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	Subject	Council Bill 15-0244R – Resolution – Heroin Task Force Report		

To: President and Members  
of the City Council  
c/o 409 City Hall

October 14, 2015

The Baltimore City Health Department (BCHD) is pleased to have the opportunity to review Council Bill 15-0244R – Resolution – Heroin Task Force Report. The purpose of this Resolution is to call on the Health Commissioner and members of the Mayor’s Heroin Treatment and Prevention Task Force to appear before the City Council to report on the findings and recommendations of the Heroin Treatment and Prevention Task Force.

With approximately 19,000 active heroin users in Baltimore, our city cannot be healthy without addressing heroin addiction and overdose – a problem that tie’s into nearly every other issue facing our city and claims lives every day. Heroin addiction impacts our entire community. Those struggling with addiction are among our neighbors, our friends, and our family. Addressing addiction is about saving lives and we need to get back on track.

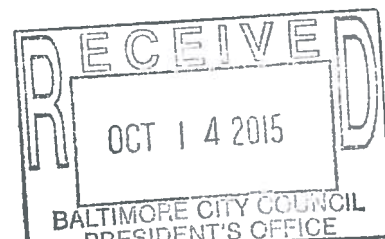
Mayor Rawlings-Blake had the foresight to convene the Heroin Treatment and Prevention Task force in October of 2014. Understanding that health is not just about physical health, but also mental health, the Mayor made this one of her administrations top priorities. She challenged the task force to develop bold and progressive recommendations that could be realistically implemented to help turn the tide against addiction and overdose in our city.

All totaled, the task force made ten recommendations found within the report provided. Some of the recommendations were so important that we have already begun to implement them:

- **We have implemented a citywide heroin overdose plan.** To save the lives of our citizens, we have developed targeted treatment and preventive interventions for those at highest risk for overdose to facilitate widespread dissemination of the opioid antidote, naloxone.

Through this plan we were able to take naloxone directly into the most at risk communities and see that it gets to those in need. On International Overdose Day alone, we trained and distributed naloxone kits to approximately 382 people – which is a total of 762 doses of this life saving drug now in the hands of those who need it.

*Fav w/ comm*



As of October 1<sup>st</sup>, the Health Commissioner has issued a standing order for every resident of Baltimore City that has received naloxone training to be given naloxone without a prescription. This is one of the largest single efforts in the country to achieve citywide naloxone distribution and as such, the over 4,000 people we have trained to date will now have easier access to naloxone.

- **We have implemented a comprehensive outreach and education campaign to reduce stigma and encourage treatment.** In July, the Health Department launched “DontDie.org”. The campaign included billboards, bus shelter ads and a new website to educate citizens that addiction is a chronic disease and to encourage individuals in need to seek treatment.
- **We are coordinating efforts with treatment providers and law enforcement.** This includes preventing targeted drug sales to vulnerable individuals undergoing addiction treatment; working collaboratively to obtain help for people with behavioral health disorders; and increasing support for Drug Treatment Courts and other diversion programs.

Working with the Baltimore City Police Department, other city leaders like Councilman Henry, our partners at BHSB, and other city agencies the Health Department assisted in applying to a grant to develop the LEAD program in Baltimore. Law Enforcement Assisted Diversion is a pre-arrest diversion program for low level drug offenders. The program will help break the cycle of arrest for addicts by facilitating access to treatment and other services. We are confident Baltimore will be awarded the grant and will develop an effective LEAD program here in our city.

- **We have developed the first “Good Neighbor Agreement” for substance use disorder providers and community members.** This agreement covers issues such as loitering, cleanliness, security, and engagement with community committees. We have successfully implemented our first “Good Neighbor Agreement” in Cherry Hill and helped improve community relations between an important treatment clinic and the surrounding community.

These and other recommendations are things we in the city can do ourselves, but there are some recommendations that will take the help and support of our federal, state, and private partners to implement. The Task Force took the Mayor’s challenge to heart and recommended bold and visionary ideas.

- **We must ensure treatment on demand.** This involves developing a 24/7, “no wrong door” treatment center for addiction and mental health – an ER just for substance abuse and mental health. Just as a patient with a physical complaint, can go into the ER any time of the day for treatment, a person suffering from addiction must be able to seek treatment on-demand. Nationwide, just 11% of patients with addiction get the treatment they need. There is no physical ailment for which this would be acceptable.

This center would be among the first of its kind in the country and would provide full capacity treatment in both intensive inpatient and low-intensity outpatient settings. The center could also link to case management services to connect patients to other necessary services such as housing, and job training.

- **We must increase access to treatment and case management services for those in prison and recently incarcerated, as well as increasing availability of evidence-based treatment, such as buprenorphine.** We must stop criminalizing addiction and treat it as the chronic medical disease that it is. 8 out of 10 people in jail use illegal substances. We must provide evidenced based treatment in prison such as buprenorphine. Upon release must ensure each person recovering from addiction is connected to future care and comprehensive case management services. Re-entry is a vulnerable time when many individuals back-slide into their disease despite their best intentions. Case management services will provide support and resources to increase the potential for people to successfully maintain their recovery.

We hope these and the rest of our recommendations will be a roadmap to address addiction and overdose. We have shared our innovative, evidence-based approaches with the Governor's Heroin Task Force and hope that they will use our recommendations in order to fight the heroin epidemic in Baltimore and in Maryland. We will also be turning to our federal partners and our private partners around the country to help to fund these necessary, live-saving interventions.

The heroin epidemic is a public health emergency that is claiming the lives, the livelihoods, and the souls of our residents. There are some who say the heroin problem is too big, that it cannot be solved. But Baltimore has been fighting the heroin epidemic for decades and has never taken a back seat to public health. We pioneered programs like the needle exchange, which has prevented 15,000 people from contracting HIV and Hepatitis. We never shy away from doing what's right for our citizens, no matter if it's controversial or if it's hard. If any city that can turn bold ideas into reality, it's Baltimore. With dedicated partners like you in our city council and the other represented here today, we can fight the epidemic together, save lives and reclaim people and their families.

The Health Department thanks the City Council for calling this hearing. We look forward to working with you to implement these recommendations and reduce addiction and overdose in Baltimore. We will be present at the hearing to answer any questions the Committee may have on this matter.

cc: Angela Gibson, Office of the Mayor  
Andrew Nicklas, Director of Legislative Affairs, Department of Health