south of Howard Avenue, and to improve the infrastructure for pedestrians to establish greater compatibility with the adjacent neighborhoods.

The 2004 ERNP described in detail a redevelopment concept for North Stonestreet Avenue that was "to transform the corridor into a mixed-use area of neighborhood serving retail, residential and small-scale office uses" (pages 17-19). It also included guidance about new development taking advantage of the area's location next to a transit stop (page 24). The 2004 ERNP was frank about the contrast between the vision for the corridor and its existing conditions. The plan stated that the preferred approach for the existing service industrial businesses was that they be grandfathered and not displaced, and that certain incentives should be considered to motivate upgrades to service industrial properties that would be in line with plan objectives (page 19).

The Planned Land Use map from the 2004 ERNP designated the properties fronting North Stonestreet Avenue, and at the corner of North Stonestreet and Park Road, for mixed-use development. The remaining properties in the

subject area were designated for detached residential housing, which, along with the accompanying single-family residential zoning, prohibits a mix of housing types that would better maximize the area's adjacency to transit and meet some of the housing demand pressures that the east side of the city is currently experiencing.

1.4 AREA AND CONTEXT

Park Road is a critical, and one of only a few, east/west connections within the city. The area is busy not only with cars, trucks, and buses utilizing Park Road, but also with walkers and bikers traveling to and from the Rockville Metro Station. There are crosswalks at the intersection, but the sidewalk that exists on the west (rail) side of North Stonestreet Avenue discontinues after less than 100 feet north of Park Road. People often walk in the street on the west side of North Stonestreet Avenue. Although there is a sidewalk on the east side, it is sub-par and often crowded by vehicles from the auto repair shops.

Also on the north side of Park Road, is a mix of one-story buildings set back from the street, overgrown vacant properties, and single-family homes. The commercial uses include a convenience store, a restaurant, multiple auto repair and body shops, and retail sales businesses. There is no open public use or gathering space within the commercial area, and access is vehicle-oriented. The closest green space is Mary Trumbo Park at the corner of Park Road and North Grandin Avenue. It is passive, landscaped space geared toward the residential neighborhood.

To the east of the Rockville Metro Station and South Stonestreet Avenue is the East Rockville neighborhood, predominantly comprised of single-family detached homes. Due in part to its proximity to transit, East Rockville has experienced increased development pressure over the past decade to accommodate new residents seeking relatively affordable housing near transit. Small homes have been demolished and have been replaced by large houses, some of which are used as rentals for multiple occupants.

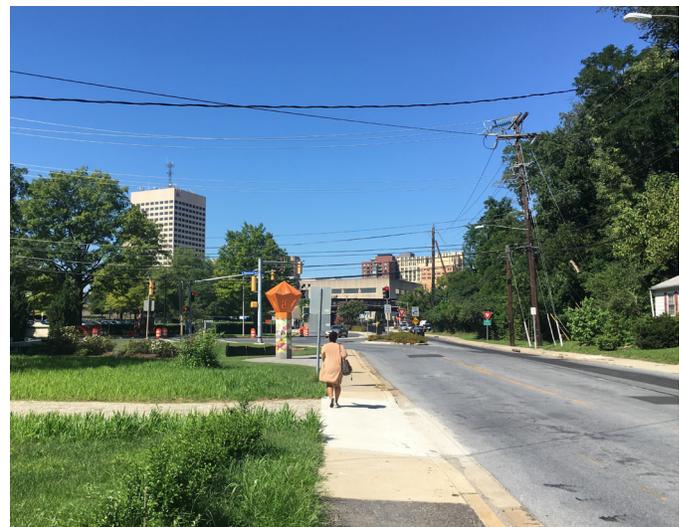
Service industrial is the predominant existing land use on North Stonestreet Avenue, south of England Terrace. The properties are smaller in size and the lots are often maximized with parked vehicles, which



Park Road at N. Stonestreet Ave



N. Stonestreet Ave near the Park Road intersection



Park Road viewing west, near S. Stonestreet Ave

at times spill onto the street. This area is in need of up-grades to ensure that walking and biking are viable modes of travel on their own, as well as safe and comfortable connections to transit.

Progress has been made in recent years to improve pedestrian and bicycle infrastructure in the area. A new sidewalk and bicycle lane was recently installed adjacent to the Rockville Metro Station along South Stonestreet Avenue. Both travel lanes on North Stonestreet Avenue include painted "sharrows" (share-the-road painted bike and arrow markings) to indicate a shared road with bicyclists. On a more transformative level, the adopted FY2020 Capital Improvements Program includes the design of the North Stonestreet Avenue streetscape project and the reconfiguration of the intersection at Park Road and South Stonestreet Avenue, as recommended in the Stonestreet Corridor Study. Proposed improvements include enhanced sidewalks on both sides of the street, improved street lighting, landscaping, and improved bicycle infrastructure. These proposals, when constructed, will provide a much needed shift on North and South Stonestreet Avenues and Park Road toward better accommodating walkers and bikers, along with vehicles.

1.5 COMMUNITY ENGAGEMENT

The 2018 Stonestreet Corridor Study, the precursor planning process that led to this amendment, included five well-attended community meetings and several small group and civic association meetings in 2017 and 2018. The subject area was identified as a priority area for action at the first meeting. Some of the comments expressed about the area included:

- Improve pedestrian security on N. Stonestreet Avenue from the Rockville Metro Station to the neighborhoods, especially at night--- better lighting, complete sidewalks, better crosswalks;
- Encourage upgrades to existing businesses. Park Road at N. Stonestreet is the gateway to the east side;
- Add more housing options and vibrancy closest to the Metro with improved access to the station;
- Allow businesses to stay where they are;
- Improve safety for bicyclists and walkers on N. Stonestreet Avenue and at the Park Road and S. Stonestreet Avenue intersection;
- Construct sidewalks on both sides of N. Stonestreet Avenue;
- Address traffic management, congestion and parking that may result with new development;
- Redesign intersections near Rockville Metro Station to protect and encourage pedestrian access.

The subject area was one of the primary topics of the third meeting at which street improvement preferences were discussed for both North Stonestreet Avenue and Park Road, in particular its intersection with South Stonestreet Avenue. At the fourth community meeting on December 5, 2017, based on input up to that point, an example redevelopment concept was presented and discussed for the subject area that included a mix of housing types, mixed-use buildings with ground floor commercial, and improved



Park Road viewing east



Crowded sidewalk on N. Stonestreet Ave



Improvements on S. Stonestreet Ave near Metro

pedestrian and open space connections. The concept was presented again as a component of the draft recommendations at the final public meeting. Feedback about the illustrative concept was generally enthusiastic. Some of the responses from the meetings included: appreciation for the pedestrian-friendly concept; more housing and more housing types made sense so close to transit; and liking the idea that there would be more places and activities within walking distance. Some of the concerns were about parking, additional traffic, and what certain infrastructure improvements or redevelopment could mean for existing businesses.

1.6 PROPOSED COMPREHENSIVE MASTER PLAN CHANGES

A. Area Goals

In the event that the subject properties become available for redevelopment, they should bring about:

- A revitalized area and focal point at the corner of Park Road and North Stonestreet Avenue, establishing an anchored entrance to Rockville's east side, integrating such elements as building form and design, public art, landscaped open spaces or plazas, and wayfinding.
- Redevelopment that takes advantage of transit proximity, is well-connected, and that transitions appropriately to the East Rockville neighborhood.
- An upgraded pedestrian environment, including enhanced sidewalks, landscaping, street trees, public/civic gathering spaces, and pedestrian-scale lighting.
- A mix of walkable, local-serving commercial uses and multi-unit residential, and residential attached uses at the North Stonestreet Avenue and Park Road intersection.
- A range of new, high-quality residential attached housing types, designed to be compatible with the scale of adjacent detached residential homes.

The city should seek creative approaches to meeting these goals, including public/private partnerships, infrastructure investments, financing mechanisms, and/or others.

B. Land Use

A new set of planned land uses for the subject area are proposed with Map 4. In addition, the text from the Area Goals, Design Guidance, and Implementation sections will also be adopted as components of the Comprehensive Master Plan.

The changes to the proposed land use, pursuant to this plan amendment include the new land use categories that have been proposed as part of the Rockville 2040 Comprehensive Plan process. The categories and descriptions are:

RA: Residential Attached

Allows a variety of house types that share party walls. Types of permitted construction include rowhouse, duplex, triplex, fourplex, and small apartment buildings with up to six units total in a single structure. Detached houses are also allowed.

RRM: Retail Residential Mix

Expresses the city's interest in retaining or introducing retail in specific locations mixed with multiple-unit residential and/or residential attached types. The mix can be horizontal, with stand-alone retail next to apartment buildings on a development site; or the mix can be vertical, with retail on the ground floor and apartments above. In some locations, the plan indicates where retail is strongly preferred along a street front.

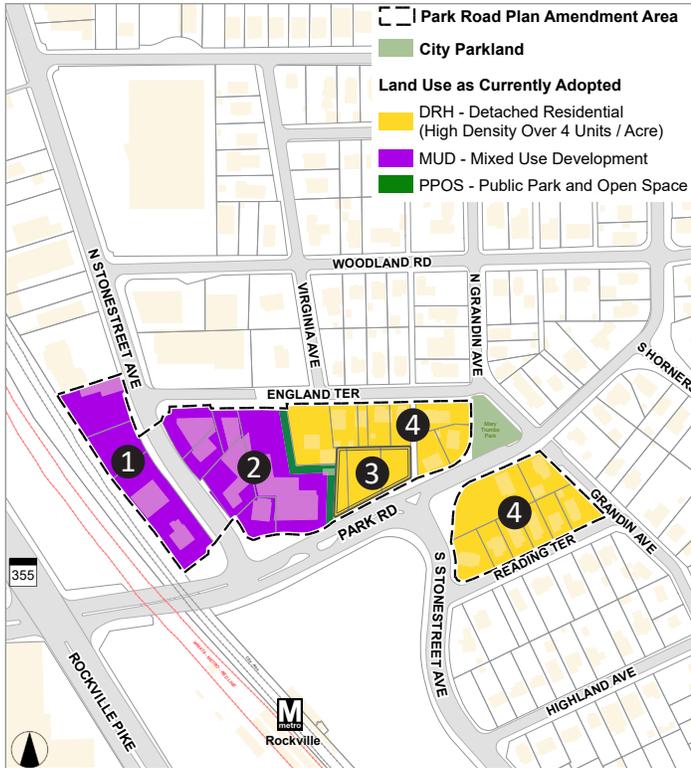
OR: Office or Retail

Allows either or both uses.

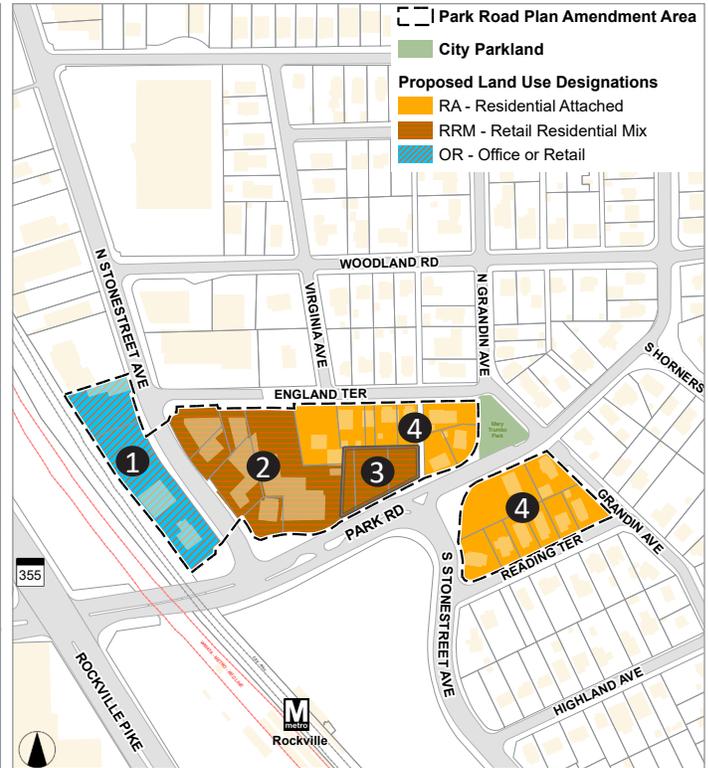
The numbers to follow correspond to the numbers on Maps 3 and 4 on the following page.

- ① Amend the Land Use from **Mixed Use Development (MUD)** to **Office or Retail (OR)** to promote walkable retail, office, and services uses.
 - In addition to office and retail, artisan and craft/maker spaces are also encouraged at this location.
 - Residential as the sole use is not encouraged at this location given site constraints due to shallow lot depths and the abutting rail lines. If residential units are proposed as a component of a larger project, specific consideration should be given to ensure that negative impacts from the abutting rail lines are mitigated.
 - No new Service Industrial uses would be encouraged, but existing uses would be allowed to remain.
- ② Amend the Land Use from **Mixed Use Development (MUD)** and **Public Parks and Open Space (PPOS)** to **Retail Residential Mix (RRM)** with building heights up to 4-5 stories (or 50-65 ft) to promote a mix of local retail and service uses and multi-unit residential across from the Rockville Metro Station.
 - No new Service Industrial uses would be encouraged, but existing uses would be allowed to remain.
- ③ Amend the Land Use from **Detached Residential - High Density Over 4 Units Per Acre (DRH)** to **Retail Residential Mix (RRM)** to promote a greater mix of uses, including smaller-scale multi-unit residential, rowhouses, and limited commercial at this transit node.
 - Explore options for the City to facilitate the development of these properties consistent with plan goals. Street improvements for the Park Road and South Stonestreet Avenue intersection have been proposed for inclusion in a future Capital Improvements Program, and the City may also want to consider options to coordinate the development of these properties with any future street reconstruction.
- ④ Amend the Land Use from **Detached Residential - High Density Over 4 Units Per Acre (DRH)** to **Residential Attached (RA)** to promote a mix of infill housing types, compatible in scale with single-family homes, including duplexes, triplexes, fourplexes, and rowhouses.
 - A small multiplex with up to 6 units may be appropriate at the southeast corner of Park Road and South Stonestreet Avenue and on the north side of Park Road if the building fronts on Park Road.
 - The building should blend well with the surrounding residential detached neighborhood, transition well in scale, mass, and height to surrounding homes, provide enhanced connections to the Rockville Metro Station, and limit curb cuts on Park Road so as to focus vehicular access and parking to the rear of the building.
 - Particular consideration should be given to how stormwater is managed for any new development on the south side of Park Road. The area is lower in elevation and residents have raised concerns about backyard flooding, under current conditions.
 - For all other areas, all housing types included in the RA category are recommended except the multiplex with up to 6 units.

Map 3: Land Uses as Currently Adopted



Map 4: Land Uses as Proposed



Attachment 13.a: Park Road-Stonestreet Plan Amendment Planning Commission Draft (3193 : Park Road and North/South Stonestreet Ave Area

C. Design Guidance

The recommendations in this section provide guidance for new development in both the private and public realms. They also promote compatibility with adjacent homes in East Rockville. Every effort should be made to integrate new development with the surrounding neighborhoods to further strengthen the existing community fabric.

- a. **Neighborhood Transitions:** Provide sensitively scaled transitions between new development and existing neighborhood homes.
 - Orient maximum building heights along Park Road and North Stonestreet Avenue, away from the existing single-family residential.
 - New buildings should taper down in height and scale toward existing single-family homes to establish a compatible relationship between buildings.
 - Exterior lighting for new buildings should utilize a cut-off design to minimize light spillover onto surrounding properties.

- b. **Public Realm Improvements:** Enhance pedestrian and bike connections to the Rockville Metro Station, to new open spaces, and to the surrounding neighborhoods through improved sidewalks, bike infrastructure, signage, landscaping, lighting, and public art.
 - Ensure that streetscape improvements that result from the redevelopment of individual properties are compatible with the overall street and sidewalk improvement recommendations from the 2018 Stonestreet Corridor Study.
 - Consider additional street connections and pathway crossings to break up block sizes and to create greater ease of access and pedestrian safety within the area.
 - Re-connecting England Terrace with North Stonestreet Avenue and North Grandin Avenue with Park Road should be studied and considered as part of any

- redevelopment concept as a means to improve traffic flow, increase access points for pedestrians, and provide access to rear- or side-yard parking.
 - Any new street connections or pathways should be well-landscaped and designed for pedestrian safety.
 - Consolidate and reduce the number of curb cuts where possible to minimize conflicts between vehicular access points and pedestrian and bicycle areas.
 - Explore burying utility lines at the time of new development and/or street and sidewalk reconstruction.
- c. **Building Orientation:** In general, orient the primary facades of buildings and front doors parallel to the street or to a public open space to frame the edges of streets, parks and open spaces, and to activate pedestrian areas. Establish building frontages along Park Road and North Stonestreet Avenue to include ground-floor retail, enhanced pedestrian areas and amenities, landscaping, and bicycle infrastructure.
- d. **Facade Articulation:** Create an architecturally enhanced feature at the corner of North Stonestreet Avenue and Park Road by focusing new development at that intersection, incorporating high-quality design components, and enhancing the public realm.
- e. **Parks and Open Space:** Incorporate accessible community use space, including parks and other contiguous outdoor green space into the overall redevelopment concept.
- f. **Parking:** In general, parking areas should be set back behind front building lines, away from the public realm and screened from public view. For attached dwellings, rear garage access is preferred, whether the garage is integrated into the primary structure or whether it is a separate structure. Avoid front loaded garages whenever possible. For multi-unit dwellings, parking requirements should take into account the area's transit proximity.
- g. **Rail Line Impact Mitigation:** Mitigate impacts on new development, particularly residential developments, related to the area being proximate to the rail line, in such areas as safety hazards, noise, vibrations and odors. The purpose is to safeguard residents, customers, and employees of these new buildings.

D. Implementation: Zoning

The land use plan amendment is one component of implementing the goals and recommendations from the 2018 Stonestreet Corridor Study for this area. If this plan amendment is approved by the Mayor and Council, the zoning will need to be updated, through a separate public process, to be consistent with the land use changes.

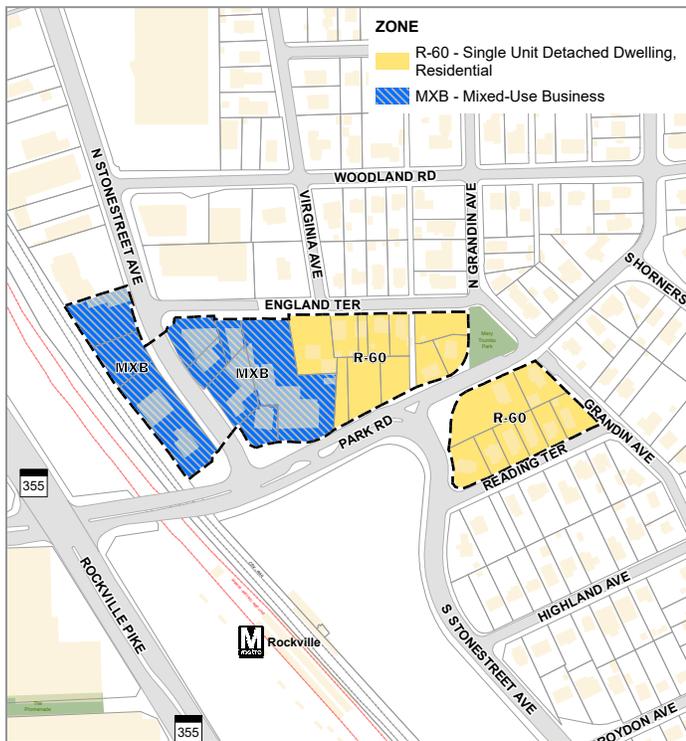
The potential zoning is as follows:

Property Specific (the numbers below correspond to the numbers on Map 6):

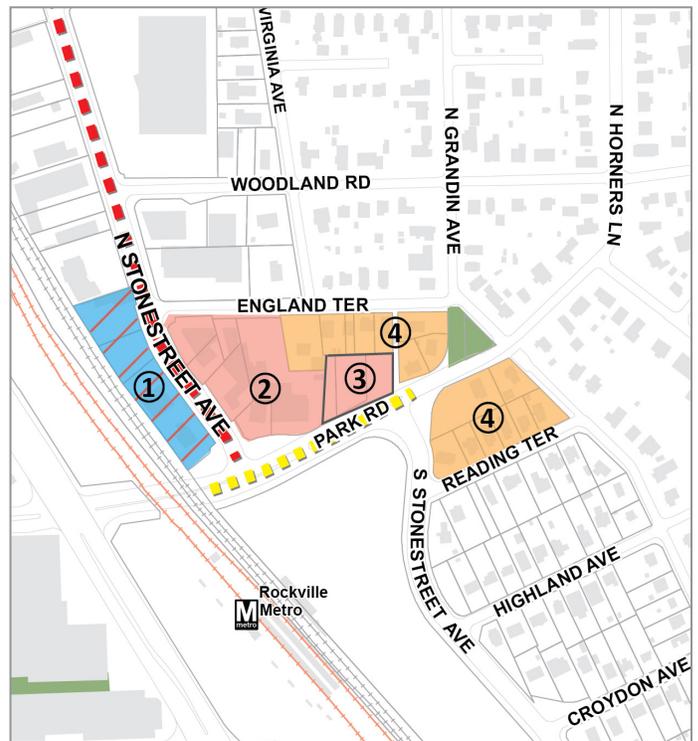
1. Rezone the properties from Mixed Use Business (MXB) to a mixed-use zone that allows for uses including retail, office, neighborhood services, and artisan/craft manufacturing.
 - Artisan and craft/maker manufacturing spaces are light-impact uses that have their operations generally enclosed within a building and produce little-to-no noise, vibrations or fumes outside of the building.
 - Residential as the sole use is not encouraged at this location given site constraints due to shallow lot depths and the abutting rail lines. If residential units are proposed as a component of a larger project, specific consideration should be given to ensure that negative impacts from the abutting rail lines are mitigated.

- No new Service Industrial uses should be permitted, but existing uses should be allowed to remain.
2. Rezone the properties from Mixed Use Business (MXB) to a mixed-use zone to promote a mix of local retail and service uses and multi-unit residential across from the Rockville Metro Station.
 - No new Service Industrial uses should be permitted, but existing uses should be allowed to remain.
 3. Rezone the properties from Single-Family Residential (R-60) to a mixed-use zone to promote a greater mix of uses, including smaller-scale multi-unit residential, rowhouses, and limited commercial at this transit node.
 4. Rezone the property from Single-Family Residential (R-60) to a zone specifically designed for infill residential attached development.

Map 5: Existing Zoning



Map 6: Potential Zoning Recommendations



Park Road and North/South Stonestreet Avenue Area
Comprehensive Master Plan Amendment
Planning Commission Draft
February 12, 2020



City of Rockville
Maryland

MAYOR AND COUNCIL OF ROCKVILLE
ROCKVILLE, MARYLAND

MEETING NO. 18-20

AGENDA ITEM NO. 12

PUBLIC HEARING ON
PARK ROAD AND NORTH/SOUTH STONESTREET AVENUE AREA

Monday, June 8, 2020

1 PARTICIPANTS:

2 Mayor and Council:

- 3 BRIDGET DONNELL NEWTON, Mayor
- 4 BERYL L. FEINBERG, Councilmember
- 5 MONIQUE ASHTON, Councilmember
- 6 MARK PIERZCHALA, Councilmember
- 7 DAVID MYLES, Councilmember

8 Staff:

- 9 ROBERT DiSPIRITO, City Manager
- 10 DEBRA YERG DANIEL, City Attorney
- 11 SARA TAYLOR-FERRELL, City Clerk/Director
of Council Operations
- 12 NILES ANDEREGG, Deputy City Clerk

13 Speakers:

- 14 JULIE PALAKOVICH-CARR
- 15 JAMIE PARKER
- 16 DEBORAH LANDAU
- 17 JACOB SCHNEIDER

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1 P R O C E E D I N G S

2 MAYOR NEWTON: Agenda item number 12
3 which is another public hearing on Park Road and
4 North/South Stonestreet Avenue area. Ms. Ferrell,
5 has this public hearing been properly advertised?

6 MS. FERRELL: Yes madam Mayor and
7 councilmembers, this public hearing was advertised
8 on May 21st and May 28th in the Washington Post
9 and also on the city's website.

10 MAYOR NEWTON: Thank you. There are
11 several people who signed up for the public
12 hearing and there are several comments. I see --
13 or did for a minute see Andrea.

14 MS. GILLES: I'm here.

15 MAYOR NEWTON: Hi. Would you like to
16 say anything first or go right into the public
17 hearing?

18 MS. GILLES: If you'd like to go right
19 into the public hearing that would be great.

20 MAYOR NEWTON: Okay. Thank you very
21 much. First up is former councilmember, now
22 delegate, Julie Palakovich-Carr. Ms. Carr?

1 MS. CARR: Good evening everyone.

2 Alright, looks like it's working. So for the

3 record I'm July Palakovich- Carr. I am a resident

4 and homeowner in East Rockville on Charles Street

5 and in my Cassidy as a resident and property owner

6 here in the neighborhood, I wanted to offer my

7 support for the proposed master plan amendment as

8 passed by the planning commission. So when my

9 husband and I moved to East Rockville about almost

10 13 years ago. We really liked the neighborhood

11 because it was walkable to the metro and to the

12 town center, which was under construction at the

13 time and how diverse it was and there was

14 relatively affordable housing prices in the

15 neighborhood. And it appears that the plan

16 amendment that's before you this evening furthers

17 all of those goals and really enhances the things

18 that we like about the neighborhood. There are

19 two issues specifically that I wanted to address

20 in my comments this evening. The first has to do

21 with the debate that's been around how much

22 density and housing density specifically is

1 appropriate for a long park road close to the
2 metro. Perhaps unsurprisingly given my track
3 record when I was a city councilmember, I do
4 support having more density close to metro, more
5 density for housing and as such do support the
6 plan as it was passed by the planning commission.

7 The other issue that I wanted to bring
8 to your attention has to do with one of the
9 proposed land use changes for along North
10 Stonestreet, kind of right along the railroad
11 tracks, there at the corner with Park Road where
12 it is proposed to be changed from mixed use to
13 retail or office. And specifically the plan right
14 now says that "residential as a sole use is not
15 encouraged" it goes on from there for that
16 particular area. I would just suggest that that
17 sentence actually be deleted from the plan for a
18 few reasons. First of all, we know that use of
19 commercial office space and commercial retail
20 space has been a tough market for a number of
21 years because of changing work patterns, changing
22 shopping patterns in American and in this region.

1 Certainly the pandemic has exacerbated those
2 trends and at this point, nobody can foresee
3 what's going to happen in the future. But I would
4 hate to see that basically the master plan
5 amendment locks in changes as you go through the
6 zoning process. That would mean that really only
7 the types of things that could get really
8 developed in that area are things that no one
9 actually really wants to build. So I would just
10 encourage the city to maintain some flexibility as
11 you are considering the master plan amendment to
12 delete that sentence about residential as a sole
13 use, not being encouraged. That way as you all
14 are going through the zoning process and the
15 zoning amendments for that area that you have more
16 flexibility and more options in terms of what
17 types of land use might be allowed off of that
18 particular area. Thank you for your time and
19 attention.

20 MAYOR NEWTON: Thank you very much.
21 Next up is Jamie Parker. Jamie are you with us?
22 You can go ahead.

1 MS. PARKER: Hi, I'm here. I'm sorry.
2 My phone is not doing what it needs to do.

3 MAYOR NEWTON: Well welcome.

4 MS. PARKER: Can you hear me?

5 MAYOR NEWTON: Yes, welcome.

6 MS. PARKER: Hi. Thank you for letting
7 me talk. I just wanted to first -- Andrea I
8 wanted to thank you for - we'd talked early in
9 February about the zoning or the land use for the
10 corner of Viers Mill to Grandon on 1st, and I
11 believe Andrea correct me if I'm wrong, that was
12 going to be zoned medium density and I think
13 resolution came that it would be mixed use of
14 multi family dwelling and I just wanted to state
15 that well I think perhaps on Viers Mill, on 1st
16 Avenue that corner of Viers Mill, that might make
17 sense. Grandon Avenue, I feel like that may not
18 be the best and I would like to just revisit and
19 state that if we could keep Grandon Avenue a
20 single family, I would greatly appreciate it and
21 so would the neighbors on our particular street
22 and which runs from 1st Street Grandon up to

1 Joseph.

2 MAYOR NEWTON: Great. Thank you, Ms.
3 Parker. We've made those notes. Thank you.

4 MS. PARKER: Thank you.

5 MAYOR NEWTON: Next up is Deborah
6 Landau, President of the East Rockville Civic
7 Association. Welcome.

8 MS. LANDAU: Mayor, can you hear me
9 alright?

10 MAYOR NEWTON: Yes ma'am.

11 MS. LANDAU: If I may, I'd like speak on
12 the Stonestreet plan amendment but I was also
13 hoping I could speak on the East Rockville design
14 guidelines for which there is not a public hearing
15 but I know you'll be discussing it tonight. Is
16 that okay?

17 MAYOR NEWTON: Sure. And as president,
18 you get five minutes.

19 MS. LANDAU: Stupendous. I don't think
20 I'll need it, but thank you. Regarding the
21 Northstone Street plan amendment I've already
22 spoken on this so I'll keep it short. We're

1 actually very excited and pleased about it,
2 however, we're very concerned about the proposal
3 of 6-plex building. We feel that a building of
4 this size would not fit the character of our
5 community. It's much too large and we hope that
6 you will strike that from the plan. That's really
7 all I have to say about that. But I would like to
8 speak as I said about the East Rockville design
9 guidelines and again, I'm speaking as the
10 President of the East Rockville Civic Association.
11 And I'd like to express our full support for these
12 design guidelines as written. As many of you
13 know, the citizens of East Rockville have been
14 concerned for well over a decade as we've watched
15 our small many pre war homes full of character and
16 individuality replaced with large, generic box-
17 like houses which were built for maximizing mass
18 and minimizing costs. But happily in 2017, we
19 were given the opportunity to begin working with
20 the city on design guidelines that were tailored
21 to our neighborhood. This plan has taken many
22 meetings over many months and to end word is

1 today, which is a thoughtful comprehensive
2 carefully constructed document that truly takes
3 into consideration the thoughts, desires and hopes
4 for the East Rockville community.

5 Coming up with this plan was not an easy
6 process and Andrea Gilles thoughtfully addressed
7 our concerns and captured our vision through
8 listening, processing and revising. Coming up
9 with a plan that you're considering tonight was
10 not a seamless process. There were many meetings
11 in which there was disagreement and often heated
12 discussion of over numerous aspects of the
13 guidelines, but we ultimately did reach consensus
14 and we feel that the plan that you'll be
15 discussing tonight truly captures that. So we
16 greatly appreciate all the time that the staff
17 that the city has provided East Rockville through
18 the development of these guidelines. Similarly,
19 though, I greatly appreciate the many hours of
20 personal time that my neighbors and myself have
21 invested into this plan. Attending meetings,
22 reading and reviewing in order to get to where we

1 are today so I hope that you'll approve the zoning
2 text amendments so that we can keep this as it is
3 and be one step closer to applying these
4 guidelines towards preserving the character of our
5 beloved East Rockville. Thank you so much.

6 MAYOR NEWTON: Thank you very much. I
7 appreciate those comments. Next up is Jacob
8 Schneider.

9 SPEAKER: Mayor Newton I do not believe
10 Mr. Schneider has joined us this evening. He has
11 not logged on.

12 MAYOR NEWTON: Okay.

13 SPEAKER: So he must have decided not to
14 participate.

15 MAYOR NEWTON: Okay, great. Thanks very
16 much. That exhausts the list of those who signed
17 up in advance to testify. We do have several
18 written comments, emails that you all have. One
19 from Dr. Michael S. Dutka, Zee Snyder, Andrew
20 Martin, Robin Nawrocki, Dan Mills, Richard Essex,
21 Susan and Garrett Clemons, Suzan Pitman, Donald
22 Masters. So with that, we'll close the public

1 hearing and have a little bit of a conversation.
2 Does anybody have anything they want to say? So I
3 will jump in. I am disturbed that the 6-plex is
4 still in here. The community has asked for it not
5 to be, the adjoining residents have asked for it
6 not to be. The mayor in council had quite a
7 conversation about this the last time this was up
8 and I guess I don't understand why we're still
9 having this conversation. I'd like to recommend
10 that it be removed and then this could go forward.
11 Otherwise I think we're just still going to have
12 people battling over what is basically a very good
13 plan except for this one item.

14 MR. PIERZCHALA: Madam Mayor?

15 MAYOR NEWTON: Yes. Councilmember
16 Pierzchala, welcome back.

17 MR. PIERZCHALA: Yes, I had to switch
18 computers because of bandwidth issues. Thank you.
19 This is a public hearing. The record is open
20 until June 15th (inaudible) the time to discuss
21 that one issue. I don't believe that there has
22 yet been a vote one way or another and it's not

1 the time to take a vote on that particular issue.
2 I don't agree that a 6-plex is undue burden on the
3 neighborhood, personally, but I think we're coming
4 back -- I don't know when this officially comes
5 back Mayor Council, perhaps June 22nd, but the
6 public record is open until June 15th and I don't
7 think we should take preemptive action on any of
8 the item at the moment.

9 MS. GILLES: To clarify, that is
10 correct. So what we would be doing is we'll be
11 summarizing the testimony tonight that you
12 received and then we'll be setting up a work
13 session probably in the first part of July so that
14 we can discuss any of that. And the reason why
15 the 6-plex is still in this document is because
16 that was the planning commission recommendation.
17 So what you have before you is the planning
18 commission draft document. There was a lot of
19 back and forth discussion, there are still some
20 people -- there certainly are -- there's the civic
21 association and there certainly are a lot of
22 neighbors that were concerned about the 6-plex but

1 as you heard tonight in some of the comments that
2 you read tonight, there are people that are in
3 support of it. So ultimately planning commission
4 made the recommendation to move forward with the
5 6-plex but again, knowing that it was going to be
6 forwarded to Mayor and council, we have another
7 opportunity for discussion and another opportunity
8 for testimony. So we'll be discussing that at the
9 work session that we'll set up and then you all
10 can vote on it at that time.

11 MAYOR NEWTON: Great. Thanks Andrea.
12 Any other comments or questions? Councilmember
13 Ashton.

14 MS. ASHTON: Just a question. Will you
15 be organizing the comments by issue area so we can
16 see where folks stand?

17 MS. GILLES: Yes.

18 MAYOR NEWTON: Great. Thank you. So as
19 Councilmember Pierzchala said we will keep the
20 record open until June 15th and I look forward to
21 the work session.

22 (Whereupon, the HEARING was

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adjourned.)

* * * * *

CERTIFICATE OF NOTARY PUBLIC

I, Carleton J. Anderson, III do hereby certify that the forgoing electronic file when originally transmitted was reduced to text at my direction; that said transcript is a true record of the proceedings therein referenced; that I am neither counsel for, related to, nor employed by any of the parties to the action in which these proceedings were taken; and, furthermore, that I am neither a relative or employee of any attorney or counsel employed by the parties hereto, nor financially or otherwise interested in the outcome of this action.

/s/Carleton J. Anderson, III

Notary Public in and for the Commonwealth of Virginia Commission No. 351998 Expires: November 30, 2020



Sara Taylor-Ferrell

From: Andrea Gilles <agilles@rockvillemd.gov>
Sent: Thursday, June 25, 2020 9:08 PM
To: Sara Taylor-Ferrell
Subject: June 8 Park Road/Stonestreet Public Hearing

Sara -

As I go through emails regarding the Park Road/Stonestreet Plan Amendment, I realize the message below should be included as testimony. It was received on the night of the hearing, and I noticed it only went to me in the city.

Thanks,

Andrea

From: mykonosaev@gmail.com <mykonosaev@gmail.com>
Sent: Monday, June 8, 2020 4:07 PM
To: Andrea Gilles <agilles@rockvillemd.gov>; Lvtb <lvtb@aol.com>; Alexandra Vassila <avassila12@gmail.com>; Balatsos, Steve <stevebalatsos@gmail.com>; michael.sirian@gmail.com <michael.sirian@gmail.com>; George D. Beglis AIA <g@beglisarchitects.com>
Subject: Today's conference

Dear Andrea

**Even though we should be watching tonight meeting
 ,,.,the only questions we have are .**

**A] For our properties on 100-Lot -200 ,,.,North Stone Street following
 your proposal ,,up to who tall
 a building can be ??? is it the same hights up to 4-5 stories or 50-
 65 ft ???as you allow on MUD
 across the street from us on Map 2 ?**

**B] From our earlier meetings with you and people in your team you
 know that our principle idea is to
 improve the neighbors and make it attractive for everyone in the
 Metro Washington area ,so how
 your proposal going to affect our dream to come true ???**

**Looking for tonights meeting ,thank you always for giving
 us the opportunity**

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

to make Rockville the Diamond City in Metro Washington

area

ted with Blessings and Good Health for everyone

Anastasios E Vassilas

Respectfully submit

The Family of

--

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Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master



Exhibit 13
Park Road/N-S. Stonestreet Ave.
Monday June 8, 2020

Sara Taylor-Ferrell

From: Bridget Newton <bnewton@rockvillemd.gov>
Sent: Monday, June 15, 2020 5:22 PM
To: Sara Taylor-Ferrell; Andrea Gilles; Ricky Barker; Robert DiSpirito
Cc: Fred Evans
Subject: FW: Stonestreet Avenue Plan

Hi all – just realizing that Mr. Evans testimony didn't include you. Sara – could you please add it to the Public Record.

Thanks-
Bridget

Bridget Donnell Newton
Mayor
City of Rockville
111 Maryland Avenue
Rockville, Maryland 20850

From: Fred Evans <fredevans1970@gmail.com>
Sent: Monday, June 15, 2020 4:54 PM
To: Bridget Newton <bnewton@rockvillemd.gov>; Beryl Feinberg <BFeinberg@rockvillemd.gov>; dmyles@rockvillemd.com; Mark Pierzchala <mpierzchala@rockvillemd.gov>; Monique Ashton <mashton@rockvillemd.gov>; Robert DiSpirito <rdispirito@rockvillemd.gov>
Subject: Stonestreet Avenue Plan

Good Afternoon Madam Mayor and Council Members,

We are writing to express concern over the inclusion of Six-plex dwelling units specifically in the intersection Park Road and Southstreet Ave in the current Stonestreet Corridor plan. These are far too big to fit with the character of the neighborhood and should be stricken from the plan. It seems apparent that this language was added after the fact and without regard for the majority of residents who spoke at the large number of community meetings over that last several years. At all of the meetings we attended, there was nearly universal opposition to high-density dwelling units in this part of East Rockville.

Thank you for your support on this matter.

On a related topic, we would like to request greater transparency in the permit approval process. Is it one person for the City or a committee? We do not want to see a repeat of the monstrous brick dwelling at the corner of Reading Terrace and South Stonestreet Ave.

Sincerely,

Fred and Trish Evans
701 Grandin Avenue

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

Sara Taylor-Ferrell

Exhibit 12

Park Road/N-S. Stonestreet Ave.

Monday June 8, 2020

From: MHBI <mhbinspections@gmail.com>
Sent: Monday, June 8, 2020 1:41 PM
To: Sara Taylor-Ferrell
Cc: Donald Masters
Subject: Council Agenda Item #12 for 6/8/2020 - Stonestreet Public Comment for the Record

Re: Stonestreet Sector Plan

First let me again thank Andrea Gilles for her continued and diligent work facilitating discussions with the community.

While my support for the Stonestreet plan is, for the most part, positive, the continued patchwork of development planning and implementations surrounding the Metro station has no overall consistency, and will only add to the patchwork development that the City is known for. The current excitement over having a storage facility on North Stonestreet will add little to city revenue, enhancement of the area, and benefit to local residents and business owners - and goes nowhere to assisting in the creation of an arts and entrepreneurial creative district.

This Stonestreet plan should be passed on until a more integrated plan is formalized with Metro renovation and redevelopment.

The City had a recent meeting with Metro regarding development at and around the Rockville station. I had requested to attend but was refused, and then submitted an apology after council members attended the meeting. My frustrations with city staff and management goes deep, with 35 years in Arlington where county operations with residents was incredibly open, and responses to FIOA requests required by staff was a breeze and without issue.

Having publicized meetings behind locked doors, decision making behind closed doors, and obfuscation of and playing on the edges of the Open Meetings Act is, at a minimum, reprehensible.

Thirteen residents did not run for City Council because they wanted to become politicians. They wanted to see change and advancement of their communities and the City overall. For years Lincoln Park, Twinbrook East, Twinbrook West, East Rockville, and more recently Fallsgrove and Rockshire have been neglected parts of the City, relegated to the "other side of the railroad tracks". We value and have faith that the two newest members of the Council are able to advance changes to this existing structure that is ingrained in the processes, thinking, staff, management, and views that past councils have taken on development and infrastructure planning and implementations. The style of ULI planning and community input is what Rockville should be striving to implement.

Thank you for listening.

Regards,
 Donald A. Masters
 307 Seth Place

Master Home and Building Inspections, LLC
www.mhbi.net
 240-292-8175
 MD Lic #32336
 VA Lic #338000-1044
 VA NRS New Home Inspector
 ASHI Inspector #258385
 NADRA Certified Deck Inspector
 Mold - Certified Green Technologist

Exhibit 11
Park Road/N-S. Stonestreet Ave.
Monday June 8, 2020

Jacqueline Mobley

From: Susan Garrett Clemons <clemonsrockville@msn.c
Sent: Monday, June 8, 2020 1:14 PM
To: mayorcouncil; Susan Garrett Clemons
Subject: Park Rd/N. Stonestreet Comprehensive Master Plan Amendment

Comments from Garrett Clemons and Susan Clemons of 408 North Horners Lane, Rockville, MD 20850

Attention Mayor and Council,

We support the Park Road and North Stonestreet Avenue Area Comprehensive Master Plan Amendment. Garrett has been a resident of East Rockville for 60 plus years and Susan a resident of East Rockville for 30 plus years. We are well familiar with the neighborhood and community and have been members of (as well as serving Directors) of the East Rockville Civic Association for almost 30 years. We were also involved in the 2004 Neighborhood Master Plan for East Rockville. We believe the proposed plan amendment will enhance and strengthen our East Rockville Community.

We would also like to thank Andrea Gilles for her hard work and support of our community planning efforts.

Thank you - Garrett and Susan

Jacqueline Mobley

Exhibit 10

Park Road/N-S. Stonestreet Ave.

Monday June 8, 2020

From: Richard Essex <essex900@gmail.com>
Sent: Monday, June 8, 2020 12:04 PM
To: mayorcouncil
Cc: 'Nancy TangWenJian'
Subject: N. Stonestreet Plan Amendment

Dear Council Members;

My wife and I live on Park Road just about 1.5 blocks from Stonestreet and two houses from the proposed rezoned area. We are not opposed to the plan in general and understand the need for development but are concerned about the lack of traffic planning in the plan. One of the barriers to the attractiveness of East Rockville is the lack of access to Rockville Pike with most traffic to and from the Pike to East Rockville being funneled through Park Road. There needs to be some other access path; either another underpass or a flyover north of Park Road. At the very least an outlet from Stonestreet to Gude through the industrial area would keep all the traffic funneling past the Metro Station. Living on Park Road where it transitions to North Horner's this is a great concern because, as currently situated, Stonestreet and Park/N. Horners are the only main thoroughfares.

Richard

Exhibit 9

Park Road/N-S. Stonestreet Ave.

Monday June 8, 2020

Jacqueline Mobley

From: Dan Mills <qorg.org@gmail.com>
Sent: Monday, June 8, 2020 10:25 AM
To: mayorcouncil
Subject: June 8, 2020 Agenda Item 12

Regarding agenda item 12: Park Road and North/South Stonestreet Avenue Area

I have reviewed the plan for a walkable, higher-density design in the area north of the metro station and I love it! The six-unit complex might be a little too big for the neighborhood but otherwise I think it is exactly what should be done in the area. Thank you for all the work you and City staff have done on this project and please keep up the good work!

--Dan Mills
308 Crabb Ave, Rockville, MD

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

January 13, 2019

Rockville Mayor and Council

Rockville Planning Commission

Rockville Planning and Development Services Staff

My name is Jonathan Skroski, and I live at 204 Reading Terrace. I spoke at the public hearing on the proposed Park Road and North/South Stonestreet Avenue Area Master Plan Amendment on January 8th, 2020 regarding the many concerns the residents of Reading Terrace share. As disclosed during the meeting, there were other points of concern that were removed from the testimony due to time constraints but are worth mentioning in writing considering our residential properties will be the most affected by this nonsensical and truly disappointing amendment to the 2002 Comprehensive Master Plan. Per the request of the Planning Commission, below is the address that I made to the Planning Commission followed by our additional concerns.

When I spoke on January 8th, I was representing the following East Rockville Residents:

- Tammy and Jake Harlow
- Richard and Nancy Koplou
- Brian Sanfelici
- Matthew Hassink and Gabriela Uceda
- Rudy Stanley

As presented during the meeting:

My wife Robin and I bought our first home together here 7 years. We both grew up in other areas, and we have no immediate family here. We both commute to the Baltimore area every day and in doing so we pass by many communities that would be just as affordable and offer the same amenities as Rockville. Communities that would be closer to our jobs and would offer better commutes. We chose to buy our first home in Rockville because we really liked the area and until this recent development, this is where we had planned to stay for the foreseeable future.

Our neighbors are the very reason we haven't moved into a larger house with a better commute. If it weren't for our neighbors, we wouldn't help but feel like we bought a home on the wrong side of Rockville. The side that isn't given an ounce of the same consideration the west side is given when it comes to re-development projects.

Without knowing it at the time, this inequality was foreshadowed during my first attendance at a City of Rockville Planning Commission meeting, the now infamous "No Town Homes on Chestnut Lodge" meeting. During this meeting I saw a presentation from a developer who wanted to build townhomes at the site of the old chestnut lodge. Beautiful townhomes, over \$1 million dollars each. The developer and citizens of West Rockville made it very clear that these homes were to never be considered "affordable." Every detail of these homes were upscale with architectural details reminiscent of the old chestnut

lodge hospital. The developers even made sure to spend a significant amount of time highlighting how they would protect the existing holly bushes. Being new to the area, I just had to drive through the neighborhood and see these holly bushes because they were such an important topic. Now I'm no holly bush expert, but they look like just your every day average holly bush to me.

Some of you may know me because of a long battle we had with Rockville and a developer when I tried to fight to save the 100 year old maple tree in my back yard when one of the largest McMansions in East Rockville (now known to East Rockvillians as the East Rockville Taj Mahal) was being built next door. Many City staff know me as well. During our fight to save our tree, I brought our concerns up to multiple City staff members and on their recommendation spoke on record before the Mayor and council and planning commission on multiple occasions. Every staff member that I spoke to was incredibly helpful and genuine, but unfortunately I was always given the same answer most Rockville residents are given "We'd really like to help you but there is nothing we can do". It was clear that the City wasn't going to help us and because of that, our beautiful 100 year old Silver Maple is likely going to die due the "tear down and rebuild" next door that cut over 40% of its root system because the city allowed the developer to build right up to the setbacks on ALL four sides...

We had to hire a private arborist who specializes in tree values to estimate the value of our maple tree because it was abundantly clear that we were going to lose our fight. The estimate that they provided was over \$50,000 and that's without taking into consideration what it would cost to remove the tree, replace the tree, energy costs, or storm water management issues that will arise when the tree dies. A cost of a holly bush is roughly \$50. And yet I still have a dream that one day I will live in a Rockville where 100 year old trees in East Rockville will be given the same consideration as holly bushes in West Rockville...

All of this brings me to the issue of the Park Road and North/South Stonestreet Avenue Area Comprehensive plan amendment. Do you know what is most surprising?? It's the way we found out about this special "amendment" to re-zone our neighborhood... Facebook!! I can't even begin to tell you how many notices we get in the mail every time a commercial high-rise on the other side of Rockville pike wants to add a satellite to their roof or Rockville wants to add yet another massive affordable apartment complex within walking distance to the metro.... But Rockville had hearings on whether they are going to re-zone my neighborhood to build "affordable apartments" in our backyards and we had to find out through a random Facebook post! So much for "transparency"

Under Section 1.5 of this plan, you indicated that in your opinion, residents wanted to "Add more housing options and vibrancy closest to the Metro with improved access to the station; Do you honestly think that adding 4-8 small units on Park Road is really going to make a dent in the demand for affordable housing near transit? Secondly, I've lived in the DMV long enough to know that "Affordable housing" near public transit in areas as upscale as Rockville, Bethesda, Tysons, Vienna, Fairfax etc. is just a pipe dream that isn't ascertainable. This leads me to believe that maybe some of the intentions for this rezoning aren't exactly honest. Desirable location is what drives prices up through demand, and 4-8 random affordable units isn't going to help the demand that ALL of Rockville is facing, not just East Rockville. Have you seen Bethesda and Potomac lately? They are tearing Million dollar homes to build Multi-Million dollar homes...

Additionally, we attended several of the early Stonestreet Corridor Study meetings and this Amendment is not what was discussed or proposed in any of the small groups. What almost all of us thought you intended to accomplish was make the East Rockville Metro side look like the West Rockville Metro side by adding these housing options by rezoning the existing Mixed Used Business to Mixed Use Commercial/Residential Zoning on the WMATA and MOCO Properties. Not by adding random multiplexes in the middle of our neighborhood. In fact, when several of us brought this Amendment up to multiple ERCA officers and members (both past and present), they all said they had no idea that ALL of Reading Terrace and Park Road were to be re-zoned. They said that's not what they were told when they helped create the plan and that they never would have supported that.

There is a well-known joke about the City of Rockville that goes "Rockville has never met a developer that they didn't like." As soon as we found out that the entire even side of Reading Terrace was set to be re-zoned, not just what was discussed in 2017, we immediately looked up who owned the property that's pictured in the conceptual example directly behind us (205 Park Rd). The property was previously for sale as a single family home last summer. Huge shocker... it's a developer!! Arcon Limited, based in Bethesda. Well most of it, except for the small portion the City of Rockville happens to own. It's interesting that one of the "key opportunity areas" of the plan just so happens to include a piece of property Rockville already owns meaning they already have a significant stake in this redevelopment.

West Rockville isn't the only historic part of Rockville. Apartments and duplexes do not fit in with the current style and historical blend of our neighborhood. It's bad enough we have to deal with the Taj Mahals. With that said, if you move forward with this against our wishes, are we going to have the same design input into the "Neighborhood Transition" that residents of West Rockville had on the Chestnut Lodge redesign? Remember that parking issue you had with Chestnut Lodge and underground garages so no one would have to see unsightly cars which was essentially a "deal breaker"? Are we going to have that same consideration, leverage, and pull? Well, it appears that we already know the answer to that because you've already exempted this portion of the plan from the soon to be finalized new East Rockville Neighborhood Plan which sets design guidelines and limits redevelopment for exact situations like this.

Lastly, it seems like the planning commission and mayor and council is putting the cart before the horse again. This is a MAJOR redevelopment project that has already failed on numerous occasions. Knowing this, why would you even consider rushing to start with the smallest little residential portion that has almost nothing to do with the long term goals of this South Stonestreet Project? What if this grand mixed-use commercial/retail/residential development doesn't happen? What if there more WMATA issues (we already heard they denied Rockville's request to be on their redevelopment board) or issues with the Moco properties? What if the business owners change their mind AGAIN? As I'm sure you are aware, last time this was proposed the Business owners obtained legal counsel to halt the project. If you force this through and none of these other changes happen we are all afraid that all you have done is OPEN THE FLOOD GATES to more developers in our neighborhood. Without the other pieces of this Stonestreet project we essentially get none of these other benefits you initially tried to "sell us" on. All we are stuck with is a fixed intersection and a hodgepodge of small single family homes surrounded by large Residential Attached homes like the Taj Mahal and random multiplex complexes that don't accomplish any of the intended goals of this project.. Unless of course, the real goal is to make sure a developer makes his money.

In closing, we are asking the following considerations:

- ERCA worked for years to come up with the new ERNP and it's an accurate portrayal of how the residents feel. Make this "Key Area" fall under the guidelines so many worked so hard for.
- Reincorporate this into the 2040 plan before you decide to forever change the dynamic of our neighborhood.
- Hit the brakes on starting with the residential portions, and focus on the commercial and retail places first.
- For any developers that may be here, please know that no one on Reading Terrace and Grandin wants this to be rezoned nor are any of us willing to grant any easements onto our properties.

Additional concerns that were cut due to time constraints:

Rain Water Management (Please see attached Topography Map of Reading Terrace)

The residents on the even numbered side of Reading Terrace and the section of Park Road behind us, have major rain water runoff issues that again makes us wonder why Rockville would even consider choose our small section to re-zone. Our section is the only section of the entire study that sits in a small valley. We have attached a topography map showing that all surrounding properties sit at high elevations thus all rainwater runoff from surrounding properties heads our way. Many residents have spent thousands of dollars managing the flooding issues in our yards and basements. Many of us still experience major flooding when we get any considerable amount of rain. We have even heard from many neighbors who grew up in Rockville and remember as kids playing in the creek that used to run behind our homes before the Metro was built. Many of us have struggled for years with managing the rain water runoff. We are extremely concerned that any development in our backyard will flood all of the neighboring properties. Redeveloping this area to allow for larger, multi-unit dwellings will only create more water run-off problems that our small properties already simply can't handle.



Below is a photo we took of flooding at 206 Reading Terrace in 2018. This is a normal occurrence but on this day, we took a photo to send to our neighbors who weren't home as we were concerned about possible flooding of their basement.



Rockville is allowing our neighborhood dynamics to be changed by property owners who DO NOT live here!

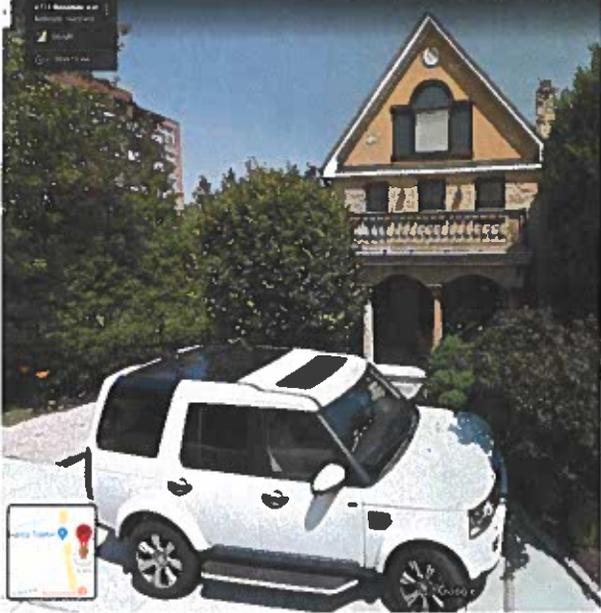
When we moved to Rockville, we were greeted by neighbors who stopped by to introduce themselves, brought cookies and treats, and even offered to run errands for us as we unpacked our belongings. For the last 7 years, we have all looked out for each other, we have neighbors who watch our home when we are out of town, neighbors who collect our mail and bring around our trash cans, neighbors who we share meals with, neighbors we attend trivia night with, neighbors we plan block parties with, and neighbors we simply just sit around a fire pit with. No offense to North Bethesda, but this sense of community didn't exist in our previous condo complex, where we called "home" before buying our first home in Rockville.

This summer, my mother came to stay at our home while my wife and I were out of the country. We thought it would be a welcomed break for her since we just lost my dad this spring, her husband of 35 years. She offered to stay in our home and watch our dog. Our dog has a lot of energy and a tendency to pull on her leash when she sees other dogs. While we were away, our neighbors saw my mom struggle while walking my dog and for two weeks offered her assistance by walking the dog or simply joining her for the evening walk. When we came home, the first thing my mom said was "you have such wonderful neighbors." On top of that, on Thanksgiving morning, my mother (who lives in Massachusetts) received a text from one of my neighbors sending her warm wishes on Thanksgiving acknowledging that this one was going to be particularly tough with the absence of her husband. My neighbors knew my mom for less than 2 weeks and thought of her on Thanksgiving morning.

It's no secret to anyone who has seen this amendment that something seems fishy and borderline corrupt about this amendment. During the Planning Commission Public Hearing, the property owner of 205 Park Rd also provided testimony in which he claimed his property, designated as small apartments in the master plan amendment, was purchased under his old company's name, Arcon Limited. We suppose it's just a coincidence that his "former" company just so happens to be a real estate development company in Bethesda which is still active with the state of MD. He is still listed as the registered agent, and the company still has an active website promoting large apartments and commercial buildings throughout Maryland and Northern Virginia. The bigger point is... he doesn't live here! He lives in a beautiful home assessed at over \$1 million in Bethesda (see below), a much more desirable place to live than Rockville. His property on Park road is a rental property. It's funny how none of our neighbors knew anything about our street being included in this amendment until we saw a random Facebook post, yet somehow the owner of this property knew about the public hearing and he doesn't even live in our neighborhood. Rockville is essentially going to allow development companies to have the same input as the long-term Rockville residents when this study and proposal was supposed to be about what was best for the citizens of Rockville not what's best for developers.

We are concerned that the city of Rockville is creating a precedence with property developers who have no interest in our neighborhood dynamics. Although no one can stop someone in Bethesda or Potomac from buying properties in East Rockville, the city should acknowledge that those who do not live here shouldn't have the same input/leverage on changing the neighborhood dynamics based on their intentions. Please see below:

Rental Properties vs. Owner on Reading Terrace/ Park Rd

Rental Home	Vs Residence
205 Park Rd, Rockville, MD	4711 Rosedale Ave, Bethesda, MD
	

Rockville is putting the cart before the horse, again...

As I mentioned during my address to the planning commission, the timing of this particular amendment seems to be incredibly rushed and poorly thought out. This study is the beginning of a major redevelopment project that has been being considered since at least 2004. It has been proposed several times in the past and as far as we can tell, it has failed each time.

It's no secret that businesses in the Rockville Town Square have experienced a great deal of struggle over the last 12 years. So why is Rockville expediting any amendments when they haven't fully addressed these issues? Why wouldn't Rockville take the time to truly understand why these businesses are struggling in such a largely populated area before we begin planning the next re-development project? What if the business owners on the east side of the tracks experience the same struggles that the business owners are experiencing on the west side? There are a number of theories on why the Rockville Town Square is struggling. From parking issues and high rent, to poor visibility from Rockville Pike. Either way, wouldn't the city want to learn from these failures so they don't make the same mistakes? Most importantly, why would Rockville expedite the part of this plan where you are encroaching into residential zoning instead of focusing on the businesses that have already invested in Rockville?

Monday June 8, 2020

Jacqueline Mobley

From: Robin Nawrocki <rmnawrocki@hotmail.com>
Sent: Monday, June 8, 2020 10:00 AM
To: mayorcouncil; Jonathan Skroski
Subject: Park road and North/South Stonestreet Avenue Area Comprehensive Plan Amendment
Attachments: Rockville Letter Final.docx

Mayor and Council,

Over the last 6 months, we have spent our time meeting with neighbors on Reading Terrace, attending East Rockville Civic Association meetings, meeting with the Mayor and Council members, writing letters to the planning commission, writing letters to the Mayor and council, and going on record detailing our neighborhood concerns regarding the Park road and North/South Stonestreet Avenue Area Comprehensive Plan Amendment. We have dedicated hours and weeks of our personal time making it clear that the residents of Reading Terrace have a number of concerns about the proposed amendment. Much to our disappointment, our concerns were completely ignored and unaddressed by the planning commission. Our concerns (please see attached) were interpreted by the planning commission as an opposition to their conceptualized drawing!! Therefore their recommendation was to remove the drawing from the amendment. We have been very vocal about our concerns so once again, we'll do my best to make it clear; We are not opposed to a drawing! We are opposed to what this drawing represents! We DO NOT want apartments in our back yards. This seems like a poorly thought out plan that very well could leave East Rockville with a random hodge-podge of apartments without getting any of the other benefits we were promised. We are asking the Mayor and Council to consider removing the residential portions, particularly the Reading Terrace/Park Road portion, from this amendment. We would be happy to revisit this once the commercial and retail portions have been implemented with success. We think this is a fair compromise and the best solution to protect the residents of Reading Terrace.

Thanks,
 Jonathan and Robin Skroski
 204 Reading Terrace

Exhibit 6
 Park Road/N-S. Stonestreet Ave.
 Monday June 8, 2020

Jacqueline Mobley

From: Andrew & Anna Martin <sellallyouown@gmail.com>
Sent: Monday, June 8, 2020 4:03 AM
To: mayorcouncil
Subject: email for June 8th and June 9th Mayor and Council Meetings/Hearings

Dear Mayor and Council of Rockville,

Considering recent protests around the nation about structural racism, and the pending Zoning Text Amendment for East Rockville Design Guidelines and Standards and the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment before this body, I would ask that prior to your approval of such items, that both undergo a detailed socio-economic analysis to see what the potential racial outcomes would be to the communities and if structural biases could occur.

I would submit to this body. To combat unconscious structural racism, communities such as the City of Rockville, must always analyze the outcomes of zoning plans for any racial impacts.

I realize there will be many who will see this as nonsense, but if we are to be sensitive to the needs of minorities, we must realize the power of zoning and standards to socio-economically shape a community and thus potentially exclude certain peoples.

So, I ask this body to be the voice of change and send these plans back for a review of their racial socio-economic impacts.

Pax,

Andrew Martin OFS
 722 Mapleton Rd.
 Rockville MD 20850

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

Exhibit 5
 Park Road/N-S. Stonestreet Ave.
 Monday June 8, 2020

Jacqueline Mobley

From: Michael Dutka <ditko86@gmail.com>
Sent: Sunday, June 7, 2020 1:45 PM
To: mayorcouncil
Subject: Comment in support of Stonestreet master plan

Dear Mayor and Council,

I would like to voice my support for the Stonestreet master plan. Any plan that rezone areas near metro stations for higher residential density should be applauded as is any plan that explores missing middle housing. As you may know the history of zoning policy in the US is actually rooted in racial exclusion, during the original court case to determine the legality of zoning the lower court who heard the case rule against it

" Finding that the zoning ordinance did in fact constitute a taking by Euclid of Ambler's property, the court stated that the ordinance was unconstitutional, being aimed implicitly if not explicitly at preventing "the colored or certain foreign races [from] invad[ing] a residential section," *i.e.* enforcing racial segregation and thus falling afoul of *Buchanan v. Warley (1917)*⁽⁹⁾."

Later the supreme court went against the lower court's ruling thus making zoning based on housing size (and therefore price) legal. Zoning is legislation that continues to enforce the segregation of communities based on income by mandating only one type of large residential unit can't be built in specific areas.

I'm supportive of the Stonestreet master plan but I think the city of Rockville should look at going farther and do away with the concept of exclusive single family zoning entirely.

https://en.wikipedia.org/wiki/Village_of_Euclid_v._Ambler_Realty_Co.

--

Dr. Michael S. Dutka
 Computational Physics Incorporated
 USNO Phone Number- 202-762-0242
 Cell- 301-996-3588

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

Monday June 8, 2020

Jacqueline Mobley

From: President ERCA <president.erca@gmail.com>
Sent: Sunday, June 7, 2020 6:13 PM
To: mayorcouncil
Subject: Participation in June 8 M&C meeting

Hello,

I would like to participate live in tomorrow's meeting, to comment on (1) the East Rockville Design Guidelines, and (2) the N. Stonestreet Plan Amendment. Please let me know what I need to do to "attend."

Thank you so much,

Deborah Landau, President of East Rockville Civic Association
"Lift up your eyes and look beyond the sod" -Mary Trumbo

Jacqueline Mobley

From: J Parker <j.parker812@gmail.com>
Sent: Saturday, June 6, 2020 9:33 PM
To: mayorcouncil
Subject: Monday June 8th, Public Hearing - I would like to attend

Name - Jamie Parker

Phone number 240-426-6977

Community Forum or Public Hearing Topic: I am interested in the Stonestreet Corridor project, and the East Rockville Design Guidelines - I am particularly interested in the zoning changes that were proposed and accepted at the February 12, 2020 meeting re: the properties from Grandin Ave along First street to Viers Mill.

Expected Method of Joining the Meeting (computer or phone): Computer

Thank You,
Jame Parker
812 Grandin Ave, Rockville, MD 20850

Jacqueline Mobley

From: Julie Palakovich Carr <juliepalakovichcarr@gmail.com>
Sent: Friday, June 5, 2020 7:52 AM
To: mayorcouncil
Subject: Sign up for public hearing

Good morning,

I would like to sign up to speak at the public hearing on Monday for agenda item #12. I will be joining by computer.

Thank you,
Julie Palakovich Carr
240-778-9798

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

Park Road/N-S. Stonestreet Ave.
Monday June 8, 2020

FW: Stonestreet Redevelopment Testimony

Robert DiSpirito <rdspirito@rockvillemd.gov>

To: Ricky Barker <rbarker@rockvillemd.gov>

Cc: David Levy <dlevy@rockvillemd.gov>; Andrea Gilles <agilles@rockvillemd.gov>

Testimony on Stonestreet Plan.docx

From: Daniel Carelli <d_carelli@yahoo.com>

Sent: Tuesday, April 21, 2020 6:44 PM

To: mayorcouncil <mayorcouncil@rockvillemd.gov>

Subject: Stonestreet Redevelopment Testimony

Hello,

Attached is my testimony for the Stonestreet Corridor Redevelopment plan meeting to be held on May 4

Daniel Carelli

Attachment 13.c: Park Road-Stonestreet Mayor and Council Written Testimony (3193 : Park Road and North/South Stonestreet Ave Area Master

Testimony on Stonestreet Redevelopment Plan

Greetings,

I am a homeowner in the East Rockville neighborhood. I have lived in the same East Rockville home for 10 years and am only a few blocks away from North Stonestreet Avenue and the Rockville Metro Station. I walked to the metro station for 9 years to go to work daily, and for the past year I have been driving to work. This is because I changed jobs and Metro is not a transportation option that would work for my current job.

I support the following recommendations in the Stonestreet Corridor Master plan amendment.

- -Wider/better sidewalks on both sides of North Stonestreet Avenue
- -Better lighting on Stonestreet Avenue and Park Rd
- -Improved/safer crosswalks for pedestrians

I believe that the above are simple, relatively inexpensive solutions that could improve the pedestrian experience in the area.

I support the idea of burying utility lines, however I do not believe that the benefit is worth spending *any* taxpayer money on.

I am *strongly* against the other changes to the zoning and structures that already exist in the area. In the 10 years that I have lived in East Rockville I have seen a significant increase in the volume of cars driving out of the neighborhoods heading west towards MD 355/I-270. This causes traffic problems to cross under the CSX/WMATA rail bridge near the Rockville Metro Station. Adding more dense housing in this area will only exacerbate the situation.

The traffic in Rockville (and Maryland in general) is already terrible. Adding more dense housing and more residents will only make it worse for everyone. If approved, nearly all the new residents in the new housing will certainly own cars, and some of them will certainly drive those cars every day to work. Just like many people (myself included), who live in East Rockville near the metro already drive to work because the metro is not an option depending on when or where a person works. We simply do not have the road infrastructure to handle additional residents. The idea that these people will only walk, bike, or take the metro (and not own a car) is a fantasy. Just like *all* the residents on my street (only 2 blocks from the metro) still have cars that they drive almost every day (whether to work, shopping, or visiting family/friends).

Pedestrian safety is a big issue in Rockville. Particularly in the past few months there have been many pedestrians hit by cars. Rockville wisely installed fencing along the median of Park Road between the metro station and the restaurant and convenience store. This was meant to encourage pedestrians to only cross Park Road at the crosswalks. I still regularly see pedestrians (particularly bus drivers from the metro station) dashing across the street between the fences (not in crosswalks). This is dangerous to

both the pedestrians and drivers. Constructing denser housing and more retail and directly across the street from the metro station will make this dangerous situation even worse as more pedestrians try to cross the street (and some will not use the crosswalk and/or ignore the crosswalk light). There will also be more cars in the area because of the denser developments. This will lead to a dangerous mix to an already dangerous area.

New retail/office/residential buildings will invariably push more overflow parking into the East Rockville Neighborhood streets. This would happen both during the work day (people visiting the offices/shops) and at night (people visiting the new residents). This is already a problem. Most of the East Rockville residential streets are crowded with cars parked on the street. Some single family houses are being operated as 'boarding houses' and have 5 or 6 adult residents with 5 or 6 cars already parking on the streets. These streets are already overcrowded for the existing residents. These changes would only make it worse.

Any building being built more than two stories is too much. East Rockville is a neighborhood of many one-story houses. Putting a six-story building right next to it would ruin the character of the neighborhood. Even with the proposed 'scaled/transitional' buildings to the neighborhood, it would still ruin the feeling of the community. Given that the proposed development area is small, there is not enough space to do a gradual scaling/transitioning of building types. East Rockville homeowners will be able to easily see these large buildings from their homes, this will ruin the East Rockville character which the Mayor and Council are trying to protect with the proposed East Rockville Design Guidelines.

I also do not support changing the zoning of the current businesses in the areas to mixed use retail/office/artisan. We already have the Rockville Town Square, which is full of mixed use retail, and it is by most accounts a failure. It is full of shuttered businesses and is a revolving door for businesses that do not stay open for very long. And the city now has chosen to subsidize with taxpayer money failing businesses (Dawson's) in the Town Center. It is not a wise decision to open more retail less than a mile from the town center, where retail is already struggling. Also, there are plenty of office buildings all over Rockville (including near the Metro station) with vacant space. It does not make sense to open more office space in a place where there clearly is not an unmet demand for office space.

The service businesses (many auto shops and others) in this area are successful and have been for many years. They are not a revolving door of opening and closing businesses as in the town center. It is a mistake to try to fix something that isn't broken. These businesses are convenient for customers who can leave their cars to be repaired and then take the metro to work or home while the car is fixed.

If the goal is to make Stonestreet more 'visually appealing' and more pedestrian friendly, then improve the sidewalks (as mentioned earlier). Also, remove the street parking from the street. The street parking contributes to traffic back-ups as people try to parallel park their cars. The street parking also contributes to the cluttered look of the area. Finally, code enforcement or maybe new building codes for the facades of the existing businesses need to be considered. Do not let the businesses park their vehicles on the sidewalk and make them clean up the outside of their buildings/parking lots. This would go a long way to making it more visually appealing. There is no need to tear down all these well established businesses.

Quality of life in East Rockville should be a top priority for the City. In the 10 years that I have lived here, the quality has decreased as the place has gotten more crowded and congested. This plan would further continue the trend with little concern for the existing residents.

Sincerely,

Daniel Carelli

Resident of East Rockville (10+ years)

209 N Grandin Ave

Rockville MD 20850

Ordinance No.

ORDINANCE: To adopt the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment as an amendment to the Adopted and Approved Comprehensive Master Plan for the City of Rockville, Maryland.

WHEREAS, the City of Rockville Planning Commission (hereinafter referred to as the "Commission"), under the provisions of Section 3-202 of the Land Use Article of the Annotated Code of Maryland, may make and approve a plan or amendments thereto and recommend the same to the local legislative body for adoption; and

WHEREAS, on December 19, 2001 the Commission did approve, and on November 12, 2002 the Mayor and Council adopted a Master Plan for the City of Rockville, Maryland (the "2002 Comprehensive Plan"); and

WHEREAS, on August 1, 2001, the Commission did approve, and on October 22, 2001, the Mayor and Council did adopt a Town Center Master Plan (the "2001 Town Center Master Plan") and subsequently adopted the 2001 Town Center Master Plan by reference in the 2002 Comprehensive Plan; and

WHEREAS, on December 17, 2003, the Commission did approve, and on March 8, 2004, the Mayor and Council did adopt an East Rockville Neighborhood Plan (the "2004 East Rockville Neighborhood Plan") as an amendment to the 2002 Comprehensive Plan; and

WHEREAS, on July 12, 2006, the Commission did approve, and on February 26, 2007, the Mayor and Council did adopt a Lincoln Park Neighborhood Plan (the "2007 Lincoln Park Neighborhood Plan") as an amendment to the 2002 Comprehensive Plan; and

WHEREAS, the Mayor and Council did instruct the Commission to make and approve, and recommend to the Mayor and Council an amendment to the 2002 Comprehensive Plan, including the 2001 Town Center Master Plan, the 2004 East Rockville Neighborhood Plan, and the 2007 Lincoln Park Neighborhood Plan (collectively referred to herein as the "Plan") for the Park Road and North/South Stonestreet Avenue Area of the Plan; and

WHEREAS, the City staff prepared, consistent with Section 3-201 *et seq.* of the Land Use Article of the Annotated Code of Maryland, an amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area; and

WHEREAS, in connection with the preparation of the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area, the Commission and City staff did carefully and comprehensively survey and study present conditions and projections of future growth; and the relation of the Park Road and North/South Stonestreet Avenue plan amendment area to neighboring jurisdictions; and

WHEREAS, the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area has been prepared for the purpose of guiding and accomplishing coordinated, adjusted and harmonious development of the City; and

WHEREAS, the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area complements the visions as provided in Section 1-201 of the Land Use Article of the Annotated Code of Maryland; and

WHEREAS, after the preparation of said amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area, the Commission gave notice of the time and place of the public hearing to be held on said amendment by giving notice in a newspaper of general circulation in the City; and

WHEREAS, the Commission did refer copies of said amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area to all adjoining planning jurisdictions and to all state and local jurisdictions that have responsibility for financing or constructing public improvements necessary to implement the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area at least sixty (60) days prior to the public hearing; and

WHEREAS, the Commission held a public hearing on said amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area on January 8, 2020; and

WHEREAS, the Commission took into consideration the testimony presented at said public hearing and in the written public record and made modifications to the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area; and

WHEREAS, pursuant to Section 3-202 of the Land Use Article of the Annotated Code of Maryland, the Commission, by Resolution No. 1-20, adopted February 12, 2020, approved and recommended for adoption by the Mayor and Council the amendment to the Plan for Park Road and North/South Stonestreet Avenue Area as an amendment to the 2002 Comprehensive Master Plan for the City of Rockville, Maryland and the amendments to the 2002 Comprehensive Master Plan entitled "Town Center Master Plan," dated October 22, 2001; "East Rockville Neighborhood Plan," dated March 8, 2004; and "Lincoln Park Neighborhood Plan," dated February 26, 2007; and

WHEREAS, the Commission certified an attested copy of the recommended amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area to the Mayor and Council on March 25, 2020; and

WHEREAS, pursuant to Section 3-204 of the Land Use Article of the Annotated Code of Maryland, the Mayor and Council, as the legislative body, may adopt, modify, remand, or disapprove an amendment to the Plan; and

WHEREAS, pursuant to Section 3-204 of the Land Use Article of the Annotated Code of Maryland, the Mayor and Council shall hold a public hearing before adopting or modifying an amendment to the Plan; and

WHEREAS, the Mayor and Council gave notice that a public hearing would be held on the recommended amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area on June 8, 2020, said notice having been published once a week for two consecutive weeks and at least ten days prior to the public hearing, in a newspaper of general circulation in the City of Rockville; and

WHEREAS, the Mayor and Council did hold a public hearing on the Commission's recommended amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area on June 8, 2020; and

WHEREAS, pursuant to Section 3-204 of the Land Use Article of the Annotated Code of Maryland, the Mayor and Council must approve, modify, remand, or disapprove the recommended plan within 90 days after the date that the Commission certifies an attested copy of the recommended plan to the legislative body or the recommended plan is considered approved; and

WHEREAS, pursuant to Section 3-204, Land Use Article of the Annotated Code of Maryland, if the Mayor and Council determines that there are exigent circumstances so that it is unable to act within the 90 days, the Mayor and Council may extend the deadline for no more than one 60-day extension; and

WHEREAS, the Mayor and Council determined that there were exigent circumstances so that it was unable to act within 90 days; and

WHEREAS, the Mayor and Council extended the deadline to approve, modify, remand or disapprove the recommended plan by 60 days to August 22, 2020 by Resolution No. 05-20, adopted on June 22, 2020; and

WHEREAS, the Mayor and Council modified the Commission's recommended plan during a work session following the June 8, 2020, public hearing; and

WHEREAS, it is the desire of the Mayor and Council to approve the recommended amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area with certain modifications.

NOW, THEREFORE, BE IT ORDAINED BY THE MAYOR AND COUNCIL OF ROCKVILLE, MARYLAND, that the amendment to the Plan for the Park Road and North/South Stonestreet Avenue Area be, and the same is hereby, adopted as an amendment to the 2002 Comprehensive Master Plan for the City of Rockville, Maryland and the amendments to the 2002

Comprehensive Master Plan entitled “Town Center Master Plan,” dated October 22, 2001; “East Rockville Neighborhood Plan,” dated March 8, 2004; and “Lincoln Park Neighborhood Plan,” dated February 26, 2007.

* * * * *

I certify that the above is a true and correct copy of
an Ordinance adopted by the Mayor and Council of
Rockville at its meeting of July 13, 2020.

Sara Taylor-Ferrell
City Clerk/Director of Council Operations



City of Rockville

MEMORANDUM

March 25, 2020

TO: City of Rockville Mayor and Council

FROM: Jim Wasilak, Zoning and Development Manager,
Planning Commission Liaison *RJW*

VIA: Members of the Planning Commission

SUBJECT: Park Road and North/South Stonestreet Avenue Area Plan Amendment

On February 12, 2020, the Planning Commission completed its review of the Park Road and North/South Stonestreet Avenue Area Plan Amendment. The Planning Commission voted 4 to 1 to approve, with revisions, the amendment for transmittal to the Mayor and Council for review and consideration.

Staff has made the revisions to the document as directed by the Planning Commission. This memo, attached to the Planning Commission resolution, serves as certification of an attested copy of the Planning Commission recommended plan.

Enclosures:
Planning Commission Resolution

Resolution No. 1-20

RESOLUTION: To approve and recommend adoption of the Park Road and North/South Stonestreet Avenue Area Comprehensive Master Plan Amendment as an amendment to the Adopted and Approved Comprehensive Master Plan for the City of Rockville, Maryland.

WHEREAS, the Planning Commission for the City of Rockville (hereinafter referred to as the “Commission”), under the provisions of Sections 3-201 *et seq.* of the Land Use Article of the Annotated Code of Maryland, may make and approve a plan or amendments thereto and recommend the same to be adopted by the local legislative body; and

WHEREAS, on December 19, 2001, the Planning Commission did approve, and on November 12, 2002, the Mayor and Council did adopt a Comprehensive Master Plan for the City of Rockville, Maryland (the “2002 Comprehensive Plan”); and

WHEREAS, on August 1, 2001, the Planning Commission did approve, and on October 22, 2001, the Mayor and Council did adopt a Town Center Master Plan (the “2001 Town Center Master Plan”) as an amendment to the 2002 Comprehensive Plan; and

WHEREAS, on December 17, 2003, the Planning Commission did approve, and on March 8, 2004, the Mayor and Council did adopt an East Rockville Neighborhood Plan (the “2004 East Rockville Neighborhood Plan”) as an amendment to the 2002 Comprehensive Plan; and

WHEREAS, on July 12, 2006, the Planning Commission did approve, and on February 26, 2007, the Mayor and Council did adopt a Lincoln Park Neighborhood Plan (the “2007 Lincoln Park Neighborhood Plan”) as an amendment to the 2002 Comprehensive Plan; and

WHEREAS, the Mayor and Council did instruct the Commission to make and approve and recommend to the Mayor and Council an amendment to the 2002 Comprehensive Plan,

including the 2001 Town Center Master Plan, the 2004 East Rockville Neighborhood Plan, and the 2007 Lincoln Park Neighborhood Plan (collectively referred to herein as the “Plan”) for the Park Road and North/South Stonestreet Avenue area of the Plan; and

WHEREAS, the City staff prepared, consistent with Sections 3-201 *et seq.* of the Land Use Article of the Annotated Code of Maryland, an amendment to the Plan for the Park Road and North/South Stonestreet Avenue area; and

WHEREAS, in connection with the preparation of the amendment to the Plan for the Park Road and North/South Stonestreet Avenue area, the Commission and City staff did carefully and comprehensively survey and study present conditions and projections of future growth and the relation of the Park Road and North/South Stonestreet Avenue plan amendment area to neighboring jurisdictions; and

WHEREAS, the amendment to the Plan for the Park Road and North/South Stonestreet Avenue area has been prepared for the purpose of guiding and accomplishing the coordinated, adjusted, and harmonious development of the City; and

WHEREAS, the amendment to the Plan for the Park Road and North/South Stonestreet Avenue area implements the visions as provided in Section 1-201 of the Land Use Article of the Annotated Code of Maryland; and

WHEREAS, after the preparation of said amendment to the Plan for the Park Road and North/South Stonestreet Avenue area, the Commission gave notice of the time and place of the public hearing to be held on said amendment to the Plan by giving notice in a newspaper of general circulation in the City; and

WHEREAS, the Commission did refer copies of said amendment to the Plan for the Park Road and North/South Stonestreet Avenue area to all adjoining planning jurisdictions and to all

state and local jurisdictions that have responsibility for financing or constructing public improvements necessary to implement the amendment to the Plan for the Park Road and North/South Stonestreet Avenue area at least sixty (60) days prior to the public hearing; and

WHEREAS, the Commission held a public hearing on said amendment to the Plan for the Park Road and North/South Stonestreet Avenue area in the Council Chamber at City Hall, Rockville, Maryland on January 8, 2020; and

WHEREAS, the Commission took into consideration the testimony presented at said public hearing and in the written public record and now desires to present its recommendations for an amendment to the Plan for the City of Rockville, Maryland; and

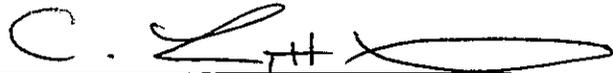
WHEREAS, the planning and development policies recommended in the amendment to the Plan for the Park Road and North/South Stonestreet Avenue area have been closely coordinated with and represent an extension of planning policy contained in the Comprehensive Master Plan for the City of Rockville, Maryland.

NOW, THEREFORE, BE IT RESOLVED by the Commission, as follows:

The amendment to the Plan for the Park Road and North/South Stonestreet Avenue area is hereby approved and recommended for adoption by the Mayor and Council of Rockville, Maryland pursuant to Section 3-202, Land Use Article of the Annotated Code of Maryland as an amendment to the 2002 Comprehensive Master Plan for the City of Rockville, Maryland, the amendments to the 2002 Comprehensive Master Plan entitled "Town Center Master Plan," dated October 22, 2001; "East Rockville Neighborhood Plan," dated March 8, 2004; and "Lincoln Park Neighborhood Plan," dated February 26, 2007.

* * * * *

I certify that the above is a true and correct copy of
a Resolution adopted by the Planning Commission
of the City of Rockville, Maryland, at its meeting of
February 12, 2020.



Charles Littlefield
Chair, Planning Commission



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Presentation and Discussion
 Department: City Manager's Office
 Responsible Staff: Jenny Kimball

Subject

Rockville Goes Purple Update

Recommendation

Staff recommends that the Mayor and Council provide feedback on the tentative Rockville Goes Purple activities proposed for the first quarter of FY21.

Discussion

Background

The Mayor and Council established the Rockville Goes Purple initiative in September 2018 to increase awareness of the opioid epidemic and prevent addiction and overdose. Rockville Goes Purple activities hosted by the Mayor and Council to date included:

- Presentation of Prevention Starts with All: The Chris Herren Story,
- Panel discussion on the opioid epidemic and Narcan training,
- Senior Center education forum on Knowing the Risks of Opioids,
- A Rockville Town Square stop on the Opioid Spoon Project Honor Tour,
- Celebration of National Recovery Month with a Mayor and Council Proclamation and purple lights at City Hall and Rockville Town Center,
- The Knight Foundation's 10K Race for Recovery in Rockville Town Center,
- Co-sponsorship and remarks by Mayor Newton at the Montgomery County International Overdose Awareness Day event,
- Hosted Narcan training sessions at City recreation centers,
- Distribution of information, resources, pins, car magnets, glow sticks and wristbands at Hometown Holidays, National Night Out and the Race 4 Recovery, and
- Narcan training and kit distribution for all Rockville City Police Department sworn officers.

Recent Data

The Maryland Opioid Operational Command Center reported in June 2020 that 561 people in Maryland died of opioid-related deaths during the first quarter of this calendar year. That

number marks a 2.6% increase from that of the first quarter of 2019. The vast majority of the 561 opioid-related deaths involved the use of fentanyl, a powerful synthetic drug that dealers mix with narcotics. The January to March 2020 quarterly report from the Command Center is provided at Attachment A for the most recent statewide data on opioids.

A May 2019 report from the Maryland Department of Health on Unintentional Drug- and Alcohol-Related Intoxication Deaths is found at Attachment B. This report provides a longer-term picture of the evolution of the crisis and the more recent significant impact of synthetic drugs like fentanyl. The Summary of Trends – Opioid Related Deaths on pages 6-7 of the report provides an informative overview.

On July 1, the Washington Post reported that suspected overdoses nationally – not all of them fatal – jumped 18% in March compared with last year, 29% in April and 42% in May, according to the Overdose Detection Mapping Application Program. The Program is a federal initiative that collects county-level data from emergency agencies.

The Maryland Opioid Operational Command Center indicated the pandemic may have been a factor in the increase in opioid-related deaths, but it is too early to know if there is a direct link with coronavirus. The Post article noted a potential connection, reporting that “emerging evidence suggests that the continued isolation, economic devastation and disruptions to the drug trade in recent months are fueling the surge.” Disruption in drug treatment services and financial struggles of treatment providers since March are also factors.

Proposed Activities

National Recovery Month in September is an opportunity to re-invigorate the City’s efforts to increase awareness about opioids and to direct people who need support to local resources. An initial list of proposed National Recovery Month activities has been developed to kick off a new year of Rockville Goes Purple.

Like the visual acknowledgement of Rockville Goes Purple for National Recovery Month in 2019, purple lights could be installed at City Hall and town Center streetlight poles. That could be enhanced with a banner across Maryland Ave. recognizing the month. Purple can also be used in the City’s communication tools to visually recognize the National Recovery Month and Rockville Goes Purple. Weekly activities during September could include:

- Week 1 – Virtual Race for Recovery – Invite the community to run a 5K or 10K to celebrate National Recovery Month in honor of a survivor or in memory of loved ones taken by overdose. Participants could run socially distanced as a team with friends and family. Runners would be encouraged to wear purple and send pictures from their virtual race for the City to compile.
- Week 2 – Mayor and Council Proclamation for National Recovery Month – The Mayor and Council and City staff could be invited to wear purple and a slide show of

the Virtual Race participants/teams could be shown with the reading of the proclamation.

- Week 3 – Virtual Book Club – Beginning in August, the community could be invited to read Beth Macy’s Dopesick: Dealers, Doctors and the Drug Company That Addicted America. The City could host a virtual facilitated panel discussion about the book, with readers (and interested non-readers) of the book listening.
- Week 4 – Narcan Training – Offer the community the opportunity learn how to use Narcan and receive a free kit.

The Rockville Goes Purple planning committee would work with Rockville Public Information, our Montgomery County partners, community service providers, local media and other stakeholders to promote the activities. With National Recovery Month activities arranged, the committee will turn its attention to additional FY21 Rockville Goes Purple initiatives. The committee will continue to collect data on the opioid epidemic, and work with our Montgomery County and community partners to understand the best ways to collaborate on this important issue.

Mayor and Council History

On September 24, 2018, the Mayor and Council received a briefing from Hagerstown Councilmember Emily Keller about the Washington Goes Purple initiative and established the Rockville Goes Purple initiative. On August 22, 2019, the Mayor and Council received an update on the first year of Rockville Goes Purple.

Next Steps

The Rockville Goes Purple planning committee will use the Mayor and Council’s feedback on the proposed activities and other suggestions to begin planning Rockville Goes Purple in FY21.

Attachments

- Attachment 14.a: OOC CY20 Q1 OD Death data June2020 (PDF)
 Attachment 14.b: Annual_2018_Drug_Intox_Report (PDF)



Rob DiSpirito, City Manager

7/8/2020



Maryland

OPIOID OPERATIONAL
COMMAND CENTER

Quarterly Report

January 1, 2020 – March 31, 2020

Released: June 10, 2020

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Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)



MESSAGE FROM THE EXECUTIVE DIRECTOR

Thank you for your interest in the Opioid Operational Command Center's (OCCC) quarterly report for the first calendar quarter of 2020.

2020 has presented the country and our state with an increasingly complex set of public health challenges. The global coronavirus pandemic has upended nearly every aspect of our lives. It has challenged our ability to monitor public health and to provide all manner of health care services. In the process, the pandemic has complicated our ability to respond to the continuing opioid and substance use crisis, which remains one of the greatest public health challenges ever to face our state.

During the first quarter of 2020, intoxication-related deaths from all types of drugs and alcohol increased slightly in Maryland when compared to the first quarter of 2019. Opioid-related deaths increased 2.6 percent in the same period. While these figures are disappointing on their own, they are met with further indicators – including substantial increases in both cocaine-related and alcohol-related deaths – of a substance use crisis that has been worsened by societal upheaval.

Beyond the increases in fatality rates, other troubling signs have appeared. Opioid-related emergency department visits and EMS naloxone administrations were down substantially in the first quarter of 2020. Typically, these statistics would rise in correlation with fatalities, and their declines indicate disruptions in our broader response systems that may have lingering effects on people who use drugs. Additionally, it is still impossible to understand precisely when the pandemic first affected the substance use landscape and exactly what the earliest ramifications may have been.

What we can understand is the near certainty of an accelerated substance use crisis as we emerge from the coronavirus pandemic. We can also understand that now is the time to redouble our focus on solutions, both established and innovative. Everybody involved in addressing the opioid crisis – every clinician, every advocacy group, every concerned parent, and every citizen – needs to renew their dedication to addressing this problem.

The OCCC is working closely with partners across the state to tailor a response to a substance use crisis that has taken a new form. With the measures outlined in the plan, we hope to begin simultaneously stanching the immediate fallout from the pandemic and laying the groundwork for the months and years ahead, when the full effects of the pandemic on the substance use crisis are clearer.

The OCCC is here to help in the challenging period ahead, and we will focus on finding solutions together.

Steven R. Schuh



Executive Director
Opioid Operational Command Center
Office of the Governor

EXECUTIVE SUMMARY

According to preliminary data from the Vital Statistics Administration (VSA) of the Maryland Department of Health (MDH), there were increases in unintentional intoxication fatalities related to nearly all major drug categories in Maryland in the first calendar quarter of 2020. During this time, there was a total of 626 reported intoxication deaths from all types of drugs and alcohol. This was an increase of 0.8 percent from the 621 intoxication deaths reported in the first three months of 2019. Opioids accounted for 89.6 percent of all such fatalities. Fentanyl, in particular, was involved in 83.5 percent of all cases.

There were 561 opioid-related deaths in the first quarter of 2020, a 2.6 percent increase from the first quarter of 2019. This is a disappointing, though slight, reversal of last year, when reported opioid-related fatalities decreased by 2.5 percent annually. Last year's decline was the first annual decrease in opioid-related fatalities since the onset of the opioid crisis over a decade ago.

Among opioid-related fatalities, fentanyl was involved in the vast majority of cases. There were 523 fentanyl-related deaths in the first quarter of 2020, representing 93.2 percent of all opioid-related fatalities. Fentanyl-related deaths increased by 4.4 percent from this time last year, compared to a 1.5 percent annual increase in 2019. Other opioid categories saw decreases during the same timeframe. There were 142 heroin-related deaths in the first quarter of 2020, a decline of 28.6 percent from the first quarter of 2019, and there were 95 prescription opioid-related deaths, a decrease of 2.1 percent.

Maryland saw significant increases in the number of fatalities related to other substances in the first quarter of 2020. There were 230 cocaine-related intoxication deaths, a 15.0 percent increase from this time last year. There were 136 alcohol-related intoxication deaths in the same timeframe, a 25.9 percent increase from the first quarter of 2019. Lastly, there were 31 benzodiazepine-related intoxication deaths and 20 methamphetamine-related intoxication deaths, representing a 72.2 percent increase and a 53.8 percent increase, respectively.

All 24 local jurisdictions in Maryland reported opioid-related intoxication fatalities in the first three months of 2020. Baltimore City (205 deaths), Baltimore County (80 deaths), and Anne Arundel County (52 deaths) reported the most deaths, collectively accounting for 60.1 percent of all opioid-related deaths in Maryland. More detail on regional opioid trends can be found on pages 9 and 10 of this report.

In contrast to the increasing number of reported opioid-related fatalities, emergency department (ED) visits for non-fatal opioid overdoses decreased during the first quarter of 2020. There were 1,261 reported opioid-related ED visits during this time, according to MDH. This was a 23.3 percent decrease for the first quarter of 2019, when there were 1,643 opioid-related emergency department visits for non-fatal opioid overdoses.

Similar to ED visits, the number of naloxone administrations by emergency medical services (EMS) personnel also decreased in the first calendar quarter of 2020. According to the Maryland Institute for Emergency Medical Services Systems (MIEMSS), in the first 15 weeks of 2020, there were 2,489 reported administrations, a decrease of 19.3 percent from the same timeframe in 2019, when there were 3,086 administrations.

This is the first time the Opioid Operational Command Center (O OCC) has included ED visits and naloxone administrations in our quarterly reports. There is an apparent contradiction between the

declining numbers of reported non-fatal ED visits and naloxone administrations and the increasing opioid-related fatalities. The OOC intends to coordinate with our state and local partners to identify any source of discrepancy in these statistics. They are nonetheless reported here to provide a more holistic picture of the current status of the opioid crisis in Maryland.

We do not know currently how the global outbreak of the novel coronavirus (commonly referred to as COVID-19) has impacted any of the statistics presented in this report or how it will continue to influence substance-use trends in the future. Many of the largest disruptions to everyday life in Maryland, such as mandated social distancing practices and travel restrictions, were not implemented until mid-to-late March, the end of the calendar quarter. For context, the Governor's stay-at-home order was not issued until March 30.

While the exact effects of the pandemic remain undetermined, general trends are now emerging. One of the most fundamental concerns is the availability of care for those struggling with substance use disorder (SUD). Increases in social isolation, disruptions to in-person treatment and counseling services, and the reconfiguration of daily routines could have profound impacts on those in crisis or recovery. We remain deeply concerned that the worst may be yet to come for those suffering from SUD. Of particular worry are disruptions to the supply of illicit narcotics, such as fentanyl. Any influx in the supply of fentanyl after an extended disruption due to border closures could lead to a sudden spike in overdoses. Additionally, any deep or sustained economic downturn has the potential to exacerbate despair among high-risk populations, potentially leading to new and worsening substance use.

In collaboration with the Maryland Department of Health, the OOC is leading the development of the state's cross-agency action plan to respond to what we anticipate will be an increasingly challenging environment to combat the substance-use crisis amidst the COVID-19 pandemic. The action plan will supplement the Interagency Heroin and Opioid Coordinating Council's *Annual Coordination Plan* and aims to address the social determinants of health that can protect individuals from negative health outcomes, including problematic substance use. We are coordinating with our partners across state government agencies, and we expect the plan to be finalized and released in June 2020.

To help combat the opioid crisis, the OOC consults regularly with the Opioid Intervention Team (OIT) in each of Maryland's 24 local jurisdictions. OITs are multiagency coordinating bodies that seek to enhance multidisciplinary collaboration to fight the opioid crisis at the local level. OITs are also responsible for administering OOC Block Grant funding (detailed below) to support programs that advance Governor Larry Hogan's three policy priorities of *Prevention & Education, Enforcement & Public Safety, and Treatment & Recovery* as outlined in the *Interagency Opioid Coordination Plan* published in January, 2020. The OOC tracks 129 high-priority programs and initiatives being implemented by OITs that are detailed beginning on page 12 of this report.

The OOC administers two grant programs to fund statewide, local, and nongovernment organizations that help advance the Hogan Administration's policy priorities. Our Block Grant Program distributes \$4 million annually on a formula basis to each of Maryland's 24 local jurisdictions. Our Competitive Grant Program is designed to distribute funding to the highest-scoring proposals received from state and local governments and private, community-based partners. In Fiscal Year 2020, the OOC distributed approximately \$6 million through this program. A summary of our grant programs and the current status of Block Grant and Competitive Grant awards can be found beginning on page 16 of this report.

Note: The fatalities data presented herein are preliminary and subject to change.

OPIOID-RELATED STATISTICS

The following section summarizes various opioid-related statistics in Maryland for the first calendar quarter (January through March) of 2020. The section includes information on the number of unintentional intoxication deaths related to opioids, alcohol, and various licit and illicit drugs according to data provided by the Vital Statistics Administration (VSA) of the Maryland Department of Health (MDH). This section also includes data on non-fatal opioid-related emergency department (ED) visits and naloxone administrations by emergency medical services (EMS) personnel.

Intoxication Deaths

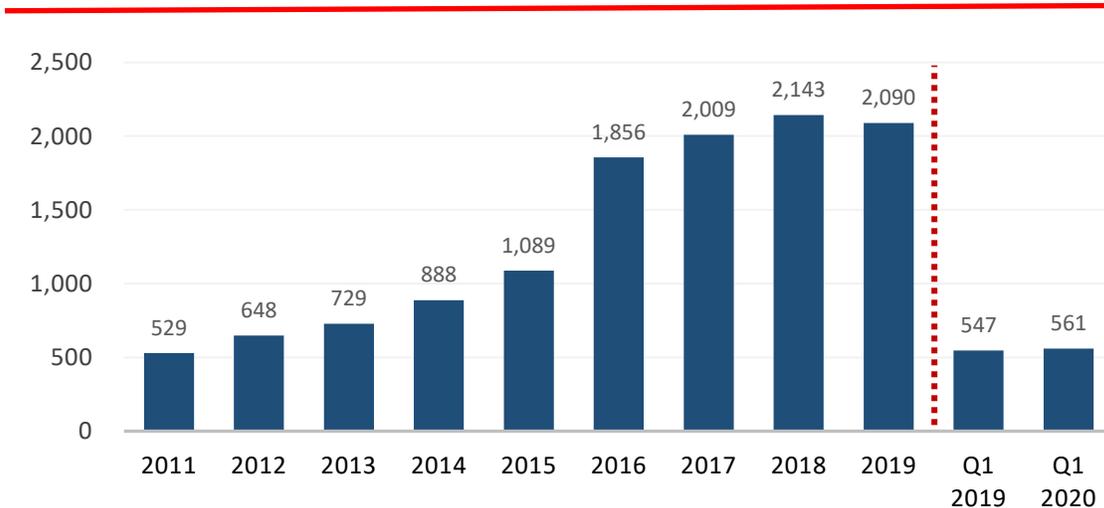
Unintentional intoxication deaths are fatalities resulting from the recent ingestion of or exposure to alcohol and other types of drugs. The substances included in this report are heroin, fentanyl, prescription opioids, cocaine, benzodiazepines, and methamphetamine. Most fatalities involve more than one substance. Subsequently, the sum total of deaths related to specific substance categories in this report does not equal the total number of deaths reported in the quarter. Please note that the fatalities data for 2019 and 2020 are preliminary at the time of this writing.

There were a total of 626 unintentional intoxication deaths involving all types of drugs and alcohol in Maryland in the first calendar quarter of 2020. This was a 0.8 percent increase from the 621 intoxication deaths reported in the same period of 2019. Opioids accounted for 89.6 percent of all such fatalities, and fentanyl in particular was involved in 83.5 percent of all cases.

Opioid-Related Fatalities

As shown in Figure 1 below, there were 561 opioid-related deaths in the first quarter of 2020, a 2.6 percent increase as compared to the same time last year. Though slight, this increase is disappointing when considering that opioid-related fatalities decreased by 2.5 percent on an annual basis between 2018 and 2019, marking the first such decrease since the beginning of the opioid crisis.

Figure 1. Opioid-Related Fatalities
2011 Through the First Calendar Quarter, 2020*



*2019 and 2020 counts are preliminary.

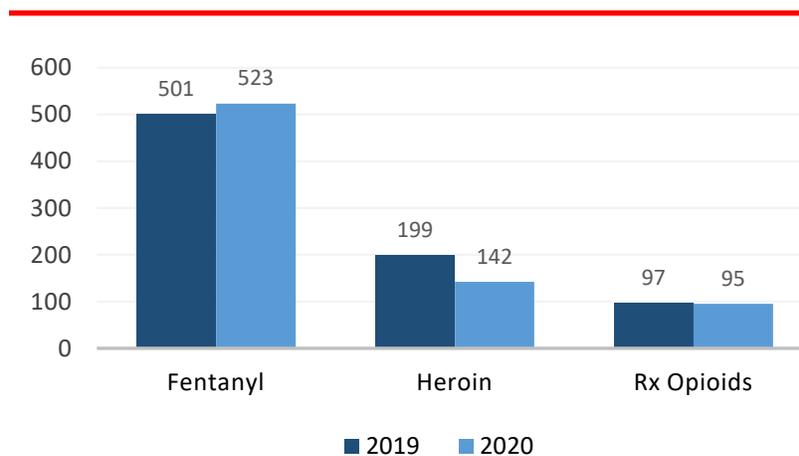


Fentanyl continues to be the deadliest drug in Maryland. Fentanyl was involved in 523 fatalities, accounting for 93.2 percent of all opioid-related deaths. Fentanyl-related deaths increased by 4.4 percent from this time last year, compared to a 1.5 percent annual increase in 2019. The growth rate of fentanyl-related fatalities had been decreasing in the last three years. In 2017, for example, the number of fentanyl-related fatalities increased by 42.4 percent from the previous year, and in 2018, that number grew by 18.4 percent. Much like the increased number of overall opioid-related fatalities, the increase in fentanyl-related deaths may be an anomaly in a broader downward trend but is still very concerning and warrants vigilant observation.

Other opioid categories, namely heroin and prescription opioids, saw decreases in the first quarter of 2020. There were 142 heroin-related fatalities, a 28.6 percent decline from this time last year. Considering that overall opioid-related fatalities increased during the same timeframe, this trend is likely due to continued changes in illicit drug markets. That is, fentanyl has been displacing heroin in the last several years. Heroin-related fatalities have decreased annually since 2016, when there was a peak of 1,212 annual reported deaths.

There were 95 prescription opioid-related deaths in the first quarter of 2020. This is a 2.1 percent decrease from the first quarter of 2019. Like heroin-related fatalities, prescription opioid-related fatalities have decreased every year since 2016, at which time there were 418 annual reported deaths.

Figure 2. Intoxication Death by Opioid Type
*First Calendar Quarter, 2019 vs. 2020**



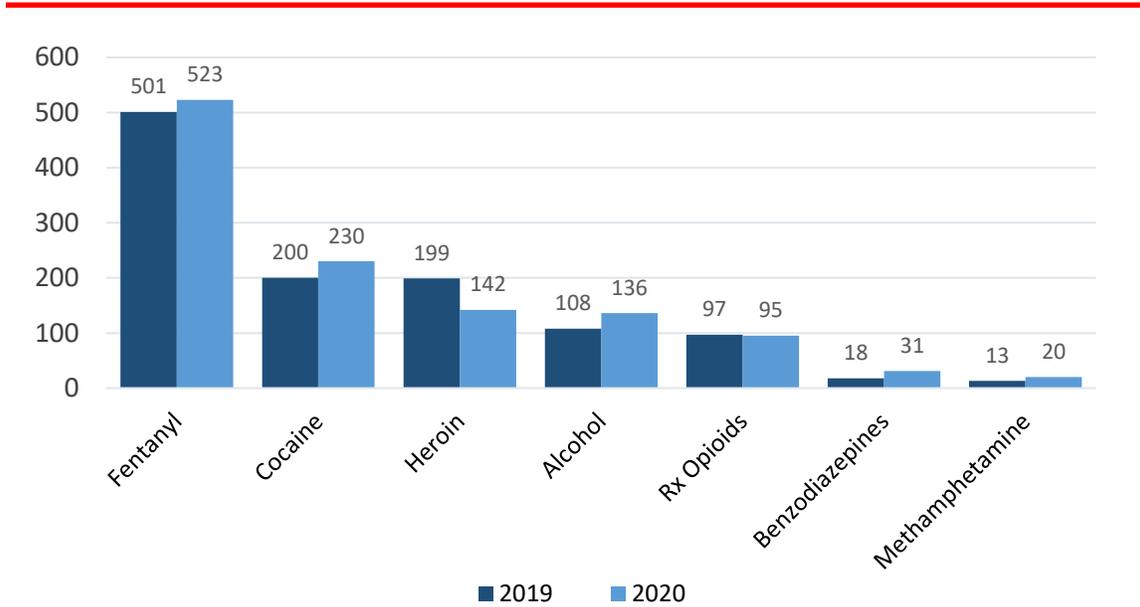
Non-Opioid Substances

Maryland saw significant increases in the number of fatalities related to other, non-opioid substances in the first quarter of 2020. There were 230 cocaine-related deaths, a 15.0 percent increase from this time last year. Cocaine accounted for the most non-opioid-related fatalities and was the substance most commonly mixed with opioids. There were 136 alcohol-related deaths in the first quarter of 2020, a 13.0 percent increase from the first quarter of 2019. Additionally, there were 31 benzodiazepine-related deaths and 20 methamphetamine-related deaths in the first three months of 2020, representing a 72.2 percent and 58.3 percent increase, respectively. These increases are striking despite the relatively smaller number of cases involved. For reference, in 2019, benzodiazepine-related fatalities decreased by 15.7 percent annually while methamphetamine-related fatalities increased by 28.1 percent annually.

*2019 and 2020 counts are preliminary.

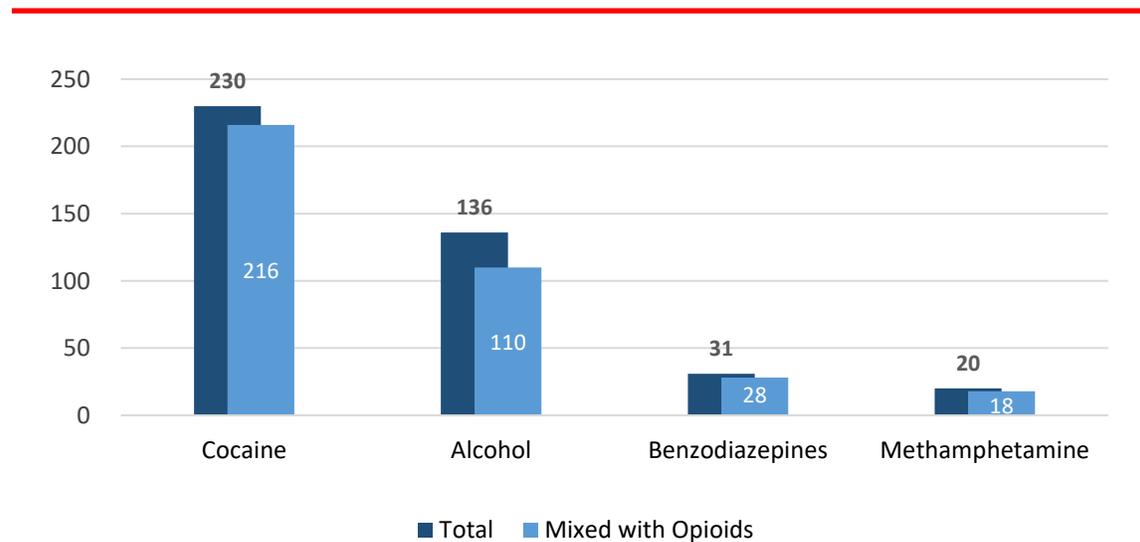
Total methamphetamine-related fatalities reported in the first quarter of 2020 alone account for nearly half of the annual total reported in 2019, indicating rapid acceleration in methamphetamine use.

Figure 3. Intoxication Deaths by Substance
*First Calendar Quarter, 2019 vs. 2020**



It is critical to note that the vast majority of fatalities involving non-opioid substances also involved combined use with opioids. Of the 417 instances in which a non-opioid was identified as a contributor to unintentional intoxication deaths, opioids were present 89.2 percent of the time.

Figure 4. Deaths Involving Substances Mixed with Opioids
*First Calendar Quarter, 2020**



*2019 and 2020 counts are preliminary.



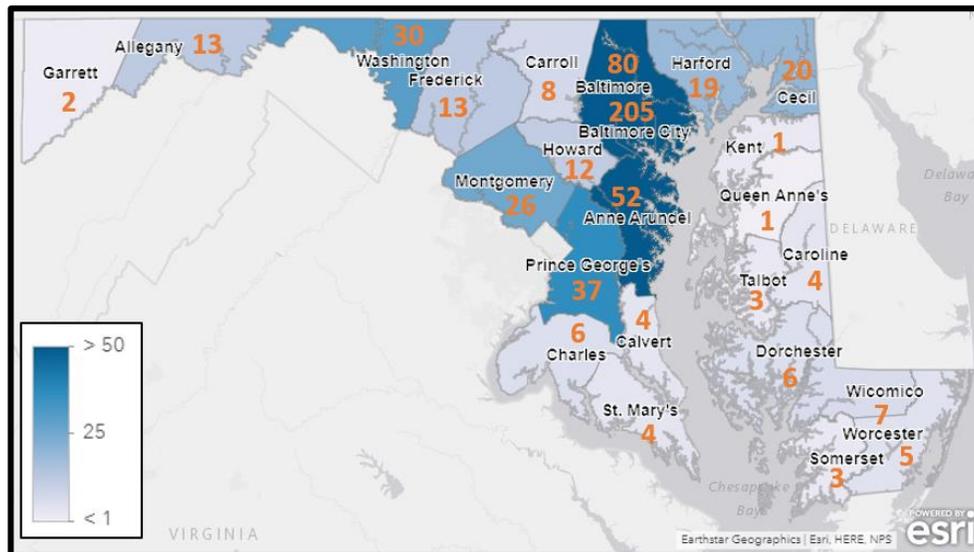
Fatalities at the County-Level

All 24 local jurisdictions in Maryland reported opioid-related intoxication fatalities in the first quarter of 2020. Baltimore City (205 deaths), Baltimore County (80 deaths), and Anne Arundel County (52 deaths) experienced the highest number of fatalities, collectively accounting for 60.1 percent of all opioid-related deaths in Maryland. Other counties that reported high numbers of opioid-related fatalities included Prince George’s County, Washington County, and Montgomery County. These counties had 37, 30, and 26 fatalities, respectively.

Table 1. Opioid-Related Intoxication Deaths by County
*First Calendar Quarter, 2020**

County	2019	2020	Difference	County	2019	2020	Difference
Allegany	7	13	6	Harford	19	19	0
Anne Arundel	49	52	3	Howard	8	12	4
Baltimore City	239	205	(34)	Kent	3	1	(2)
Baltimore	76	80	4	Montgomery	19	26	7
Calvert	8	4	(4)	Prince George's	14	37	23
Caroline	5	4	(1)	Queen Anne's	4	1	(3)
Carroll	14	8	(6)	Somerset	1	3	2
Cecil	11	20	9	St. Mary's	4	4	0
Charles	3	6	3	Talbot	3	3	0
Dorchester	1	6	5	Washington	24	30	6
Frederick	20	13	(7)	Wicomico	8	7	(1)
Garrett	0	2	2	Worcester	7	5	(2)
Statewide Total					547	561	14

Figure 5. Opioid-Related Intoxication Deaths in Maryland by County
*First Calendar Quarter, 2020**



*2019 and 2020 counts are preliminary.



Geographically, the most significant increases in opioid-related fatalities were seen in the Capital Region, which is made up of Montgomery County, Prince George’s County, and Frederick County. The Capital Region had 76 opioid-related fatalities in the first quarter of 2020, a 43.4 percent increase from the first quarter of 2019. The largest increase, both regionally and statewide, was observed in Prince George’s County, which had 23 additional fatal overdoses (37 in 2020 compared to 14 in 2019, a 164.3 percent increase).

Western Maryland, which includes Garrett County, Allegany County, and Washington County, saw a 45.2 percent regional increase, with 45 fatalities in the first quarter of 2020. Washington County led the region with 30 reported opioid-related fatalities, and Allegany County had an increase of 85.7 percent, with 13 fatalities.

The Eastern Shore saw a regional increase of 16.3 percent with 50 fatalities. The Eastern Shore is made up of Cecil, Caroline, Dorchester, Kent, Queen Anne’s, Somerset, Talbot, Wicomico, and Worcester counties. Cecil County, in particular, saw a significant increase, with 9 additional opioid-related fatalities. This was an 81.8 percent increase from the first quarter of 2019.

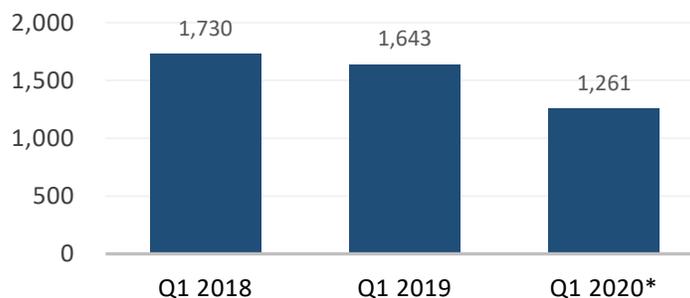
The largest decline in opioid-related fatalities was observed in Central Maryland, primarily resulting from a large decrease in Baltimore City. Central Maryland includes Anne Arundel County, Baltimore City, Baltimore County, Carroll County, Harford County, and Howard County. There were 29 fewer overdoses in Central Maryland, a decrease of 7.2 percent. Baltimore City had 34 fewer fatalities compared to this time last year, a 14.2 percent decrease.

Southern Maryland had 14 regional opioid-related fatalities, one fewer than last year, or a decrease of 6.7 percent. Southern Maryland includes Calvert County, Charles County, and St. Mary’s County.

Emergency Department Visits

In apparent contradiction to the statistics on opioid-related fatalities reported above, the number of reported emergency department visits for non-fatal opioid overdoses decreased in the first calendar quarter of 2020. There were 1,261 such reported visits in the first three months of 2020, according to the Electronic Surveillance System for the Early Notification of Community-Based Epidemics (“ESSENCE”) maintained by MDH. This is a 23.3 percent decrease from the first quarter of 2019, when there were 1,643 opioid-related ED visits for non-fatal opioid overdoses.

**Figure 6. Non-fatal Opioid Overdose
Emergency Department Visits
First Calendar Quarter, 2020***



*2020 counts are preliminary.

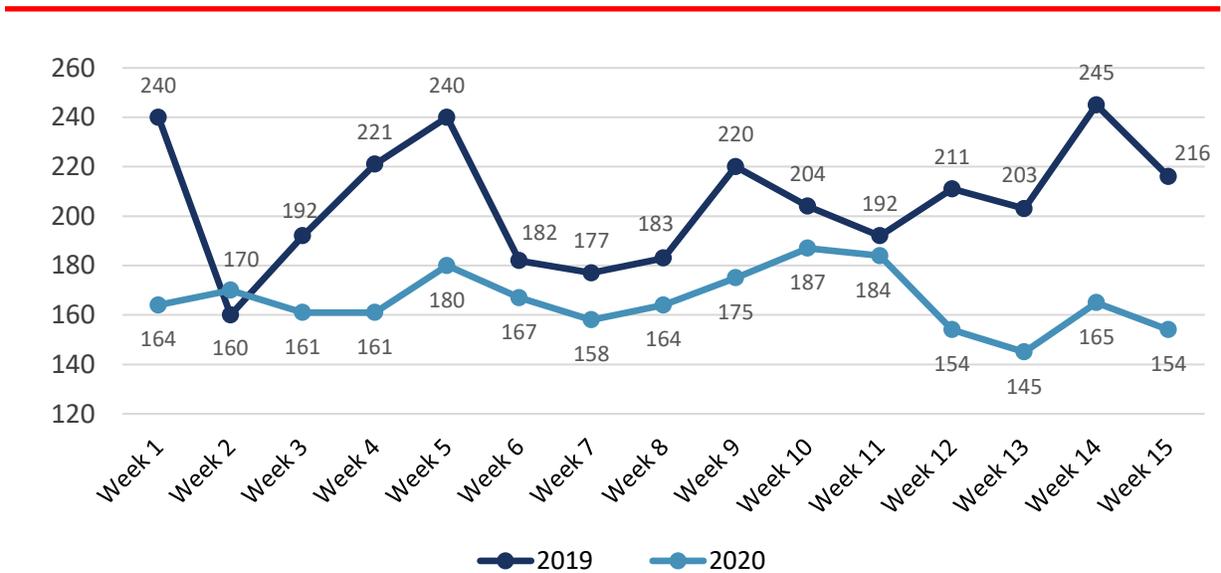


While we do not know for certain why reported opioid-related ED visits decreased while opioid-related fatalities increased during the same timeframe, it should be acknowledged that the coronavirus pandemic was likely a contributing factor. According to ESSENCE, total ED visits for all conditions began declining in mid-to-late March, likely the result of individuals avoiding EDs due to fear of contracting the virus or as to not overburden the healthcare system. This is the same timeframe in which social distancing measures and travel restrictions were adopted in Maryland as discussed in the Executive Summary of this report.

Naloxone Administrations

As with non-fatal opioid-related ED visits, the number of naloxone administrations by emergency medical services personnel decreased in the first calendar quarter of 2020. According to the Maryland Institute for Emergency Medical Services Systems (MIEMSS), in the first 15 weeks of 2020, there were 2,489 naloxone administrations by EMS professionals in Maryland. This was a decrease of 19.3 percent from the same timeframe in 2019, when there were 3,086 administrations.

Figure 7. Naloxone Administrations by EMS Personnel
First Calendar Quarter, 2020*



This is the first instance that the OCCC has included ED visits and naloxone administrations in our quarterly reports. There is an apparent contradiction between the declining numbers of reported non-fatal ED visits and naloxone administrations and the increasing opioid-related fatalities. The OCCC intends to coordinate with our state and local partners to identify any discrepancy in these statistics.

*2020 and 2019 counts are preliminary.



COVID-19 CROSS-AGENCY ACTION PLAN

The global coronavirus pandemic has necessitated a sweeping response that has rewired the systems of the opioid crisis, from drug-supply chains, to drug-use behaviors, to the provision of treatment. We do not yet know exactly how the pandemic has impacted any of the drug-use statistics presented in this report or how it will continue to influence substance-use trends in the future. Many of the largest disruptions to everyday life in Maryland, such as mandated social-distancing practices and travel restrictions, were not implemented until the final weeks of the quarter. These actions were the first official signals of the pandemic; however, it is impossible to understand precisely when the pandemic first affected the substance use landscape.

While the exact effects of the pandemic remain undetermined, general trends are now emerging. One of the most fundamental concerns is the availability of care for those struggling with substance use disorder (SUD). Increases in social isolation, disruptions to in-person treatment and counseling services, and the reconfiguration of daily routines could have profound impacts on those in crisis or recovery. Expanded access to telemedicine and to medications, such as methadone and buprenorphine for opioid-treatment-program (OTP) patients, were important early accommodations, but they may prove to be only small components of what is needed in the future.

We remain deeply concerned that the worst may be yet to come for those suffering from SUD. Of particular worry are shortages in the supply of illicit narcotics, such as fentanyl. Any resurgence of the supply of fentanyl after an extended disruption due to border closures could lead to a sudden spike in overdoses. This phenomenon is widely observed among those who have recently been released from incarceration or who have relapsed after treatment. Those who resume using their regular dosage of opioids after an extended period of withdrawal or tapering are at higher risk for overdose due to decreased tolerance. Additionally, any deep or sustained economic downturn has the potential to exacerbate despair among high-risk populations, potentially leading to new and worsening opioid use.

In collaboration with the Maryland Department of Health, the OOC is leading the development of the state's new Cross-Agency Action Plan to respond to what we anticipate may be an increase in overdose fatalities following COVID-19. The plan will supplement the *Inter-Agency Opioid Coordination Plan* and will aim to address the social determinants of health, which can protect individuals from negative health outcomes, including problematic substance use.

The OOC has received input from state partner agencies including MDH, Maryland Department of Labor, MIEMSS, Maryland Department of Housing and Community Development (DHCD), Governor's Office for Crime Prevention Youth and Victim Services (GOCPYVS), Maryland Insurance Administration, High Intensity Drug Trafficking Area (HIDTA), and the Maryland State Police (MSP). Information gleaned from these partners is being incorporated into a plan that can be implemented quickly. We expect the plan to be released in June 2020.

OPIOID INTERVENTION TEAMS UPDATE

The OCCC coordinates routinely with the Opioid Intervention Team (OIT) in each of Maryland’s 24 local jurisdictions. OITs are multiagency coordinating bodies that seek to enhance multidisciplinary collaboration to combat the opioid crisis at the local level. Each OIT is chaired by the local health officer and the emergency manager. OITs are also required to have representatives from various agencies and organizations, including law enforcement, social services, education, and various private community and faith-based groups. Each OIT is responsible for administering OCCC Block Grant funding (detailed beginning on page 16) to support local programs that advance Governor Hogan’s three policy priorities of *Prevention & Education, Enforcement & Public Safety, and Treatment & Recovery* as outlined in the *Inter-Agency Opioid Coordination Plan* published in January, 2020.

Important note: Many OIT members are involved with the coronavirus pandemic response at the local level. Despite the incredible amount of time and resources each jurisdiction has devoted to the pandemic response, OITs are also continuing their work to address the ongoing and competing opioid crisis. Many OITs began meeting virtually during this time and are making additional adjustments to accommodate all mandated public health procedures in their activities.

Local Best Practices

The OCCC has identified and tracks 129 high-priority programs and services supported by OITs around the state. The charts below illustrate the implementation of these activities by our local partners based on self-reported OIT data. Responses on implementation status range from “no programming planned” (red) to “substantial programming in place” (dark green).

Table 2. Summary of Program Implementation by Jurisdiction

OIT Program Inventory - Totals <i>First Calendar Quarter, 2020</i>	Allegany	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
Total of Substantial Programming Implemented	61	45	65	62	29	61	64	41	3	35	48	25	90	54	69	32	38	37	46	56	77	81	46	39
Total of Some Programming Implemented	22	57	39	43	53	21	40	68	71	27	59	38	14	46	20	54	45	33	26	51	18	24	59	43
Subtotal of Substantial & Some Programming	83	102	104	105	82	82	104	109	74	62	107	63	104	100	89	86	83	70	72	107	95	105	105	82
Total Programming in Development	5	21	17	21	35	6	11	10	18	36	14	19	19	16	18	16	10	23	16	13	2	11	7	13
Total of Programs Not Planned	41	6	8	3	12	34	14	10	37	31	6	47	6	10	20	27	34	35	37	9	23	13	17	21

Of Maryland’s 24 local jurisdictions, 22 reported having at least 50 percent of the 129 high-priority programs substantially or partially implemented. Around half (11) of local jurisdictions reported having at least 75 percent of these programs substantially or partially implemented. While all counties reported plans to expand high-priority programming, no counties reported full or partial implementation of all 129 programs, and no counties reported having plans to implement all 129 programs. This analysis illustrates two important points. One, all of Maryland’s jurisdictions have made great progress in implementing high-priority programs in order to combat the substance-use crisis. However, there remains ample opportunity to expand programs and services in the future in every part of the state. Two, the substance-use crisis is a multifaceted issue with varying regional and statewide characteristics, and local officials should continue to prioritize programming based on their jurisdiction’s specific needs.



Table 3. Full Local Best Practices Matrix

OIT Program Inventory First Calendar Quarter, 2020	Allegany	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
	Public Health																							
1. Harm-Reduction Programs:																								
Naloxone Distribution	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Naloxone Training	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Syringe-Service Program	Red	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Fentanyl Test-Strip Distribution	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Wound-Care Program	Red	Yellow	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
2. Information Campaigns (PSAs):																								
211 Press 1	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Access to Treatment	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Anti-Stigma	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Fentanyl	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Good Samaritan	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Naloxone	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Safe-Disposal	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Talk to Your Doctor	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
3. Local Hotline to Access Treatment																								
4. Mobile-SUD Services (Non-Treatment)																								
5. Prescriber Education/Academic Detailing																								
6. Safe-Disposal Program/Drop Boxes																								
7. Employer-Education and Support Programs:																								
Drug-Awareness Prevention	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Information/Referral for Employees Seeking Treatment/Recovery	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Behavioral Health																								
8. Assertive Community Treatment (ACT) Program																								
9. SUD Crisis -Services Facilities (Outside of ED)																								
Assessment and Referral Center/Safe Station	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Allow Walk-ins	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
23-Hour Stabilization Services	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
1-4 Day Stabilization Services	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Mobile Crisis Team	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
24/7 Operation	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
10. Mobile-Treatment Program (Dispensing, etc.)																								
11. Medication-Assisted Treatment Availability:																								
Vivitrol	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Buprenorphine	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Methadone	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
12. Certified Peer-Recovery Specialist Support:																								
DSS Service Center	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Health Department	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Hospital ER	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Jail	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Parole and Probation Offices	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Walk-in Center	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
On-Call 24/7 Availability	Red	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
Post-Incident Outreach	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
13. Outpatient SUD Services in Jurisdiction:																								
ASAM Level 0.5 Early Intervention	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
ASAM Level 1.0 for Adolescents and Adults	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green
ASAM Level 2.1 Intensive Outpatient	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green	Green

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)



OIT Program Inventory First Calendar Quarter, 2020	Allegheny	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Gaithersburg	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester
Behavioral Health (cont'd)																								
14. ASAM Level 2.5 Partial Hospitalization																								
15. Licensed SUD Residential-Treatment Programs:																								
3.1 Clinically Managed Low-Intensity																								
3.3 Clinically Managed High-Intensity for Adults Only																								
3.5 Clinically Managed High-Intensity for Adults & Adolescents																								
3.7 Medically Monitored Intensive Inpatient																								
3.7 Medically Monitored Inpatient Withdrawal Mgmt.																								
16. Recovery-Support Programs																								
Sober-Living/Recovery Housing																								
Wellness/Recovery Centers																								
17. Recovery Oriented Systems of Care (ROSC)																								
Judiciary/States Attorney																								
18. Specialized Courts:																								
Adult Drug Court																								
Adolescent Drug Court																								
19. Public-Messaging Program																								
20. Prosecute for Distribution Leading to Death																								
21. Pre-Trial Referral-to-Treatment Protocol																								
22. Information Cards Provided by Commissioners																								
Corrections																								
23. Universal Substance-Use Screening During Intake																								
24. Pre-Trial Referral to Treatment																								
25. Drug-Treatment Programs While Incarcerated:																								
Counseling																								
Methadone																								
Buprenorphine																								
Vivitrol																								
Outpatient (1.0)																								
Intensive Outpatient (2.1)																								
26. Day-Reporting Center																								
27. Facilitated Re-Entry Programs:																								
Employment-Transition Support																								
MAT Upon Release																								
Naloxone Provided at Release																								
Recovery-Housing Referral																								
Transportation Assistance																								
Treatment-Program Referral/Warm Hand-Off																								
28. Provide State Inmates Access to Local Re-Entry Programs																								
29. Organized Planning for HB 116																								
30. Compassion-Fatigue Program																								
Parole and Probation																								
31. Screening and Referral to Treatment																								
32. Treatment Monitoring Program																								
33. SUD Services On-Site at Parole and Probation Offices																								
Emergency Medical Services																								
34. Post-Incident EMS Outreach after Overdose																								
35. Leave-Behind Information Cards																								
36. Leave-Behind Naloxone																								
37. Transport to Alternative Destination (Non-ED)																								
38. Compassion-Fatigue Program																								

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)



OPIOID OPERATIONAL COMMAND CENTER

OIT Program Inventory <i>First Calendar Quarter, 2020</i>		Allegheny	Anne Arundel	Baltimore City	Baltimore Co.	Calvert	Caroline	Carroll	Cecil	Charles	Dorchester	Frederick	Garrett	Harford	Howard	Kent	Montgomery	Prince George's	Queen Anne's	Somerset	St. Mary's	Talbot	Washington	Wicomico	Worcester	
Law Enforcement																										
39. All Police Trained in Naloxone																										
40. All Police Carry Naloxone																										
41. Leave-Behind Information Cards																										
42. Post-Incident Police Outreach after Overdose																										
43. Community-Awareness SUD Programming																										
44. Organized Pre-Arrest SUD Diversion/Referral Program																										
45. Crisis Intervention Team-Trained Officers																										
46. Heroin/Overdose Coordinator																										
<i>Use ODMap</i>																										
<i>Receive Spike Alerts</i>																										
47. Compassion-Fatigue Program																										
Social Services																										
48. SUD Screening and Referral at Intake																										
<i>Medicaid</i>																										
<i>SNAP</i>																										
49. Support Program for Exposed Newborns/Families																										
50. DSS Staff Deployed in Schools																										
Hospitals in Jurisdiction																										
51. Dedicated Behavioral Health/SUD Emergency Room																										
52. Buprenorphine Induction																										
53. Warm Hand-Off to SUD Provider/Services																										
54. Naloxone Distribution at Discharge																										
55. Peer Specialists on Staff																										
56. Prescribing Guidelines for Staff																										
57. Prescribing Patterns Tracked																										
Education																										
58. Let's Start Talking Grade 3 -12 Prevention Education																										
59. Supplemental Drug-Awareness Education																										
60. Behavioral Health Professionals on Staff (Non-Special Ed.)																										
61. School Nurses Program:																										
<i>Mental Health First-Aide Training</i>																										
<i>Naloxone in Health Room</i>																										
<i>Assist with Prevention Education</i>																										
62. "Safe Place" Identified within the School																										
63. Mechanisms in Place to Identify Impacted Youth																										
64. Services for Students Impacted by SUD at Home																										
65. Handle with Care Implemented																										
66. School-Based Prevention Clubs (e.g., SADD)																										
67. Community-Awareness Programming (After School)																										
Higher Education																										
68. Substance Misuse Information Campaigns for Students																										
69. Student Wellness/Recovery Center																										
70. SUD Student-Support Programing																										
71. Host SUD Events for Community																										
OIT																										
72. Full Membership																										
73. Organized in Manner Consistent with Governor's Order																										
74. OIT Meets at Least Bi-Monthly																										
75. Updated Strategic/Implementation Plan																										
76. Co-Chaired by Health Officer and Emergency Manager																										
77. Emergency Manager Is Cabinet-Level Officer																										
78. Elected Officials Participate Regularly in OIT Meetings																										
79. Elected Officials Engaged Regularly in SUD Programming																										
80. Full-Time Opioid Programming Coordinator																										

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)



OOCC GRANTS

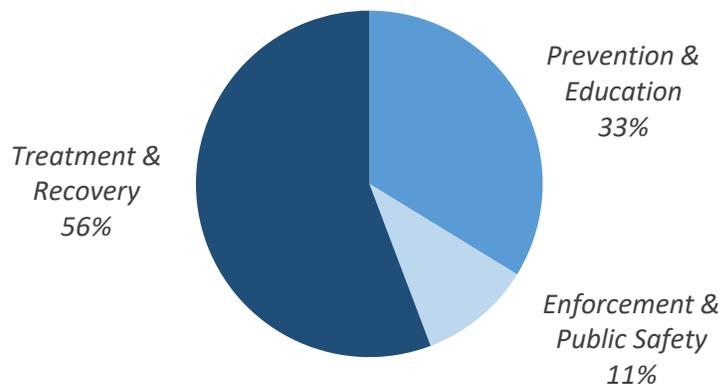
OOCC Grants Summary

The OOCC distributes funding through two distinct grant programs: (i) our Block Grant Program for local OITs and (ii) our Competitive Grant Program for statewide, local, and nongovernment grants. The purpose of the Block Grant Program is to provide a base level of flexible funding to all 24 local jurisdictions in order to combat the opioid crisis. The Block Grant Program is formula-based, with \$2 million in funding distributed equally among all jurisdictions and an additional \$2 million allocated proportionately according to opioid-related mortality rates. The purpose of the Competitive Grant Program is to distribute funding to the highest-scoring proposals received from state and local governments and from private, community-based partners. Proposals are scored based on how well they align with the OOCC's mission and the *Inter-Agency Opioid Coordination Plan* and how well they address the most pressing needs around the state.

Overview of Combined Grant Programs

The chart below illustrates combined grant program funding for Fiscal Year 2020 (July 1, 2019 to June 30, 2020) relative to Governor Hogan's policy priorities of *Prevention & Education*, *Enforcement & Public Safety*, and *Treatment & Recovery*. The 2020 Competitive Grant Program included two rounds of awards: one round of the total program allocation (approximately \$6 million) and a second round to reallocate first-round awards that were returned and/or canceled (approximately \$700,000). The second-round award distributions are still being finalized as of this writing.

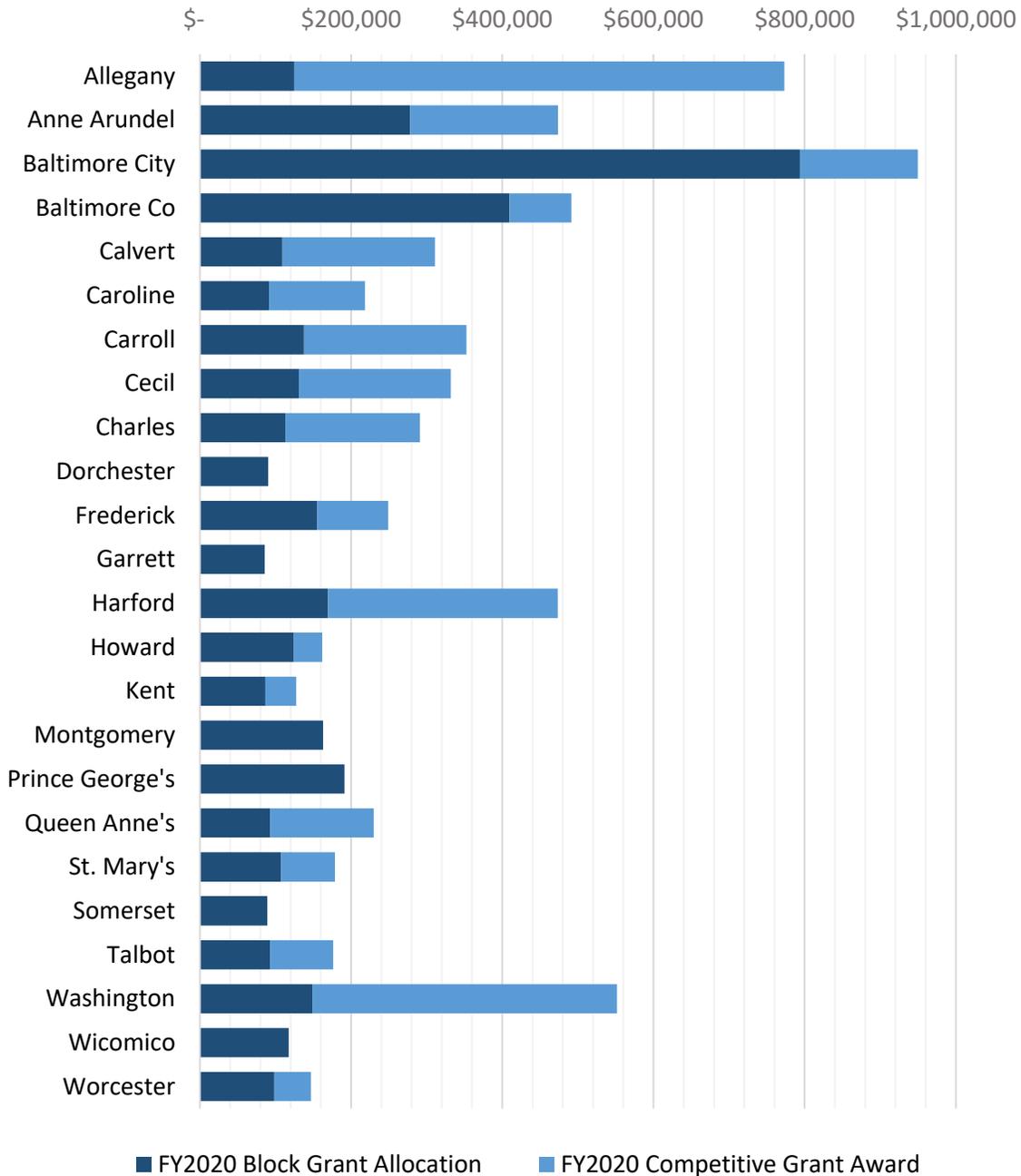
Figure 8. OOCC FY2020 Block Grants and Competitive Grants by Priority Area
First Calendar Quarter, 2020



Important note: Due to the coronavirus pandemic, the OOCC is working with its grantees to adapt 2020 project implementation to accommodate all state and local public health considerations. For example, many grantees are working to provide trainings or information sessions virtually instead of in-person as originally planned. Additionally, the OOCC is coordinating with grantees in observance of these guidelines by conducting grant progress reviews and expenditure reviews through the use of virtual meetings.

As shown in Figure 9, Baltimore City, Allegany County, Washington County, and Baltimore County will receive the greatest amount of grant funding in Fiscal Year 2020. Grants benefitting multiple jurisdictions or the entire state are excluded from this chart; those grants total \$1.9 million.

Figure 9. Fiscal Year 2020 OOCB Block Grants and Competitive Grant Funding by Jurisdiction



Attachment 14.a: OOCB CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)



Grants by Jurisdiction

The following table summarizes how the OOC intends to allocate approximately \$10 million in Block and Competitive Grant funding by jurisdiction in Fiscal Year 2020.

Table 3. FY 2020 Block Grants and Competitive Grants Summary

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Allegany County		
\$124,612	Block	Educate and provide outreach about the growing crisis of opioid prescription drugs and heroin misuse in the community
		Reduce illicit supply of opioids
		Support peer-recovery services
		Increase availability of naloxone for first responders
\$443,000	Competitive	Provide training and mentorship in a stress- and trauma-relief model to educators, healthcare workers, and addiction and detention programs
\$205,000	Competitive	Support efforts of the Sheriff's Office to educate community on opioids
Anne Arundel County		
\$278,074	Block	Expand public-outreach programming to increase awareness and decrease morbidity and mortality from opioid overdoses and to reduce the stigma associated with opioid use disorder
		Continue supporting Safe Stations
		Support start-up funding for recovery center
\$66,000	Competitive	Support for children whose parent(s) and other close relatives have experienced a fatal or nonfatal overdose
\$53,000	Competitive	Support for peer support services at the county detention centers
\$77,000	Competitive	Expand recovery services
Baltimore City		
\$793,719	Block	Continue supporting mobile treatment clinic
		Support increased access to harm-reduction materials and community-outreach activities
		Support treatment program for access to medication-assisted treatment and care coordination, case management and health-literacy services
\$59,000	Competitive	Reduce barriers to treatment services
\$97,000	Competitive	Help women in accessing treatment and recovery services

OPIOID OPERATIONAL COMMAND CENTER

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Baltimore County		
\$409,565	Block	Continue supporting peer recovery services
\$67,000	Competitive	Support a care coordinator and peer outreach associate to help individuals and families suffering from substance use disorder
\$15,000	Competitive	Support mental and behavioral health counseling for children and families who are surviving victims of the opioid crisis
Calvert County		
\$108,966	Block	Provide peer recovery-support in the local emergency department
		Expand access to clinical services and medications that support recovery from substance use disorder
		Support medication-assisted treatment coordinator
		Increase community awareness
\$60,000	Competitive	Provide health curriculum in public school system focusing on mental- and emotional-health supports and substance use disorder prevention.
\$56,000	Competitive	Support substance misuse prevention groups in the public school system
\$20,000	Competitive	Support behavioral health services (addressing both substance misuse and mental health issues) in the public school system
\$66,000	Competitive	Expand recovery services
Caroline County		
\$91,323	Block	Enhance data collection and analysis
		Support treatment and recovery services
		Decrease growth in opioid misuse through support of K-9 program
\$9,000	Competitive	Support for trauma-informed training for therapists and counselors
\$118,000	Competitive	Support for medical director to provide behavioral health services
Carroll County		
\$137,594	Block	Continue supporting mobile crisis services
\$47,000	Competitive	Provide prevention-focused programming in two high schools, four middle schools, as well as 4 th - and 5 th -grade students from five Westminster-area elementary schools
\$62,000	Competitive	Support for opioid abuse prevention project in public schools
\$106,000	Competitive	Support three certified peer recovery specialists

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)

OPIOID OPERATIONAL COMMAND CENTER

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Cecil County		
\$130,937	Block	Support youth risk-prevention program
		Support over-the-counter medication safety training for youth
		Provide transportation assistance to those in treatment and recovery
		Support Drug-Free Cecil - Youth Leadership Project
		Expand peer recovery specialist services in the community
\$97,000	Competitive	Support prevention efforts in the public school system
\$104,000	Competitive	Support prevention programming for Cecil youth
Charles County		
\$112,960	Block	Support for Opioid Intervention Team coordination
		Expand peer recovery support services
		Support harm reduction programming
		Increase availability of naloxone for first responders
		Support and facilitate outreach and public-awareness events
\$178,000	Competitive	Provide behavioral health services in the detention center
Dorchester County		
\$90,324	Block	Support for Opioid Intervention Team coordination
		Continue supporting drug-free fun and structured activities for youth and young adults
		Support peer recovery services
		Ongoing support SBIRT (screening, brief intervention, and referral to treatment) services
Frederick County		
\$155,237	Block	Expand peer recovery support services
\$94,000	Competitive	Expand outreach to families after an overdose death
Garrett County		
\$85,664	Block	Support Community Resource Team (CRT) to provide a bridge between identified potential clients and opioid-addiction services
		Support program to eliminate barriers to recovery
		Support drug prevention and education program in the school system
		Support for Opioid Intervention Team

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)

OPIOID OPERATIONAL COMMAND CENTER

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Harford County		
\$169,552	Block	Support a central intake, navigation, and recovery team to enhance early identification and intervention for those with substance use disorder
\$59,000	Competitive	Support for parenting and family training sessions to increase resilience and reduce risk factors
\$126,000	Competitive	Support for a certified peer recovery specialist to partner with EMS
\$119,000	Competitive	Support recovery housing and support services
Howard County		
\$124,279	Block	Support SBIRT (screening, brief intervention, and referral to treatment) services and connection to treatment providers
\$37,000	Competitive	Support a peer counselor in the detention center
Kent County		
\$86,662	Block	Continue supporting peer specialist(s) for Opioid Community Intervention Project
\$41,000	Competitive	Develop an integrated process for planning, policy development, and services for inmates with addiction and mental health issues
Montgomery County		
\$162,894	Block	Support public-awareness campaign
		Host four or more community forums on opioid and substance misuse
		Continue supporting community and police access to naloxone
		Continue supporting Stop Triage Engage Educate Rehabilitate (STEER)
Prince George's County		
\$191,190	Block	Support public-awareness campaign
		Support outreach efforts to overdose survivors and their families for service connection
Queen Anne's County		
\$92,654	Block	Support naloxone distribution and training program
		Support Go Purple Campaign
		Support peer-recovery services
		Support access to medications that support recovery from SUD
\$137,000	Competitive	Support informational campaign, education and training, and enhanced data collection

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)

OPIOID OPERATIONAL COMMAND CENTER

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Somerset County		
\$88,992	Block	Expand law enforcement support
		Support peer recovery support specialist
		Promote Somerset County Opioid United Team (SCOUT) initiative
St. Mary's County		
\$107,634	Block	Support peer recovery support specialist program
		Support for Opioid Intervention Team coordination
		Support treatment services to persons with substance use disorder who are incarcerated
\$59,000	Competitive	Support a multi-faceted campaign for opioid prevention and awareness in the public school system
\$12,000	Competitive	Provide alternative pain-management training to clinicians
Talbot County		
\$92,654	Block	Support for Early Intervention Project to connect women during the prenatal period when drug use is identified/suspected with counseling and other support services
		Provide prevention and intervention for high-risk students and families
\$22,000	Competitive	Support opioid-education programming
\$62,000	Competitive	Provide a licensed social worker for students in the Bay Hundred area
Washington County		
\$148,913	Block	Continue supporting opioid crisis response team
		Support Washington Goes Purple, which educates youth and community about the dangers of prescription pain medication
\$87,000	Competitive	Support Washington Goes Purple campaign to increase awareness of opioid addiction and encourage students to get/stay involved in school
\$13,000	Competitive	Support purchase of drug-disposal boxes
\$16,000	Competitive	Support high-intensity services for justice-involved youth and families
\$57,000	Competitive	Support the Sheriff's Office day reporting center
\$230,000	Competitive	Support a sober-living facility for adult women.

Attachment 14.a: OCCC CY20 Q1 OD Death data June2020 (3149 : Rockville Goes Purple Update)

OPIOID OPERATIONAL COMMAND CENTER

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Wicomico County		
\$117,288	Block	Support Heroin and Opioid Coordinator for the Wicomico County Goes Purple campaign
		Support for Opioid Intervention Team coordination
		Support First Responder's Appreciation Dinner
		Reduce illicit supply of opioids through enforcement
		Support education and prevention campaign
Worcester County		
\$98,313	Block	Support peer recovery specialist assignment in hospital ER
\$49,000	Competitive	Support of Worcester Goes Purple awareness campaign

<i>Award</i>	<i>Type</i>	<i>Project Description</i>
Multi-jurisdictional and Statewide		
\$9,000	Competitive	Support Lower Shore Addiction Awareness Visual Arts Competition
\$20,000	Competitive	Train women who are incarcerated as certified peer recovery specialists
\$49,000	Competitive	Support anti-stigma campaign in four counties across each region of the state to create awareness of opioid use disorder and related stigma
\$50,000	Competitive	Provide harm reduction materials at Maryland senior centers
\$97,000	Competitive	Support a family peer support outreach specialist for Maryland families who are struggling with substance use disorders
\$108,000	Competitive	Support families impacted by substance use statewide through Families Strong programming
\$129,000	Competitive	Expand law-enforcement-assisted diversion (LEAD) programs to direct people in crisis to treatment
\$295,000	Competitive	Improve access to naloxone statewide, specifically EMS
\$532,000	Competitive	Support a regional crisis-stabilization center for Worcester, Wicomico, and Somerset counties
\$581,000	Competitive	Increase monitoring and regulatory oversight of controlled-substances prescribers and dispensers



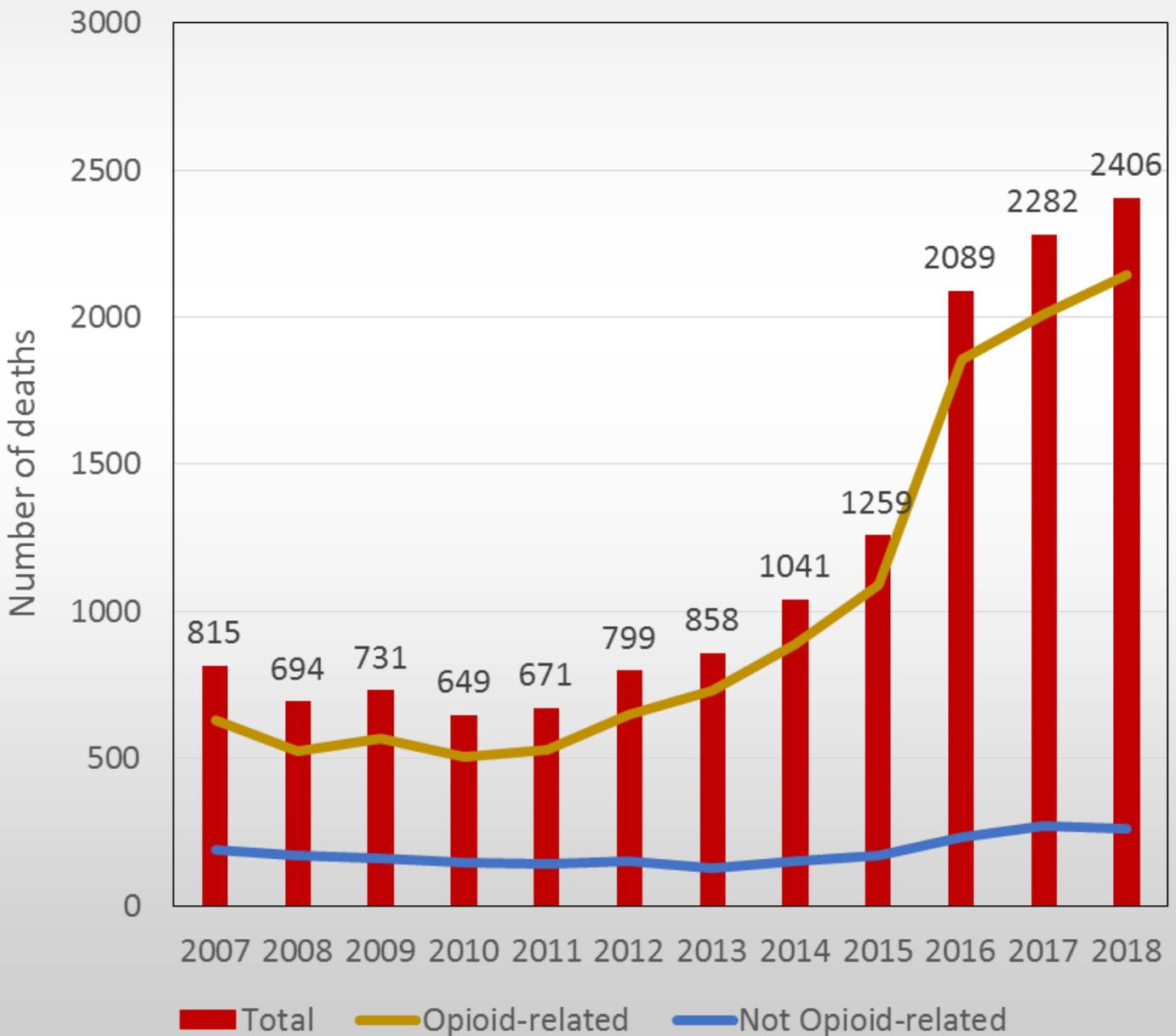
Maryland Department of Health

Larry Hogan, Governor – Boyd Rutherford, Lt. Governor – Robert R. Neall, Secretary

CHANGING
Maryland
for the Better

May 2019

Unintentional Drug- and Alcohol-Related Intoxication Deaths in Maryland, 2018



Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

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METHODS

Introduction

The purpose of this report is to describe trends in the number of unintentional drug- and alcohol-related intoxication deaths occurring in Maryland during the period 2007-2018. Trends are examined by age at time of death, race/ethnicity, gender, place of death, and substances related to death.

This report was prepared using drug and alcohol intoxication data housed in a registry developed and maintained by the Vital Statistics Administration (VSA) of the Maryland Department of Health (MDH). The methodology for reporting on drug-related intoxication deaths in Maryland was developed by VSA with assistance from the MDH Behavioral Health Administration, the Office of the Chief Medical Examiner (OCME) and the Maryland Poison Control Center. Assistance was also provided by authors of a Baltimore City Health Department report on intoxication deaths.¹

Sources of data

The data included in this report were obtained mainly from the OCME. Maryland law requires the OCME to investigate all deaths occurring in the State that result from violence, suicide, casualty, or take place in a suspicious, unexpected or unusual manner. In these instances, information compiled during an investigation is used to determine the cause or causes of death. Depending on the circumstances, an investigation may involve a combination of scene examination, review of witness reports, review of medical and police reports, autopsy, and toxicological analysis of autopsy specimens. Toxicological analysis is routinely performed when there is suspicion that a death was the result of drug or alcohol intoxication.

A small number of death records involving intoxication deaths were filed by sources other than OCME and were identified through death records maintained by VSA. This included records filed by medical facilities rather than OCME, and records filed by federal investigators following deaths involving U.S. military personnel. Information available on these cases was included in the registry.

Information on place of death and race/ethnicity was missing for a small number of records provided by OCME and was obtained through death certificate data. Death certificate data were also used to update demographic information on records that were amended after the records were filed with the Division of Vital Records.

¹ Office of Epidemiology and Planning, Baltimore City Health Department. Intoxication Deaths Associated with Drugs of Abuse or Alcohol. Baltimore City, Maryland: Baltimore City Health Department. January 2007.

Identification of drug-related intoxication deaths

For the purpose of this report, an intoxication death was defined as a death that was the result of recent ingestion or exposure to alcohol or another type of drug, including heroin, fentanyl, cocaine, prescription opioids, benzodiazepines, phencyclidine (PCP), methamphetamines, and other prescribed and unprescribed drugs. OCME provided all records to VSA for which the text of the cause of death included one or more of the following terms: poisoning, intoxication, toxicity, inhalation, ingestion, overdose, exposure, chemical, effects, or use. Any records provided by OCME that were not unintentional drug-related intoxication deaths, such as deaths due to smoke inhalation, carbon monoxide intoxication, cold exposure, and chronic use of alcohol or other drugs, were excluded in the registry. Also excluded from the registry were deaths for which the manner of death was determined to be natural, suicide, or homicide.

Analyses

Trends in the number of unintentional drug- and alcohol-related intoxication deaths occurring in Maryland during the years 2007-2018 were analyzed by age group, race/ethnicity, gender, place of occurrence of death, and substances related to the death. Changes over time were examined for deaths related to the following substances:

1. Opioids
 - a. Heroin
 - b. Prescription opioids
 - c. Fentanyl (prescribed and illicit)
2. Cocaine
3. Benzodiazepines and related drugs
4. Methamphetamine
5. Alcohol

The number of deaths by place of occurrence was computed by jurisdiction and by region, categorized as follows:

Northwest Area	Baltimore Metro Area	National Capital Area	Southern Area	Eastern Shore Area
Garrett Co. Allegany Co. Washington Co. Frederick Co.	Baltimore City Baltimore Co. Anne Arundel Co. Carroll Co. Howard Co. Harford Co.	Montgomery Co. Prince George's Co.	Calvert Co. Charles Co. St. Mary's Co.	Cecil Co. Kent Co. Queen Anne's Co. Caroline Co. Talbot Co. Dorchester Co. Wicomico Co. Somerset Co. Worcester Co.

Trends in deaths for the period 2007-2018 are shown in Figures 1 through 38. Data on intoxication deaths related to a combination of substances are shown in Figures 39

through 45. Counts of the number of total deaths and deaths related to classes of substances or specific substances by place of occurrence are shown in Tables 1 through 11.

Age-adjusted death rates

Age-adjusted death rates by place of residence are shown in Figure 46. Age-adjusted death rates were calculated in order to allow for the comparison of drug death rates among Maryland jurisdictions. Unlike all other data included in this report, these rates are based on place of residence of the decedent rather than place where the drug-related incident occurred. Since out of state data are generally not available until approximately six months after the close of a calendar year, only data through 2017 were available at the time this report was prepared. Therefore, age-adjusted rates cover the period 2013 through 2017. Since the number of drug deaths is relatively small in many Maryland jurisdictions, it was necessary to calculate rates for a five year period in order to obtain counts that were large enough to be used to calculate stable rates.

Drug death information received from other states is far less detailed than the data available from OCME and often does not include information on the substances involved in a death. For that reason, rates could only be calculated for total deaths and not deaths related to individual substances.

****Since an intoxication death may involve more than one substance, counts of deaths related to specific substances do not sum to the total number of deaths in this report.****

Opioid-related deaths

Opioids include heroin and prescription opioid drugs such as oxycodone, hydrocodone, hydromorphone, methadone, tramadol and codeine, and prescribed and illicit fentanyl. In this report, an opioid was considered to be associated with a death if a specific opioid drug was indicated in the cause of death. If the cause of death did not identify a specific drug (e.g., the cause of death indicated “Narcotic Intoxication”), OCME toxicology results were reviewed to determine whether the presence of any opioid drug was detected. If so, the cause of death was considered to be opioid-related, regardless of the level of the drug. Scene investigation notes were also reviewed in an attempt to better categorize death records with non-specific causes of death.

Since heroin is rapidly metabolized into morphine, the records of many deaths that are likely to be heroin-related do not list “heroin” as a cause of death, and therefore cannot be identified using only information listed in the cause of death. Therefore, a combination of information contained in the cause of death field, toxicology results, and scene investigation notes is used to identify heroin-related deaths. In this report, a death was considered to be heroin-related if:

1. "Heroin" was mentioned in the cause of death; or
2. The toxicology screen showed a positive result for 6-monacetylmorphine; or
3. The toxicology screen showed positive results for both morphine and quinine; or
4. The cause of death was nonspecific and the scene investigation notes indicated that heroin was likely to have been involved in the death; or
5. The death was associated with morphine through either cause of death information or toxicology results, unless information contained in the investigation notes did not support this assumption.

A record was not coded as heroin-related, despite the presence of morphine, if OCME determined that another substance caused the death.

Prescription opioid-related deaths were defined as deaths that involve one or more prescription opioids, as identified through cause of death information when a specific drug was indicated and through toxicology results when the cause of death was nonspecific. Prescription opioids include buprenorphine, codeine, hydrocodone, hydromorphone, meperidine, methadone, morphine, oxycodone, pentazocine, propoxyphene, tramadol and prescribed fentanyl. Prescribed fentanyl is an opioid analgesic approved for patient use to manage severe or chronic pain. There is also a form of fentanyl that is produced illicitly in clandestine laboratories and mixed with (or substituted for) heroin or other illicit drugs. Although in some cases it was difficult to determine whether a prescribed or illicit form of fentanyl was related to a death, the count of prescription opioid-related drugs in this report includes only fentanyl deaths in which a prescription form of the drug was clearly involved.

Fentanyl-related deaths began increasing in late 2013 as a result of overdoses involving nonpharmaceutical fentanyl, that is, nonprescription fentanyl produced in clandestine laboratories and mixed with, or substituted for, heroin or other illicit substances. Nearly all fentanyl-related deaths occurring in recent years have involved the use of nonpharmaceutical fentanyl. Fentanyl is many times more potent than heroin, and greatly increases the risk of an overdose death. Carfentanil, an extremely potent analog of fentanyl, was first detected in Maryland drug intoxication death cases in 2017, and is reported separately in Figures 21 and 22.

Benzodiazepine-related deaths

Benzodiazepines are a class of depressants that include drugs such as alprazolam, clonazepam, diazepam, and multiple related drugs. The category of benzodiazepine-related drugs in this report includes both benzodiazepines and related drugs, such as zolpidem, which have similar sedative effects.

Cocaine-related deaths

Cocaine is a highly addictive stimulant drug derived from coca leaves. It is frequently mixed with other non-psychoactive substances, such as cornstarch or talcum powder, to dilute its potency, however in the last few years, it has been mixed with fentanyl.

Methamphetamine-related deaths

Methamphetamine is another highly addictive stimulant drug. Illicit forms of methamphetamine have also been found to be mixed with fentanyl or other opioids.

SUMMARY OF TRENDS IN DRUG INTOXICATION DEATHS—2007 TO 2018

Total alcohol and drug intoxication deaths

- The number of drug- and alcohol-related intoxication deaths occurring in Maryland increased in 2018 for the eighth year in a row, reaching an all-time high of 2,406 deaths. This represented a 5% increase over the number of deaths (2,282) in 2017. However, this increase was less than the 9% increase between 2016 and 2017, and substantially less than the 66% increase that occurred between 2015 and 2016, which was the largest single year increase that has been recorded.
- Between the years 2011 through 2016, intoxication deaths increased among all age groups, and were highest among those aged 45-54 years old. In 2017, deaths in this age group were surpassed by those aged 25-34 years old. The number of deaths among those aged <25 years decreased in 2017. In 2018, deaths continued to decrease among those <25 years, and also decreased among those 25-34 years. Deaths increased in the older age groups in 2018, and were highest among those 55 years and older.
- The number of deaths decreased by 2% among Whites, but continued to increase among Blacks (20%), and among Hispanics (14%) between 2017 and 2018.
- Deaths decreased by 2% among women between 2017 and 2018, but continued to increase among men (9%). Intoxication deaths were 2.8 times higher among men than women.
- Although there continued to be substantial increases in the number of deaths occurring in many jurisdictions of the state: Baltimore City, Baltimore County, Anne Arundel, Washington, Carroll, Queen Anne's, and Somerset Counties, there were more counties that had declines in the number of deaths in 2018 compared to 2017; Garrett, Howard, Montgomery, Prince George's, Calvert, Charles, St. Mary's, Kent, Caroline, Talbot, Dorchester, and Worcester.

Opioid-related deaths

- Eighty-nine percent of all intoxication deaths that occurred in Maryland in 2018 were **opioid**-related. **Opioid**-related deaths include deaths related to **heroin**, **prescription opioids**, and nonpharmaceutical **fentanyl**.
- The number of **opioid**-related deaths increased by 7% between 2017 and 2018, slightly less than the 8% increase between 2016 and 2017. Non opioid-related drug deaths decreased for the first time since 2013.
- Large increases in the number of **fentanyl**-related deaths continued to drive the overall rise in opioid-related deaths. Between 2017 and 2018 the number of **fentanyl**-related deaths increased by 18% (from 1594 to 1888). The number of **heroin**-related deaths declined by 11% between 2016 and 2017 (from 1212 to 1078) and continued to decline in 2018 by 23% to 830 deaths. The number of **prescription opioid**-related deaths decreased by 8% between 2017 and 2018 (from 413 to 379); 65% of these deaths occurred in combination with heroin and/or fentanyl.
- **Heroin**-related deaths continued to decrease in 2018 among all age groups, and among both sexes, as they did in 2017. **Heroin**-related deaths also declined among non-Hispanic Whites and Non-Hispanic Blacks in 2018, but rose slightly among Hispanics.

In 2018, **heroin** deaths declined in 16 jurisdictions, remained the same in 2 counties, and increased in 6 jurisdictions.

- Eighty-seven percent of **heroin**-related deaths in 2018 occurred in combination with **fentanyl**, 39% in combination with **cocaine**, 15% in combination with **prescription opioids**, and 13% in combination with **alcohol**.
- The number of **prescription opioid**-related deaths had been rising since 2013, but declined slightly in 2017 and declined again in 2018. The number of **prescription opioid**-related deaths declined among all age groups except among those 55 years and older, which increased by 22% between 2017 and 2018. Deaths decreased among non-Hispanic Whites and Hispanics, but increased by 14% among non-Hispanic Blacks. Deaths related to **prescription opioids** were stable among men, but decreased by 20% among women in 2018.
- **Fentanyl**-related deaths have increased rapidly since 2013, but the 18% increase between 2017 and 2018 was diminished compared with the dramatic increases between 2015 and 2016 (229%) and between 2016 and 2017 (42%).
- In 2018, **Fentanyl**-related deaths continued to increase among all age groups except those under 25 years. **Fentanyl**-related deaths increased among non-Hispanic Whites, non-Hispanic Blacks, and Hispanics and among both men and women. In 2018, **fentanyl** deaths increased in 12 jurisdictions, declined in 9 counties, and remained the same in 3 counties.
- Thirty-nine percent of **fentanyl**-related deaths in 2018 occurred in combination with cocaine, 38% in combination with **heroin**, and 18% in combination with **alcohol**.
- Deaths related to **carfentanil** (a **fentanyl** analog) were first identified in 2017 (testing began in 2016). There were 60 **carfentanil**-related deaths in 2017, however this number dropped to 2 in 2018.

Cocaine-related deaths

- The number of **cocaine**-related deaths remained relatively stable between 2008 and 2013, and began rising in 2014. The number of **cocaine**-related deaths increased 110% between 2015 and 2016, increased 49% between 2016 and 2017, and increased by 29% between 2017 and 2018.
- **Cocaine**-related deaths increased in 2018 among all age groups except those under 25 years, among non-Hispanic Whites, non-Hispanic Blacks, and Hispanics, and among both sexes.
- The overall increase in **cocaine**-related deaths is largely the result of deaths occurring in combination with opioids. Eighty-two percent of **cocaine**-related deaths in 2018 occurred in combination with **fentanyl**, and 36% in combination with **heroin**.

Benzodiazepine-related deaths

- The number of **benzodiazepine**-related deaths decreased by 13% between 2017 and 2018.
- **Benzodiazepine**-related deaths declined in 2018 among all age groups except those 55 years and older. Deaths decreased among non-Hispanic Whites, but increased among

non-Hispanic Blacks and Hispanics. Decreases were seen among both men and women.

- Ninety-one percent of **benzodiazepine**-related deaths in 2018 were in combination with **opioids**. Fifty-six percent of all **benzodiazepine**-related deaths occurred in combination with **fentanyl**, 44% in combination with **prescription opioids**, and 37% in combination with **heroin**.

Methamphetamine-related deaths

- The number of **methamphetamine**-related deaths has been rising since 2015. These deaths increased by 14% between 2017 and 2018.
- **Methamphetamine**-related deaths increased among those aged 25-34 years, but were steady among all other age groups. Deaths increased among non-Hispanic Whites, but decreased among non-Hispanic Blacks. There were no deaths among Hispanics. Deaths increased among both sexes.
- Eighty-eight percent of **methamphetamine**-related deaths in 2018 were in combination with **opioids**. Eighty-one percent of all **methamphetamine**-related deaths occurred in combination with **fentanyl**, 47% in combination with **heroin**, and 9% in combination with **prescription opioids**.

Alcohol-related deaths

- The number of **alcohol**-related deaths decreased by 9% in 2018.
- **Alcohol**-related deaths in 2018 declined among those less than 35 years of age, increased among those 35-44 years, decreased among those 45-54 years and was stable among those 55 years and older. Deaths decreased among non-Hispanic Whites and Hispanics, but increased among non-Hispanic Blacks. Deaths decreased in 2017 among both men and women.
- Eighty percent of acute **alcohol**-related deaths in 2018 occurred in combination with **opioids**. Seventy-two percent occurred in combination with **fentanyl**, and 23% occurred in combination with **heroin**.

Age-adjusted death rates

- Age-adjusted death rates for the period 2013-2017 ranged from lows of 8.5 and 9.7 per 100,000 population in Montgomery and Prince George's Counties, respectively, to a high of 56.6 per 100,000 population in Baltimore City. The Maryland state age-adjusted mortality rate for deaths related to unintentional intoxication was 23.8 deaths per 100,000 population over the five year period.

TOTAL INTOXICATION DEATHS

Figure 1. Total Number of Drug- and Alcohol-Related Intoxication Deaths Occurring in Maryland, 2007-2018. 14.b

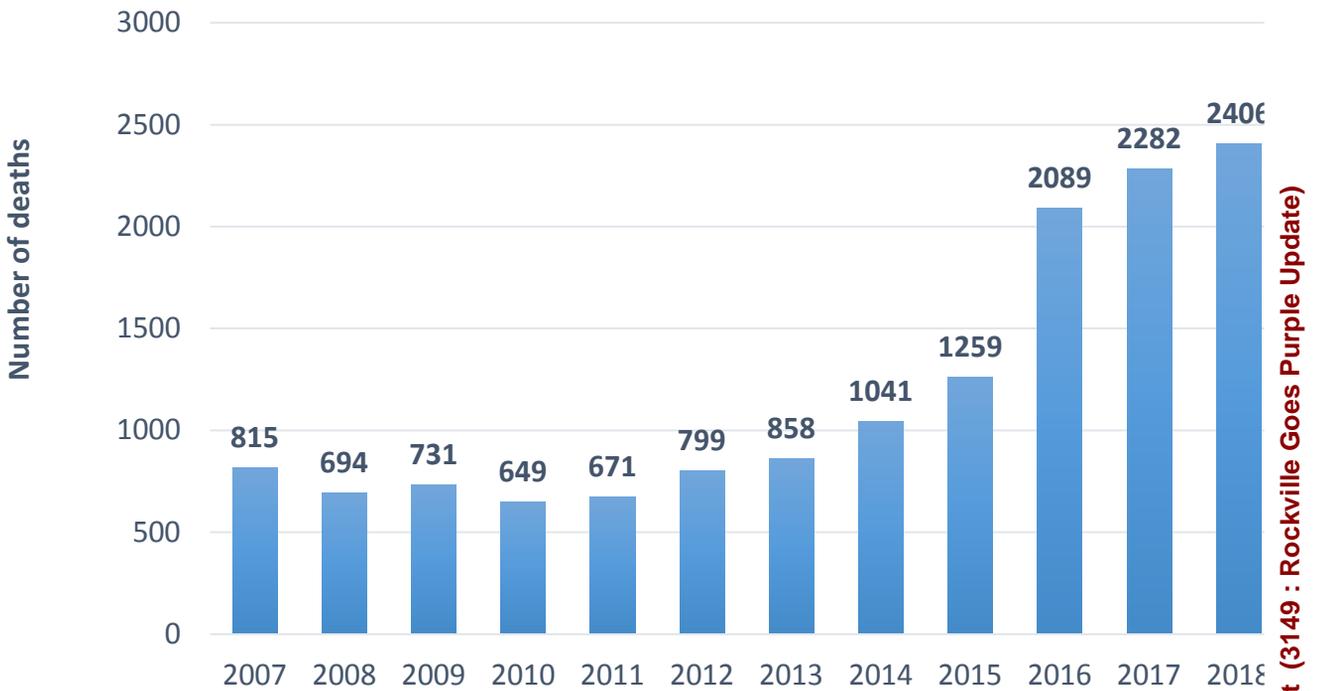
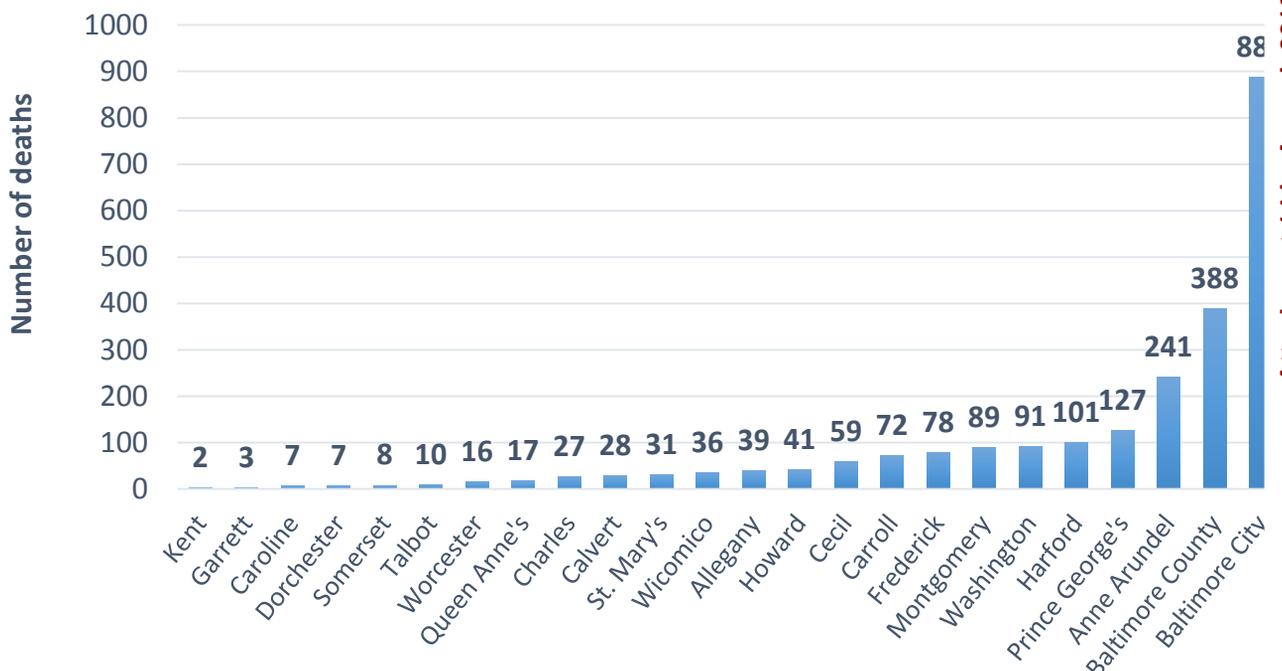
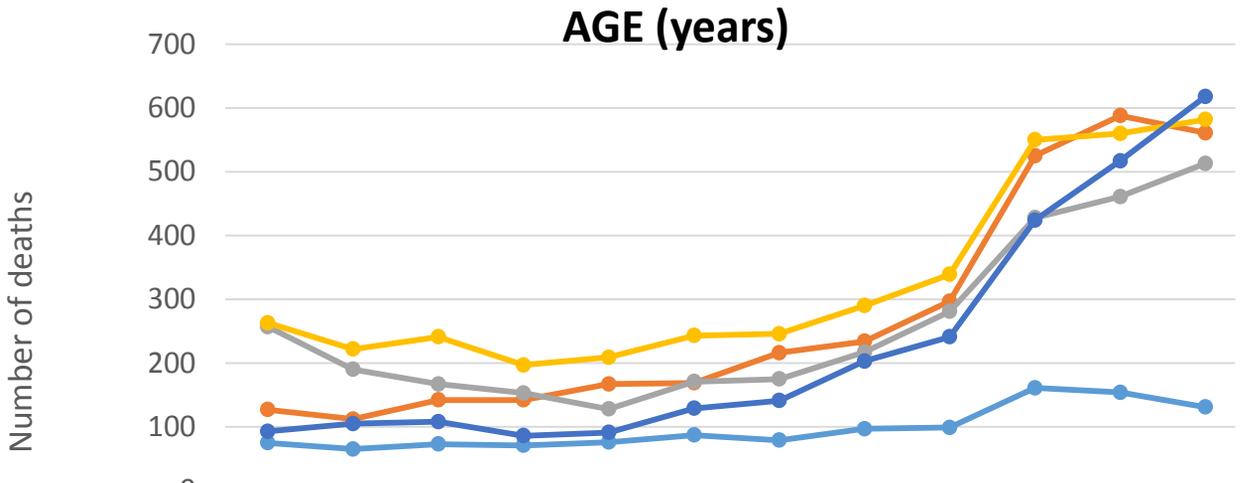


Figure 2. Total Number of Intoxication Deaths Occurring in Maryland by Place of Occurrence, 2018.



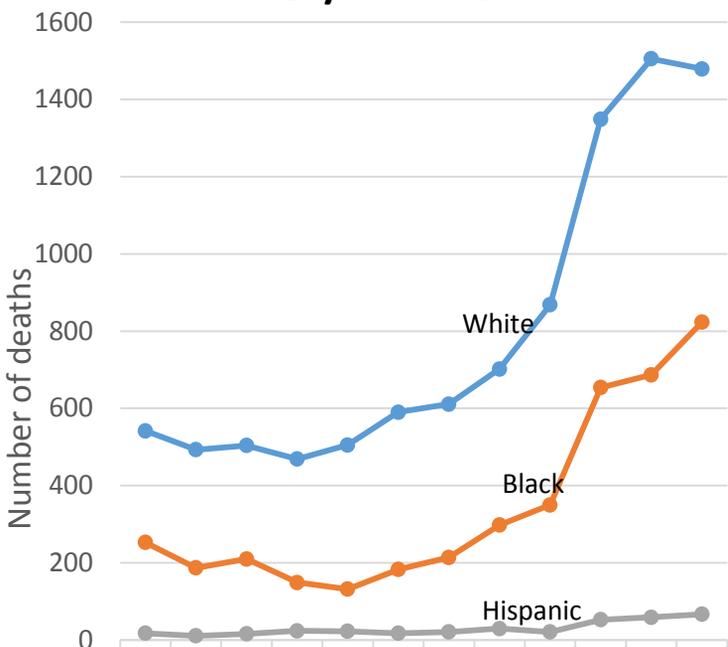
Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

Figure 3. Total Number of Drug- and Alcohol-Related Intoxication Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018.



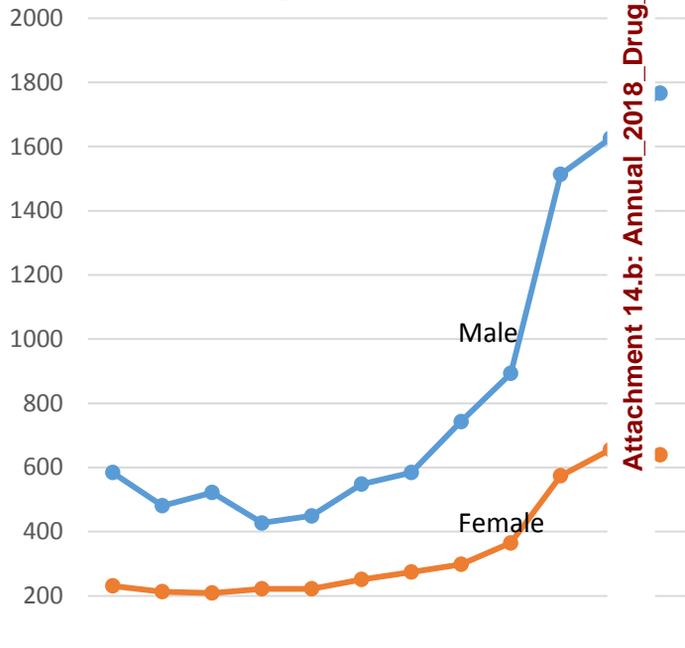
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
<25 years	75	65	73	71	76	87	79	97	99	161	154	131
25-34 years	127	112	142	142	167	169	216	234	297	525	588	561
35-44 years	257	190	167	153	128	171	175	217	281	428	461	513
45-54 years	263	222	241	197	209	243	246	290	339	550	560	582
55+ years	93	105	108	86	91	129	141	203	241	424	517	618

RACE/ETHNICITY



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
NH White	542	493	504	469	505	590	611	702	868	1349	1505	1479
NH Black	253	187	210	149	132	183	214	298	350	654	687	823
Hispanic	18	11	16	24	23	18	21	30	21	53	59	67

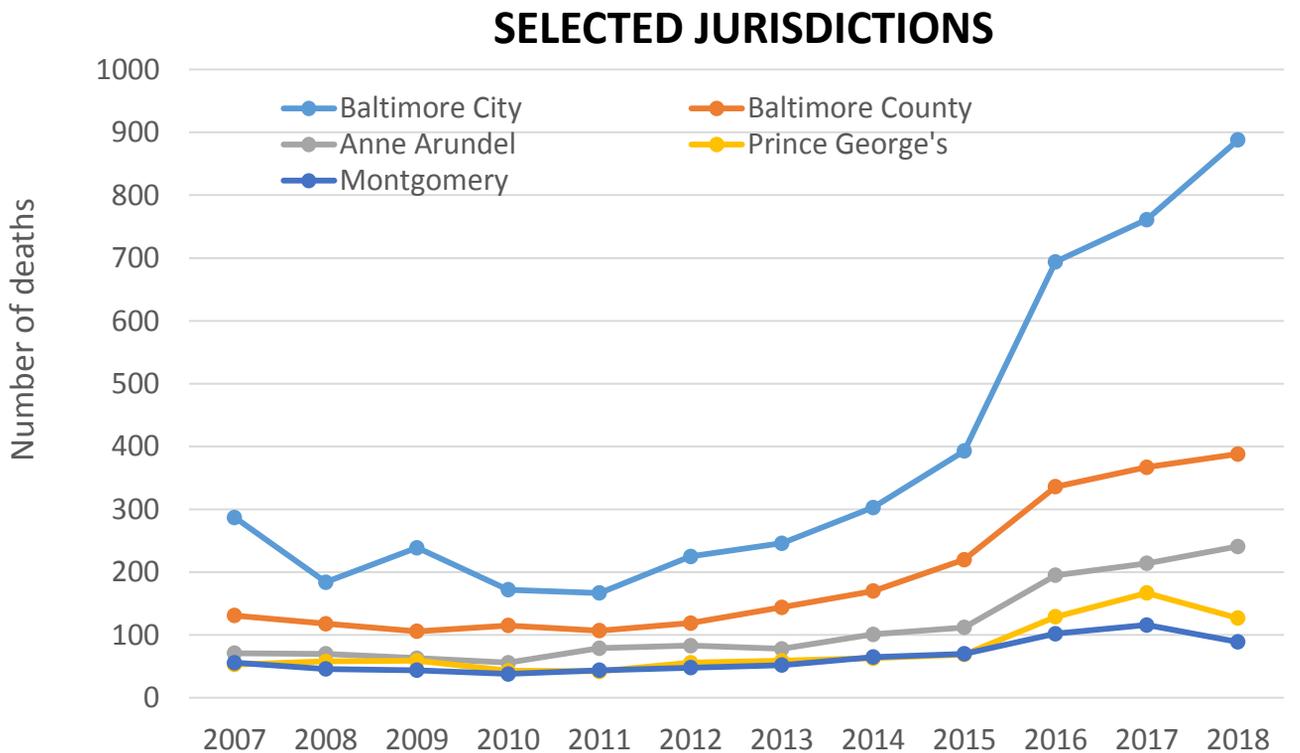
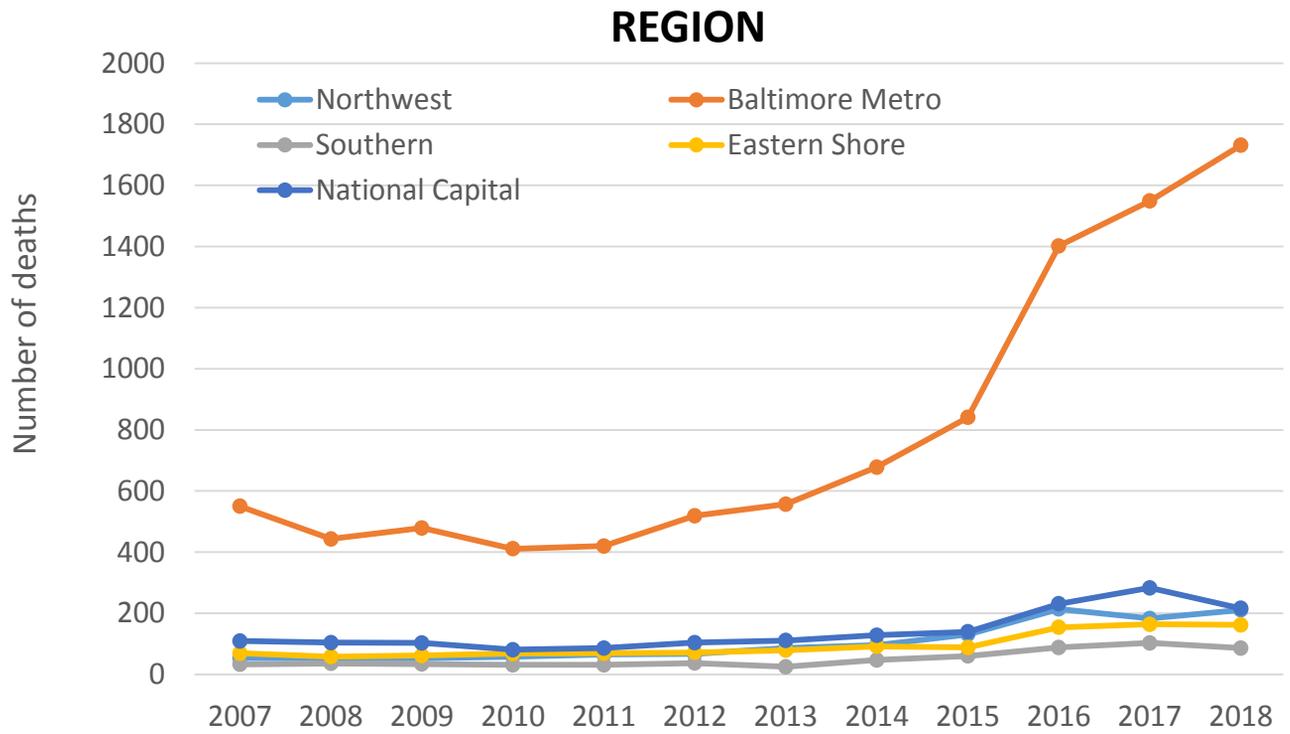
GENDER



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Male	584	481	522	427	449	548	584	743	893	1513	1620	1766
Female	231	213	209	222	222	251	274	298	365	574	656	640

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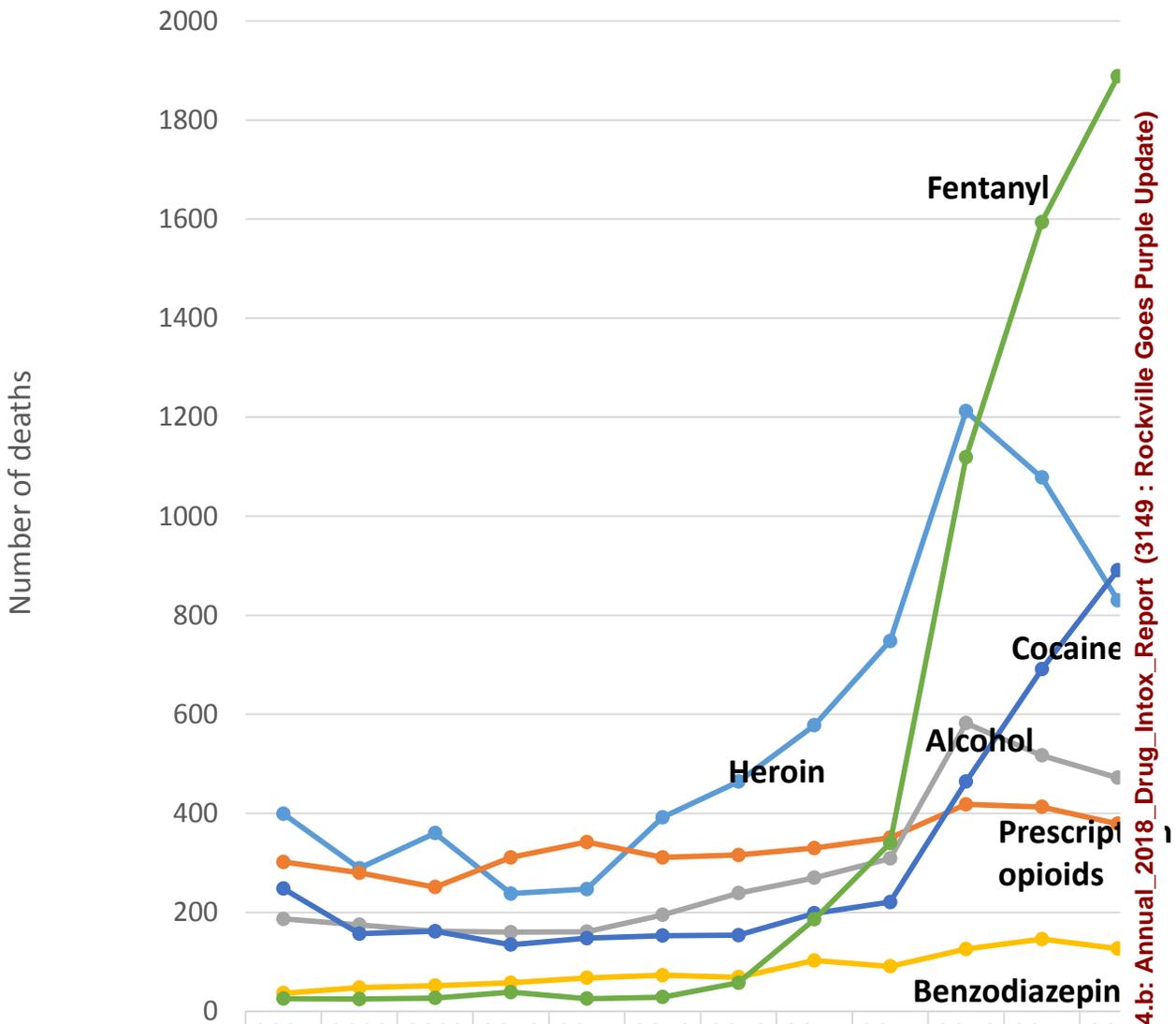
Figure 4. Total Number of Drug- and Alcohol-Related Intoxication Deaths by Place of Occurrence, Maryland, 2007-2018.



Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

**DRUG- AND ALCOHOL-RELATED INTOXICATION
DEATHS BY SUBSTANCE**

Figure 5. Total Number of Drug- and Alcohol-Related Intoxication Deaths by Selected Substances¹, Maryland, 2007-2018. 14.b



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Heroin	399	289	360	238	247	392	464	578	748	1212	1078	831
Prescription opioids	302	280	251	311	342	311	316	330	351	418	413	371
Alcohol	187	175	162	160	161	195	239	270	309	582	517	471
Benzodiazepines	37	48	52	58	68	73	69	103	91	126	146	121
Cocaine	248	157	162	135	148	153	154	198	221	464	691	891
Fentanyl	26	25	27	39	26	29	58	186	340	1119	1594	1831

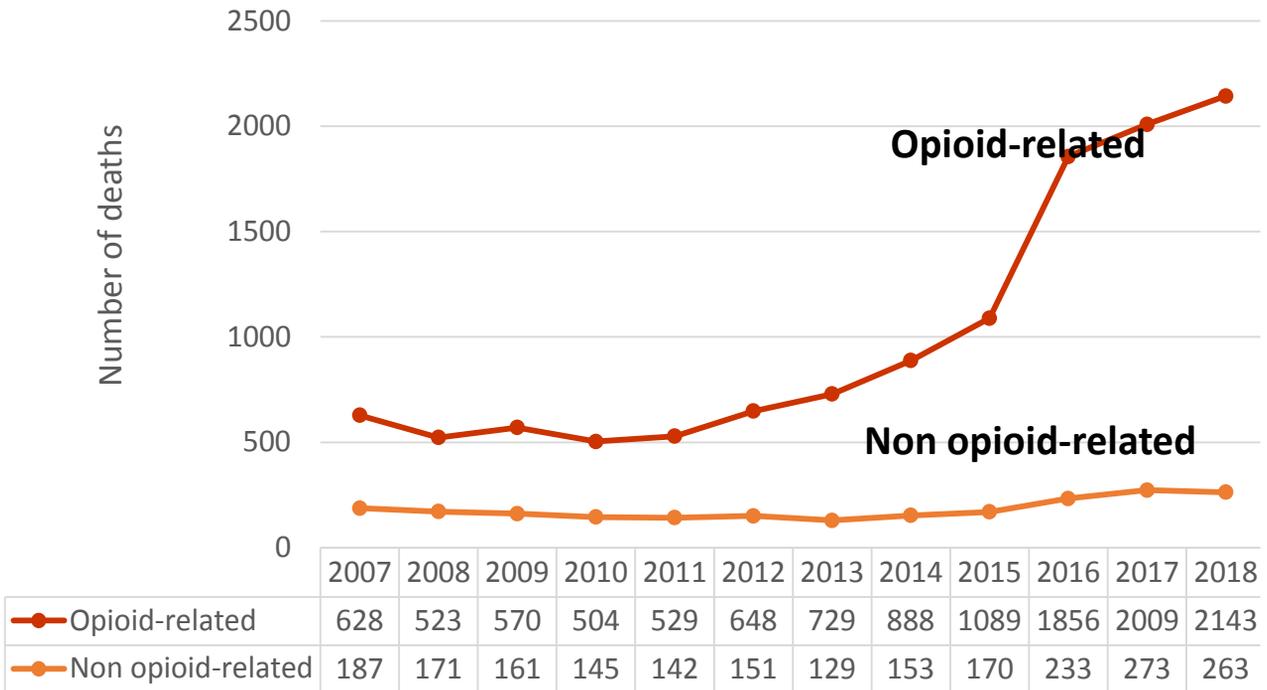
Attachment 14.b: Annual 2018 Drug Intox Report (3149 : Rockville Goes Purple Update)

¹Since an intoxication death may involve more than one substance, counts of deaths related to specific substances do not sum to the total number of deaths.

²Includes deaths caused by benzodiazepines and related drugs with similar sedative effects.

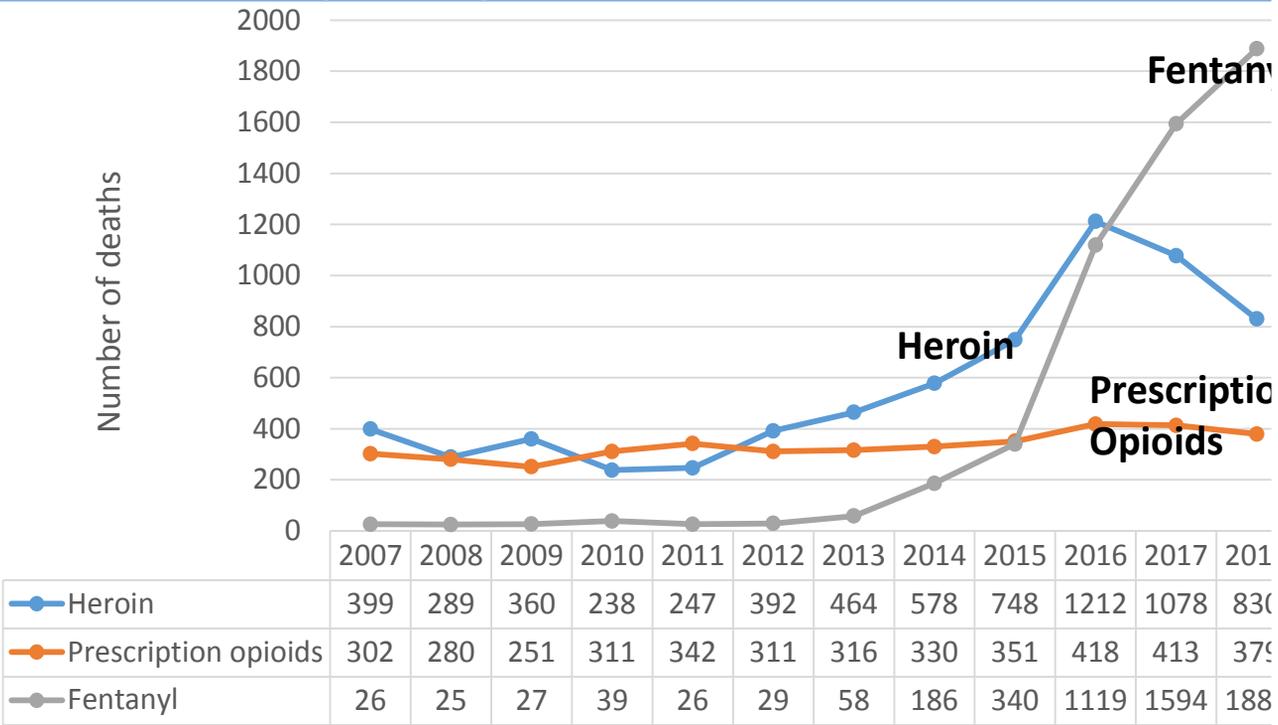
OPIOID-RELATED DEATHS

Figure 6. Total Number of Opioid* and Non-Opioid Related Deaths Occurring in Maryland, 2007-2018.



Attachment 14.b: Annual_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

Figure 7. Number of Opioid-Related Deaths Occurring in Maryland by Substance, 2007-2018.



*Total opioids include heroin, prescription opioids, and illicit forms of fentanyl.

Figure 8. Number of Heroin-Related Deaths Occurring in Maryland, 2007-2018.

14.b

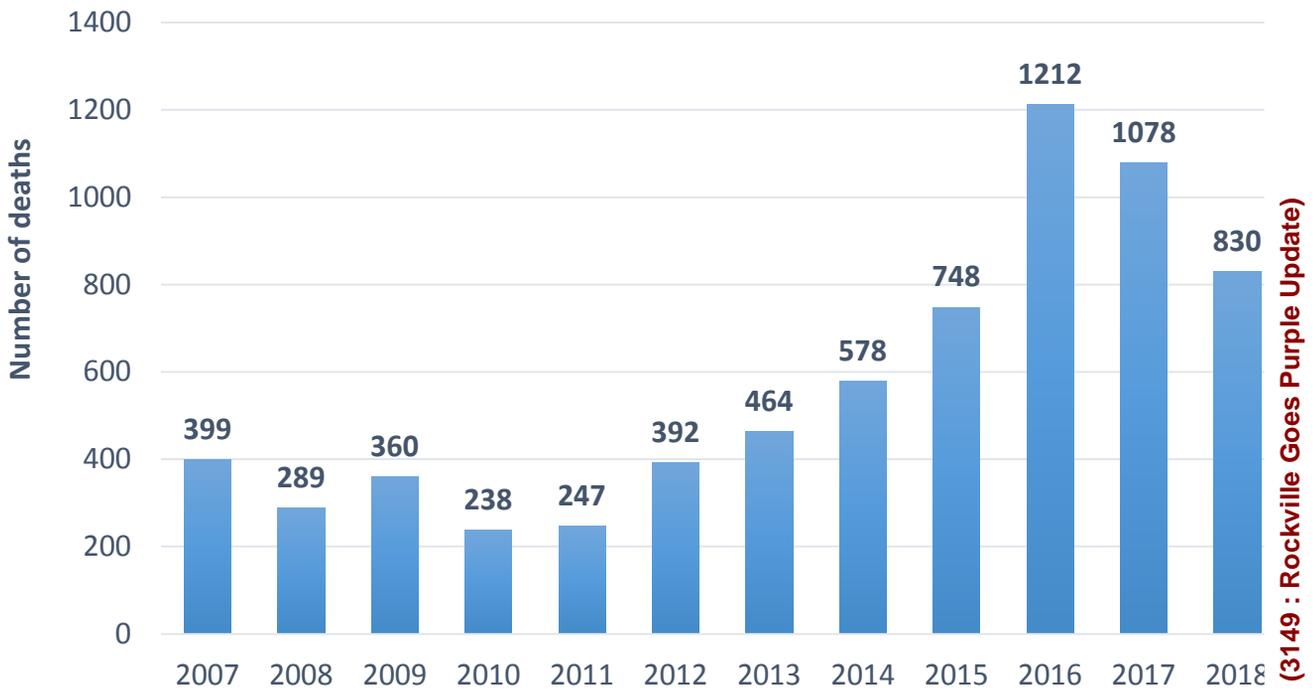
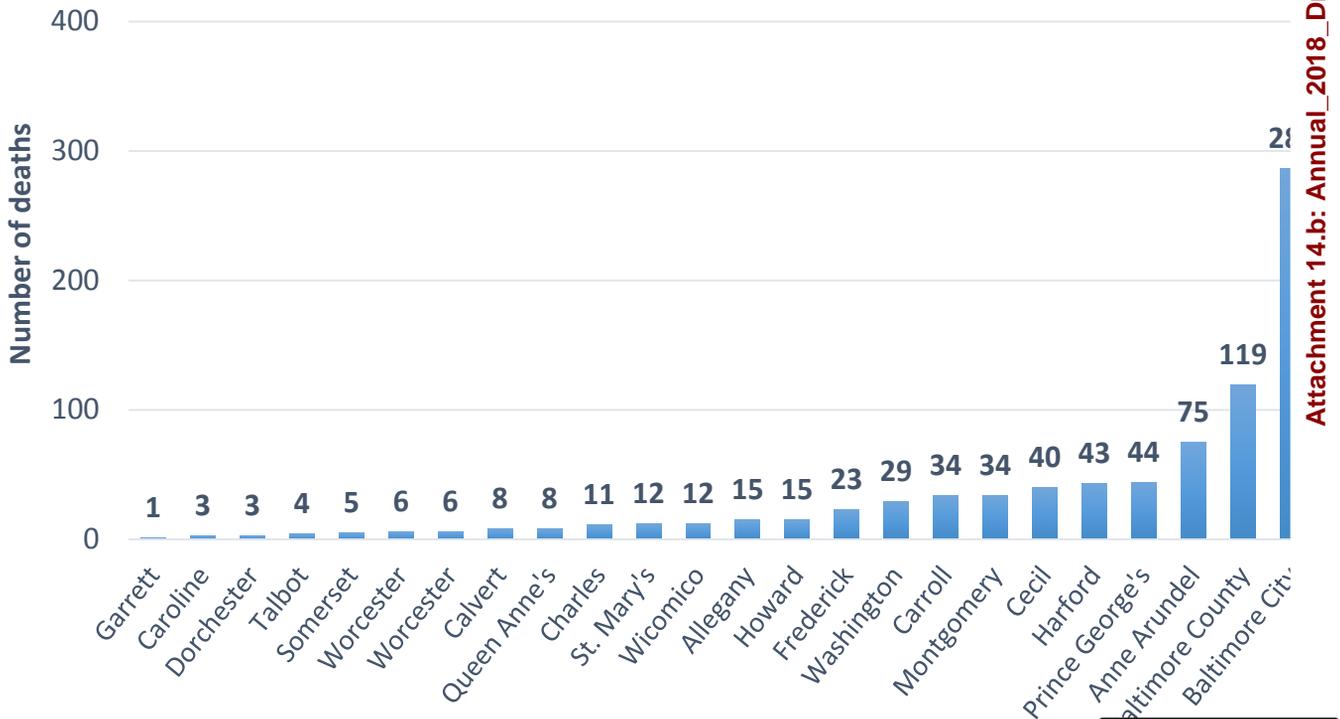
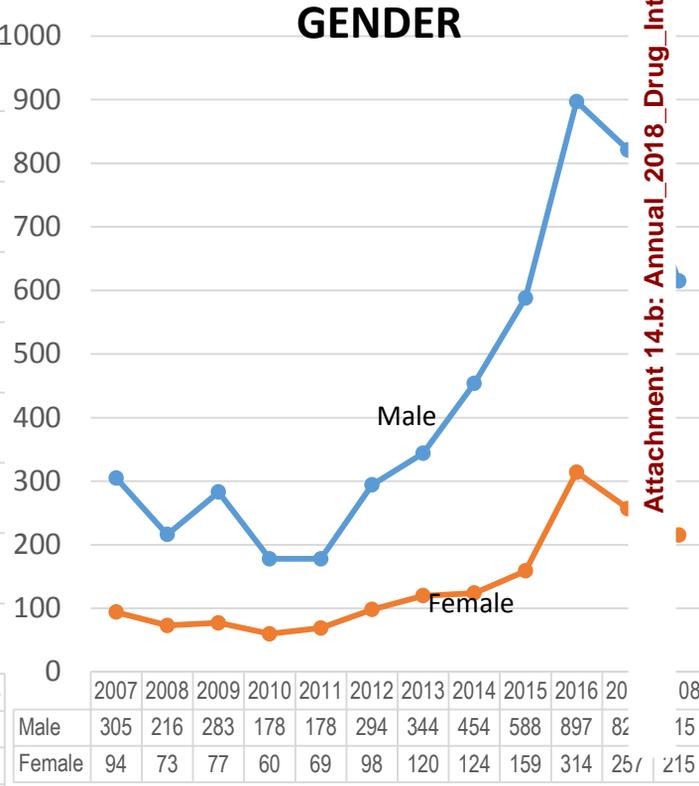
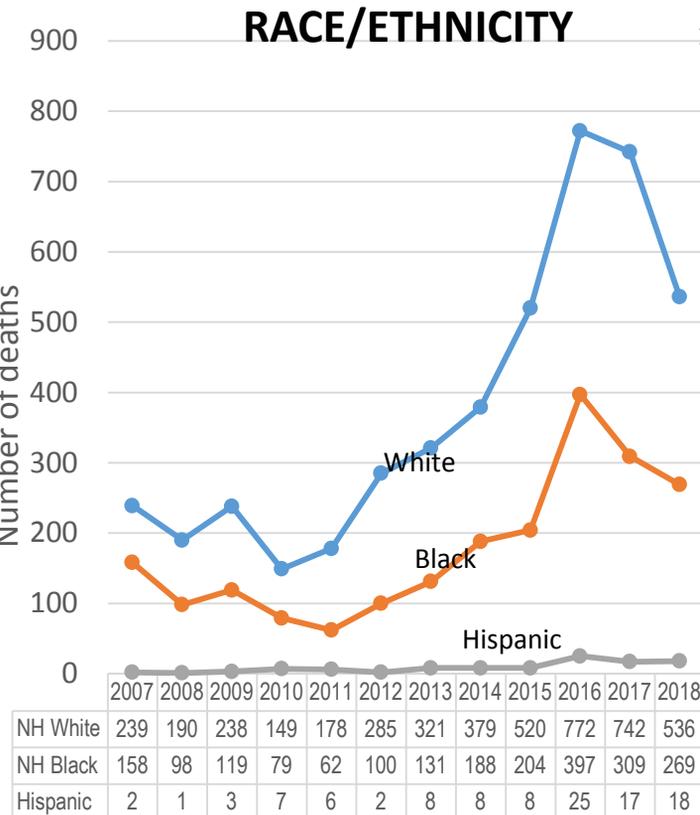
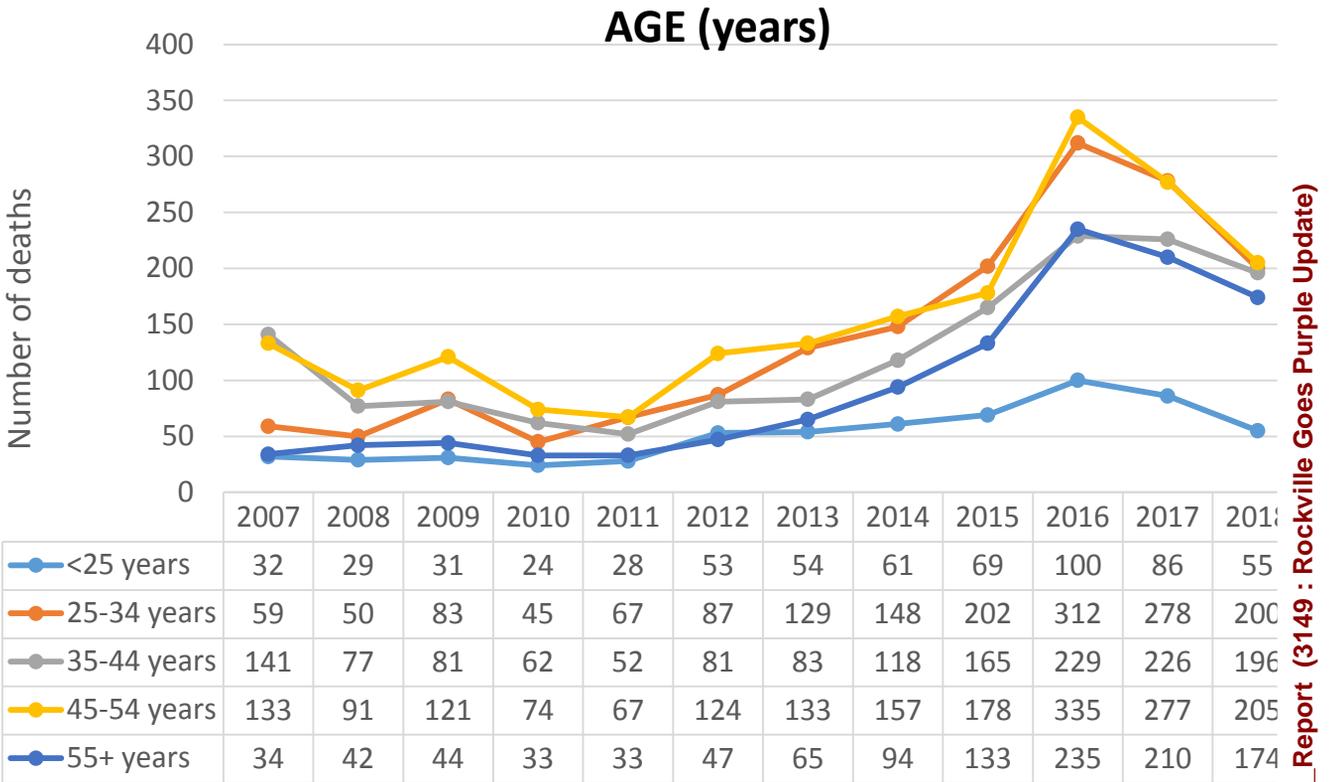


Figure 9. Number of Heroin-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



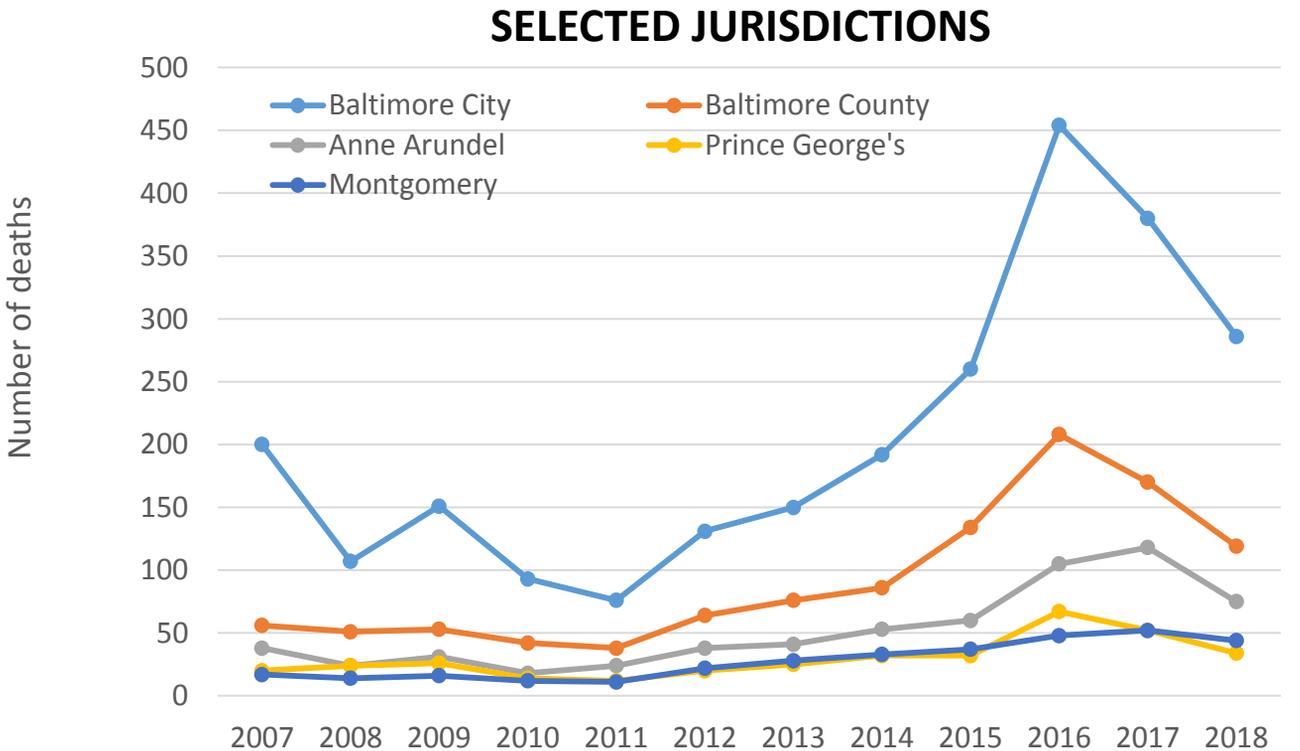
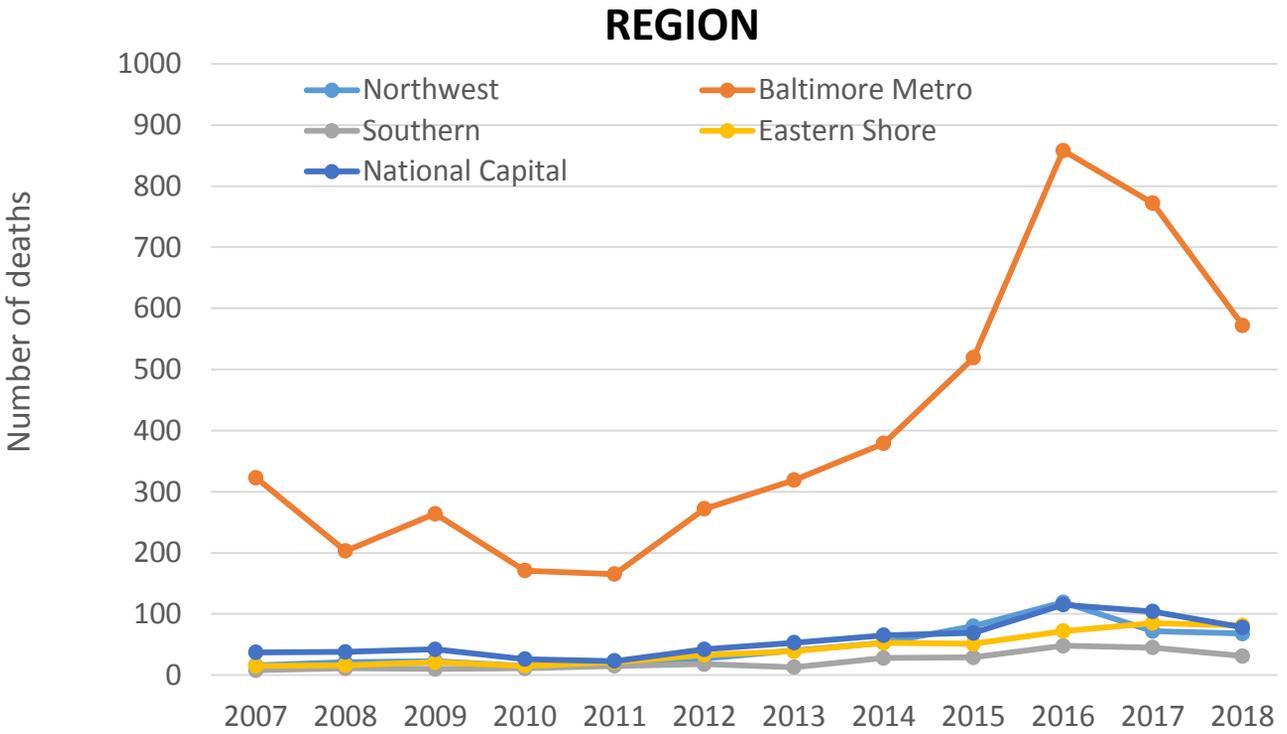
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Figure 10. Number of Heroin-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018



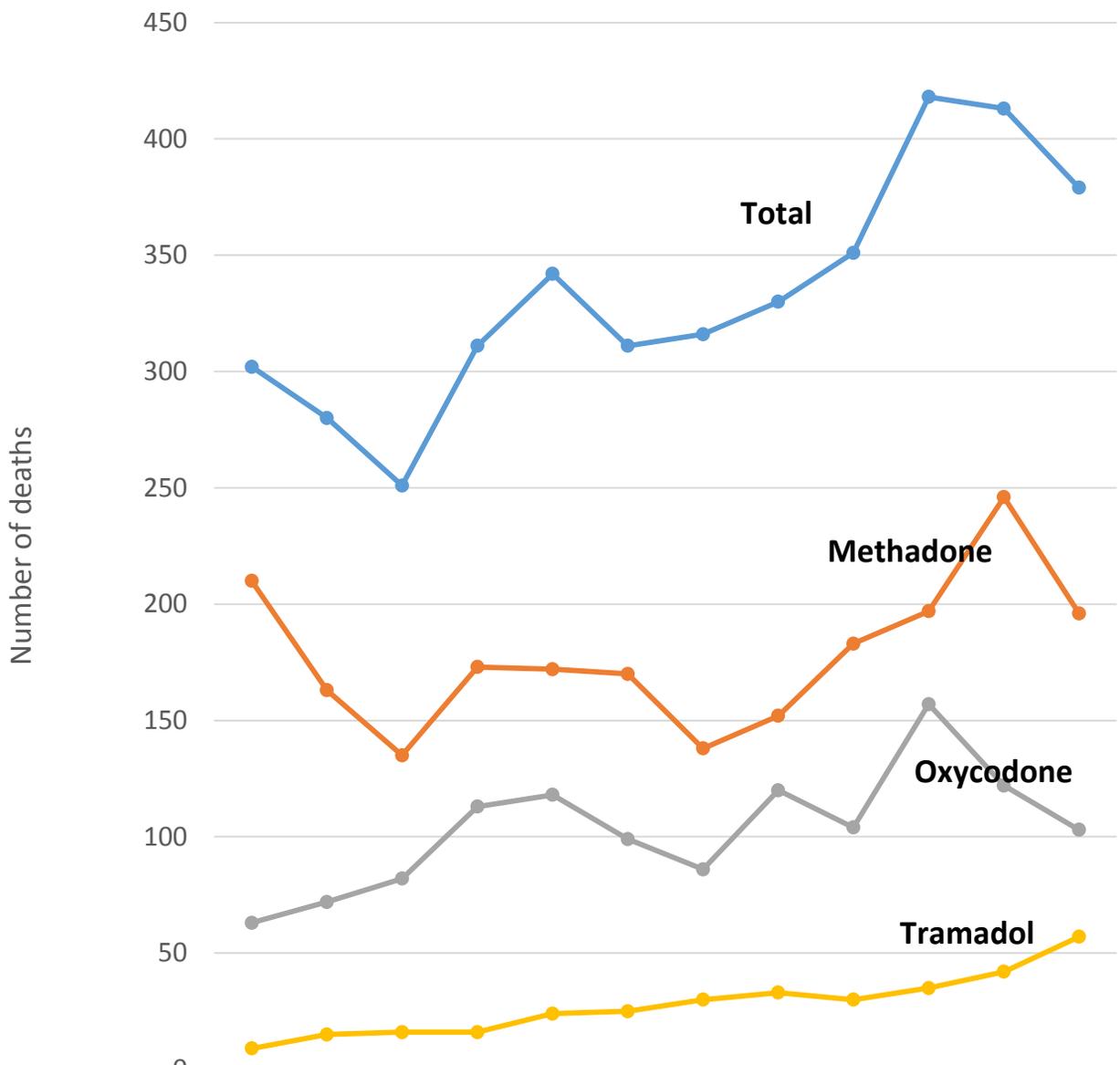
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Figure 11. Number of Heroin-Related Deaths by Place of Occurrence, Maryland, 2007-2018.



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Figure 12. Number of Deaths Occurring in Maryland by Selected Prescription Opioids, 2007-2018.



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Total	302	280	251	311	342	311	316	330	351	418	413	379
Methadone	210	163	135	173	172	170	138	152	183	197	246	196
Oxycodone	63	72	82	113	118	99	86	120	104	157	122	103
Tramadol	9	15	16	16	24	25	30	33	30	35	42	57

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Figure 13. Number of Prescription Opioid-Related Deaths Occurring in Maryland, 2007-2018. 14.b

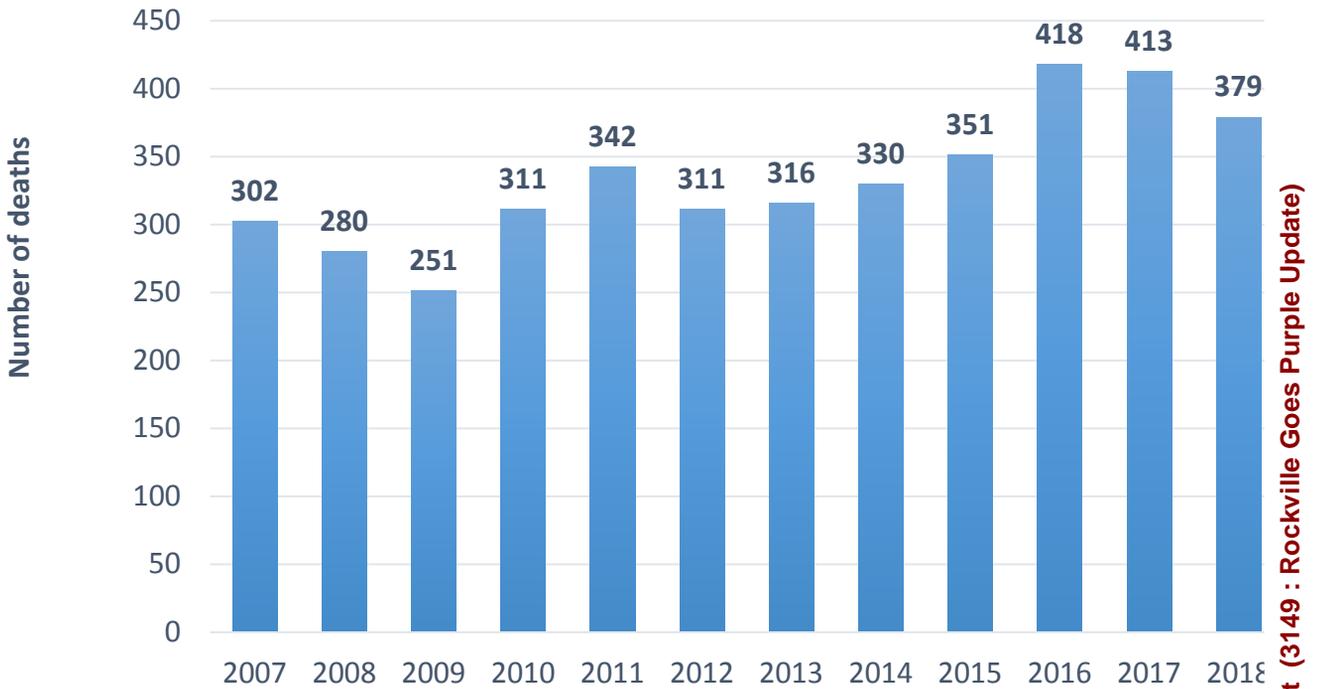


Figure 14. Number of Prescription Opioid-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.

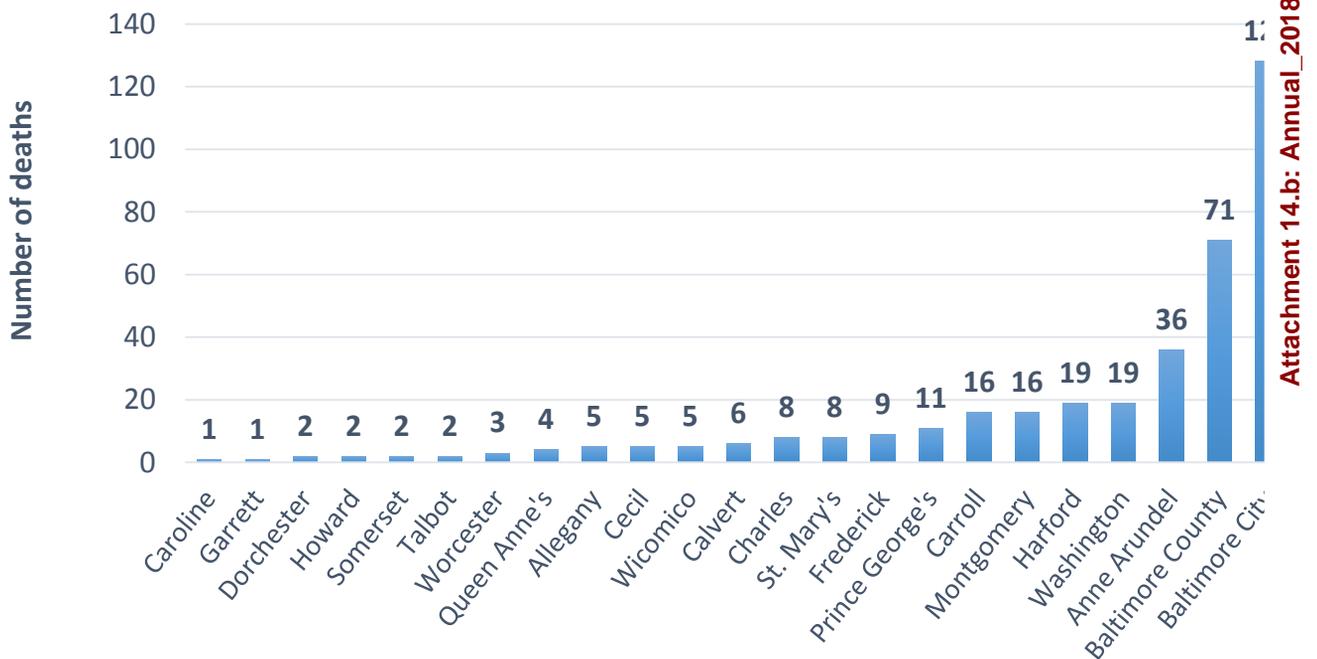
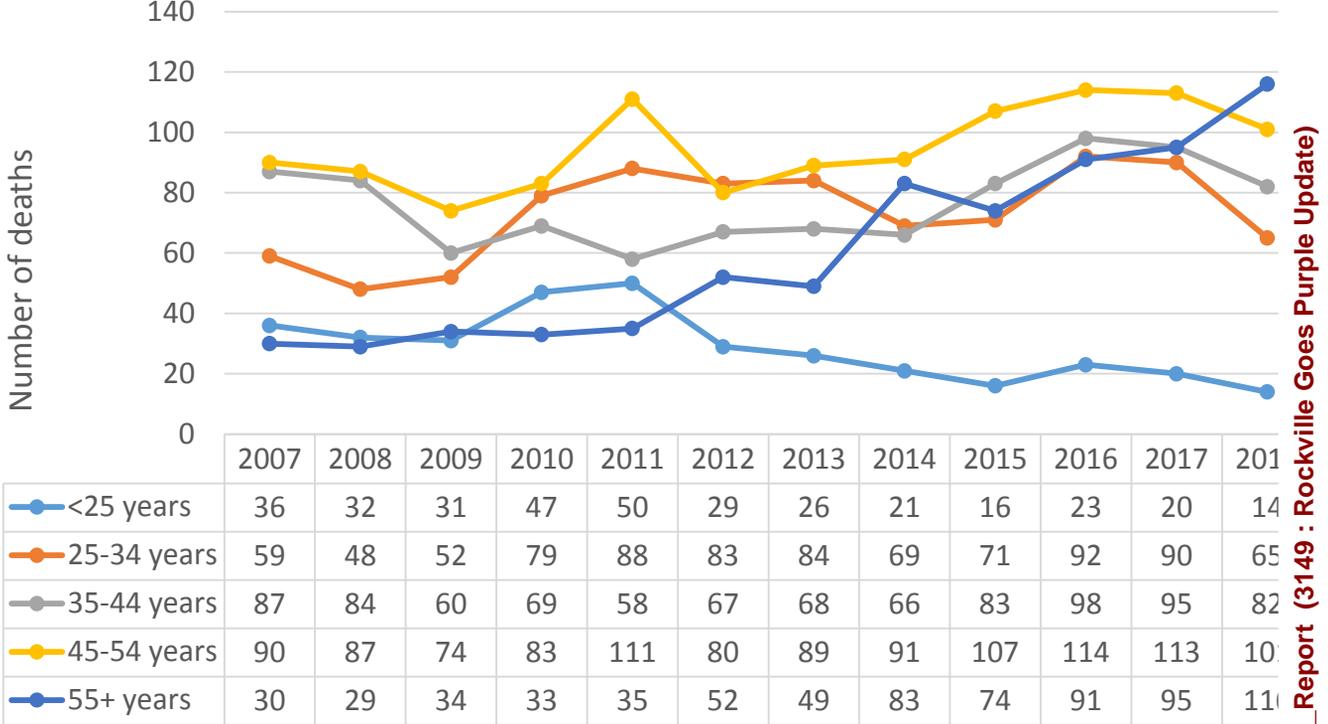
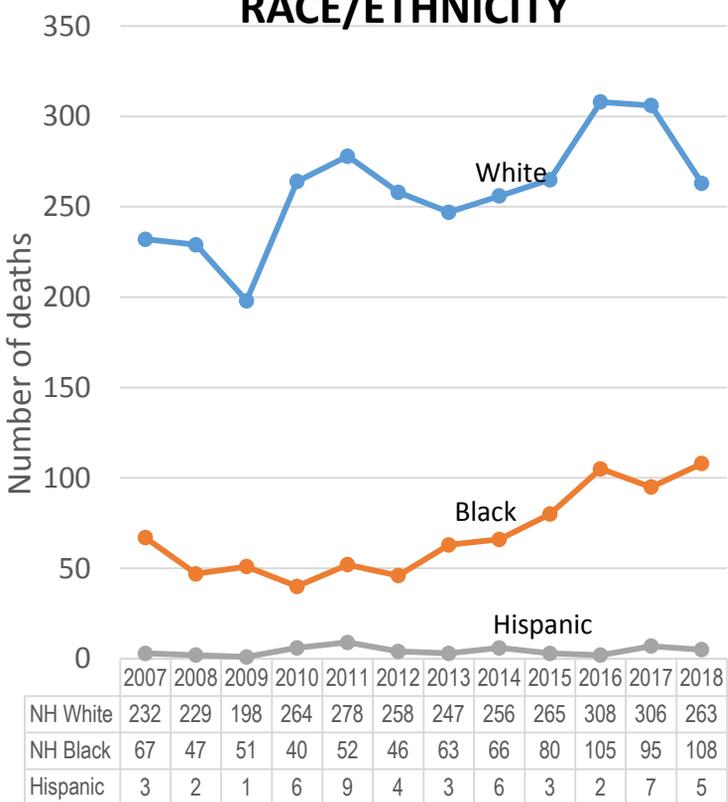


Figure 15. Number of Prescription Opioid-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018

AGE (years)



RACE/ETHNICITY



GENDER

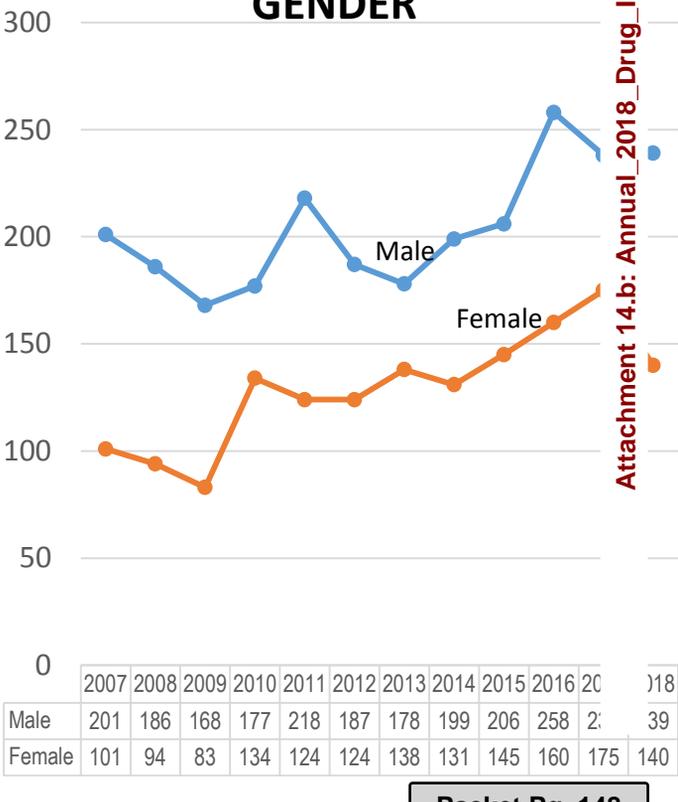
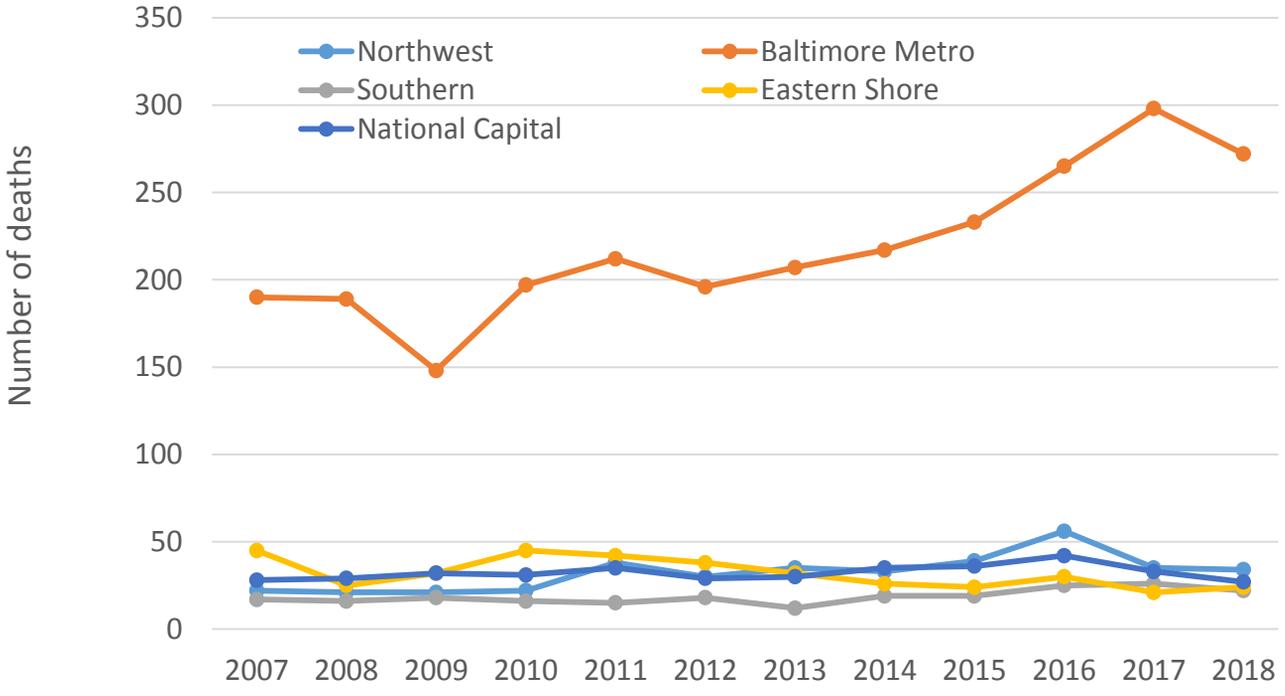
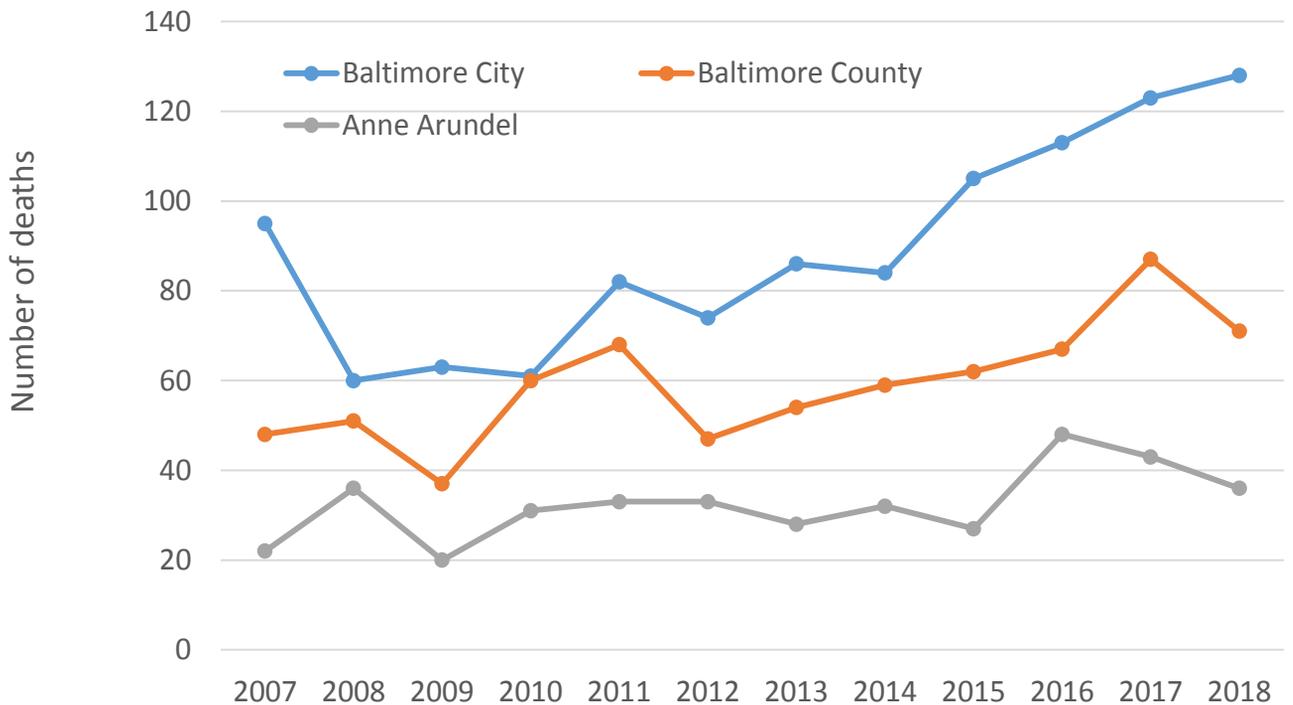


Figure 16. Number of Prescription Opioid-Related Deaths by Place of Occurrence, Maryland, 2007-2018.

REGION



SELECTED JURISDICTIONS



Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

Figure 17. Number of Fentanyl-Related Deaths Occurring in Maryland, 2007-2018.

14.b

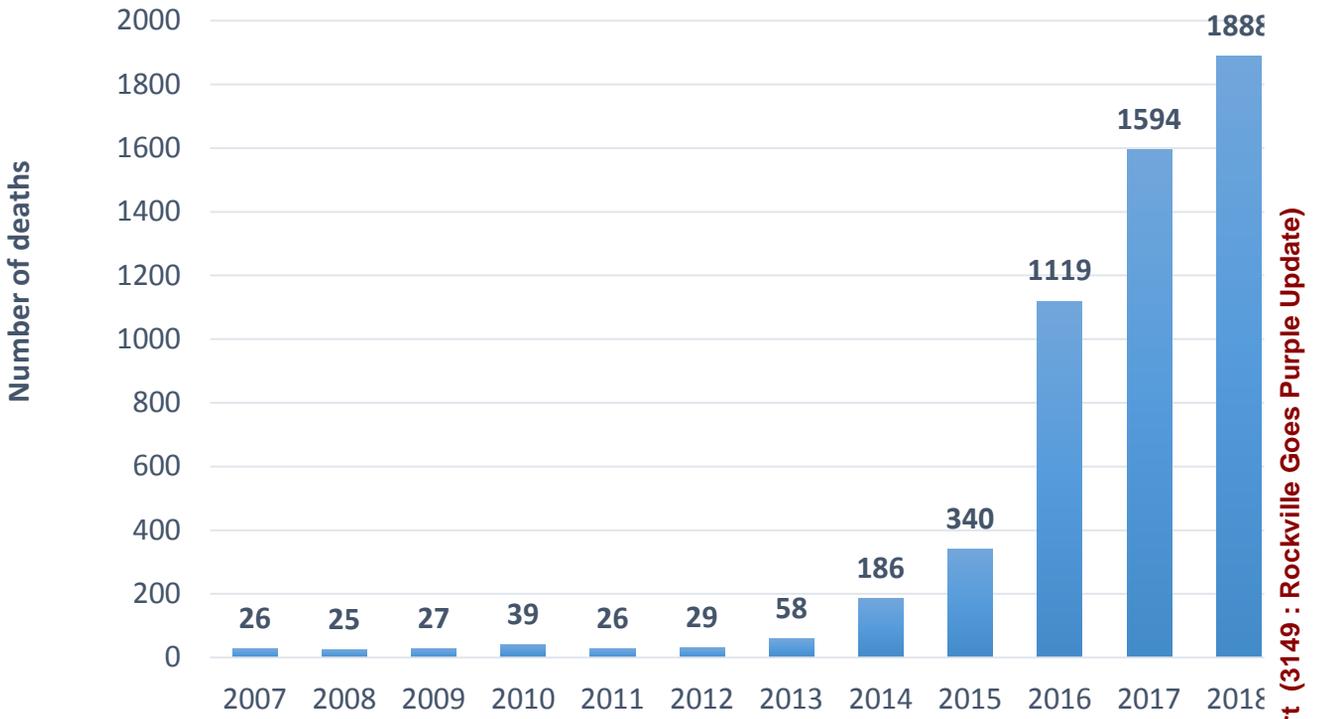
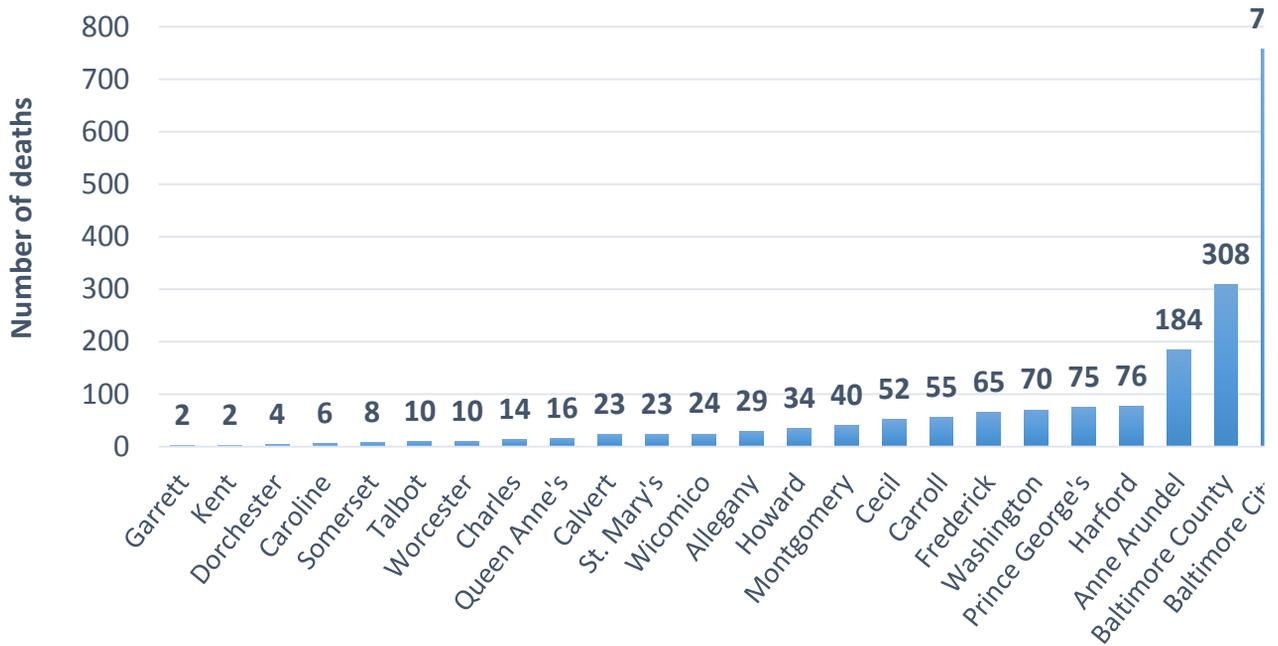


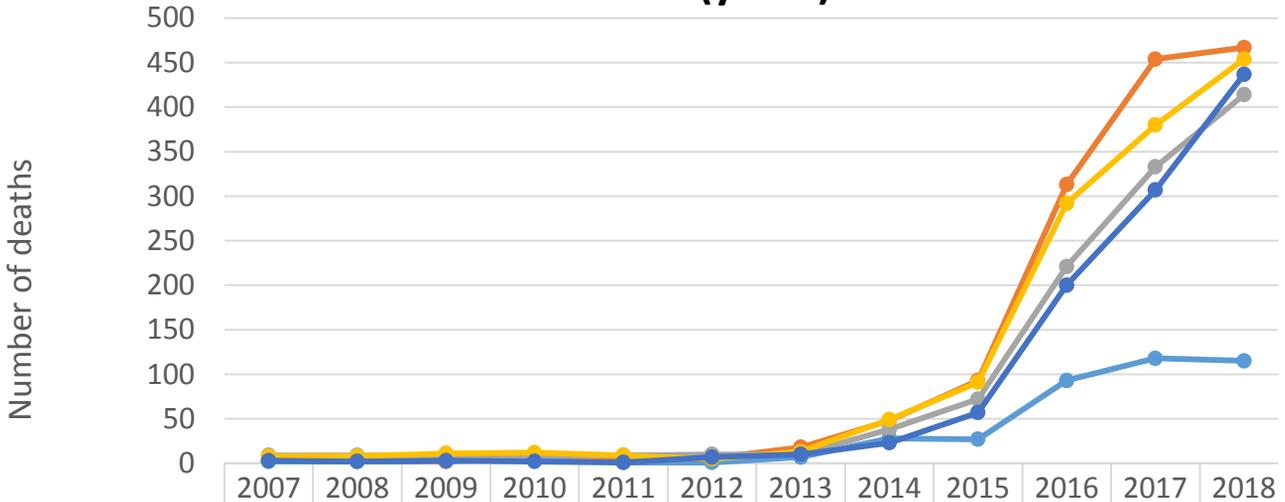
Figure 18. Number of Fentanyl-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



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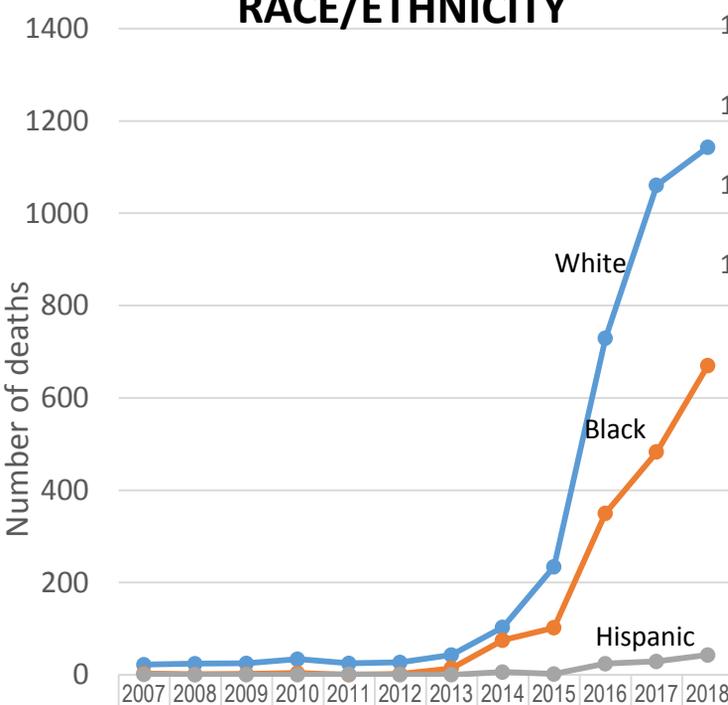
Figure 19. Number of Fentanyl-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018

AGE (years)



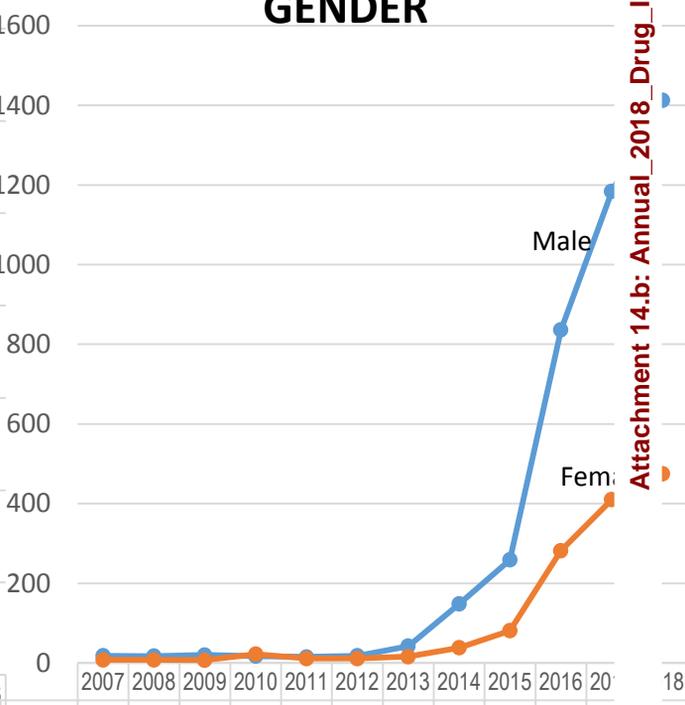
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
<25 years	2	2	2	6	1	1	7	28	27	93	118	115
25-34 years	4	4	2	10	6	6	18	48	93	313	454	467
35-44 years	9	9	9	9	9	10	10	38	72	221	333	414
45-54 years	8	8	11	12	9	5	13	49	91	292	380	454
55+ years	3	2	3	2	1	7	10	23	57	200	307	437

RACE/ETHNICITY



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
NH White	22	24	25	34	25	27	43	103	234	729	1061	1143
NH Black	3	1	2	4	0	2	14	75	102	350	483	670
Hispanic	1	0	0	0	1	0	0	6	2	24	29	43

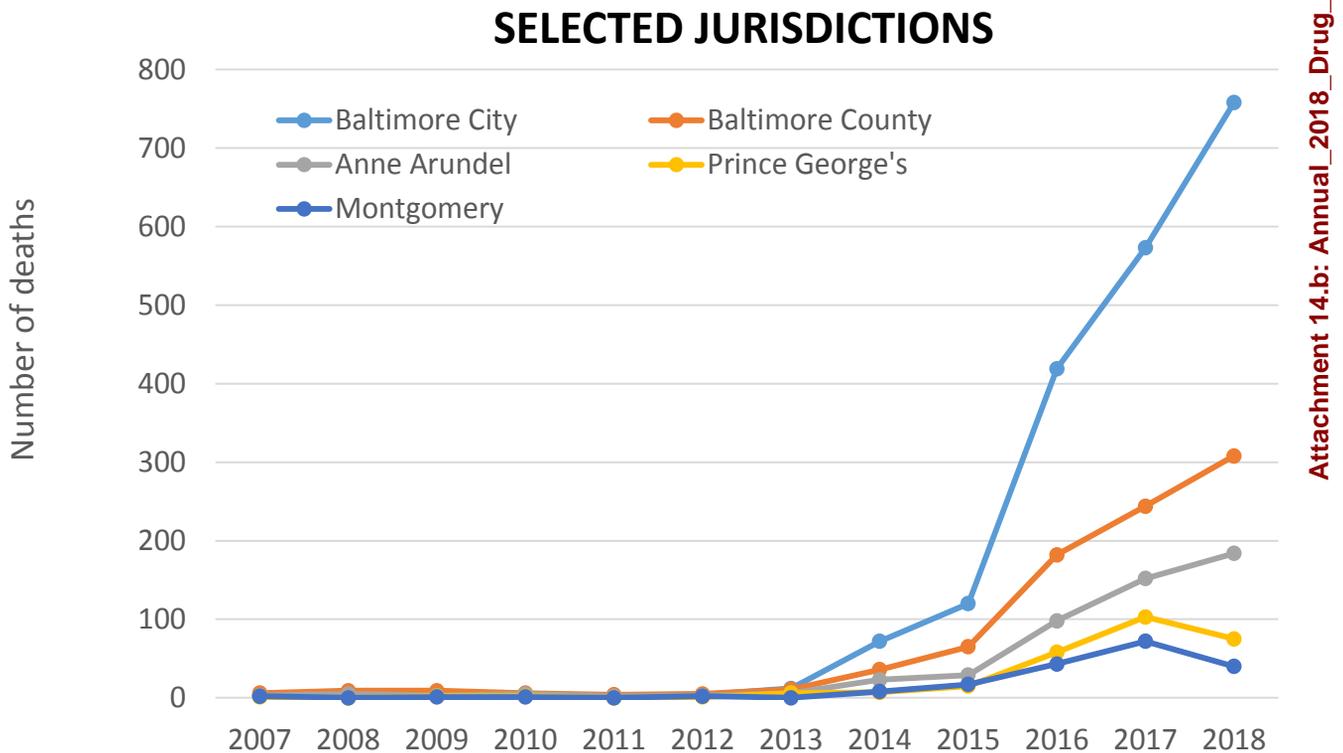
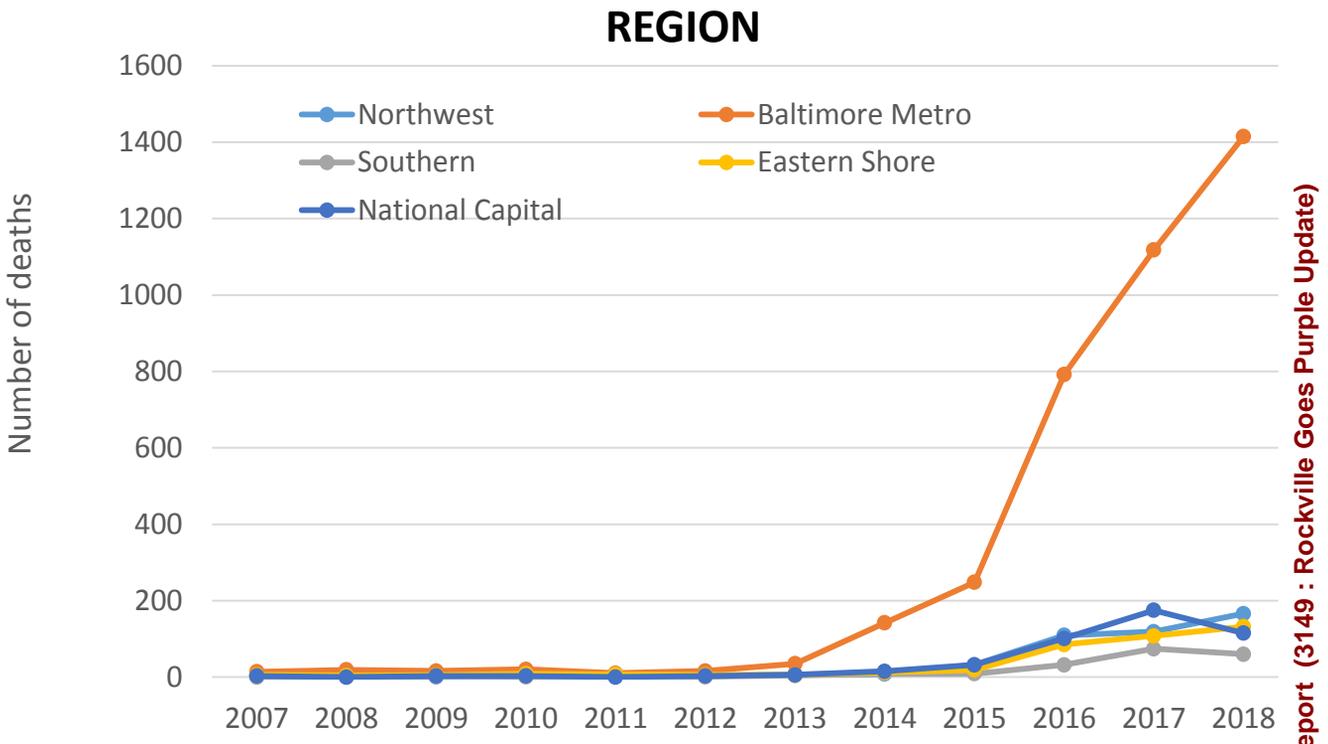
GENDER



	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018
Male	18	17	20	17	15	18	42	148	259	836	1143	1313
Female	8	8	7	22	11	11	16	38	81	282	410	475

Attachment 14.b: Annual 2018 Drug Intox Report (3149 : Rockville Goes Purple Update)

Figure 20. Number of Fentanyl-Related Deaths by Place of Occurrence, Maryland, 2007-2018. 14.b



Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

Figure 21. Number of Carfentanil-Related Deaths Occurring in Maryland, 2007-2018.

14.b

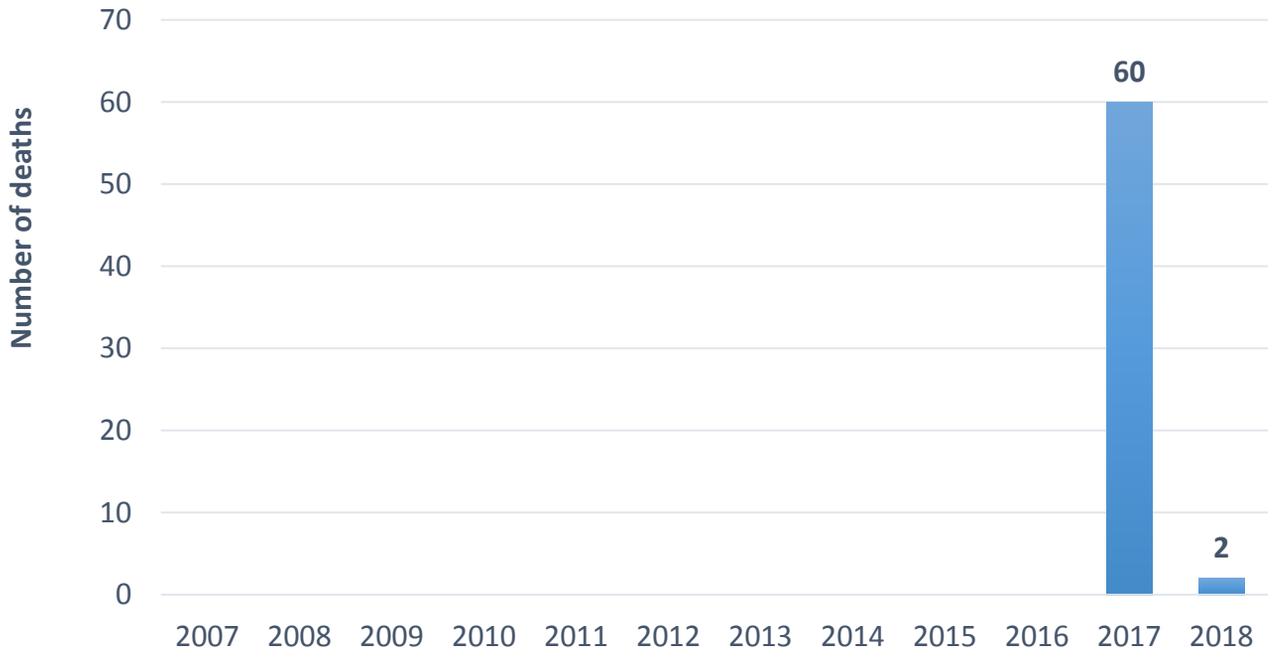
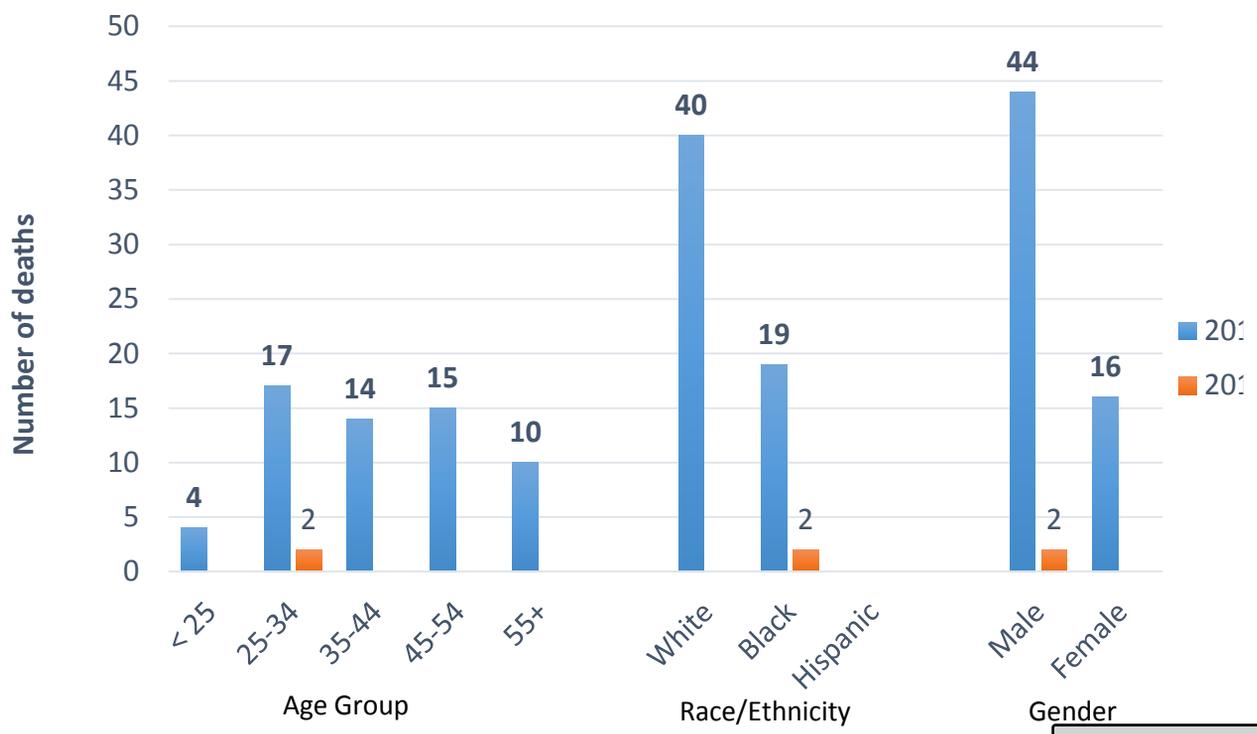


Figure 22. Number of Carfentanil-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity, and Gender, 2017-2018



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COCAINE-RELATED DEATHS

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

Figure 23. Number of Cocaine-Related Deaths Occurring in Maryland, 2007-2018.

14.b

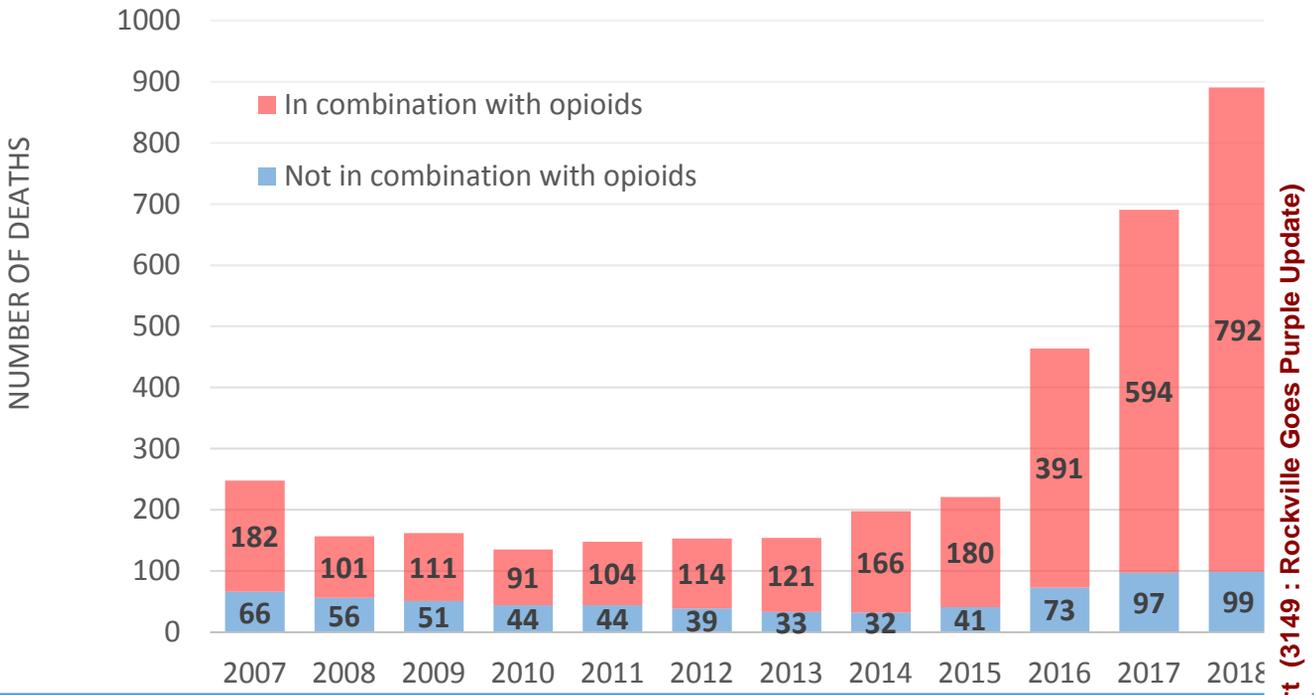
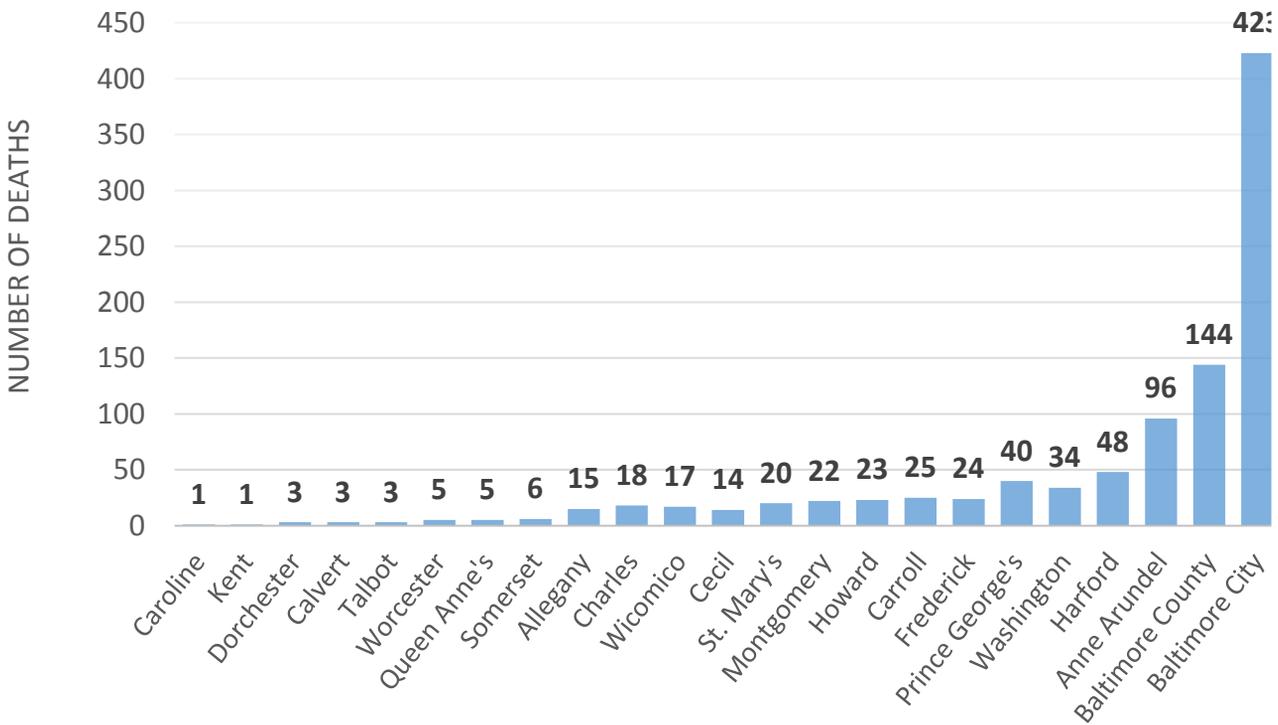


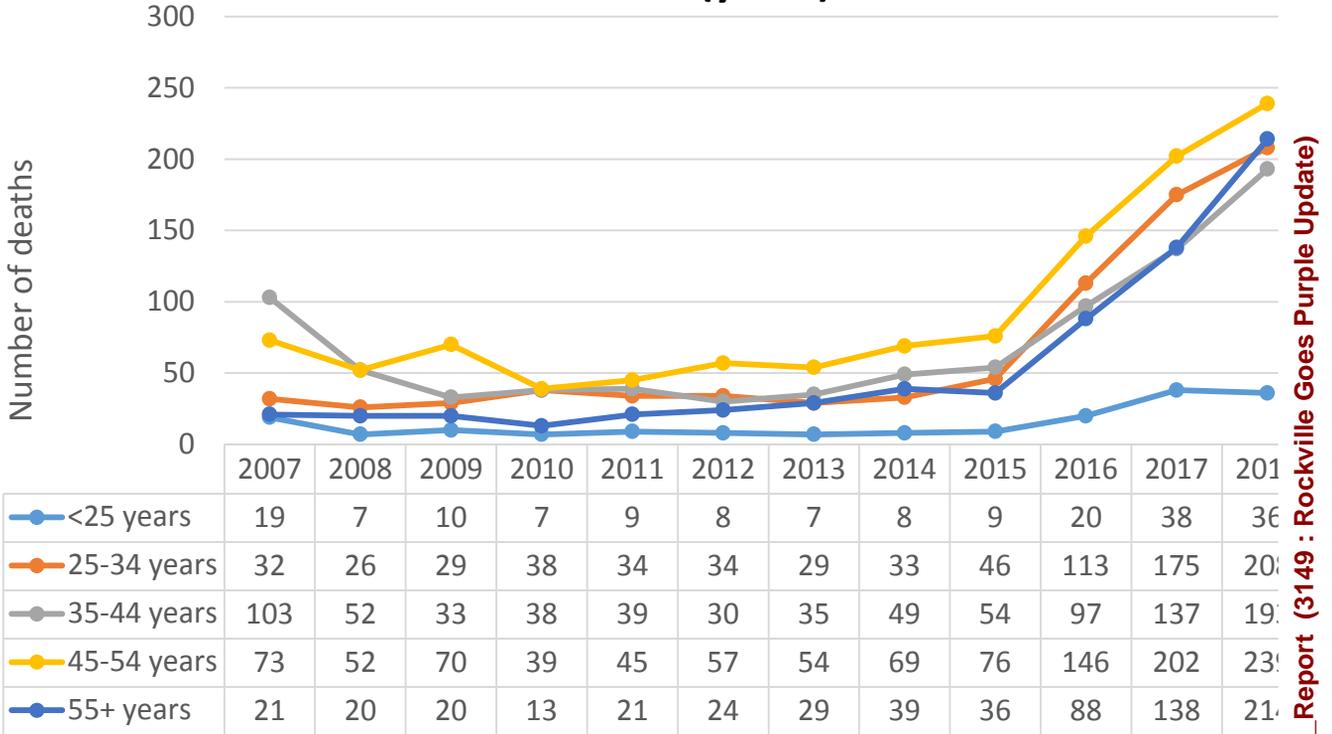
Figure 24. Number of Cocaine-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



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Figure 25. Number of Cocaine-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018

AGE (years)



RACE/ETHNICITY

GENDER

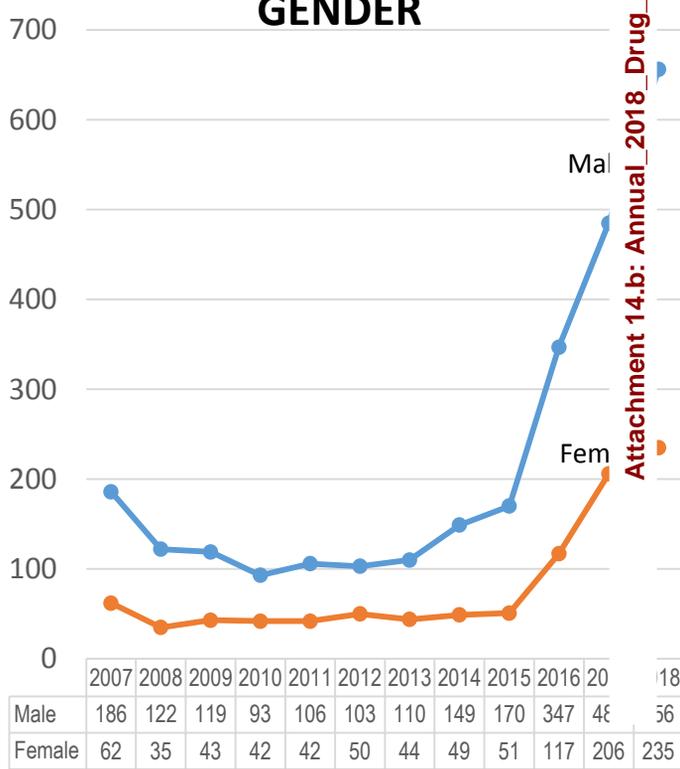
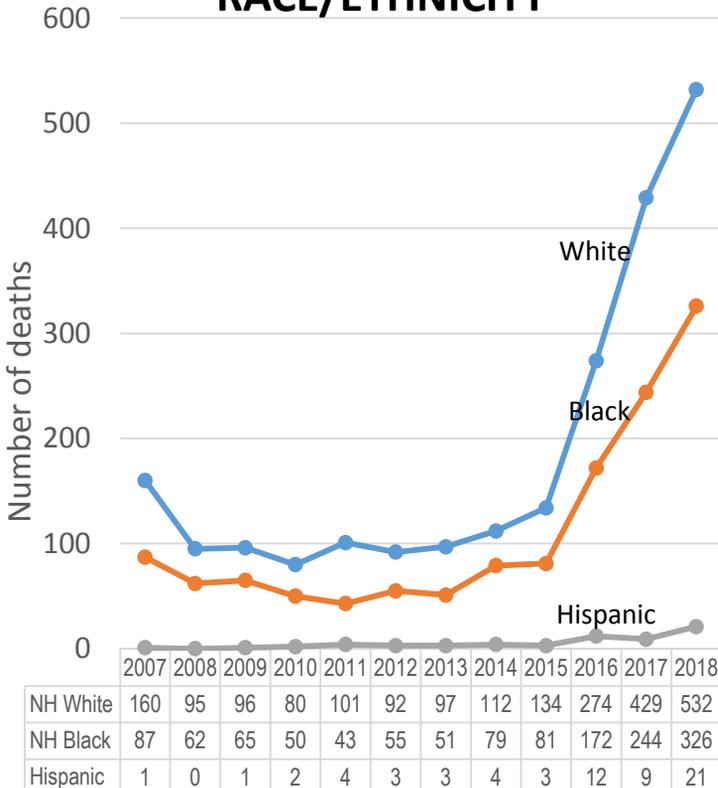
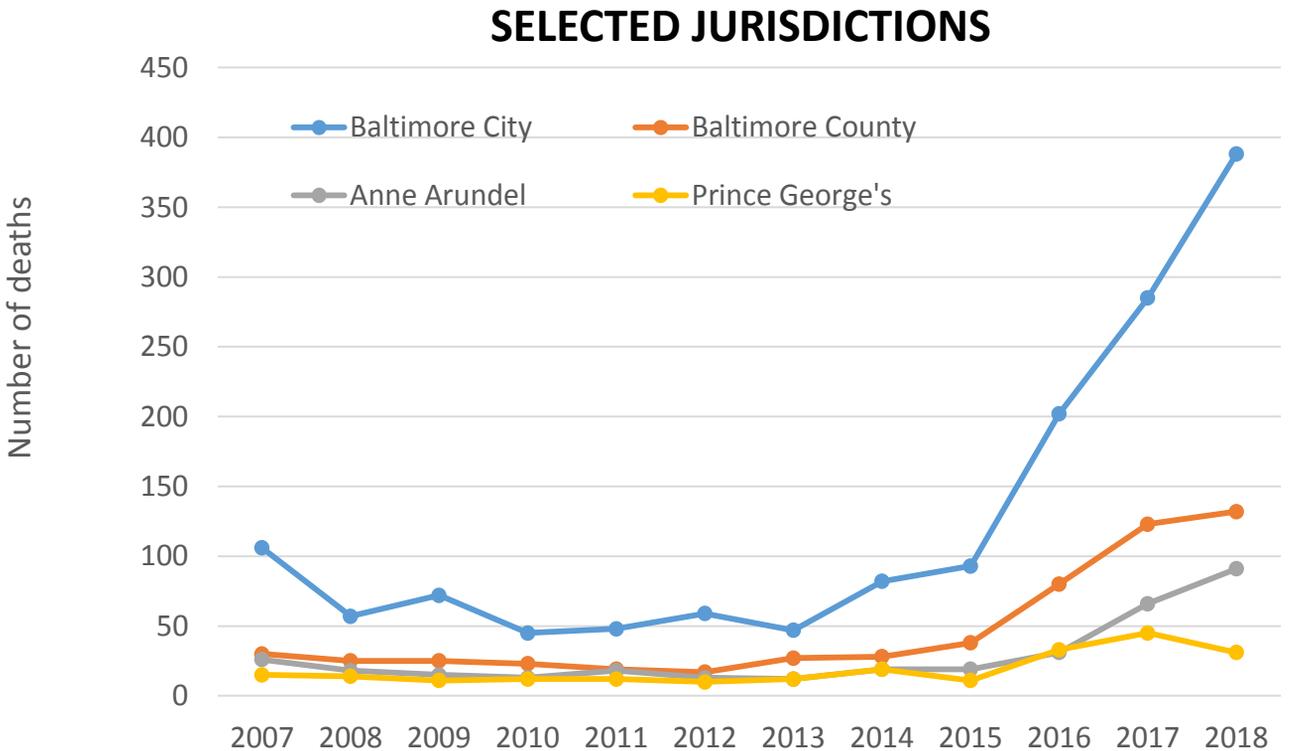
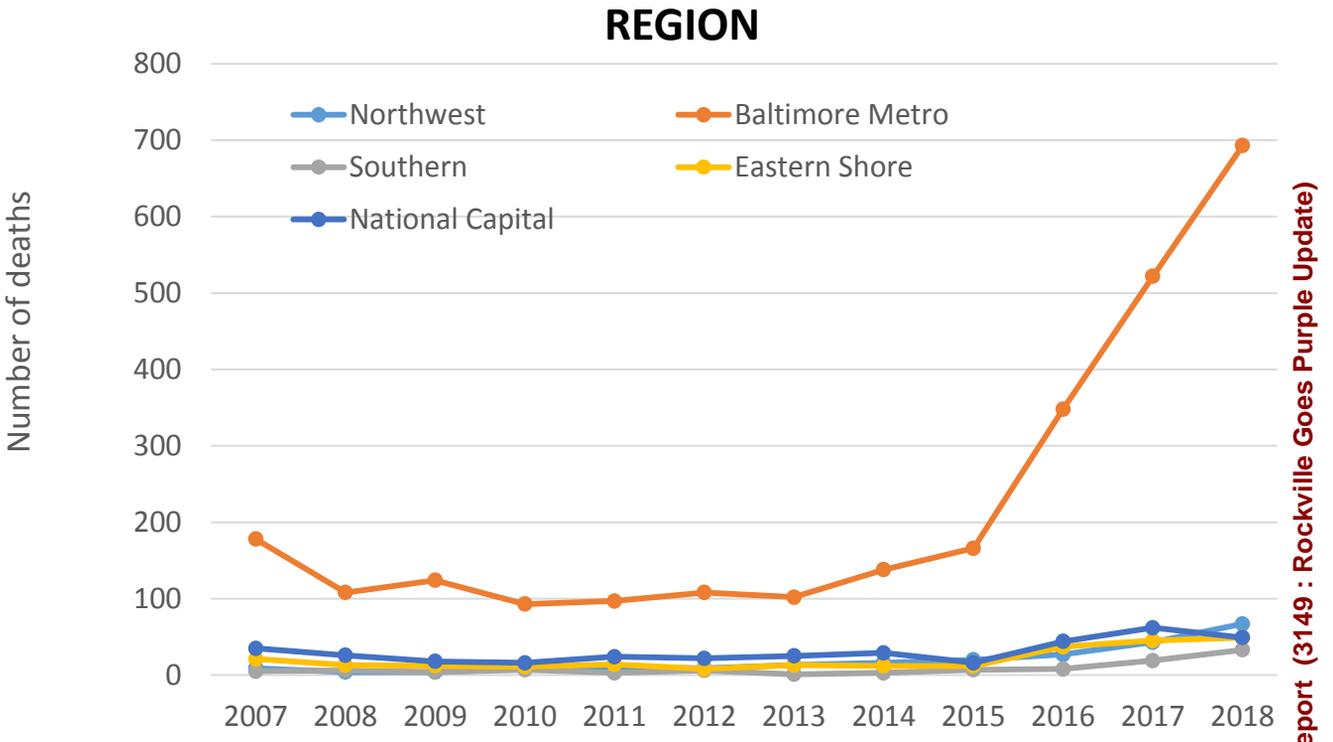


Figure 26. Number of Cocaine-Related Deaths by Pl 14.b
 Occurrence, Maryland, 2007-2018.



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BENZODIAZEPINE-RELATED DEATHS

Figure 27. Number of Benzodiazepine-Related Deaths Occurring in Maryland, 2007-2018.

14.b

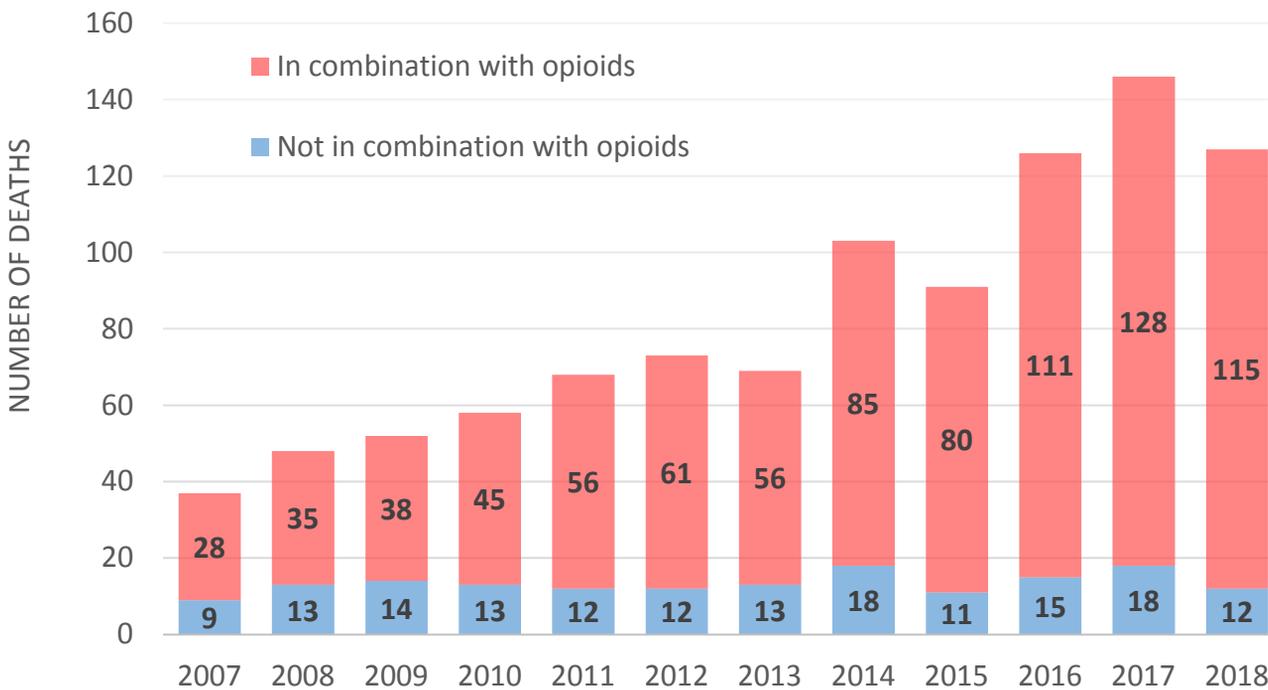
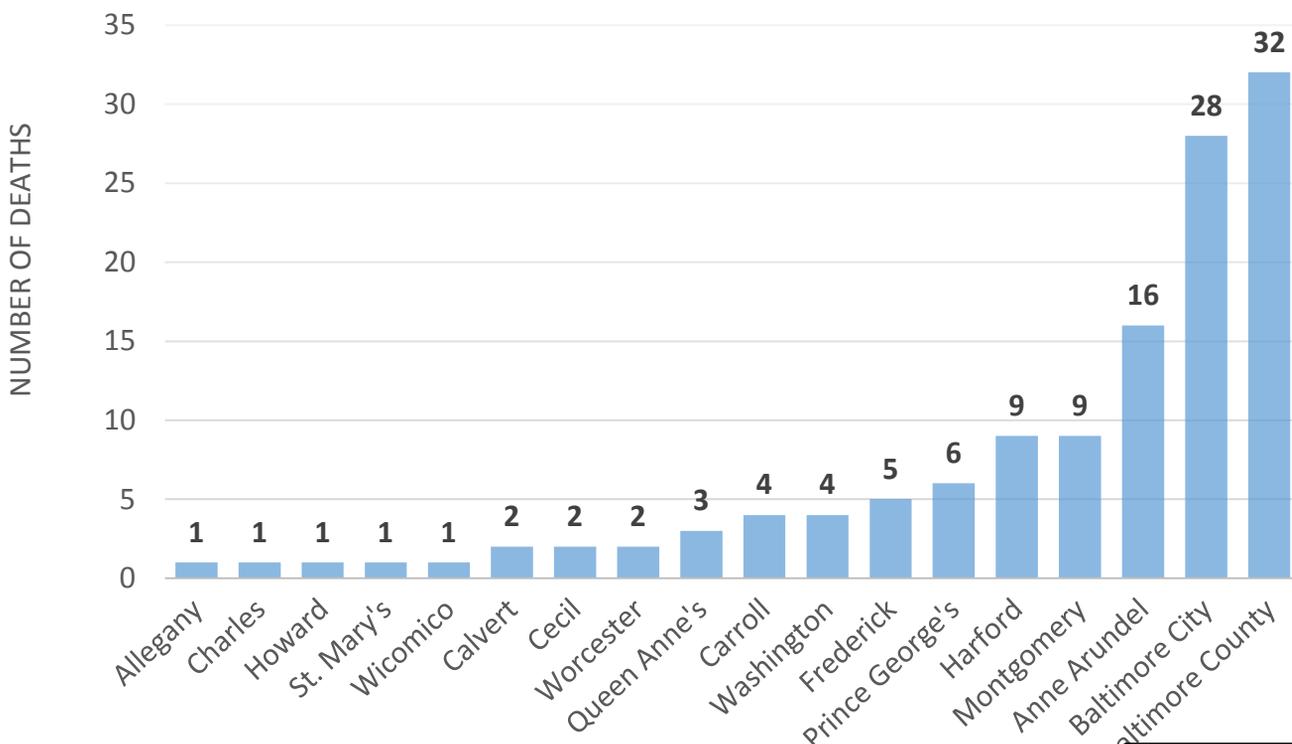


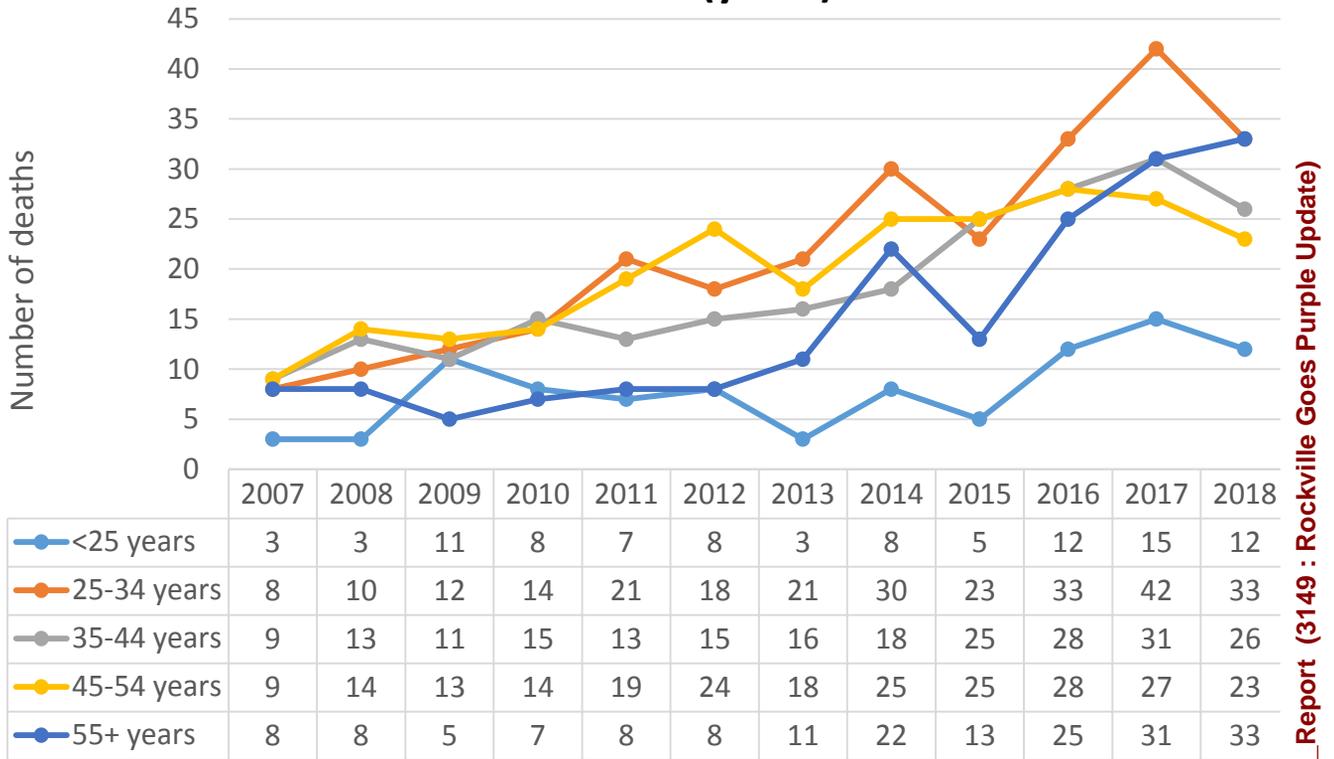
Figure 28. Number of Benzodiazepine-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



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Figure 29. Number of Benzodiazepine-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018.

AGE (years)



RACE/ETHNICITY

GENDER

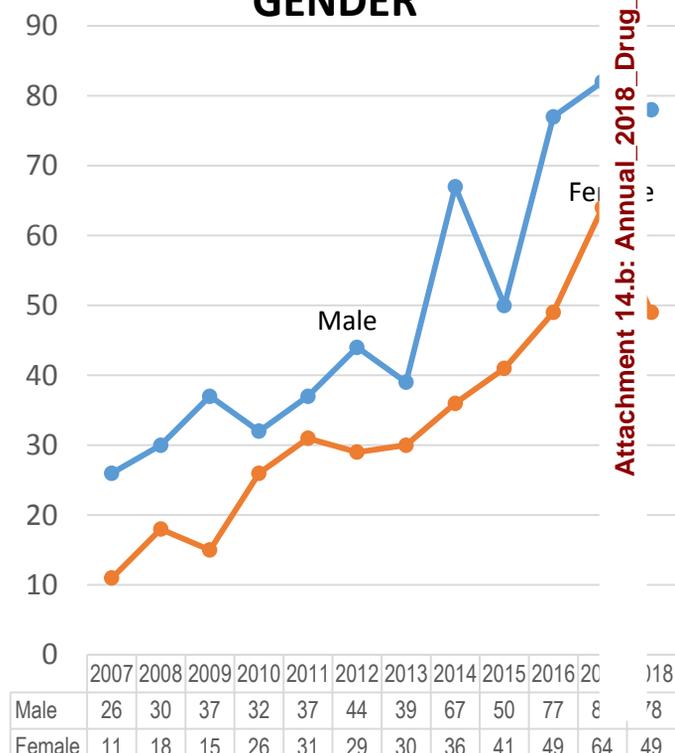
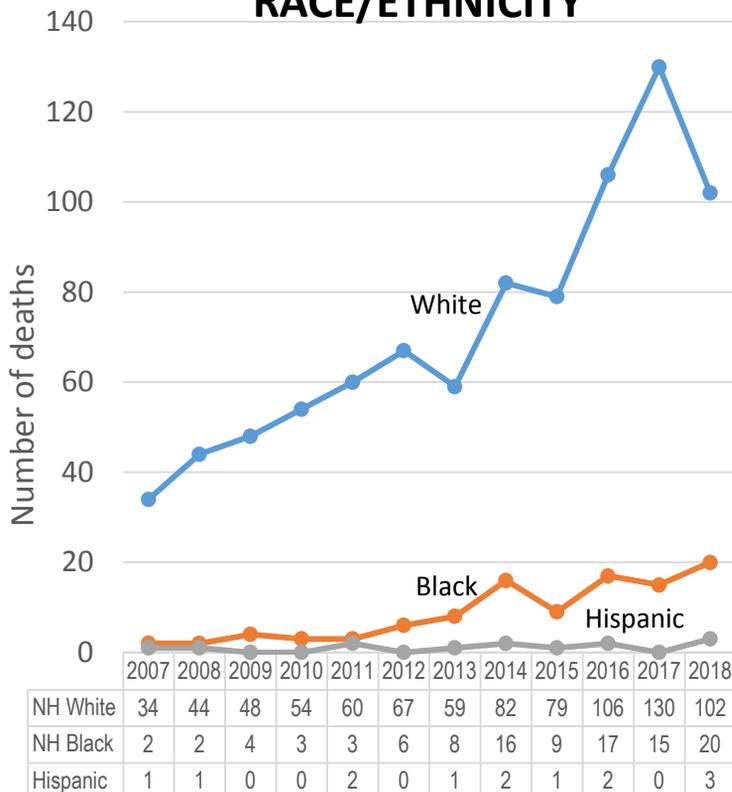
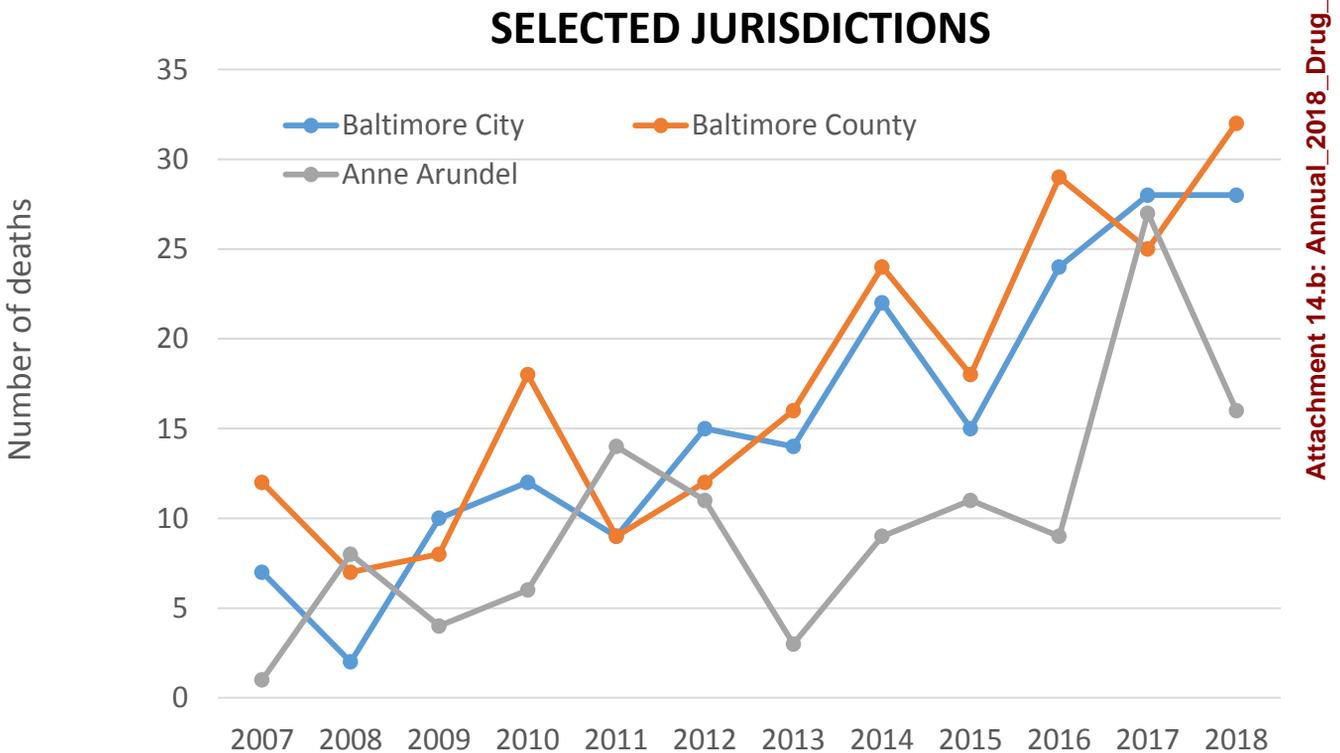
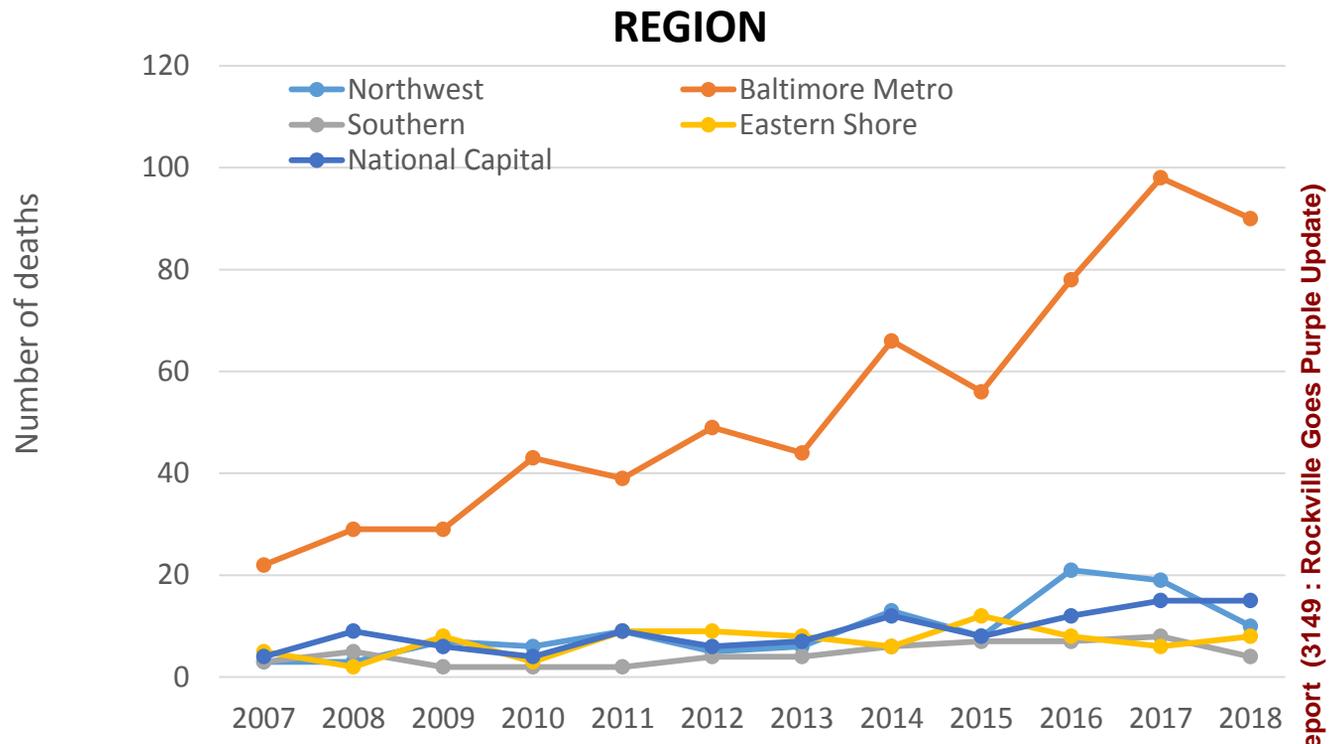


Figure 30. Number of Benzodiazepine-Related Deaths by Place of Occurrence, Maryland, 2007-2018.



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METHAMPHETAMINE-RELATED DEATHS

Figure 31. Number of Methamphetamine-Related Deaths Occurring in Maryland, 2007-2018.

14.b

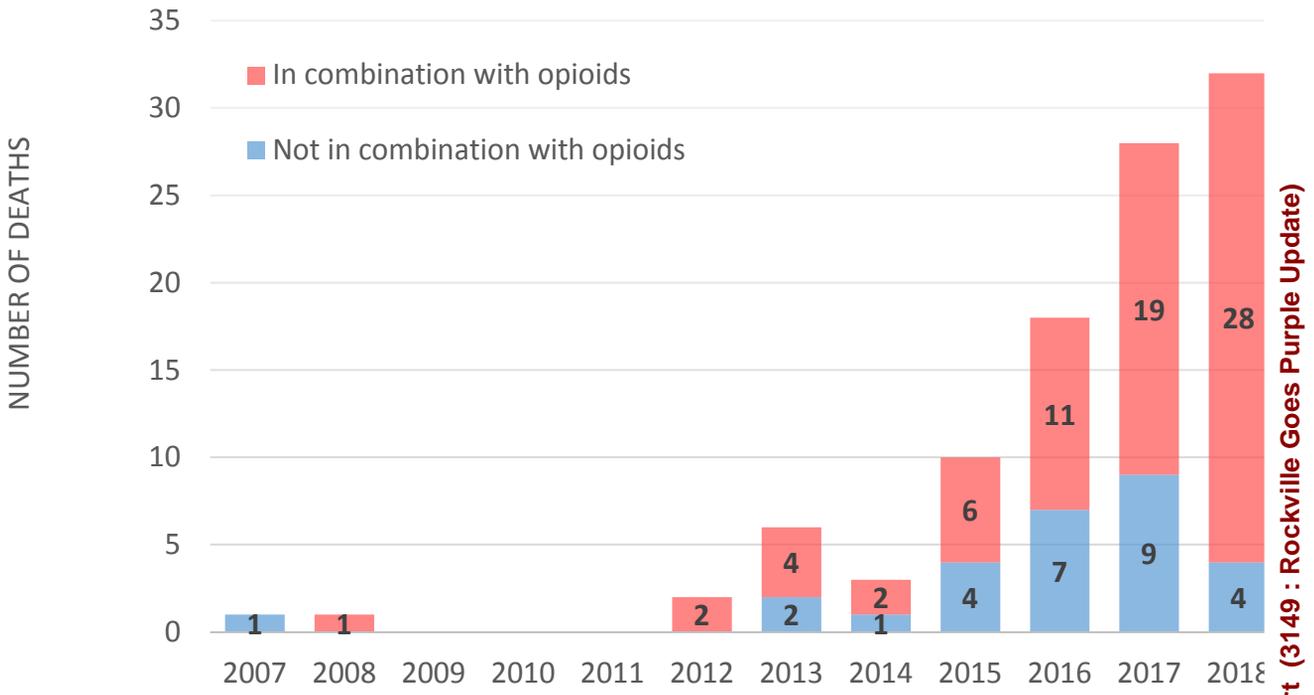
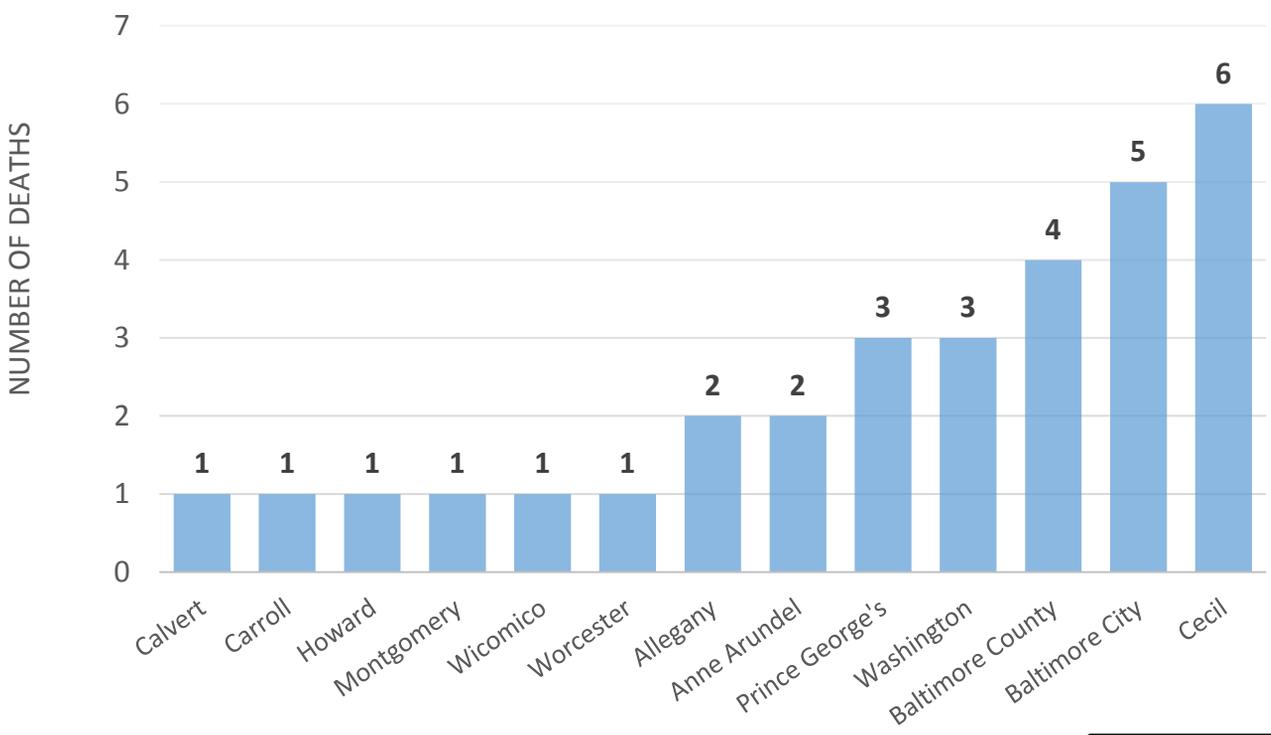
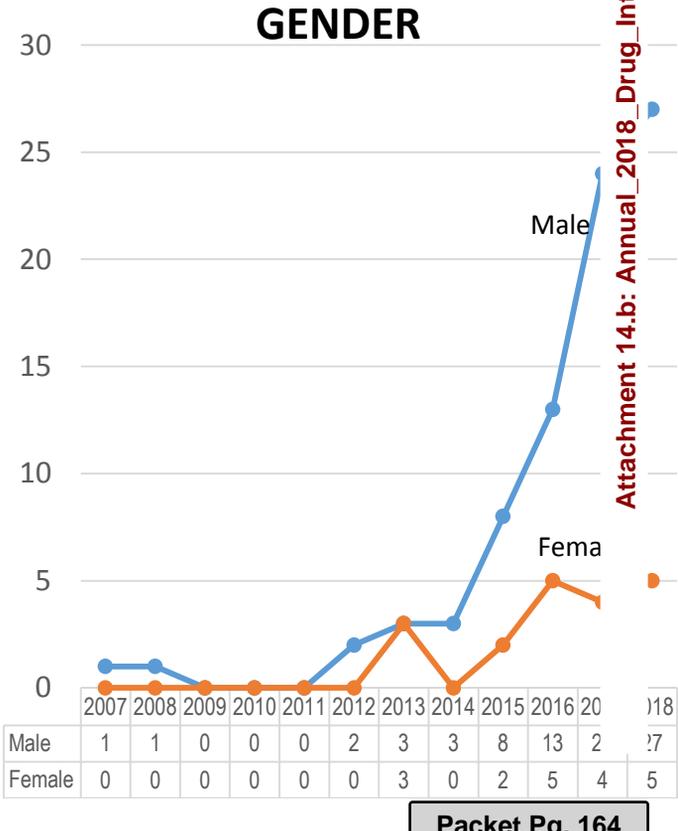
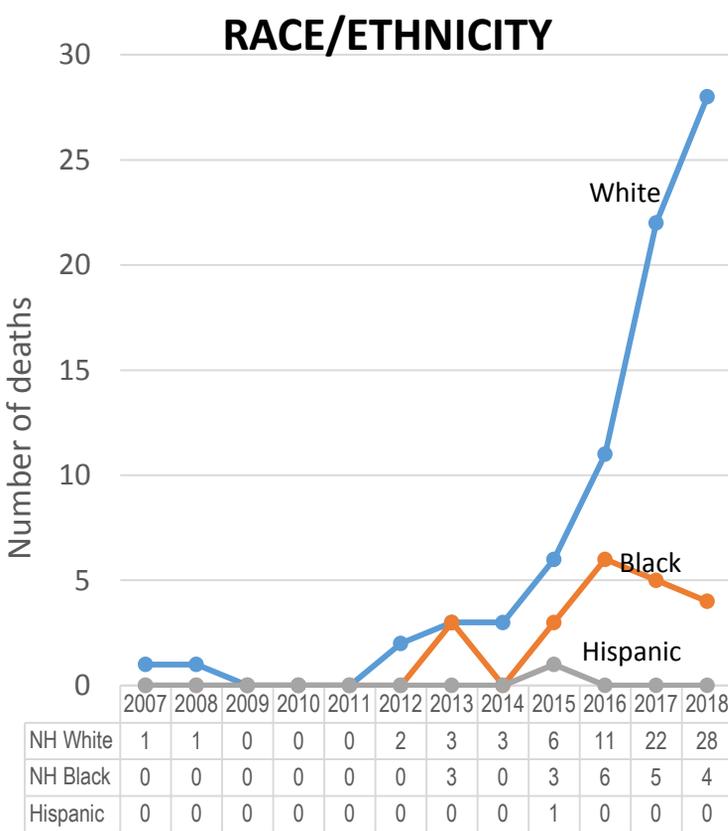
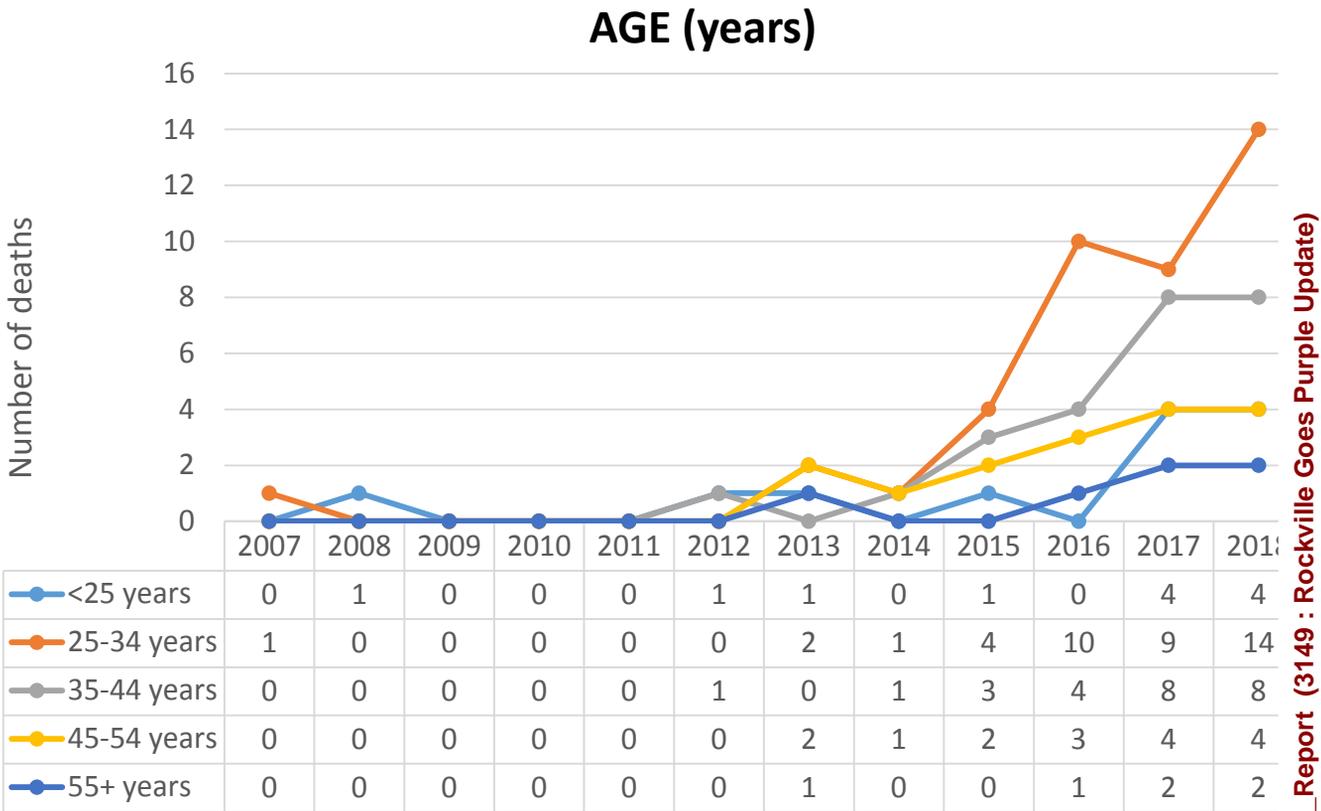


Figure 32. Number of Methamphetamine-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



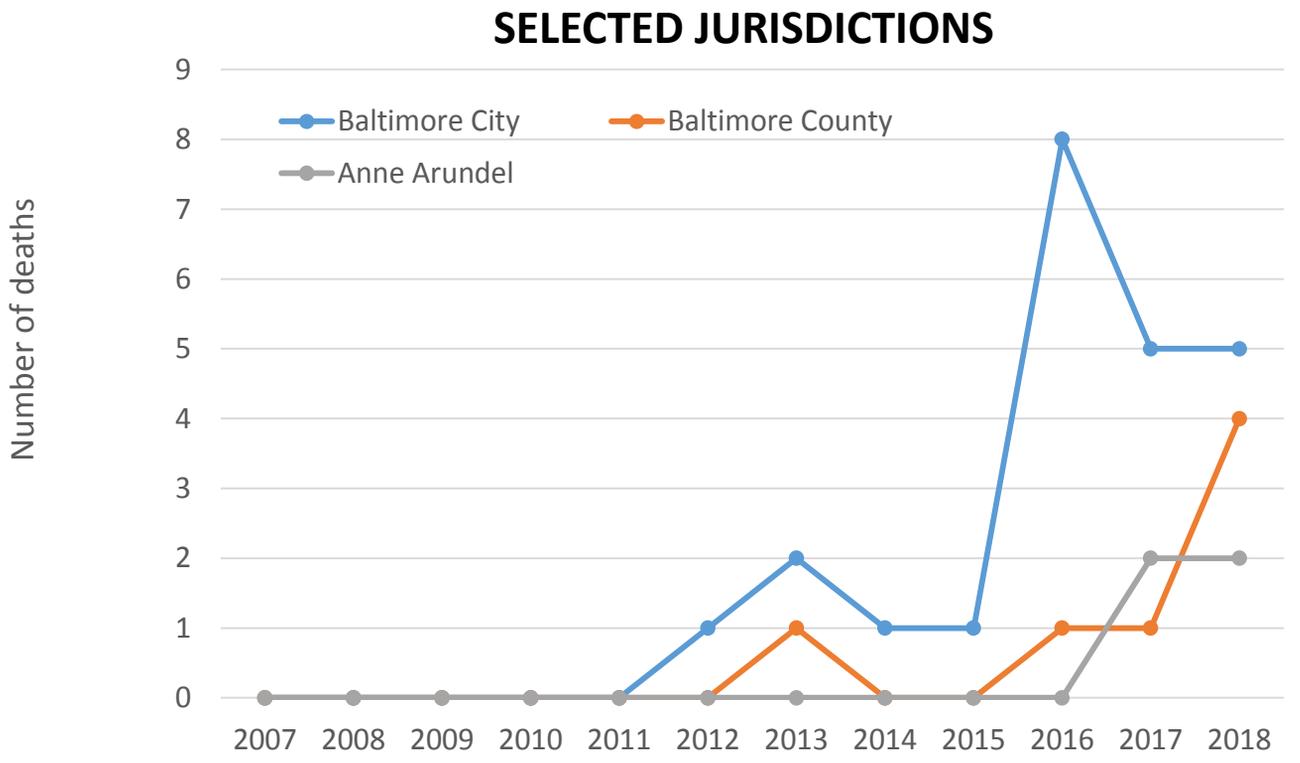
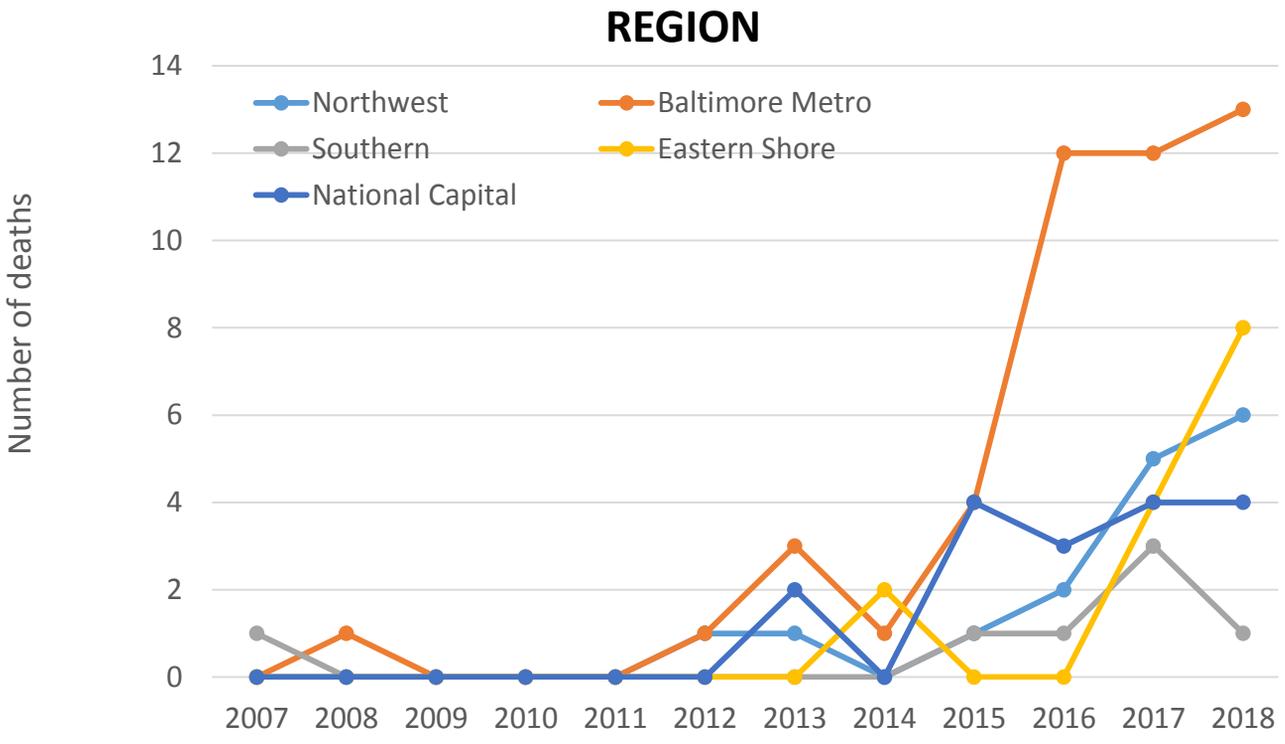
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Figure 33. Number of Methamphetamine-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018.



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Figure 34. Number of Methamphetamine-Related Deaths by Place of Occurrence, Maryland, 2007-2018.



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ALCOHOL-RELATED DEATHS

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Figure 35. Number of Alcohol-Related Deaths Occurring in Maryland, 2007-2018.

14.b

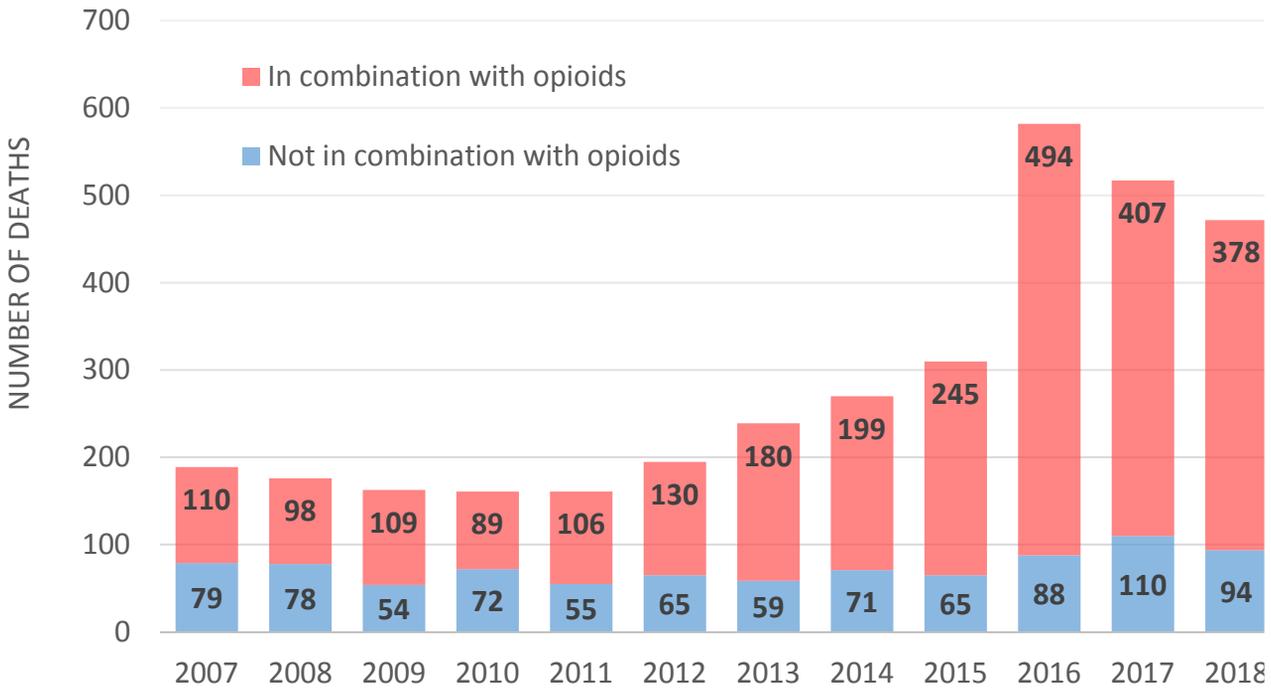
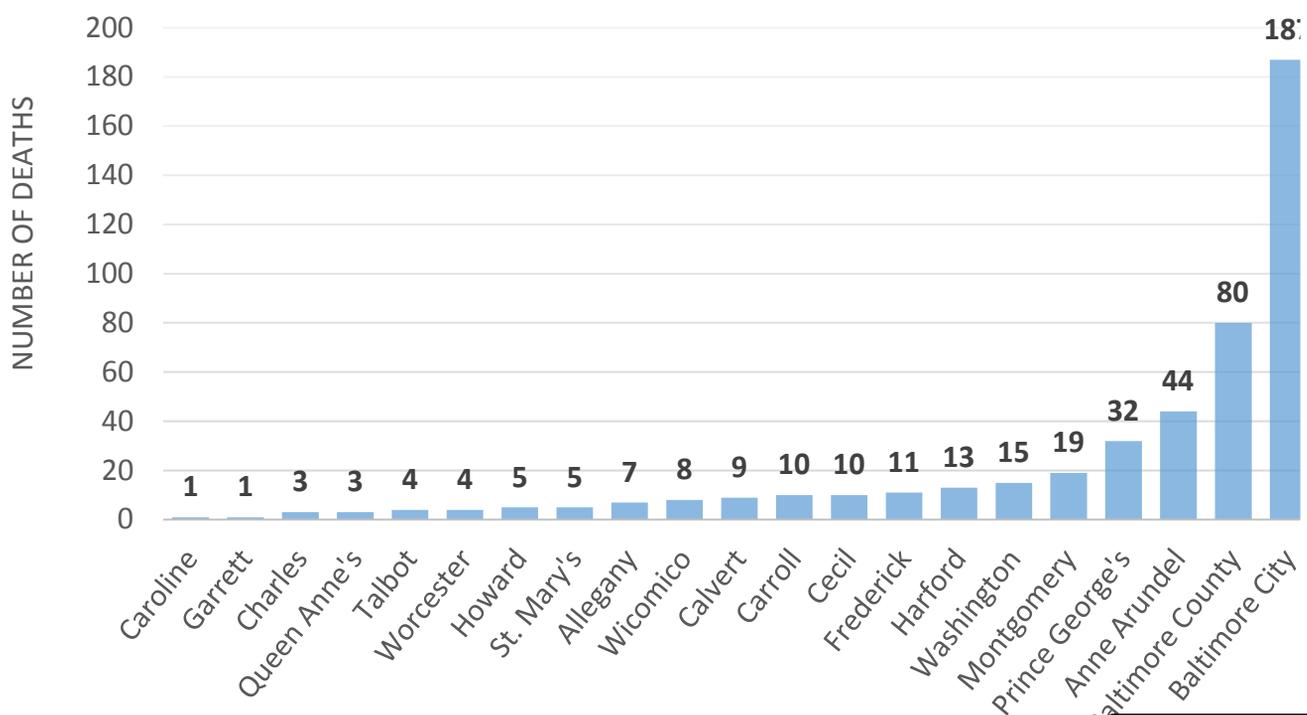
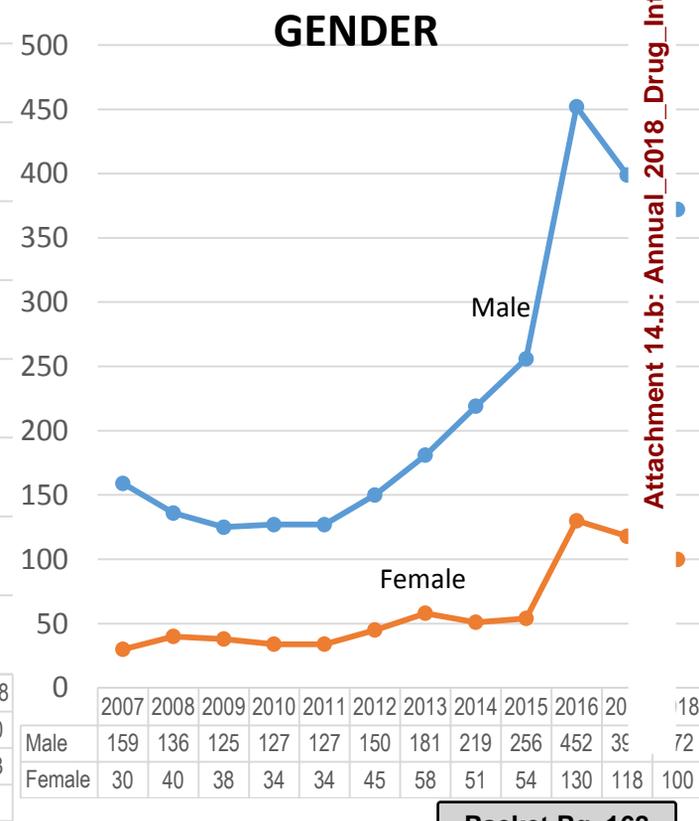
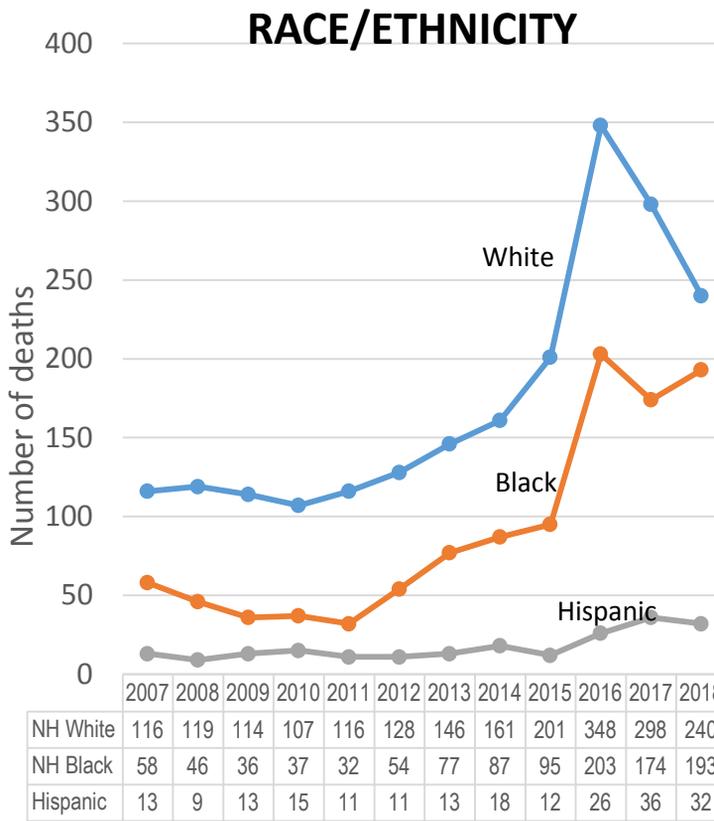
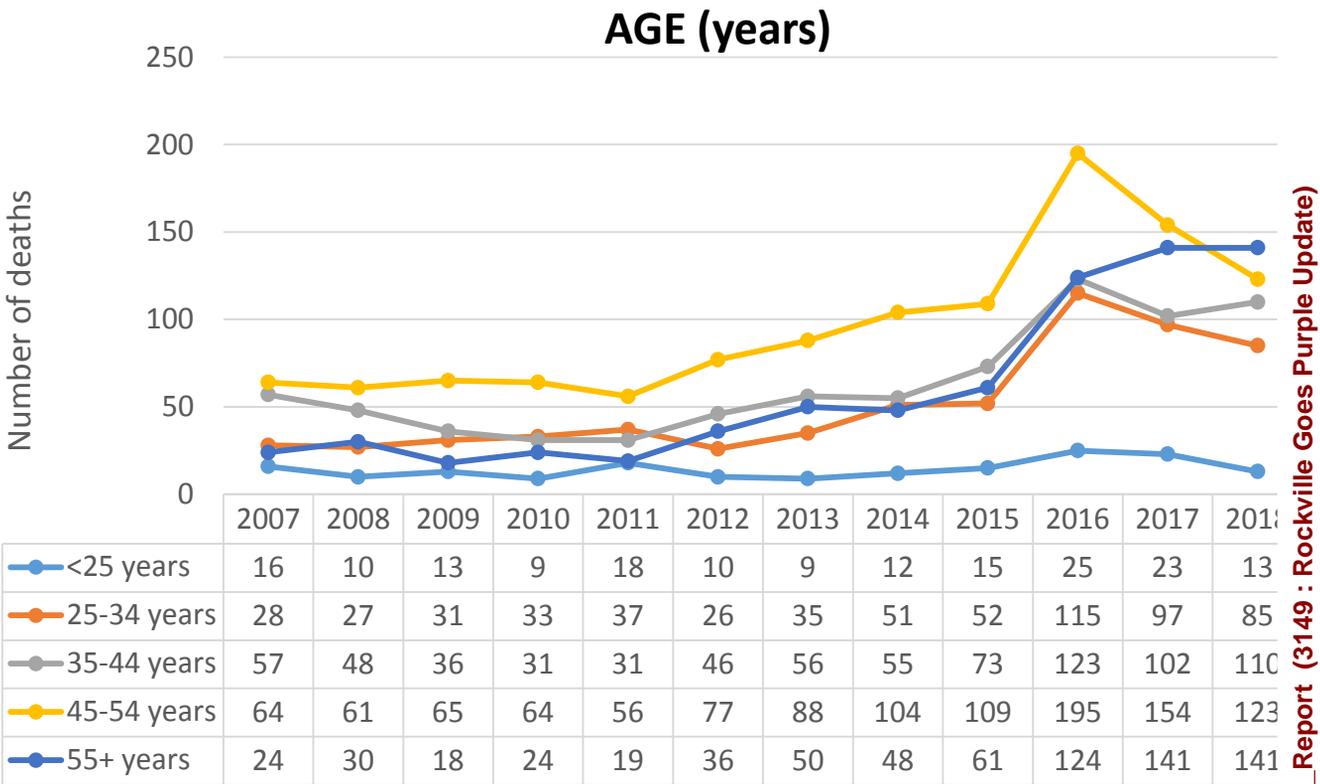


Figure 36. Number of Alcohol-Related Deaths Occurring in Maryland by Place of Occurrence, 2018.



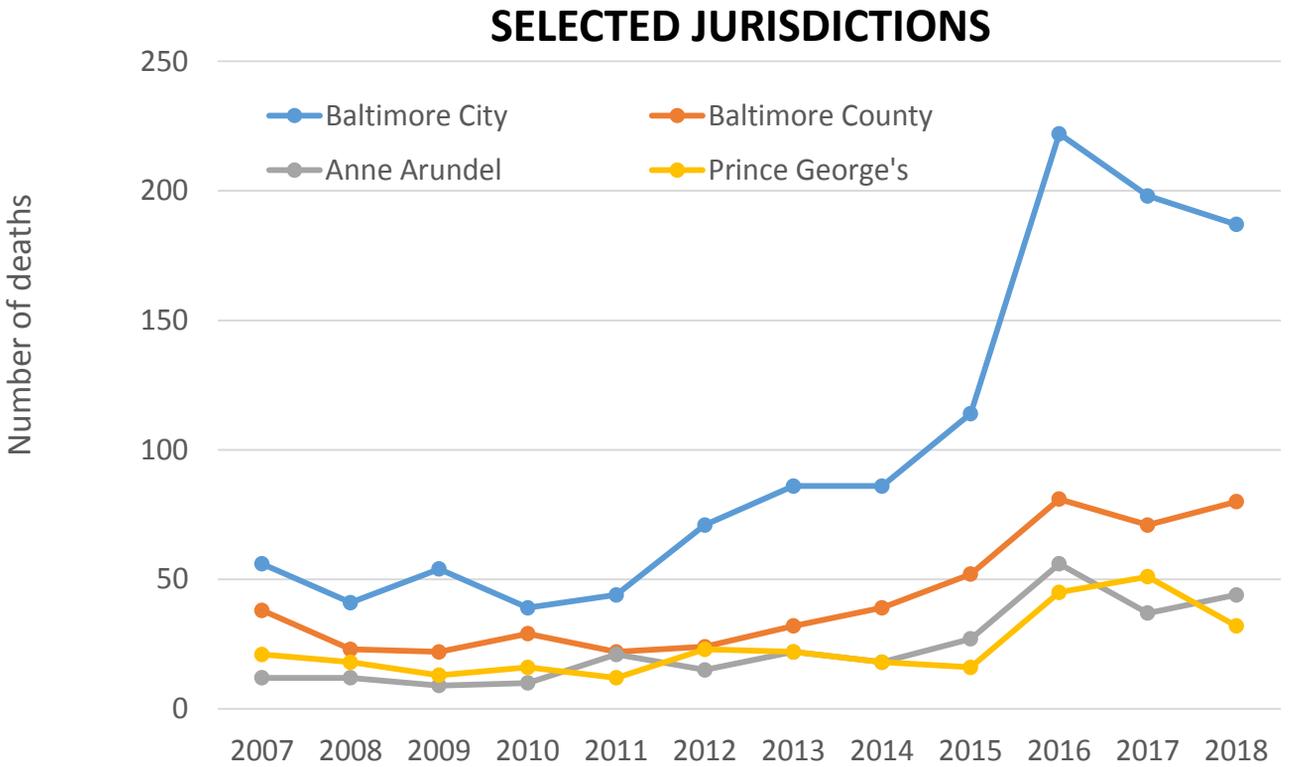
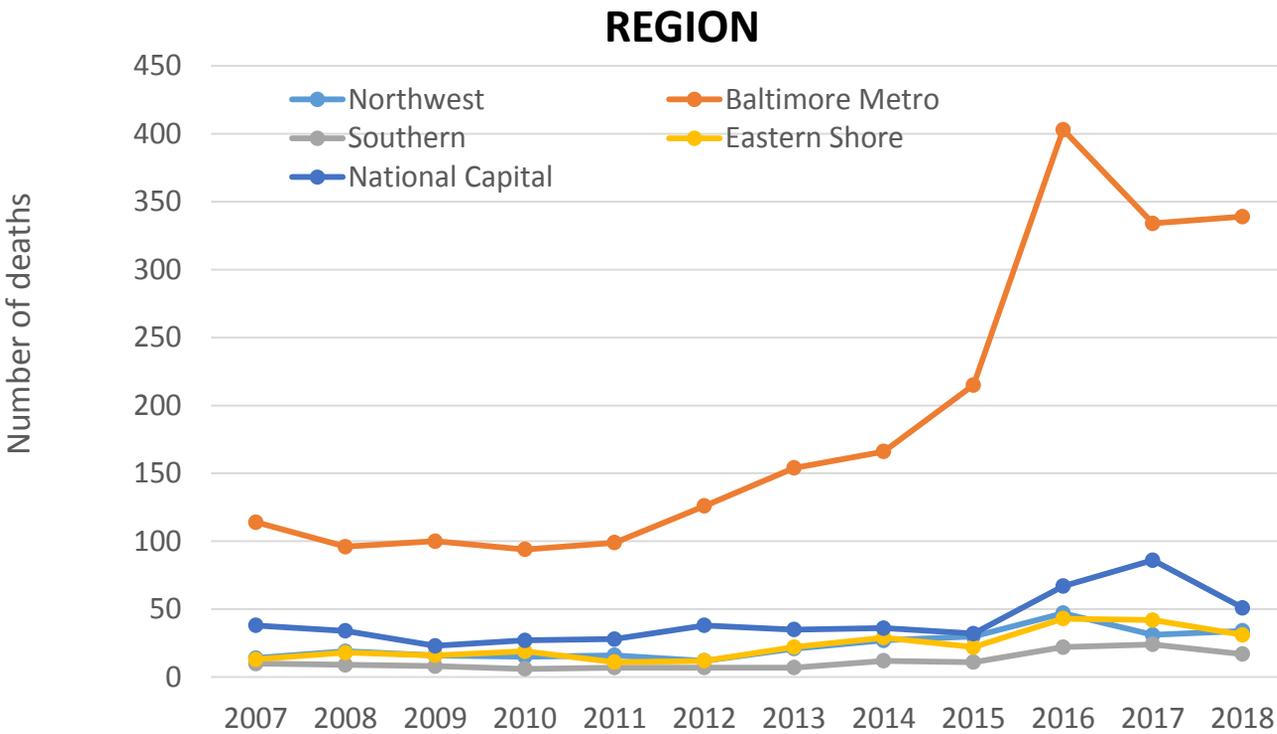
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Figure 37. Number of Alcohol-Related Deaths Occurring in Maryland by Age Group, Race/Ethnicity and Gender, 2007-2018



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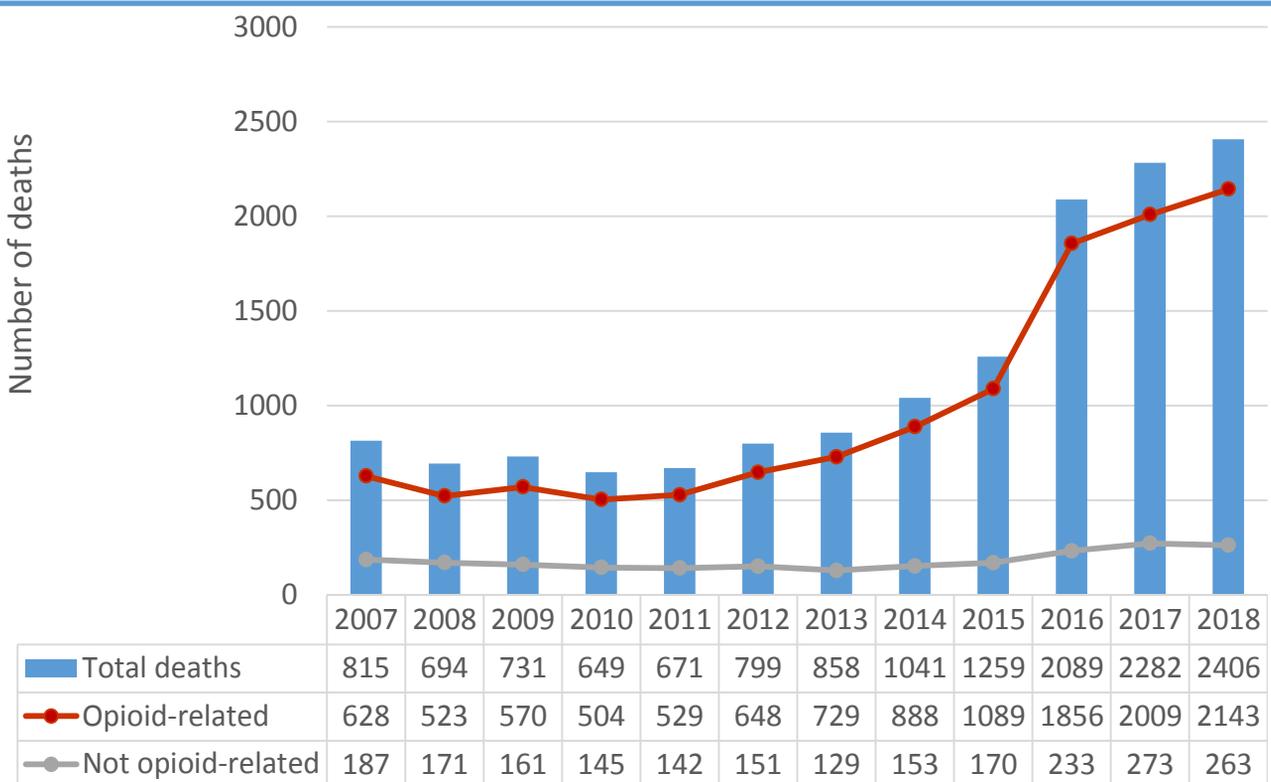
Figure 38. Number of Alcohol-Related Deaths by Place of Occurrence, Maryland, 2007-2018.



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DRUG COMBINATIONS

Figure 39. Number of Drug- and Alcohol-Related Intoxication Deaths Involving Opioids, 2007-2018.



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Figure 40. Number of Intoxication Deaths by Presence of Heroin and/or Fentanyl, 2007-2018.

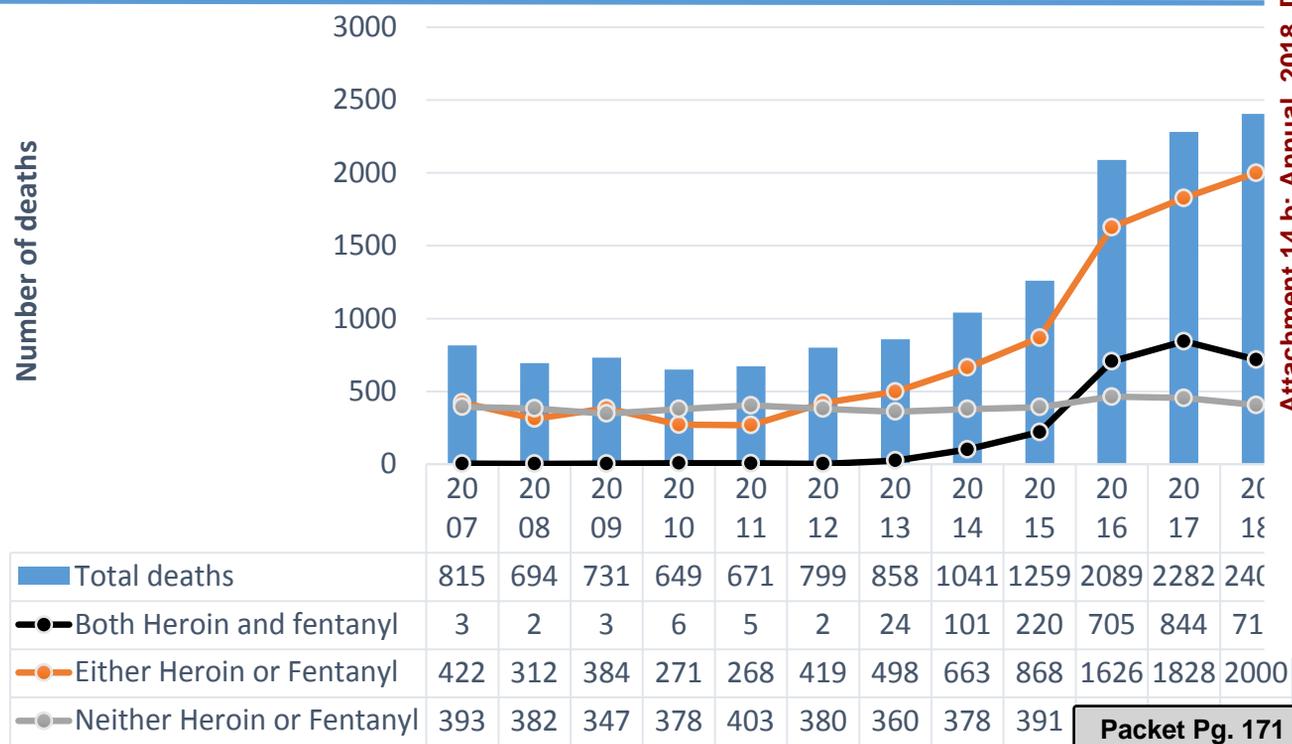


Figure 41. Number of Prescription Opioid-Related Intoxication Deaths Involving Heroin or Fentanyl, 2007-2018.

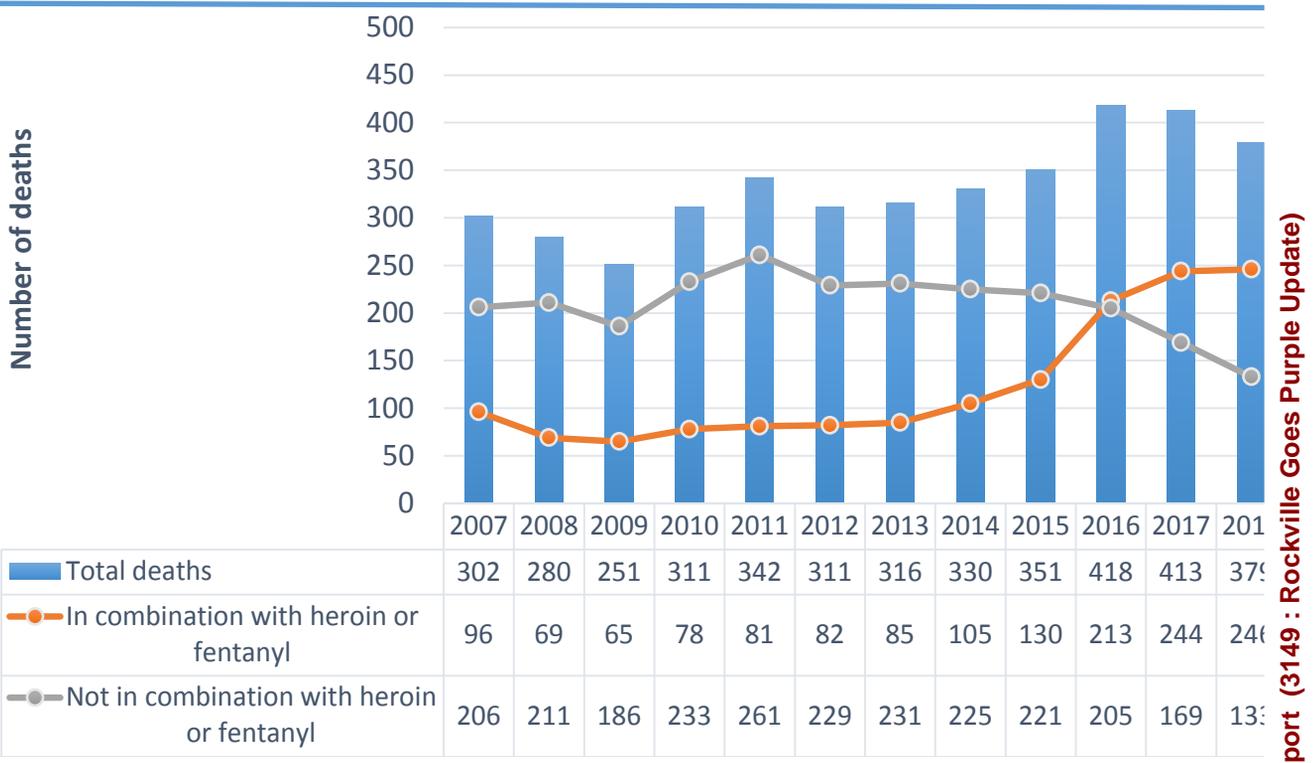


Figure 42. Number of Cocaine-Related Intoxication Deaths Involving Heroin or Fentanyl, 2007-2018.

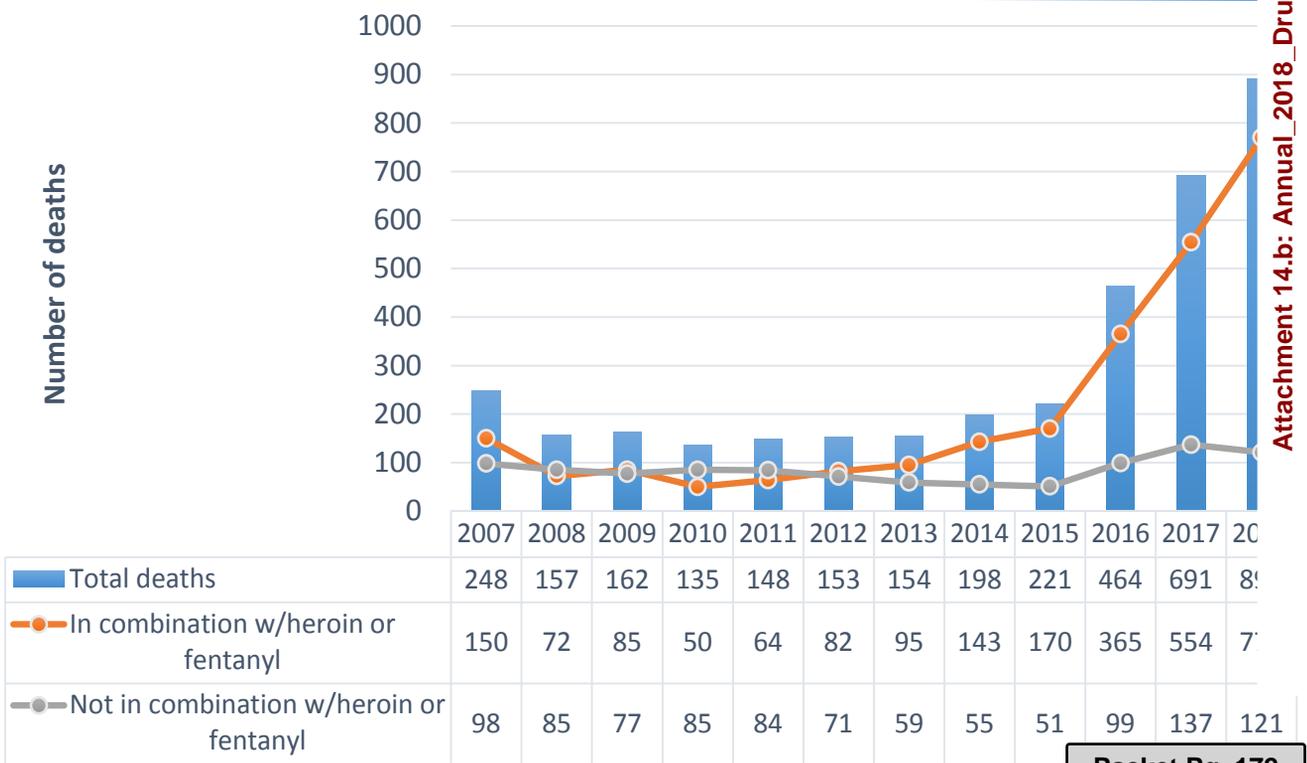


Figure 43. Number of Benzodiazepine-Related Intoxication Deaths Involving Heroin or Fentanyl, 2007-2018.

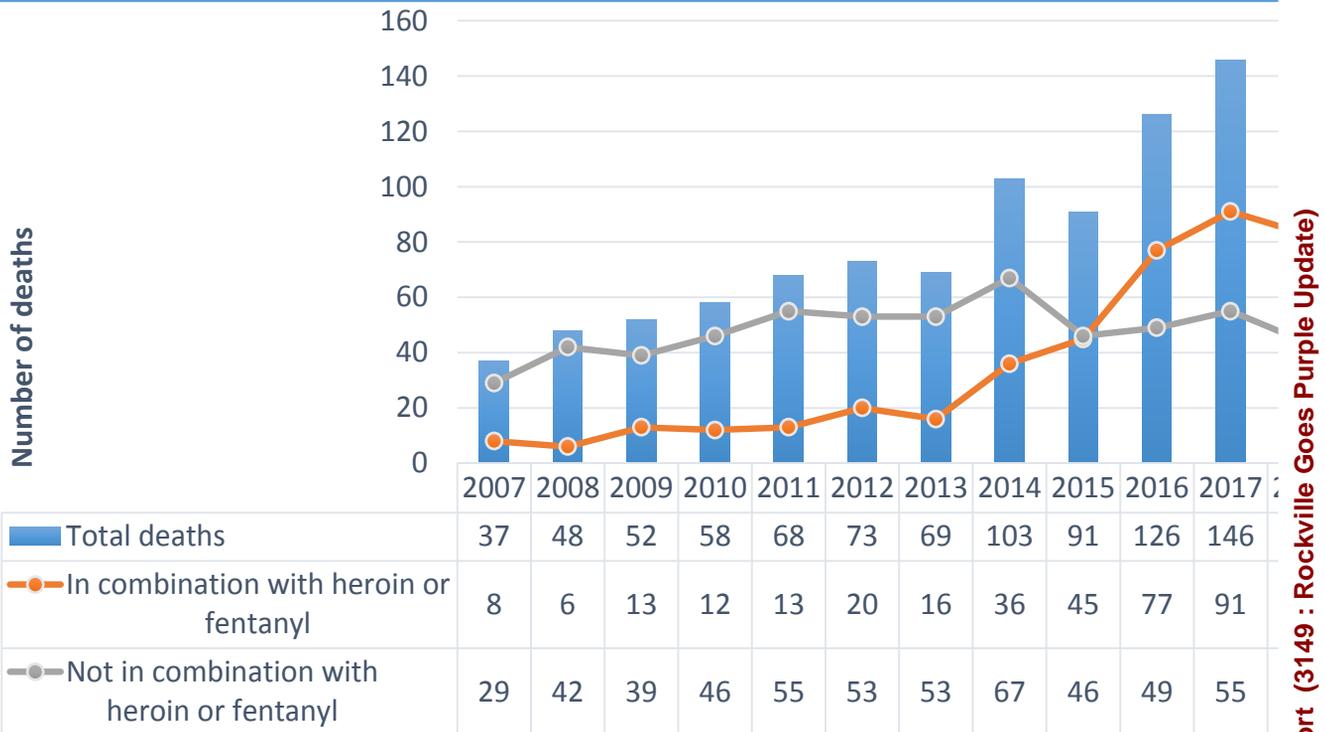
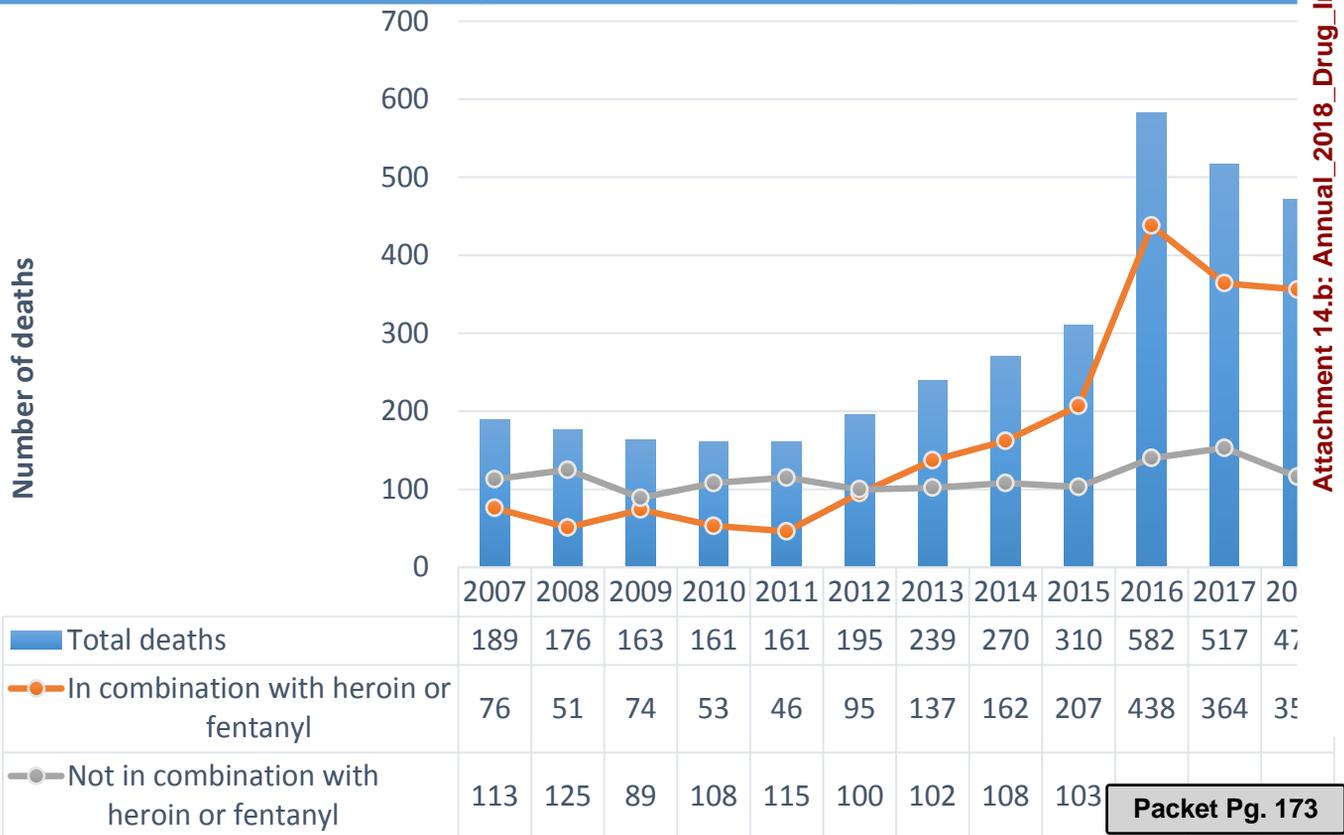


Figure 44. Number of Alcohol-Related Intoxication Deaths Involving Heroin or Fentanyl, 2007-2018.

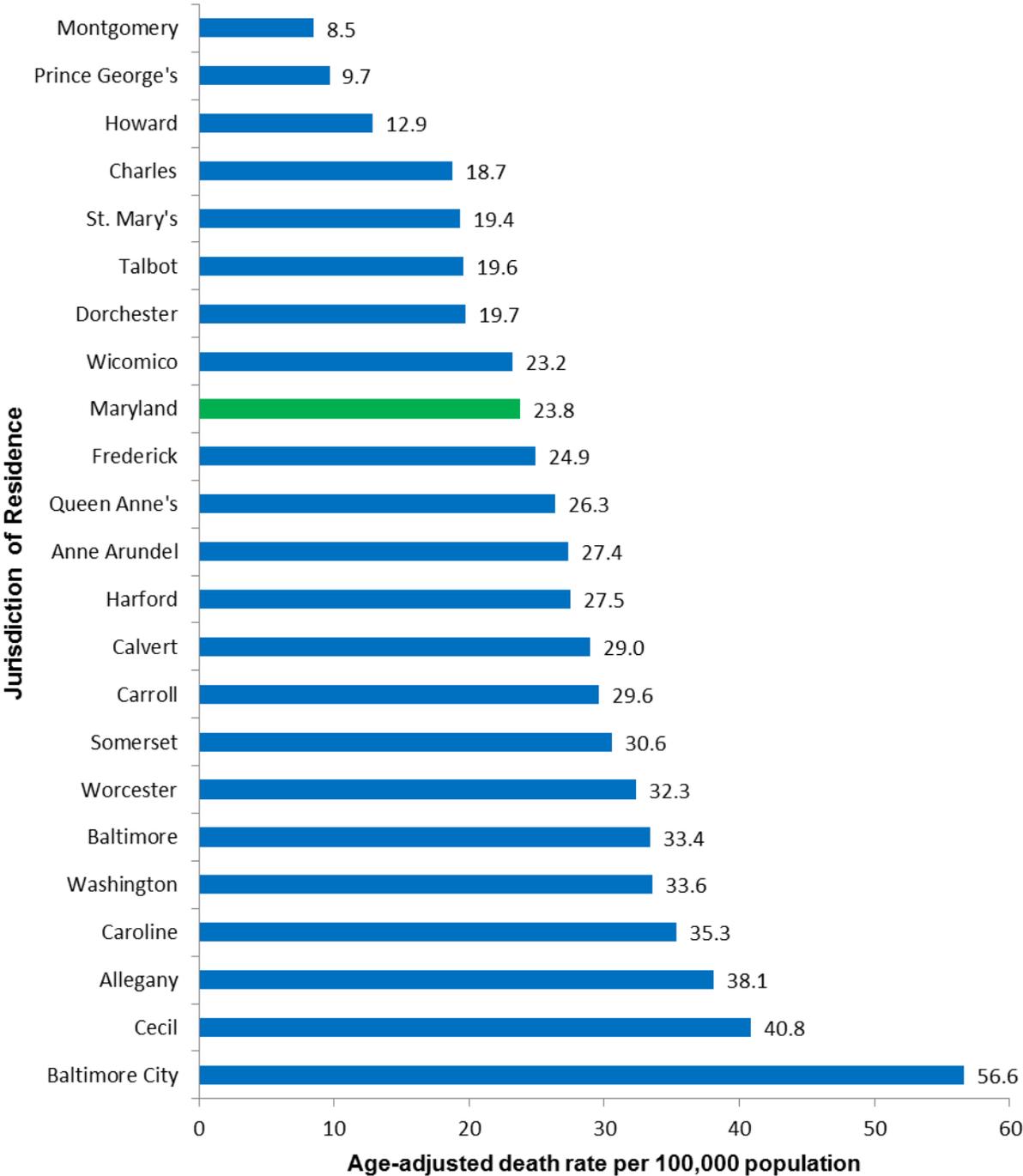


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Figure 45. Combinations of Substances Related to Unintentional Drug- and Alcohol-Related Intoxication Deaths, Maryland, 2018.

		Number	Percent
Fentanyl			
	Total	1888	
	In combination		
	With cocaine	737	39.0
	With heroin	718	38.0
	With alcohol	339	18.0
	With prescription opioids	222	11.8
	With benzodiazepines	71	3.8
Cocaine			
	Total	891	
	In combination		
	With fentanyl	727	81.6
	With heroin	324	36.4
	With alcohol	134	15.0
	With prescription opioids	109	12.2
	With benzodiazepines	32	3.6
Heroin			
	Total	830	
	In combination		
	With fentanyl	718	86.5
	With cocaine	324	39.0
	With prescription opioids	128	15.4
	With alcohol	110	13.3
	With benzodiazepines	47	5.7
Alcohol			
	Total	472	
	In combination		
	With fentanyl	339	71.8
	With cocaine	134	28.4
	With heroin	110	23.3
	With prescription opioids	50	10.6
	With benzodiazepines	21	4.4
Prescription opioids			
	Total	379	
	In combination		
	With fentanyl	222	58.6
	With heroin	128	33.8
	With cocaine	109	28.8
	With benzodiazepines	56	14.8
	With alcohol	50	13.2
Benzodiazepines			
	Total	127	
	In combination		
	With fentanyl	71	55.9
	With prescription opioids	56	44.1
	With heroin	47	37.0
	With cocaine	32	25.2
	With alcohol	21	16.5

Figure 46. Age-Adjusted Mortality Rates^{1,2} for Total Unintentional Intoxication Deaths by Place of Residence,³ Maryland, 2013-2017.



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¹Age-adjusted to the 2000 U.S. standard population by the direct method.

²Since age-adjusted rates based on fewer than 20 deaths are considered unreliable, rates are only shown for jurisdictions with 20 or more intoxication deaths over the five-year period.

³Rates are based on place of residence, not place of occurrence.

TABLES

TABLE 1. TOTAL NUMBER OF DRUG AND ALCOHOL-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	TOTAL INTOXICATION DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	815	694	731	649	671	799	858	1,041	1,259	2,089	2,282	2,406	14,294
NORTHWEST AREA	54	53	53	58	65	67	86	96	131	214	183	211	1,271
GARRETT	1	3	3	3	2	0	6	2	5	1	8	3	37
ALLEGANY	14	9	9	15	12	14	15	12	22	59	38	39	258
WASHINGTON	16	26	18	20	21	27	28	40	64	66	59	91	476
FREDERICK	23	15	23	20	30	26	37	42	40	88	78	78	500
BALTIMORE METRO AREA	550	443	479	411	420	519	557	678	841	1,402	1,549	1,731	9,580
BALTIMORE CITY	287	184	239	172	167	225	246	305	393	694	761	888	4,561
BALTIMORE COUNTY	131	118	106	115	107	119	144	170	220	336	367	388	2,321
ANNE ARUNDEL	71	70	63	56	79	83	78	101	112	195	214	241	1,363
CARROLL	14	17	22	15	8	29	24	38	40	47	55	72	381
HOWARD	16	19	16	10	21	24	29	21	26	46	51	41	320
HARFORD	31	35	33	43	38	39	36	43	50	84	101	101	634
NATIONAL CAPITAL AREA	109	104	103	81	86	104	111	128	140	231	283	216	1,696
MONTGOMERY	56	46	44	38	44	48	52	65	70	102	116	89	770
PRINCE GEORGE'S	53	58	59	43	42	56	59	63	70	129	167	127	926
SOUTHERN AREA	33	36	34	31	31	37	25	47	59	88	103	86	610
CALVERT	14	9	14	6	12	12	6	17	20	28	32	28	198
CHARLES	13	16	11	13	11	13	9	21	22	45	37	27	238
ST MARY'S	6	11	9	12	8	12	10	9	17	15	34	31	174
EASTERN SHORE AREA	69	58	62	68	69	72	79	92	88	154	164	162	1,137
CECIL	25	10	24	24	28	25	26	29	32	30	59	59	371
KENT	3	4	2	5	2	0	4	6	3	6	5	2	42
QUEEN ANNE'S	4	5	4	4	5	2	8	10	4	8	8	17	79
CAROLINE	1	4	2	2	11	4	2	7	3	10	11	7	64
TALBOT	5	4	3	3	1	5	7	4	5	10	11	10	68
DORCHESTER	4	5	2	6	2	5	5	0	1	6	12	7	55
WICOMICO	9	13	12	13	11	21	17	20	18	48	35	36	253
SOMERSET	6	3	4	1	3	3	4	3	6	8	4	8	53
WORCESTER	12	10	9	10	6	7	6	13	16	28	19	16	152

¹ Includes deaths that were the result of recent ingestion or exposure to alcohol or another type of drug, including heroin, cocaine, prescription opioids, benzodiazepines, and other prescribed and unprescribed drugs.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

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TABLE 2. TOTAL NUMBER OF OPIOID-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	OPIOID-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	628	523	570	504	529	648	729	888	1,089	1,856	2,009	2,143	12,116
NORTHWEST AREA	35	37	41	37	53	53	74	81	118	198	157	189	1,073
GARRETT	0	2	3	1	1	0	4	2	4	0	4	3	24
ALLEGANY	12	7	6	11	8	10	11	11	20	55	36	33	220
WASHINGTON	11	21	14	13	16	20	26	34	57	63	51	83	409
FREDERICK	12	7	18	12	28	23	33	34	37	80	66	70	420
BALTIMORE METRO AREA	455	362	382	337	341	437	485	591	742	1,262	1,404	1,578	8,376
BALTIMORE CITY	256	154	199	139	142	189	212	275	354	628	692	814	4,054
BALTIMORE COUNTY	95	92	83	95	93	104	125	146	195	305	323	352	2,008
ANNE ARUNDEL	54	57	45	44	53	68	67	85	89	169	198	218	1,147
CARROLL	12	15	16	12	7	27	21	29	34	44	51	68	336
HOWARD	14	13	11	9	18	17	26	18	25	40	47	36	274
HARFORD	24	31	28	38	28	32	34	38	45	76	93	90	557
NATIONAL CAPITAL AREA	62	62	69	52	52	66	78	101	104	190	215	158	1,209
MONTGOMERY	35	29	31	25	28	36	40	53	59	84	91	64	575
PRINCE GEORGE'S	27	33	38	27	24	30	38	48	45	106	124	94	634
SOUTHERN AREA	23	24	28	23	26	32	24	40	48	74	94	71	507
CALVERT	12	6	11	4	10	11	5	16	19	25	27	25	171
CHARLES	8	9	10	9	10	12	9	16	17	36	34	19	189
ST MARY'S	3	9	7	10	6	9	10	8	12	13	33	27	147
EASTERN SHORE AREA	53	38	50	55	57	60	68	75	77	132	139	147	951
CECIL	23	9	21	21	24	22	22	25	26	28	57	58	336
KENT	2	4	2	3	1	0	4	3	3	4	4	2	32
QUEEN ANNE'S	4	2	3	4	4	2	7	9	4	6	6	16	67
CAROLINE	0	2	1	2	8	4	2	7	3	9	8	7	53
TALBOT	3	3	2	2	1	3	6	4	5	10	8	10	57
DORCHESTER	2	3	1	6	2	5	5	0	1	5	10	6	46
WICOMICO	6	7	10	10	10	17	14	15	17	44	28	30	208
SOMERSET	5	3	2	1	3	2	4	2	4	6	3	8	43
WORCESTER	8	5	8	6	4	5	4	10	14	20	15	10	109

¹ Includes deaths confirmed or suspected to be related to recent ingestion of opioids.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

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TABLE 3. TOTAL NUMBER OF HEROIN-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	HEROIN-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	399	289	360	238	247	392	464	578	748	1,212	1,078	830	6,835
NORTHWEST AREA	16	21	23	15	23	27	40	53	80	119	72	68	557
GARRETT	0	0	1	0	1	0	2	1	3	0	1	1	10
ALLEGANY	3	4	2	3	3	6	3	5	13	34	14	15	105
WASHINGTON	5	13	11	6	8	11	14	21	38	39	22	29	217
FREDERICK	8	4	9	6	11	10	21	26	26	46	35	23	225
BALTIMORE METRO AREA	323	203	264	171	165	272	319	379	519	858	772	572	4,817
BALTIMORE CITY	200	107	151	93	76	131	150	192	260	454	380	286	2,480
BALTIMORE COUNTY	56	51	53	42	38	64	76	86	134	208	170	119	1,097
ANNE ARUNDEL	38	24	31	18	24	38	41	53	60	105	118	75	625
CARROLL	9	5	7	3	2	13	14	16	22	25	28	34	178
HOWARD	8	8	7	3	10	12	16	9	16	24	23	15	151
HARFORD	12	8	15	12	15	14	22	23	27	42	53	43	286
NATIONAL CAPITAL AREA	37	38	42	26	23	42	53	65	69	115	104	78	692
MONTGOMERY	17	14	16	12	11	22	28	33	37	48	52	34	324
PRINCE GEORGE'S	20	24	26	14	12	20	25	32	32	67	52	44	368
SOUTHERN AREA	8	11	10	11	15	18	13	28	29	48	45	31	267
CALVERT	5	3	7	1	5	6	2	13	15	17	17	8	99
CHARLES	2	5	3	6	6	5	5	10	8	22	16	11	99
ST MARY'S	1	3	0	4	4	7	6	5	6	9	12	12	69
EASTERN SHORE AREA	15	16	21	15	21	33	39	53	51	72	85	81	502
CECIL	8	4	12	4	8	11	11	15	16	19	37	40	185
KENT	1	1	0	0	1	0	0	2	1	1	1	0	8
QUEEN ANNE'S	0	1	3	2	2	2	5	7	1	4	5	8	40
CAROLINE	0	0	0	0	3	3	2	6	2	6	4	3	29
TALBOT	1	2	0	0	1	2	2	4	3	4	3	4	26
DORCHESTER	1	2	0	2	1	3	3	0	1	3	4	3	23
WICOMICO	1	3	3	5	3	9	11	12	13	21	20	12	113
SOMERSET	2	1	1	0	1	2	1	1	3	3	2	5	22
WORCESTER	1	2	2	2	1	1	4	6	11	11	9	6	56

¹ Includes deaths confirmed or suspected to be related to recent heroin use.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

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TABLE 4. TOTAL NUMBER OF PRESCRIPTION OPIOID-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	PRESCRIPTION OPIOID-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	302	280	251	311	342	311	316	330	351	418	413	379	4,004
NORTHWEST AREA	22	21	21	22	38	30	35	33	39	56	35	34	386
GARRETT	0	2	2	1	1	0	2	2	1	0	1	1	13
ALLEGANY	9	5	6	8	5	5	8	6	6	15	9	5	87
WASHINGTON	7	10	4	7	11	9	11	16	20	23	8	19	145
FREDERICK	6	4	9	6	21	16	14	9	12	18	17	9	141
BALTIMORE METRO AREA	190	189	148	197	212	196	207	217	233	265	298	272	2,624
BALTIMORE CITY	95	60	63	61	82	74	86	84	105	113	123	128	1,074
BALTIMORE COUNTY	48	51	37	60	68	47	54	59	62	67	87	71	711
ANNE ARUNDEL	22	36	20	31	33	33	28	32	27	48	43	36	389
CARROLL	4	11	10	9	5	17	12	15	14	15	13	16	141
HOWARD	6	6	4	6	9	5	13	7	9	6	13	2	86
HARFORD	15	25	14	30	15	20	14	20	16	16	19	19	223
NATIONAL CAPITAL AREA	28	29	32	31	35	29	30	35	36	42	33	27	387
MONTGOMERY	20	17	19	14	20	18	16	19	23	26	19	16	227
PRINCE GEORGE'S	8	12	13	17	15	11	14	16	13	16	14	11	160
SOUTHERN AREA	17	16	18	16	15	18	12	19	19	25	26	22	223
CALVERT	8	3	4	3	7	6	3	7	6	11	5	6	69
CHARLES	6	6	7	4	5	7	5	9	8	10	11	8	86
ST MARY'S	3	7	7	9	3	5	4	3	5	4	10	8	68
EASTERN SHORE AREA	45	25	32	45	42	38	32	26	24	30	21	24	384
CECIL	19	6	10	20	20	18	12	12	10	8	8	5	148
KENT	2	3	2	3	1	0	4	2	2	0	2	0	21
QUEEN ANNE'S	4	1	1	2	2	0	3	3	3	2	2	4	27
CAROLINE	0	2	1	2	5	1	0	1	0	4	1	1	18
TALBOT	2	1	2	2	0	1	4	0	2	3	4	2	23
DORCHESTER	2	1	1	4	1	3	3	0	0	2	2	2	21
WICOMICO	5	4	8	7	7	9	4	3	5	7	0	5	64
SOMERSET	4	3	1	1	3	2	2	1	1	0	1	2	21
WORCESTER	7	4	6	4	3	4	0	4	1	4	1	3	41

¹ Includes deaths confirmed or suspected to be related to recent ingestion of one or more prescription opioids.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

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TABLE 5. TOTAL NUMBER OF OXYCODONE-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	OXYCODONE-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	63	72	82	113	118	99	86	120	104	157	122	103	1,239
NORTHWEST AREA	4	7	9	7	11	13	12	10	11	25	16	13	138
GARRETT	0	1	0	0	0	0	1	0	0	0	0	0	2
ALLEGANY	3	0	1	2	0	2	3	3	2	7	3	2	28
WASHINGTON	0	4	3	2	5	2	5	5	6	11	2	7	52
FREDERICK	1	2	5	3	6	9	3	2	3	7	11	4	56
BALTIMORE METRO AREA	31	44	34	59	63	51	44	69	56	77	73	67	668
BALTIMORE CITY	7	6	10	5	15	15	11	20	18	22	23	21	173
BALTIMORE COUNTY	8	14	14	21	22	12	14	22	16	22	21	20	206
ANNE ARUNDEL	5	9	4	9	14	11	9	10	12	23	15	15	136
CARROLL	2	3	3	6	3	6	3	4	3	3	4	7	47
HOWARD	3	2	0	4	2	2	4	4	4	2	5	0	32
HARFORD	6	10	3	14	7	5	3	9	3	5	5	4	74
NATIONAL CAPITAL AREA	10	10	14	15	14	11	13	17	16	25	13	7	165
MONTGOMERY	7	8	10	7	9	8	7	11	8	16	8	4	103
PRINCE GEORGE'S	3	2	4	8	5	3	6	6	8	9	5	3	62
SOUTHERN AREA	9	7	11	7	10	10	6	11	13	13	14	10	121
CALVERT	3	1	2	2	4	5	3	3	3	7	3	1	37
CHARLES	5	3	4	2	4	3	1	5	8	4	7	5	51
ST MARY'S	1	3	5	3	2	2	2	3	2	2	4	4	33
EASTERN SHORE AREA	9	4	14	25	20	14	11	13	8	17	6	6	147
CECIL	3	0	3	13	9	4	6	6	3	2	2	0	51
KENT	0	0	1	2	0	0	1	0	1	0	0	0	5
QUEEN ANNE'S	1	0	1	1	1	0	1	1	2	1	0	1	10
CAROLINE	0	0	1	1	0	0	0	0	0	3	0	1	6
TALBOT	0	0	0	1	0	1	1	0	0	2	2	0	7
DORCHESTER	1	0	0	2	1	1	0	0	0	2	1	1	9
WICOMICO	1	2	4	2	5	5	1	2	1	5	0	2	30
SOMERSET	0	0	1	1	2	1	1	1	0	0	0	1	8
WORCESTER	3	2	3	2	2	2	0	3	1	2	1	0	21

¹ Includes deaths confirmed or suspected to be related to recent ingestion of oxycodone.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

TABLE 6: TOTAL NUMBER OF METHADONE-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	METHADONE-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	210	163	135	173	172	170	138	152	183	197	246	196	2,135
NORTHWEST AREA	15	9	7	8	14	14	8	20	14	12	11	14	146
GARRETT	0	0	1	1	0	0	1	1	0	0	0	0	4
ALLEGANY	3	4	2	3	4	1	1	3	2	4	3	2	32
WASHINGTON	6	4	0	3	5	4	3	10	6	5	4	10	60
FREDERICK	6	1	4	1	5	9	3	6	6	3	4	2	50
BALTIMORE METRO AREA	141	118	97	128	128	122	110	112	145	158	198	155	1,612
BALTIMORE CITY	80	47	50	53	65	54	57	54	78	82	87	85	792
BALTIMORE COUNTY	34	29	18	37	32	28	29	31	34	36	63	37	408
ANNE ARUNDEL	15	19	13	17	17	15	6	14	9	21	23	12	181
CARROLL	1	7	4	2	2	12	7	5	9	9	6	6	70
HOWARD	2	1	4	2	5	1	5	2	5	2	8	1	38
HARFORD	9	15	8	17	7	12	6	6	10	8	11	14	123
NATIONAL CAPITAL AREA	11	16	12	12	13	13	7	6	9	13	14	7	133
MONTGOMERY	8	8	7	5	6	7	3	5	6	7	6	4	72
PRINCE GEORGE'S	3	8	5	7	7	6	4	1	3	6	8	3	61
SOUTHERN AREA	9	7	7	7	3	5	2	7	6	6	9	7	75
CALVERT	5	0	2	1	2	2	0	2	3	2	3	4	26
CHARLES	2	4	2	1	0	1	1	4	2	2	3	2	24
ST MARY'S	2	3	3	5	1	2	1	1	1	2	3	1	25
EASTERN SHORE AREA	34	13	12	18	14	16	11	7	9	8	14	13	169
CECIL	16	3	6	9	9	10	4	4	3	3	4	5	76
KENT	2	2	1	2	1	0	2	1	1	0	2	0	14
QUEEN ANNE'S	2	1	1	1	1	0	1	0	1	1	2	3	14
CAROLINE	0	0	0	1	1	1	0	1	0	2	1	0	7
TALBOT	2	0	2	1	0	1	2	0	1	1	2	1	13
DORCHESTER	1	1	0	0	0	1	0	0	0	0	2	1	6
WICOMICO	3	2	1	3	1	1	2	0	2	0	0	1	16
SOMERSET	3	2	0	0	1	0	0	0	1	0	1	0	8
WORCESTER	5	2	1	1	0	2	0	1	0	1	0	2	15

¹ Includes deaths confirmed or suspected to be related to recent ingestion of methadone.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

TABLE 7: TOTAL NUMBER OF FENTANYL-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	FENTANYL-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	26	25	27	39	26	29	58	186	340	1,119	1,594	1,888	5,357
NORTHWEST AREA	3	1	1	6	6	3	7	8	32	109	119	166	461
GARRETT	0	1	0	0	1	0	0	0	2	0	2	2	8
ALLEGANY	3	0	1	2	1	1	1	1	5	29	29	29	102
WASHINGTON	0	0	0	2	1	1	4	1	14	31	39	70	163
FREDERICK	0	0	0	2	3	1	2	6	11	49	49	65	188
BALTIMORE METRO AREA	14	19	16	20	10	16	35	142	248	792	1,118	1,415	3,845
BALTIMORE CITY	3	2	4	4	2	4	12	72	120	419	573	758	1,973
BALTIMORE COUNTY	6	9	9	6	4	5	11	36	65	182	244	308	885
ANNE ARUNDEL	3	5	3	5	2	3	6	23	29	98	152	184	513
CARROLL	0	2	0	2	0	1	2	4	11	20	40	55	137
HOWARD	1	0	0	0	0	2	3	5	7	27	36	34	115
HARFORD	1	1	0	3	2	1	1	2	16	46	73	76	222
NATIONAL CAPITAL AREA	3	0	3	3	0	3	6	15	32	101	175	115	456
MONTGOMERY	2	0	1	1	0	2	0	8	17	43	72	40	186
PRINCE GEORGE'S	1	0	2	2	0	1	6	7	15	58	103	75	270
SOUTHERN AREA	0	1	2	1	3	1	4	9	9	32	74	60	196
CALVERT	0	1	1	0	1	0	0	5	2	11	22	23	66
CHARLES	0	0	0	0	1	1	3	1	4	17	26	14	67
ST MARY'S	0	0	1	1	1	0	1	3	3	4	26	23	63
EASTERN SHORE AREA	6	4	5	9	7	6	6	12	19	85	108	132	399
CECIL	2	1	0	2	2	0	0	1	7	9	44	52	120
KENT	0	0	0	0	0	0	0	1	0	3	3	2	9
QUEEN ANNE'S	1	0	0	0	0	0	1	1	0	4	5	16	28
CAROLINE	0	0	0	1	4	0	0	0	1	3	7	6	22
TALBOT	1	1	0	1	0	1	0	2	2	7	3	10	28
DORCHESTER	0	0	0	2	0	0	2	0	1	3	7	4	19
WICOMICO	1	1	3	1	1	4	1	7	1	34	24	24	102
SOMERSET	1	1	0	1	0	0	2	0	1	6	3	8	23
WORCESTER	0	0	2	1	0	1	0	0	6	16	12	10	48

¹ Includes deaths confirmed or suspected to be related to recent ingestion or exposure to pharmaceutical or nonpharmaceutical fentanyl.

² Includes only deaths for which the manner of death was classified as accidental or undetermined.

TABLE 8: TOTAL NUMBER OF COCAINE-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	COCAINE-RELATED DEATHS												TOTAL
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	
MARYLAND	248	157	162	135	148	153	154	198	221	464	691	891	3,622
NORTHWEST AREA	9	4	4	8	10	9	13	16	20	27	43	67	230
GARRETT	0	0	0	1	0	0	0	0	1	0	1	0	3
ALLEGANY	2	1	1	1	0	2	2	2	5	9	13	12	50
WASHINGTON	3	1	0	3	3	5	6	6	10	9	10	31	87
FREDERICK	4	2	3	3	7	2	5	8	4	9	19	24	90
BALTIMORE METRO AREA	178	108	124	93	97	108	102	138	167	348	522	693	2,678
BALTIMORE CITY	106	57	72	45	48	59	47	82	93	202	285	388	1,484
BALTIMORE COUNTY	30	25	25	23	19	17	27	28	38	80	123	132	567
ANNE ARUNDEL	26	18	15	13	18	13	12	19	19	31	66	91	341
CARROLL	2	2	3	6	3	7	7	2	6	8	14	23	83
HOWARD	6	1	4	1	5	7	5	3	6	7	16	19	80
HARFORD	8	5	5	5	4	5	4	4	5	20	18	40	123
NATIONAL CAPITAL AREA	35	26	18	16	24	22	25	29	16	44	62	49	366
MONTGOMERY	20	12	7	4	12	12	13	10	5	11	17	18	141
PRINCE GEORGE'S	15	14	11	12	12	10	12	19	11	33	45	31	225
SOUTHERN AREA	5	6	4	7	3	6	1	3	6	8	19	33	101
CALVERT	1	2	1	3	2	3	0	2	0	2	3	3	22
CHARLES	3	3	2	2	1	1	0	0	2	4	10	13	41
ST MARY'S	1	1	1	2	0	2	1	1	4	2	6	17	38
EASTERN SHORE AREA	21	13	12	11	14	8	13	12	12	37	45	49	247
CECIL	5	3	4	3	7	2	5	4	3	3	15	14	68
KENT	1	2	0	1	0	0	0	1	1	0	1	1	8
QUEEN ANNE'S	3	0	2	0	1	0	0	0	0	1	2	5	14
CAROLINE	0	0	1	0	1	1	0	1	0	5	2	1	12
TALBOT	4	0	1	0	0	0	3	0	1	2	2	3	16
DORCHESTER	1	1	0	1	1	1	1	0	0	1	7	2	16
WICOMICO	2	5	2	3	3	4	3	4	7	13	7	13	66
SOMERSET	1	0	1	1	0	0	0	0	0	4	2	6	15
WORCESTER	4	2	1	2	1	0	1	2	0	8	7	4	32

¹ Includes deaths confirmed or suspected to be related to recent use of cocaine.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

TABLE 9: TOTAL NUMBER OF BENZODIAZEPINE-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	BENZODIAZEPINE-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	37	48	52	58	68	73	69	103	91	126	146	127	998
NORTHWEST AREA	3	3	7	6	9	5	6	13	8	21	19	10	100
GARRETT	0	0	1	0	0	0	1	0	1	0	2	0	5
ALLEGANY	1	0	1	3	1	0	1	3	1	6	5	1	23
WASHINGTON	1	2	2	2	4	3	2	5	3	6	2	4	36
FREDERICK	1	1	3	1	4	2	2	5	3	9	10	5	46
BALTIMORE METRO AREA	22	29	29	43	39	49	44	66	56	78	98	90	553
BALTIMORE CITY	7	2	10	12	9	15	14	22	15	24	28	28	186
BALTIMORE COUNTY	12	7	8	18	9	12	16	24	18	29	25	32	210
ANNE ARUNDEL	1	8	4	6	14	11	3	9	11	9	27	16	119
CARROLL	0	4	3	3	0	1	3	3	4	1	4	4	30
HOWARD	1	2	2	2	4	2	5	0	6	8	5	1	38
HARFORD	1	6	2	2	3	8	3	8	2	7	9	9	60
NATIONAL CAPITAL AREA	4	9	6	4	9	6	7	12	8	12	15	15	92
MONTGOMERY	1	5	4	4	6	4	4	10	7	7	8	9	69
PRINCE GEORGE'S	3	4	2	0	3	2	3	2	1	5	7	6	38
SOUTHERN AREA	3	5	2	2	2	4	4	6	7	7	8	4	50
CALVERT	1	1	1	1	1	1	1	3	1	1	2	2	16
CHARLES	1	3	1	0	0	2	1	2	4	4	4	1	23
ST MARY'S	1	1	0	1	1	1	2	1	2	2	2	1	15
EASTERN SHORE AREA	5	2	8	3	9	9	8	6	12	8	6	8	76
CECIL	4	0	3	2	6	7	3	3	5	2	1	2	38
KENT	0	0	0	0	0	0	0	0	0	1	2	0	3
QUEEN ANNE'S	0	0	0	1	1	0	0	0	1	1	0	3	7
CAROLINE	0	0	0	0	0	0	0	0	0	0	1	0	1
TALBOT	0	1	0	0	0	0	3	0	1	1	1	0	7
DORCHESTER	0	0	1	0	0	1	1	0	0	1	0	0	4
WICOMICO	0	0	0	0	1	0	0	1	2	1	0	1	6
SOMERSET	1	0	1	0	0	1	1	0	0	0	0	0	4
WORCESTER	0	1	3	0	1	0	0	2	3	1	1	2	14

¹ Includes deaths confirmed or suspected to be related to recent ingestion of a benzodiazepine or related drug with sedative effects.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

TABLE 10: TOTAL NUMBER OF METHAMPHETAMINE-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	METHAMPHETAMINE-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	1	1	0	0	0	2	6	3	10	18	28	32	101
NORTHWEST AREA	0	0	0	0	0	1	1	0	1	2	5	6	16
GARRETT	0	0	0	0	0	0	0	0	0	0	2	1	3
ALLEGANY	0	0	0	0	0	0	1	0	0	1	0	2	4
WASHINGTON	0	0	0	0	0	0	0	0	1	1	1	3	6
FREDERICK	0	0	0	0	0	1	0	0	0	0	2	0	3
BALTIMORE METRO AREA	0	1	0	0	0	1	3	1	4	12	12	13	47
BALTIMORE CITY	0	0	0	0	0	1	2	1	1	8	5	5	23
BALTIMORE COUNTY	0	0	0	0	0	0	1	0	0	1	1	4	7
ANNE ARUNDEL	0	0	0	0	0	0	0	0	0	0	2	2	4
CARROLL	0	0	0	0	0	0	0	0	1	0	1	1	3
HOWARD	0	0	0	0	0	0	0	0	2	2	1	1	6
HARFORD	0	1	0	0	0	0	0	0	0	1	2	0	4
NATIONAL CAPITAL AREA	0	0	0	0	0	0	2	0	4	3	4	4	17
MONTGOMERY	0	0	0	0	0	0	0	0	0	1	2	1	4
PRINCE GEORGE'S	0	0	0	0	0	0	2	0	4	2	2	3	13
SOUTHERN AREA	1	0	0	0	0	0	0	0	1	1	3	1	7
CALVERT	0	0	0	0	0	0	0	0	0	0	1	1	2
CHARLES	1	0	0	0	0	0	0	0	1	1	2	0	5
EASTERN SHORE AREA	0	0	0	0	0	0	0	2	0	0	4	8	14
CECIL	0	0	0	0	0	0	0	0	0	0	4	6	10
CAROLINE	0	0	0	0	0	0	0	1	0	0	0	0	1
WICOMICO	0	0	0	0	0	0	0	1	0	0	0	1	2
WORCESTER	0	0	0	0	0	0	0	0	0	0	0	1	1

¹ Includes deaths confirmed or suspected to be related to recent ingestion of methamphetamine.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.

Attachment 14.b: Annual_2018_Drug_Intox_Report (3149 : Rockville Goes Purple Update)

TABLE 11: TOTAL NUMBER OF ALCOHOL-RELATED INTOXICATION DEATHS BY PLACE OF OCCURRENCE, 2007-2018.^{1,2}

REGION AND POLITICAL SUBDIVISION	ALCOHOL-RELATED DEATHS												
	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016	2017	2018	TOTAL
MARYLAND	189	176	163	161	161	195	239	270	310	582	517	472	3,435
NORTHWEST AREA	14	19	16	15	16	12	21	27	30	47	31	0	282
GARRETT	1	2	1	1	1	0	2	1	1	1	2	1	14
ALLEGANY	5	0	3	4	2	4	2	3	6	14	4	7	54
WASHINGTON	3	10	4	5	4	3	6	11	10	17	14	15	102
FREDERICK	5	7	8	5	9	5	11	12	13	15	11	11	112
BALTIMORE METRO AREA	114	96	100	94	99	126	154	166	215	403	334	0	2,240
BALTIMORE CITY	56	41	54	39	44	71	86	86	114	222	198	187	1,198
BALTIMORE COUNTY	38	23	22	29	22	24	32	39	52	81	71	80	513
ANNE ARUNDEL	12	12	9	10	21	15	22	18	27	56	37	44	283
CARROLL	3	4	5	4	4	4	4	9	6	12	9	10	74
HOWARD	2	7	5	3	4	6	6	6	5	14	7	5	70
HARFORD	3	9	5	9	4	6	4	8	11	18	12	13	102
NATIONAL CAPITAL AREA	38	34	23	27	28	38	35	36	32	67	86	0	495
MONTGOMERY	17	15	9	10	16	15	13	18	15	22	35	19	204
PRINCE GEORGE'S	21	19	14	17	12	23	22	18	17	45	51	32	291
SOUTHERN AREA	10	9	8	6	7	7	7	12	11	22	24	0	140
CALVERT	3	3	4	0	2	2	1	4	3	7	4	9	42
CHARLES	5	5	1	4	3	2	4	5	4	12	9	3	57
ST MARY'S	2	1	3	2	2	3	2	3	4	3	11	5	41
EASTERN SHORE AREA	13	18	16	19	11	12	22	29	22	43	42	0	278
CECIL	5	4	7	6	3	6	9	5	8	8	12	10	83
KENT	0	0	0	1	0	0	1	1	0	1	1	0	5
QUEEN ANNE'S	1	2	0	1	3	0	1	7	0	2	4	3	24
CAROLINE	1	0	1	0	1	0	1	2	0	5	4	1	16
TALBOT	0	3	0	0	0	2	2	0	0	0	5	4	16
DORCHESTER	2	0	0	1	0	1	0	0	1	1	2	1	9
WICOMICO	1	6	3	4	2	2	6	7	3	12	9	8	63
SOMERSET	0	0	1	0	1	1	1	2	2	3	1	0	12
WORCESTER	3	3	4	6	1	0	1	5	8	11	4	4	50

¹ Includes deaths confirmed or suspected to be related to recent ingestion of alcohol.
² Includes only deaths for which the manner of death was classified as accidental or undetermined.



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Discussion and Possible Approval
 Department: City Manager's Office
 Responsible Staff: Linda Moran

Subject

2021 Maryland Municipal League Legislative Action Requests

Recommendation

Discuss and approve three recommended Maryland Municipal League (MML) 2021 Legislative Action Requests (LARs) and two additional State advocacy issues.

Discussion

Consideration of proposed Maryland Municipal League (MML) Legislative Action Requests (LAR) is the first step in the Mayor and Council's development of Rockville's comprehensive 2021 State legislative program. MML has invited the membership to submit LARs by July 24, 2020 to be considered for inclusion in the League's priority program for the 2021 General Assembly Session.

LARs are issues that are resolved through State legislation and have broad impact to the MML membership. The League does not typically advocate for issues that impact a small number of municipalities and does not engage with State legislation introduced by local Delegations. As the lead entity with whom decision makers in Annapolis engage on State legislation affecting municipalities, MML focuses on high-profile issues with significant impact to its membership. Each municipality is limited to submitting three LARs to MML for consideration.

The MML LAR process is as follows:

- 1) Member municipalities submit LAR forms on issues they would like to have addressed in the upcoming General Assembly Session;
- 2) MML staff prepares background on each LAR for the Legislative Committee (LC) to consider, as well as priority issues that were not resolved in the previous session;
- 3) The LC meets in August/September and chooses up to four priority program issues to recommend to the membership; and
- 4) The MML membership votes on the recommended LC priorities at the Fall Conference in October.

Rockville-specific issues are discussed and approved by the Mayor and Council in the fall, after the MML priority program is adopted. In recent years, school construction funding and advocacy for the enhancement of senior programs and services are examples of items that are Rockville-specific that have been included in Rockville's State legislative program. In recent years, the Mayor and Council's comprehensive State legislative program has included MML adopted priorities and Rockville-specific initiatives.

Based on high priority issues of interest to the Mayor and Council in recent months and LAR input received from the governing body, staff recommends submitting three LARs and monitoring two additional policy items for inclusion in the City's legislative program in the fall.

Legislative Action Requests

1. Advocate for the Preservation and Full Restoration of Municipal Highway User Revenue (HUR)

Highway User Revenue is a critical State funding source for Maryland's municipalities. According to MML, municipalities use the funds for road repair, snow plowing, bicycle and walking path maintenance, sidewalk construction, crosswalk installation, equipment maintenance and intersection upgrades. The unprecedented COVID-19 pandemic brings much uncertainty to the State budget, including municipal HUR. The Board of Revenue Estimates in May projected that FY21 State revenue declines could be as high as \$2.6 billion.

The revised HUR Estimate from MDOT for FY21 equals \$2,499,928. The FY21 Adopted Budget for Rockville includes \$2,107,900 of HUR to account for expected decreases in State Transportation Trust Fund (TTF) revenue and possible State budget cuts. Staff is closely monitoring information coming out of MDOT and MML and will notify the Mayor and Council of any further changes.

The FY21 Proposed budget included a municipal HUR allocation at \$2.8 million. The FY20 Adopted HUR was \$2.7 million. Recently, MDOT wrote down Rockville's FY20 allocation to \$2,358,752.

According to the Maryland Department of Transportation (MDOT), sources of funds in the TTF include motor fuel taxes, vehicle excise (titling) taxes, motor vehicle fees (registrations, licenses, and other fees), and federal aid. During the pandemic, demand for automobiles declined due to State and County shutdown directives and increased use of telework to slow the spread of COVID-19. Despite the phased re-openings in recent weeks, telework has become the norm. The pre-pandemic demand for automobiles may not return in the foreseeable future.

During the Great Recession, the State cut municipal HUR by 96%. The US economy is in a recession due to the public health and financial impacts of COVID-19. It is essential that

Rockville and all Maryland municipalities work with MML to vigorously advocate for the preservation of HUR funding, and continue to push for the eventual, permanent restoration. A permanent solution is critical because it would provide a long-term, stable funding source for municipal transportation projects. Maryland municipalities have experienced reduced revenues and increased costs resulting from the pandemic. A large HUR budget cut from the State would be a devastating blow to municipal budgets.

2. Advocate for State Financial Support for Childcare Facilities

Staff recommends a LAR advocating for State funding for childcare providers who have been harmed financially due to COVID-19. A fully functioning quality childcare network statewide will be critical to adjusting to a new normal following the pandemic. It is one component of the State's economic recovery.

The Montgomery County Council recognized this need on June 16 with unanimous approval of a \$10 million special appropriation to provide re-opening expenses for licensed childcare center programs and registered family childcare homes. This funding includes eligibility for one month of expenses to support early care and education operations and includes compensation for significant financial losses caused by COVID-19 restrictions. According to the County Council staff report, although some providers received approval to deliver childcare to essential personnel, many providers did not. Among those that received approval, many providers did not actually serve children or deliver their pre-COVID-19 level of service. The County Council staff report noted that without public investment and support, licensed, quality childcare in Montgomery County is not sustainable under the current recovery requirements.

While this funding is an important step, additional funding from the State will help to ensure that providers succeed and families' care needs are met. Education and childcare are issues with which MML does not typically engage. MACo is the advocacy lead for education and related issues. Given the importance of childcare services to municipal economies and residents, MML could consider partnering with MACo on this effort during the 2021 Session.

Additionally, staff recommends in the 2021 Session that Rockville closely monitor discussions of any legislation or budgetary initiatives in support of childcare. Rockville could engage and advocate in support of initiatives that align with its position. Additionally, staff can explore what organizations statewide might be pursuing a similar initiative and identify any possible opportunities for collaboration.

3. Advocate to Protect Restaurants from Onerous Food Delivery Service Fees

Staff recommends a LAR submittal to MML for State legislation that would either:

- cap the fees statewide that food delivery services charge per transaction to 15% and require that 100% of the tips be forwarded directly to the drivers and restaurants during a Governor's emergency order that impacts the restaurant industry, or

- give municipalities the authority to regulate the fees when a Governor's emergency order is in place that impacts the restaurant industry.

Restaurants are a key aspect of Rockville's local economy and community fabric. Restaurant owners and their employees have been severely impacted by the pandemic. In the earlier stages of the pandemic, activities were limited to take out and delivery only. While outdoor dining and 50% indoor dining directives were recently instituted through Montgomery County's Phase II re-opening, it is likely that some customers will continue to use take out and delivery.

In June 2020, the Mayor and Council sent a letter to the major food delivery services providers in Maryland and asked them to limit their fees per transaction to 15% during the pandemic and require that 100% of the tips be forwarded directly to the drivers and restaurants. Other cities, such as San Francisco and Santa Cruz, California and Seattle, Washington, have ordered these companies to reduce their fees to 15% per transaction.

Given the importance of this issue, the Mayor and Council sent a letter to Governor Hogan asking that he require food delivery fees to be capped at 15% and that 100% of tips be forwarded to drivers and restaurants. The Mayor and Council also sent a letter to Montgomery County elected leaders asking that they regulate these providers, if authorized, or to make the same request of the food delivery services as Rockville.

It would be a boost to Rockville's advocacy efforts if MML were to accept the LAR as a League priority.

Additional Policy Areas to Monitor

The Mayor and Council will develop a comprehensive Rockville-specific legislative program for the 2021 session in the fall. Staff recommends monitoring activity on two key policy areas through the summer, in preparation for fall decision-making about the City's legislative program.

1. Improving Police Accountability and Oversight

Staff recommends in the 2021 Session that Rockville closely monitor State legislation focused on improving Police accountability and oversight. Specifically, State legislation is needed that would modify the Law Enforcement Offices Bill of Rights (LEOBR). Regarding advocacy for public safety legislation in the General Assembly, the Maryland Chiefs and Sheriffs Association typically takes the lead. MML monitors and engages in the advocacy in concert with the Maryland Chiefs and Sheriffs Association as needed. At any time, the Mayor and Council can directly engage and advocate in support of legislation recommended by MML or identified by the City as being in alignment with its position.

During the Mayor and Council's discussion of Rockville's Fair and Impartial Policing Strategies on June 22, Chief Brito shared that a critical component of reform is the amendment of the

LEOBR. The staff report noted “Enacted in 1974, the Maryland Public Safety Code, Title 3, Law Enforcement, Subtitle 1 – Law Enforcement Officers Bill of Rights, Sections 3-101 – 3-113, which specifically focuses on the disciplinary process for police officers, is of great concern to Police executives. A currently structured, the LEOBR grants police officers’ specific rights when they are investigated for misconduct, imposes significant impediments to conducting an adequate investigation, and takes responsibility for timely discipline away from police chiefs. Significantly, the LEOBR is a substantial barrier to transparency that precludes meaningful civilian oversight of the disciplinary process. Because of these flaws, a great many people have no faith that the officers who police our communities will be held accountable when they act improperly.”

Maryland lawmakers recently formed the Workgroup to Address Police Reform and Accountability in Maryland. According to the Maryland Department of Legislative Services, the workgroup’s activities include:

- Reviewing policies and procedures related to the investigation of Police misconduct, including Maryland’s LEOBR statute; and the use of body cameras and the disclosure of footage.
- Examining the viability of uniform statewide use-of-force policies and arrest procedures.
- Identification of national best practices of independent prosecution of law enforcement-related crimes.

Prior to the start of the 2021 legislative session, the Work Group will make its recommendations. The first meeting was held on June 23. Staff and the City’s State lobbyists are monitoring the meetings and will share the recommendations with the Mayor and Council when they are available.

2. Mitigate the Impacts of the I-270 & I-495 Expansion and Protect Homes, Businesses, and Infrastructure

Staff recommends continuing the Mayor and Council’s current efforts to mitigate the impacts of potential I-270 expansion on Rockville neighborhoods, homes, businesses and infrastructure. That will include monitoring the response to the Mayor and Council’s June 2020 letter to MDOT and reviewing the Draft Environmental Impact Statement this summer and fall.

Since the Managed Lanes Study was introduced, the Mayor and Council have vigorously advocated to protect Rockville homes, businesses, and infrastructure in nine city neighborhoods from being affected. This issue was a Rockville-specific State legislative priority in the 2019 and 2020 Sessions and continues to be a major advocacy focus.

Mayor and Council History

The Mayor and Council annually discuss and approve LAR items to forward to MML for consideration in the League’s priority program for the next General Assembly Session.

Next Steps

With Mayor and Council approval, staff will forward the completed LARs to MML by the July 24, 2020 deadline. Additionally, staff will also follow-up as described in the staff report on the “improving police accountability” and “financial support for childcare facilities” issues.

Staff will update the Mayor and Council on the priority issues that are selected by the MML Legislative Committee, and the member vote at the Fall Conference on the recommended topics for the 2021 MML Priority Program.

The Mayor and Council will take up 2021 state legislation priorities specific to the City of Rockville in the fall of 2020 after MML’s priorities are adopted (meeting date to be determined).



Rob DiSpirito, City Manager

7/8/2020



Mayor & Council Meeting Date: July 13, 2020
 Agenda Item Type: Discussion, Instructions and Possible Adoption
 Department: City Clerk/Director of Council Operations Office
 Responsible Staff: Sara Taylor-Ferrell

Subject

Mayor and Council Discussion on Holding Meetings by Conference Call or Other Media Platforms and Possible Adoption of an Amendment to the Rules and Procedures for the Mayor and Council of Rockville

Recommendation

If the proposed amendment to the Rules and Procedures for the Mayor and Council of Rockville are acceptable, staff recommends that the Mayor and Council adopt the Rules and Procedures as amended.

Change in Law or Policy

If adopted, this would be an amendment to the Rules and Procedures for the Mayor and Council of Rockville.

Discussion

Since the Maryland Governor's Executive Order was issued declaring a health emergency in the State of Maryland, the Mayor and Council have been holding virtual meetings. In light of this new method of conducting meetings, the Mayor and Council has decided to consider whether members of the Mayor and Council may be permitted to attend meetings virtually when they cannot be present in person even after the health emergency is over.

Attachment A includes a draft amendment to the Rules and Procedure for the Mayor and Council of Rockville. The proposed amendment would expressly allow members of the Mayor and Council to attend a meeting through a form of electronic means. The amendment would apply to any type of Mayor and Council meeting (e.g., regularly scheduled meeting, executive session, administrative function session, etc.) and does not limit the circumstances under which a member may so participate.

As additional information for the Mayor and Council and the efforts to enable meetings to be conducted with a virtual audience and remote participation, the City Manager's Office has provided Attachment B outlining the plans for accommodating the need for virtual participation in Mayor and Council meetings. While Attachment B is drafted to address virtual participants

and audience members, the proposal outlined in Attachment B would also accommodate virtual participation by members of the Mayor and Council.

Mayor and Council History

This is the first time this amendment to the Rules and Procedures for the Mayor and Council of Rockville has been brought before the Mayor and Council for approval.

Fiscal Impact

There is no fiscal impact associated with this agenda item. While the quote for the proposed modifications to the Mayor and Council Chambers as set forth in Attachment B is \$10,252.00, this amount is what is needed to allow for virtual participation by residents and audience members and is not needed specifically in connection with this agenda item.

Attachments

Attachment 16.a: Attach A - Rules and Procedures-proposed amendment (PDF)
Attachment 16.b: Attach B - WebEx Broadcast Integration (PDF)


Sara Taylor-Ferrell, City Clerk/Director of Council Operations 7/9/2020

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**RULES AND PROCEDURES FOR THE
 MAYOR AND COUNCIL OF ROCKVILLE**

I. AUTHORITY

These rules are adopted pursuant to the authority provided in Article II, §2.c. of the Charter of the Mayor and Council of Rockville.

II. AGENDA ITEMS

A. Modifications to the agenda by members of the Mayor and Council may be made in the following manner:

(i) At the request of two or more members of the Mayor and Council, an item shall be placed on the agenda for consideration at a future meeting. Except as provided in this subsection, such a request shall be made during a Mayor and Council meeting. If, due to time constraints, an item must be placed on the agenda outside of the meeting process, two or more members of the Mayor and Council may do so as long as the item is placed on the published agenda prior to the meeting during which the item is to be considered.

(ii) At the commencement of a Mayor and Council meeting, upon a motion duly made and seconded, and upon the affirmative vote of at least four members of the Mayor and Council, an item may be removed from the meeting agenda.

B. Any item brought up during a Mayor and Council meeting for a motion during Old/New Business, may only be approved by an affirmative vote of at least four members of the Mayor and Council.

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III. MAYOR AND COUNCIL MEETINGS

The Mayor and Council shall provide public notice of the time, location, and date of its meetings. When any member of the Mayor and Council is unable to participate in-person in any Mayor and Council meeting (e.g., regularly scheduled meeting, executive session, administrative function session, etc.), that member may participate from a remote location by means of telephone, video conferencing or other available electronic means that allows for real-time participation in the meeting. All meetings of the Mayor and Council shall have a written, published agenda. Except for recognitions, proclamations, appointments and citizens' forum, each agenda item shall be presented and considered as follows:

- A. The Mayor shall announce the agenda item number and read the description contained in the published agenda.
- B. Following the announcement of the agenda item by the Mayor, the Mayor will invite the City Manager, or an appropriate staff person, to comment or provide a report on the agenda item then before the Mayor and Council.
- C. Upon conclusion of any report or comments by the City Manager, or member of the staff, the Mayor shall ask members of the Mayor and Council if they have any questions to ask the City Manager or staff.
- D. For those public hearing agenda items, the Mayor and Council shall follow the procedures in the attached "Procedures for Public Hearings."

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E. Once the staff has concluded its presentation, the Mayor may request a motion from a member of the Mayor and Council or, in cases where the Mayor determines that discussion is advisable prior to entertaining a motion, in order to better vet or frame the proposition to be acted upon, the Mayor may so indicate and defer calling for a motion until there has been some preliminary discussion.

F. When a motion is made, the Mayor shall determine if any member wishes to second the motion. Any motion that is not seconded will die for lack of a second.

G. Once a motion is made and seconded, the Mayor will invite discussion of the motion by members of the Council. If no discussion is desired, or once the discussion has ended, the Mayor shall announce that a vote will be taken on the motion.

H. The Mayor takes a vote by asking all those in favor of the motion to raise their hands and, if not all members vote in favor of the motion, then the Mayor will request those voting against the motion to raise their hands. If a member neither votes for nor against a motion, the Mayor will then ask if there are any members wishing to abstain. Except as provided in Sections II.A(ii) and II.B. a simple majority of those members present and voting determines whether the motion passes or is defeated. An abstention does not count as a vote. If due to abstentions there is a lack of a quorum to vote on a motion, the motion fails.

IV. MOTIONS SUBJECT TO DEBATE

The following motions shall be debatable:

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A. Main Motions

A main motion is a motion that puts forward a proposition, decision or action for adoption by the Mayor and Council.

B. Motions to Amend a Main Motion

A motion to amend a main motion, seeks to amend, alter or change, in some way, a main motion that is presently pending before the Mayor and Council.

When the Mayor and Council are ready to vote on a motion which has been subject to an amendment, the Mayor and Council shall first vote on the amendment and, if the amendment passes, then the Mayor and Council will then proceed to vote on the motion as amended. In the event that the amendment does not carry, then the Mayor and Council will consider and vote on the main motion.

C. Motion to Reconsider

A motion to reconsider may be only made by a member who voted in the majority for the original motion which is sought to be reconsidered. A motion to reconsider must be made either at the meeting where the item sought to be reconsidered was first voted upon, or at the very next meeting of the Mayor and Council.

D. Motion to Suspend the Rules

A motion to suspend the rules allows the Mayor and Council to suspend its rules for a particular purpose such as to allow debate on a motion which is non-debatable or to permit some other type of action which is not otherwise permitted by these rules and procedures. The Mayor

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and Council may only act to suspend its adopted rules and procedures, not the requirements contained in State law, the City's Charter, or the City Code.

V. MOTIONS NOT SUBJECT TO DEBATE

Although most motions before the Mayor and Council are subject to discussion and debate, there is a limited category of motions that are non-debatable and include the following:

A. Motion to Adjourn

If a motion to adjourn passes, the Mayor and Council meeting is immediately adjourned to the next regularly scheduled meeting.

B. Motion to Recess

If a motion to recess passes, the Mayor shall declare a recess and indicate the time that the Mayor and Council will be in recess.

C. Motion to Establish Time for Adjournment

If a motion to establish a time for adjournment passes, the Mayor and Council meeting is adjourned at the time specified in the motion.

D. Motion to Table

If a motion to table passes, discussion of the item is halted and the agenda item is placed on hold. If the motion contains a specific date to bring the matter back before the Mayor and Council, then the matter will be brought back at the designated time. If, however, no specific time for the return of the item to the Mayor and Council is designated in the motion, a motion

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will be required at a future meeting to take the matter off the table and bring it back before the Mayor and Council at a future meeting.

E. Motion to Call the Question for Vote

If a motion to call the question for a vote passes, then discussion on the item stops and a vote is taken.

F. Motion to Limit Debate

If such a motion to limit debate passes, the amount of time to debate will be limited to the amount of time set forth in the motion.

G. Withdrawal of a Motion

At any time during debate and discussion, the maker of a motion may interrupt a speaker to withdraw his or her motion. The motion is then immediately deemed withdrawn without the need for a second.

VI. POINTS OF ORDER AND APPEAL

Members of the Mayor and Council may interrupt a speaker under the following circumstances:

A. Point of Order

A member of the Mayor and Council can interrupt the speaker and raise a point of order. If a point of order is raised, the Mayor would ask the person making the point of order to explain his or her point of order. After considering the point of order, the Mayor rules in favor or against the point of order.

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B. Appeal

If the Mayor makes a ruling with which a member of the body disagrees, the member may appeal the ruling of the Mayor. This appeal must be made immediately after the ruling is made. If the appeal is seconded, and after debate and discussion as in the case of a main motion, if the appeal passes, the ruling of the Mayor is reversed. If the appeal of the ruling of the Mayor does not pass, the ruling of the Mayor is sustained.

VII. ROBERT'S RULES OF ORDER

The current version of Robert's Rules of Order shall govern all questions of procedure not otherwise provided for in these rules, by Federal or State law, the City Code or City Charter.

VIII. CONFLICTS WITH FEDERAL, STATE LAW, CITY CODE OR CITY CHARTER

To the extent that any rules and procedures set forth herein conflict with Federal, State, or City laws, then Federal, State or City law shall control.

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PROCEDURES FOR PUBLIC HEARINGS OF THE MAYOR AND COUNCIL OF ROCKVILLE

I. SCOPE

- A. Quasi-Judicial Public Hearings. These procedures shall apply to all quasi-judicial public hearings that are required by State law and/or City Code. Quasi-judicial proceedings are proceedings that typically apply to either a particular person or property, as opposed to the entire City. In a quasi-judicial proceeding, the Mayor and Council are typically called upon to make findings and determinations based upon the record produced in the proceedings.
- B. Other Public Hearings. These procedures also apply to public hearings involving legislative matters such as, but not limited to, amendments to the City Charter or Code or master plan amendments. However, for public hearings that do not involve quasi-judicial matters, the following subsections (from Section II. PUBLIC HEARING PROCEDURES) do not apply: G., and J.

II. PUBLIC HEARING PROCEDURES

- A. Presiding Officer. The Mayor is the presiding officer and has broad discretion to conduct hearings in any manner that permits the development of a complete administrative record and provides a reasonable opportunity for interested parties to be heard. If the Mayor makes a ruling with which a member of the Council disagrees, the member may appeal the ruling of the Mayor. An appeal must be made immediately after the ruling is made. If the appeal is seconded, and after debate and discussion, the appeal passes by a majority vote, the ruling of the Mayor is overturned. If the appeal does not pass, the ruling of the Mayor is sustained.
- B. Commencement of Public Hearing. The Mayor will commence the public hearing by reading the agenda item and asking the City Clerk if the public hearing has been properly advertised.
- C. Time Limits on Testimony. The Mayor may set time limits on receiving testimony, including limits on the time for individual speakers, and limits on the total time permitted for oral testimony. The Mayor may increase or decrease any time limits, however, in most cases, the following time limits will apply:

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1.	Staff Presentation	15 minutes
2.	Applicant Testimony	10 minutes
3.	Government Officials Testimony	5 minutes
4.	Representatives of Organizations Testimony	5 minutes
5.	Adjacent and confronting property owners	5 minutes
6.	Individual Testimony	3 minutes
7.	Applicant Rebuttal	5 minutes

D. Sequencing of Testimony. The Mayor may decide, in any given case, what the sequencing of testimony, however, in most cases, the sequencing of testimony will be as follows:

1. Staff
2. Applicant
3. Government Officials
4. Persons and Organizations signed up to speak
5. Persons and Organizations present wishing to speak (who did not sign up to speak in advance)
6. Applicant Rebuttal

E. Duplicative Testimony. The Mayor has the discretion to limit the presentation of unduly repetitious testimony, and to otherwise conduct the hearing so that it proceeds in an orderly and fair manner.

F. Rules of Evidence. Any public hearing conducted under these Procedures need not conform strictly to the rules of evidence or procedure that govern judicial proceedings. The Mayor and Council will accept evidence with the goal of developing a full administrative record. The Mayor and Council may consider any relevant evidence that assists in its reaching a decision. Hearsay evidence, if relevant, may be accepted. The Mayor may exclude from evidence any irrelevant, immaterial, or unduly repetitious material. The Mayor must rule on any objections to the admission of any evidence subject to the provisions of Section II.A.

G. Requests to Cross-Examine Speakers. Any person may request to cross-examine (question) another speaker at the end of that speaker's testimony. The Mayor will allow questioning of speakers subject to the following: 1) the questions must pertain only to

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that speaker's testimony; 2) the questions must not be argumentative; and 3) the questions must not be preceded by any statements. The Mayor may reject any question that is objectionable or duplicative.

- H. Questions from the Mayor and Council. Members of the Mayor and Council may ask questions at any time during the public hearing. Any time spent responding to questions from the Mayor and Council will not count against the speaker's time limit.
- I. Exhibits. Any exhibit, including, but not limited to, documents, models, or other demonstrative evidence presented at the public hearing must be assigned an exhibit number and marked and identified for the record by the City Clerk. Any exhibit introduced in the public hearing becomes a part of the administrative record. The exhibit or an accurate representation of it must be given to the City for inclusion in the administrative record and becomes the property of the City and may not be returned.
- J. Ex Parte Communications. Ex parte communications are not permitted. An ex parte communication is a communication by either a party or an interested person to a member of the Mayor and Council outside the public hearing. These types of communications can be written or oral and can be by telephone call, personal contact, email, regular mail, or any other type of communication directed either to a single member of the Mayor and Council or to some or all members of the Mayor and Council. The Mayor and Council must avoid telephone calls, emails and meetings with parties or interested persons for those types of proceedings which are quasi-judicial in nature. If a member of the Mayor and Council receives unsolicited communications about a pending matter outside of the public hearing, the member must disclose and describe the communications to the rest of the Mayor and Council at the earliest opportunity during the Mayor and Council's hearing on the matter.
- K. Postponement, or Continuation of Hearing. Any member of the Mayor and Council may move to postpone a hearing. A motion to postpone must be approved by a majority of the members present and voting. Any member of the Mayor and Council may move to recess a hearing and continue it to another time. A motion to continue must be approved by a majority of the members present and voting. If the date, time, and place of a continued hearing is announced on the record, no further notice is required unless otherwise required by law.
- L. Closing of the Record. Once all testimony has been received, the public hearing is closed and the record remains open for the length of time designated by the Mayor and Council for the receipt of additional public comment. Once the record has closed, the matter is

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typically brought back on the agenda for Mayor and Council discussion and instructions to staff.



WebEx chamber/Broadcast Integration

In response to the COVID-19 pandemic, the City of Rockville is now holding Mayor and Council meetings virtually using WebEx software.

As the city begins taking steps to reopen City Hall, the need to allow officials to conduct meetings from the Mayor and Council chamber with a virtual audience and remote participants may become necessary.

Rockville 11 has reached out to Human Circuit, who designed the Rockville 11 infrastructure in the chamber and is responsible for maintaining the AV broadcast systems, for a solution.

The proposed modifications include:

- Integration of the current WebEx software to Rockville 11's current audio and visual and presentation systems in the chamber.
- Dedicated laptop, which will serve as the "WebEx Workstation". It will be located at the staff table in place of the document camera.
 - NOTE: The document camera will be stored when not in use and will stay connected to the system through a floor box.
- The Crestron control system touch panels will be updated to include volume control of far-end participants and updated input source names.
- Install a connection of the inputs/outputs to Rockville 11's equipment rack and production switcher.

Rockville 11 and IT staff are in agreement that Human Circuit's modifications to integration of WebEx to the AV and presentation systems in the chamber are satisfactory.

These modifications will allow:

- Officials to conduct meetings from the chamber and have participants join virtually using current WebEx system.
- Rockville 11 will have more visual broadcast control of the meeting using the chamber microphones and cameras.
- Officials in the chamber will be able to view virtual participants from the two-monitors located on the side wall of the chamber.
- Remote participants and presenters can view the chamber.
- Viewing audience will be able to see the all aspects of meeting including officials in the chamber as well as participants and presenters with video and audio capabilities.
 - NOTE: If the participant is joining only by phone, audio will continue to be broadcasted.

These modifications will have minimal effect on staff and the Mayor and Council as adjustment to virtual meetings has taken place over approximately three months.



WebEx chamber/Broadcast Integration

The Mayor and Council will conduct meeting as they have in the past, when meetings are held in the chamber, using the microphones at the dais for audio and the broadcast cameras for the visual feed.

IT staff is still needed to continue to monitor connectivity.

The quote for the modifications is \$10,252.00. Funds from the Special Activities Communications Equipment fund will be used. These funds are from the PEG franchise revenues that the city receives for operation costs of Rockville 11. These modifications are in line with the definition of use of funds.

Human Circuit advises that the integration and modifications to both systems (presentation and broadcast) will require 3 days to complete once onsite work begins. Staff will arrange to have the work done in advance of Mayor and Council meetings returning to City Hall.



Mayor & Council Meeting Date: July 13, 2020
Agenda Item Type: Review and Comment
Department: City Manager's Office
Responsible Staff: Jenny Kimball

Subject

Action Report

Recommendation

Staff recommends that the Mayor and Council review and comment on the Action Report.

Attachments

Attachment 17.A.a: MC Action Report Master 2020 _REVISED 070820 (PDF)

A handwritten signature in black ink, appearing to read "Rob DiSpirito", is written over a horizontal line.

Rob DiSpirito, City Manager

7/8/2020

Blue - new items to the list.

Red - latest changes.

Mayor and Council Action Report

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2014-23	9/8/11	R&P	Future agenda	<p>King Farm Farmstead</p> <p>Status: On April 20, 2020, the Mayor and Council discussed the responses to the request for information (RFI) on potential future uses of the Farmstead. As a next step, staff will work with stakeholders to develop the scope of a request for thorough and detailed proposals for future uses of the Farmstead. During the May 4th discussion of the FY21 budget, the Mayor and Council directed staff to fund a fire suppression system for the Dairy Barns and the house in FY21 and to fund a security system for those buildings in FY20. The security system project will be completed this summer and design/construction for the fire suppression system will begin in FY21 and conclude in FY22.</p>	Ongoing
2015-14	7/13/15	CMO	Future agenda	<p>Purchasing Study Response</p> <p>Status: An update on the Procurement Action Plan was shared on January 27, 2020. Another update will be provided on August 3, 2020.</p>	August 3, 2020
2016-12	9/26/16	HR	Future agenda	<p>Vacancy Report/Hiring Freeze Update</p> <p>Provide a Vacancy Report to the Mayor and Council at the first meeting of each month.</p> <p>Status: The next report will be on the August 3, 2020 agenda.</p>	August 3, 2020
2016-16	10/10/16	PDS	Future agenda	<p>Global Issues on BRT</p> <p>Schedule another discussion on BRT with the City of Gaithersburg and Montgomery County, to include broader issues such as governance and finance. Consider holding the meeting in Gaithersburg.</p> <p>Status: County transportation is determining a recommended alternative for design of the MD 355 route. City staff attended a meeting with Montgomery County DOT on April 30, 2020 to review an update on the 6.7 mile Veirs Mill Rd (MD 586) BRT project. The project team is advancing Alternative 2.5 at this time, and the limit of the project has been extended to Montgomery College. A new station has been added at Atlantic Avenue. Public outreach will take place in the next few months.</p>	Ongoing

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2016-18	10/24/16	PDS	Future agenda	<p>FAST – Faster, Smarter, More Transparent (Site Plan/Development Review Improvements) Provide regular updates on the status of the work.</p> <p>Status: A FaST update was provided to the Mayor and Council on November 18, 2019. The next update is scheduled for September 14, 2020.</p>	September 14, 2020
2017-6	2/27/17	CMO	Email	<p>Minority-, Female- & Disabled-Owned Businesses Provide updates on the Procurement Division’s activities to engage and support minority-, female- and disabled-owned businesses.</p> <p>Status: The MFD Report for FY19 and the first half of FY20 was shared with the Mayor and Council by email on May 1, 2020. A Mayor and Council discussion of the City’s MFD outreach program is scheduled for August 3, to include topics such as program metrics, program successes and potential program adjustments. A local preference approach for City procurement also will be discussed with the Mayor and Council on a future agenda.</p>	August 3, 2020
2017-11	6/12/17	R&P	Agenda item	<p>Deer Population in Rockville Continue to monitor the deer population. Consider action steps and gather community input.</p> <p>Status: The Mayor and Council approved the location, dates and required City Code changes for the pilot deer culling program on June 1 and June 22, 2020. The pilot will be underway from October 2020 to January 2021.</p>	January 2021
2018-1	1/22/18	Finance	Action Report	<p>Utility Billing System Provide updates on the replacement of the Velocity Payment System, powered by Govolution.</p> <p>Status: Implementation with the system vendor is underway and is scheduled to be completed in September 2020. To date, server set up, software installation, and data conversion has been completed. Testing and data validation is underway.</p>	September 2020

Attachment 17.A.a: MC Action Report Master 2020_REVISED 070820 (3155 : Action Report)

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2018-7	6/18/18	CMO	Agenda Item	<p>LGBTQ Initiatives Identify and implement Mayor and Council suggestions.</p> <p>Status: A gender neutral/family restroom was constructed on the 3rd floor of City Hall. Directional signs were put on the second floor directing those wanting to use the restroom to the first or third floor. The Adopted FY21 budget includes a new family/gender neutral bathroom at Dogwood Park, to be constructed in FY22. The Human Rights Campaign sent Rockville’s draft 2020 Municipal Equality Index (MEI) scorecard on June 2 for review and comment by July 31.</p>	Ongoing
2018-8	6/18/18	CMO/RCPD /R&P	Town Meeting	<p>Opioid Town Meeting Schedule a Town Meeting on the opioid crisis, to include prevention, enforcement and treatment.</p> <p>Status: A proposed Rockville Goes Purple plan for the initial months of FY21 will be presented to the Mayor and Council on July 13, 2020.</p>	July 13, 2020
2018-11	8/1/18	PDS	Agenda Item	<p>Neighborhood Shopping Centers Discuss mechanisms to encourage neighborhood shopping center revitalization and explore additional zoning and uses.</p>	TBD
2018-15	10/8/18	PDS	Future Agenda	<p>Short-Term Residential Rentals Discuss how to manage short-term residential rentals’ (e.g., Airbnb) impact on city neighborhoods and explore options for taxing users.</p> <p>Status: Short-term residential rentals was discussed on January 13. Staff emailed the results of additional research requested by the Mayor and Council on January 23, 2020. The Mayor and Council also requested that a public hearing be held at a future date.</p>	Fall 2020
2018-19	10/15/18	HR	Future Agenda	<p>Volunteer Program Discuss whether the Mayor and Council want to direct the City Manager to create a centralized volunteer program.</p> <p>Status: A report on the number of volunteers and volunteer hours for the first half of FY20 was provided on the January 13, 2020 agenda. The next update will be on the September 14, 2020 agenda.</p>	September 14, 2020

Attachment 17.A.a: MC Action Report Master 2020 _REVISED 070820 (3155 : Action Report)

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2019-1	10/29/18	PDS	Future Agenda	<p>Accessory Structures</p> <p>Status: On April 20, 2020, the Mayor and Council discussed potential revisions to the development standards for accessory structures. The Mayor and Council directed staff to conduct additional neighborhood outreach to educate and inform residents of the proposed changes and to schedule an additional public hearing in the Fall 2020.</p>	Fall 2020
2019-2	2/25/19	R&P/PDS/ CMO	Future Agenda	<p>RedGate Park Planning</p> <p>Status: Staff examined the condition of the walking paths and made critical repairs. Other repairs will be addressed when the entire path is redone, or as critical needs arise. Staff presented the strategy for engaging the public in a planning process for a new destination park at Redgate on June 22, 2020 and received Mayor and Council direction to proceed. The Mayor and Council will receive updates during the planning process and will be engaged in the public outreach portion of the work.</p>	Completed
2019-4	3/25/19	PDS	Future Agenda	<p>Business Improvement Districts (BIDs) and Tax Increment Financing (TIF)</p> <p>Discussion of potential City uses of BIDs and TIFs.</p>	TBD
2019-7	4/1/19	R & P	Memo	<p>Child Care Services</p> <p>Discuss city provision of child care services (history of the current program, community need for the service, private sector market, expansion to additional Rockville locations).</p> <p>Status: Staff is preparing follow up on the Mayor and Council's November 25, 2019 worksession on early childhood education services, and staff will check in with the Mayor and Council on how to incorporate COVID-related topics in the September 21 staff report.</p>	September 21, 2020
2019-9	4/1/19	HR	Memo	<p>Reduction in Force (RIF) Policy</p> <p>Prepare a Reduction in Force (RIF) policy, to be incorporated in the Personnel Policy and Procedures Manual update.</p> <p>Status: Mayor and Council will consider this policy in the context of the ongoing review of the proposed Personnel Policies and Procedures Manual (PPM), which will be on the Mayor and Council's August 3, 2020 agenda.</p>	August 3, 2020

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2019-10	4/1/19	HR	Email	<p>Personnel Policy and Procedures Manual Update Share an update on the status of this effort.</p> <p>Status: In follow up to the Feb. 24 presentation of the updated PPM, the Mayor and Council will discuss it on August 3, 2020.</p>	August 3, 2020
2019-11	4/1/19	HR/Finance	Future Agenda	<p>Retirement Incentive/Employee Buyout Program Provide information about employee buyout programs and discuss the potential for a Rockville program.</p> <p>Status: Director of Finance provided an update to the Mayor and Council via email on May 3, 2019. Staff is identifying a Mayor and Council meeting date to take up this topic after the summer recess and will engage the Financial Advisory Board.</p>	Fall 2020
2019-12	4/1/19	Police	Future Agenda	<p>Parking Enforcement at Street Meters Share an overview of Rockville’s current program and how other local jurisdictions handle parking enforcement at street meters, including hours of enforcement.</p> <p>Status: Town Center parking meter spaces have been signed as 15- minute curbside pick-up during COVID-19 response. On June 1, 2020, the Mayor and Council approved a FRIT-requested system for special food pick up spaces in Town Square to further support food service establishments during the COVID recovery.</p>	Ongoing
2019-19	12/16/2019	City Clerk/Director of Council Operations	Worksession	<p>Boards and Commissions Task Force Work Session Continue the Mayor and Council’s discussion of the Boards and Commission Task Force (BCTF).</p> <p>Status: The Mayor and Council discussed the Task Force’s report and next steps on July 6, 2020. The Mayor and Council directed the three appointed officials to return on agenda on September 21, 2020 with specific updates and responses to the recommendations in the report and an action plan for next steps.</p>	September 21, 2020

Attachment 17.A.a: MC Action Report Master 2020 _REVISED 070820 (3155 : Action Report)

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2019-20	12/16/2019	City Clerk/Director of Council Operations	Meeting	<p>Post-Election Presentation</p> <p>Status: The Board of Supervisors of Elections presented the 2019 Election Report to the Mayor and Council on May 11, 2020. The Board revised the report and prepared responses to questions posed during the discussion. The Mayor and Council received the revised report and it is being posted on the web.</p>	Completed
2020-01	1/6/2020	Police	Future Agenda	<p>Emergency Management Program</p> <p>Receive an update from the Emergency Manager on the city's emergency management program and activities.</p> <p>Status: The Emergency Manager provided an update on the Emergency Management Program during the July 6, 2020 agenda.</p>	Completed
2020-02	1/13/2020	PDS/DPW/ CAO	Memo and Future Agenda	<p>5G Wireless Technology</p> <p>Status: On March 18, 2020, the Mayor and Council discussed Zoning Text Amendment TXT2019-00251 on regulating the Installation of Small Cell Antennas. Introduction and Possible Adoption of an Ordinance to Grant Text Amendment Application TX T2019-00251 -To Adopt Regulations for the Installations of Small Cell Antennas was on the May 11, 2020 agenda. Staff is researching additional topics and questions raised by the Mayor and Council, in order to schedule adoption of the Ordinance on an upcoming agenda.</p>	Fall 2020
2020-03	1/13/2020	DPW	Memo and Future Agenda	<p>Climate Change Efforts</p> <p>Brief the Mayor and Council on City efforts related to climate change.</p> <p>Status: Discussion and Instructions on a Climate Action Plan is scheduled for the Mayor and Council's September 21, 2020 meeting.</p>	September 21, 2020
2020-04	1/13/2020	Police	Memo and Future Agenda	<p>Drones and Public Safety</p> <p>Explore potential public safety issues associated with drones and how the City could consider monitoring, regulating and penalizing criminal activity.</p>	Fall 2020

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2020-07	1/13/2020	PDS	Future Agenda	<p>Affordable Housing Goals Discuss Rockville’s strategy to meet the affordable housing goals established by the Metropolitan Washington Council of Governments (COG).</p> <p>Status: Future agenda items will explore paths that the city could take to meet the COG housing allocation. In addition, staff will conduct a forum with stakeholders in the development community and building trade association to solicit feedback to report to the Mayor and Council on:</p> <ol style="list-style-type: none"> 1. Affordable Housing Fee for Small Residential Developments (tentatively in 2021) 2. In-Lieu Fee for Condominium Development (tentatively in Nov 2020) 3. Require Developments with 50 or More Units to Provide 15% MPDUs (tentatively in 2021) <p>Tentatively in Nov 2020, the Mayor and Council will discuss addressing annual MPDU rent increases that could be set at a rate higher than the voluntary guideline (e.g., 8% increase between 2019 and 2020). Staff is also in the process of developing a system for tracking MPDU expiration dates.</p>	Ongoing

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2020-08	1/27/2020	CMO/PDS/ Finance/ DPW	Worksession	<p>Town Center Follow up on Mayor and Council direction from the Town Hall meeting and Urban Land Institute (ULI) report. Status: A status update and discussion of Town Center initiatives will be provided to the Mayor and Council on October 5, 2020.</p> <p>Parking – Explore improvements to parking in Town Center Status: A parking update will be included in the October 5, 2020 Town Center discussion.</p> <p>Town Center Road Diet – Study and report to Mayor and Council on suggestions in the TAP report and Mayor and Council’s discussion. Status: The consultant will present their analysis of No. Washington St and Middle Ln to the Mayor and Council on October 5, 2020.</p> <p>Real Estate/Broker/Economist Assessment – In the context of the next update on the ULI recommendations, invite industry experts to dialogue on competitive challenges to Town Center. Status: The REDI board of directors and staff will be present for the next Town Center/ULI Update and provide an opportunity to receive their professional insights on competitive challenges to Town Center.</p> <p>Undergrounding of Route 355 – Revisit the information provided to the Mayor and Council, including community impacts, to formulate an official Mayor and Council position post COVID-19. Status: Discussion is scheduled for October 5, 2020.</p>	Ongoing
2020-09	1/27/2020	DPW	Future Agenda	<p>Corridor Cities Transitway Provide background information to facilitate the current Mayor and Council taking an official position on the CCT route. Status: Discussion will be scheduled for a fall 2020 meeting.</p>	Fall 2020
2020-10	1/27/2020	DPW	Future Agenda	<p>I-270 widening Establish a strategy for negotiating with the State. Status: The Mayor and Council received an update and discussed strategy on June 1, 2020. The Mayor and Council sent a letter to the State at the end of June expressing Rockville’s concerns. The Mayor and Council will seek support from Rockville’s representatives at all levels of government and will participate in identifying City concerns and mitigations. A discussion of the MOU with the State will be planned.</p>	Ongoing

Attachment 17.A.a: MC Action Report Master 2020_REVISED 070820 (3155 : Action Report)

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2020-11		PDS	Future Agenda	Annexation Options Discuss a nnexation options.	TBD
2020-12	4/27/20	R&P	Future Agenda	Resident Company Briefing Include on a fall 2020 Mayor and Council agenda a briefing from the resident companies to share information about their plans to resume operations and their business plans to support ongoing operations.	Fall 2020
2020-13	4/27/20	CMO	Email	Census Outreach Update Provide an update on the efforts completed, underway and planned to continue encouraging Rockville residents to complete the 2020 Census. Status: A memo on Census outreach efforts was emailed to the Mayor and Council on May 17, 2020. An update will be provided the week of July 13.	Ongoing
2020-14	4/20/20	CMO/CAO	Future Agenda	Smoking/Vaping Awareness Campaign (Public Rights-of-Way & multi-family residential developments) Develop a public awareness campaign about the negative impacts of smoking generally, on people with underlying health conditions and on neighbors in multi-family residential communities. Status: The Mayor and Council will take up this topic on July 20, 2020.	July 20, 2020
2020-16	6/1/20	RCPD	Future Agenda	Social Injustice, Racism and Bias Prepare suggestions for Mayor and Council discussion of ways to further engage with and educate our community. Status: On June 22, 2020, the Mayor and Council received a briefing and discussed the Rockville City Police Department's (RCPD) fair and impartial policing strategies. A follow up discussion and planning of future community engagement on this topic is scheduled for July 20, 2020. The discussions will include potential enhancements to policing in the City and establishing a public safety commission/committee. Frequently Asked Questions will be prepared to help educate the community about RCPD fair and impartial policing practices.	July 6, 2020

Attachment 17.A.a: MC Action Report Master 2020_REVISED 070820 (3155 : Action Report)

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline
2020-17	6/1/20	CMO	Email	<p>Spanish Language Article in Rockville Reports Provide background information about the City’s former practice of translating to Spanish one of the articles of priority interest to the community into each edition of Rockville Reports.</p> <p>Status: Staff shared the requested information by email on June 16, 2020.</p>	TBD
2020-18	6/8/20	CC/DCO	Future Agenda	<p>New Education Commission/Committee Discuss on a future agenda the possibility of establishing a new commission or committee on education.</p>	TBD

CLOSED/COMPLETED

Ref. #	Meeting Date	Staff/ Dep	Response Method	Direction to Staff/ Action Taken/ Status	Timeline

Attachment 17.A.a: MC Action Report Master 2020 _REVISED 070820 (3155 : Action Report)



Mayor & Council Meeting Date: July 13, 2020
Agenda Item Type: Review and Comment
Department: City Clerk/Director of Council Operations Office
Responsible Staff: Sara Taylor-Ferrell

Subject

Future Agendas

Recommendation

Attachments

Attachment 18.A.a: 07.20.20 Mock Agenda (DOC)
Attachment 18.A.b: Future Agendas 7.13.2020 (XLS)


Sara Taylor-Ferrell, City Clerk/Director of Council Operations 7/8/2020



MAYOR AND COUNCIL

MEETING NO.
Monday, July 20, 2020 – 6:00 PM

MOCK AGENDA

Agenda item times are estimates only. Items may be considered at times other than those indicated.

Any person who requires assistance in order to attend a city meeting should call the ADA Coordinator at 240-314-8108.

Rockville City Hall is closed due to the state directives for slowing down the spread of the coronavirus COVID-19 and continue practicing safe social distancing.

Viewing Mayor and Council Meetings

To support social distancing, the Mayor and Council are conducting meetings virtually. The virtual meetings can be viewed on Rockville 11, channel 11 on county cable, livestreamed at www.rockvillemd.gov/rockville11, and available a day after each meeting at www.rockvillemd.gov/videoondemand.

Participating in Community Forum & Public Hearings:

If you wish to submit comments in writing for Community Forum or Public Hearings:

- Please email the comments to mayorandcouncil@rockvillemd.gov by no later than 2:00 p.m. on the date of the meeting.
- All comments will be acknowledged by the Mayor and Council at the meeting and added to the agenda for public viewing on the website.

If you wish to participate virtually in Community Forum or Public Hearings during the live Mayor and Council meeting:

1. Send your **Name, Phone number, the Community Forum or Public Hearing Topic and Expected Method of Joining the Meeting (computer or phone)** to mayorandcouncil@rockvillemd.gov no later than **9:00 am on the day of the meeting**.
2. On the day of the meeting, you will receive a confirmation email with further details, and two Webex invitations: 1) Optional Webex Orientation Question and Answer Session and 2) Mayor & Council Meeting Invitation.
3. Plan to join the meeting no later than 5:40 p.m. (approximately 20 minutes before the actual meeting start time).
4. Read for <https://www.rockvillemd.gov/DocumentCenter/View/38725/Public-Meetings-on-Webex>
5. meeting tips and instructions on joining a Webex meeting (either by computer or phone).
6. If joining by computer, **Conduct a WebEx test:** <https://www.webex.com/test-meeting.html> prior to signing up to join the meeting to ensure your equipment will work as expected.
7. Participate (by phone or computer) in the optional Webex Orientation Question and Answer Session at 3 p.m. the day of the meeting, for an overview of the Webex tool, or to ask general process questions.

Participating in Mayor and Council Drop-In (Mayor Newton and Councilmember Myles)

Drop-In Sessions will be held by phone on Monday, August 3 from 5:30-6:30 p.m. **Please sign up by 2 p.m. on the meeting day using the form at:** <https://www.rockvillemd.gov/formcenter/city-clerk-11/sign-up-for-dropin-meetings-227>

Mayor and Council

July 20, 2020

- 6:00 PM 1. **Convene**
2. **Pledge of Allegiance**
3. **Agenda Review**
- 6:05 PM 4. **City Manager's Report**
- 6:20 PM 5. **COVID-19 Update**
- 6:25 PM 6. **Recognition**
- A. **TERRIFIC KID Bike Program Presentation**
- 6:45 PM 7. **Boards and Commissions Appointments and Reappointments**
- A. **Boards and Commissions Appointments and Reappointments**
- B. **Proposed Appointment Selection 2020 Charter Review Commission**
- 7:05 PM 9. **Community Forum**
- Any member of the community may address the Mayor and Council for 3 minutes during Community Forum. Unless otherwise indicated, Community Forum is included on the agenda for every regular Mayor and Council meeting, generally between 7:00 and 7:30 pm. Call the City Clerk/Director of Council Operation's Office at 240-314-8280 to sign up to speak in advance or sign up in the Mayor and Council Chamber the night of the meeting.
10. **Mayor and Council's Response to Community Forum**
- 7:10 PM 11. **Consent**
- A. **Leave Policy for COVID-19 Pandemic**

- 8:10 PM 12. Discussion of Social Justice, Racism, and Bias in Rockville
- 8:30 PM 13. Discussion and Possible Adoption of Juneteenth Resolution
- 9:00 AM 14. Discussion on the 2020 Charter Review Commission Scope of Work
- 9:30 PM 15. Map Amendment MAP2020-00119, for the Rezoning of 102 Aberdeen Road from R-60 to R-60 (Historic District) in Order to Place the Property in a Historic District; Historic District Commission, Applicants
- 9:45 PM 16. Public Awareness Campaign on the Dangers of Smoking and Vaping
- 10:05 PM 17. Festival and Event Alternatives
- 10:25 PM 18. Review and Comment - Mayor and Council Action Report
- A. Action Report
19. Review and Comment - Future Agendas
20. Old/New Business
- 10:40 PM 21. Adjournment

The Mayor and Council Rules and Procedures and Operating Guidelines establish procedures and practices for Mayor and Council meetings, including public hearing procedures. They are available at: <http://www.rockvillemd.gov/mcguidelines>.

Future Agendas
As of 07/13/2020

18.A.b

Category	Estimated Agenda Time Needed (in minutes)	Title
Meeting : 08/03/20 07:00 PM (12 item)		
Review and Comment	10	Action Report
Presentation and Discussion	20	COVID Staffing Update
Discussion	30	Follow-Up Discussion on MFD FY19 and 6 Mos FY20 Report
Presentation	30	Procurement Action Plan Update 48-Month
Proclamation	5	Proclamation Declaring National Hispanic Heritage Month
Presentation	10	Proclamation Declaring September 7-11 2020 as National Payroll Week
Discussion and Instructions	60	Discussion of the Personnel Policies and Procedures Manual
Discussion	60	Reduction in Force Policy
Discussion	10	Vacancy Report/Hiring Freeze Status
Introduction and Possible Adoption	30	Park Road and North/South Stonestreet Avenue Area Plan Amendment Introduction and Possible Adoption
Consent	5	Award IFB #08-20, Middle Lane 54-Inch Diameter CMP Storm Drain Renewal, to Pleasants Construction, Inc., in the Amount Not to Exceed \$330,817.81
Consent	5	Award of Sourcewell (NJPA) Rider Contract #081716-NAF, Rear Loader Refuse Truck, to National Auto Fleet Group in the Amount Not to Exceed \$258,320
Total Meeting Time (In Hours)		
	4 HR 35 MINS	
Meeting : 09/14/20 07:00 PM (5 item)		
Presentation	60	Volunteer Program Update
Approval	60	Financial Advisory Board FY 2020 Annual Report and FY 2021
Discussion	30	Diversity Hiring Strategies
Presentation	30	Status Report on the Faster, Accountable, Smarter and Transparent (FAST) Project – Improvements to the Development Review and Permitting Processes - Update
Discussion and Instructions	30	Police Advisory Commission
Total Meeting Time (In Hours)		
	3 HR 30 MINS	

Attachment 18.A.b: Future Agendas 7.13.2020 (3237 : Future Agendas)

Future Agendas
As of 07/13/2020

Category	Estimated Agenda Time Needed (in minutes)	Title
Meeting : 09/21/20 07:00 PM (4item)		
Worksession		
Discussion and Instructions	60	Staff Recommendations on Boards and Commissions Task Force
Work Session	60	Fiscal Preparedness Plan
Presentation and Discussion	60	Climate Action Plan Presentation, and Discussion and
Discussion	60	Rockville Early Childhood Education
Total Meeting Time (In Hours)	4 HR 00 MINS	
Category	Estimated Agenda Time Needed (in minutes)	Title
Meeting : 10/05/20 07:00 PM (4item)		
Work Session	60	Worksession with the Board of Directors of Rockville Economic Development Inc.
Discussion	60	Town Center Initiative - Update
Discussion	30	Undergrounding of MD 355
Presentation	45	Presentation of Consultant's Analysis of North Washington Street and East Middle Lane
Total Meeting Time (In Hours)	3 HR 15 MINS	

Attachment 18.A.b: Future Agendas 7.13.2020 (3237 : Future Agendas)