

Baltimore County Overdose Prevention Plan

Section 1: Review and Analysis of Data

Based on the data available in the DHMH publication “Drug and Alcohol Intoxication Deaths in Maryland”, there has been an average of 112 overdose deaths per year from 2007 to 2012 in Baltimore County. Actual deaths per year range from 122 in 2007 to 115 in 2012. Opioid-related deaths overall have ranged from 87 in 2007 to 101 in 2012. The number of prescription opioid-related deaths showed a definite increase from 2007 to 2011 (from 44 in 2007 to 66 in 2011) but decreased to 46 in 2012. Oxycodone-related deaths also increased in Baltimore County during the same time period, from 8 in 2007 to 21 in 2011, but similar to the overall prescription opioid-related deaths, decreased to 12 in 2012. Methadone-related deaths remained relatively unchanged during the same time period. Please refer to the attached graphs and tables excerpted from the referenced publication for additional data. Over the last year, although there has been a decrease in prescription opioid-related deaths, there has been a corresponding increase in heroin-related deaths. Anecdotally, we believe that people who initially become addicted to prescription opioids often switch to heroin when they can no longer obtain prescriptions. Heroin can be obtained without a prescription and therefore becomes the substitute drug.

Although the total number of overdose deaths in the County has remained relatively stable over the past several years, we have also not seen a decrease in deaths. The Baltimore County Department of Health sees this as a public health issue, and is of the belief that even one overdose death is one too many. The Baltimore County Department of Health will be leading a new effort toward decreasing the number of overdose deaths. In collaboration with the Baltimore County Drug and Alcohol Abuse Council and the Mental Health Advisory Council, we will form a Lethality Review Team. Similar to the Child Fatality Review Team, this will bring together different disciplines to review adult behavioral health deaths, with the initial focus on overdose deaths, in Baltimore County. The Team will gather and review data on overdose deaths, and findings will help determine what additional prevention and treatment efforts are necessary in the County.

Section 2: Planned Interventions/Initiatives

1) Education of Clinical Community

a) Health Officer will engage medical community in an effort to provide education on various aspects of overdose prevention.

- i) Letter to be sent to all prescribers in Baltimore County that informs them of increase in deaths associated with prescription opiates. Information will include safe prescribing practices, the use of Screening, Brief Intervention, and Referral to Treatment (SBIRT), information on the Prescription Drug Monitoring Program (PDMP), and contact number for additional information.
- ii) Provide Grand Rounds to least two hospitals during FY 2014. Presentation will include information on the increase in overdose deaths due to opiates, safe prescribing practices, the PDMP, and additional contact information.

- b) Provide training to relevant staff of Baltimore County Department of Health and Human Services (i.e. home health nurses, social workers, etc.)
- c) Offer training for substance use disorder treatment providers about overdose prevention and effective interventions.

2) Outreach to High-Risk Individuals and Communities

- a) Contact methadone and buprenorphine providers in the County to provide information on overdose prevention and offer technical assistance.
- b) Invite at least one one methadone or buprenorphine provider to be a member of the Lethality Review Team.
- c) Prepare flyer to distribute to selected pharmacies and ask them to include when filling any prescription for opiate medication.

3) Other Interventions/Initiatives

- a) Public Awareness Campaign collaboration among Prevention, Treatment and ROSC managers and programs.
 - i) TV and radio ads targeted to parents about proper storage and disposal of prescriptions as a way to prevent teens from abusing these medications.
 - ii) Place prescription drop off boxes at all police precincts and advertise their availability.
 - iii) Purchase bus stop signs with prevention messages.
 - iv) Offer an educational program to Emergency personnel and share informational kits that could be distributed by EMT's throughout the County. The kits would be offered to the family of individuals who have overdosed.
 - v) Offer educational seminars to:
 - (1) Crisis Response Staff
 - (2) Targeted Case Managers
 - (3) Family members with a recovering addict in the home
 - (4) Peer Recover Support Specialists
 - vi) Encourage the Peer Recovery Support Specialists to educate their contacts and encourage these individuals to attend trainings on administering Naloxone.
 - vii) Prepare flyers/brochures/handouts to distribute at health fairs, conferences and educational events. Topics may include safe storage and disposal of prescription drugs, information on Naloxone, Opioid abuse and addiction and how to get help with local resource information.

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