Baltimore City Opioid Addiction and Overdose Response Strategy

Introduction

In Baltimore, a city of 620,000 residents, nearly 25,000 people are estimated to misuse opioids, and many of them are not connected to adequate treatment or social support services. Since 2011, the City has experienced a four-fold increase in total overdose deaths from 167 in 2011 to 761 in 2017. According to data from the state of Maryland, 2,282 people lost their lives to overdose statewide in 2017. Of these deaths, 33% took place in Baltimore City, though the city comprises only 10% of the state population.

Baltimore has implemented an aggressive three-pronged strategy for responding to this crisis that has been recognized as one of the strongest in the nation. On behalf of the Baltimore City Health Department (BCHD), Health Commissioner Dr. Leana Wen has given testimony about this strategy before U.S. Senate and House committees and discussed it on a panel with President Barack Obama at the National Rx Drug Abuse and Heroin Summit in March 2016. Baltimore’s efforts have been lauded by former Director of National Drug Control Policy Michael Botticelli, FDA Commissioner Robert Califf, and U.S. Surgeon General Vivek Murthy and gained national media attention as a model for the country from USA Today, National Public Radio (NPR), CNN, and other outlets.

Saving lives via naloxone distribution and training

The first prong of Baltimore’s three-pronged approach is to prepare city residents to recognize an opioid overdose and respond with the overdose reversing medication naloxone. Since January 2015, BCHD and its partners:

1) Trained more than 43,000 people to administer naloxone
2) Distributed over 38,000 naloxone kits in the community

These efforts have resulted in over 2,800 lives saved.

Baltimore City will continue to build on these efforts to train and equip as many residents as possible through the following initiatives:

- **Non-fatal overdose spike response:** A spike is defined as 3 or more non-fatal overdoses in one census tract in one calendar day; the Health Department worked with Johns Hopkins University to develop an algorithm that develops patterns and triggers a response from outreach teams.
• **Increased naloxone distribution with community partners:** Pilot programs deliver naloxone to businesses and libraries disseminating both information and naloxone kits to physical locations throughout the city.

• **EMS leave-behind program:** ~3,000 naloxone kits will be distributed by BCFD at the scene of an overdose as a pilot program through the Behavioral Health Administration.

**Expanding access to substance use disorder treatment**

The second prong of Baltimore’s strategy is to expand access to substance use disorder (SUD) treatment.

• **Buprenorphine expansion:** Baltimore is implementing a plan to dramatically increase capacity and access to medication-assisted treatment for opioid use disorder with buprenorphine.

• **24/7 hotline for mental health and substance use:** Baltimore City has implemented a 24/7 hotline for behavioral health and crisis services. The hotline has been operational since October 2015 and receives ~40,000 calls annually.

• **Overdose Survivors Outreach Program:** Since November 2016, several emergency departments in Baltimore City have operated an overdose survivors outreach program that connects people who survive an overdose with peer outreach workers who assist with substance use disorder treatment access and other services.

• **Stabilization Center:** Baltimore City’s stabilization center will provide sobering services, referrals to treatment, and connections to other support services for patients with non-emergency health needs.

• **Real-time Capacity Tool:** Baltimore City – in conjunction with the Open Society Institute – will launch a tool for providers that improves referral effectiveness for those seeking outpatient treatment services.

• **Hub & Spokes:** Launched a pilot initiative with IBR Reach as a buprenorphine treatment hub and 12 spokes throughout Baltimore City. Over 100 patients were treated at IBR Reach during the first year.

**Education**

The third prong of Baltimore’s strategy is to educate people about the risks of opioids and the disease of addiction, treatment options, and harm reduction strategies like learning to use naloxone.

• **Don’t Die:** Baltimore City’s Don’t Die campaign is a successful public health campaign focused on reducing stigma, promoting SUD treatment, and educating the public to recognize and respond to an overdose. This first-of-its-kind campaign has included billboards and posters at bus stops and metro stations, and even in the Pratt library. BCHD and its partners have distributed fliers, posters, and post cards across the city. The campaign’s website, www.dontdie.org, includes these public health messages and offers a short online training.
• **Outreach to providers:**
  o **Hospital CEOs and CMOs:** BCHD has written letters and met with hospital CEOs and CMOs to encourage them to adopt hospital policies that promote judicious prescribing of opioids, education of patients about the risks of these medications, and prescribing and providing naloxone for patients receiving opioids.
  o **ED meetings:** BCHD convenes emergency department chairs quarterly to identify and expand emergency department-based strategies for addressing and preventing opioid misuse and overdoses.
  o **Pharmacist detailing:** BCHD worked with pharmacy leaders to discuss changes to state law that make naloxone available in pharmacies under the Health Commissioner’s standing order without a special training or individual prescription. BCHD wrote letters to, called, and provided information in person to every single pharmacy in the city.

**Fentanyl Task Force/Opioid Intervention Team**

Recognizing the increasing devastation being caused by fentanyl, Baltimore City established a Citywide Fentanyl Task Force in August 2016. The Task Force includes over twenty local, state, and federal agencies, non-profits, business groups, and health care providers. Among other actions, the Task Force has implemented significant cross-agency responses to opioids, including:

- Public education
- Naloxone training of frontline staff
- Overdose spike detection and rapid response

The Task Force now acts as Baltimore’s Opioid Intervention Team.

**Overdose Fatality Review Team**

Since 2015, Baltimore City has operated an Overdose Fatality Review Team (OFR). The OFR examines individual cases of overdose fatality and reviews the victims’ interactions with systems and agencies in the city to make recommendations for changes in policy and practices that can prevent future overdose deaths.

The OFR’s recommendations have been and continue to be significant drivers in developing Baltimore City’s opioid addiction and overdose response strategy and identifying new opportunities to intervene and save lives.