

FINAL REPORT



HEROIN & OPIOID EMERGENCY TASK FORCE

Lieutenant Governor Boyd K. Rutherford, Chair



DECEMBER 1, 2015

a focus on heroin and opioids. It also recommends establishing peer recovery specialists within the Safe Streets model.

5. Establishing a Recovery Unit at Correctional Facilities

The Task Force recommends that the Department of Public Safety and Correctional Services establish a pilot Recovery Unit at Eastern Correctional Institution to house offenders who are engaged in drug addiction programs and are invested in recovery.

6. Studying the Collateral Consequences of Maryland Laws and Regulations on Employment of Ex-Offenders

The Task Force recommends that the Governor’s Office of Crime Control and Prevention conduct a study of Maryland laws and regulations that establish a “Collateral Consequence,” particularly unnecessary barriers to employment of ex-offenders.

PROMOTING EDUCATIONAL TOOLS FOR YOUTH, PARENTS, AND SCHOOL OFFICIALS

1. Creating a User-Friendly Educational Campaign on School Websites

The Task Force recommends that the Maryland State Department of Education assist local school boards in the development and promotion of a drug education and information segment on school websites.

2. Training for School Faculty and Staff on Signs of Student Addiction

The Task Force recommends that the Maryland State Department of Education assist school staff, including teachers, school resource officers, coaches, athletic directors, and guidance counselors, to receive training on the disease of addiction and signs that a student is abusing heroin or prescription opioids.

3. Promoting Evidence-Based Prevention Strategies that Develop Refusal Skills

The Task Force recommends that the Maryland State Department of Education promote evidence-based programs to help students resist peer pressure while maintaining self-respect.

4. Support Student-Based Film Festivals on Heroin and Opioid Abuse

The Task Force recommends that the Maryland State Department of Education evaluate the success of student-based film festivals and consider replicating it as a statewide initiative.

IMPROVING STATE SUPPORT SERVICES

1. Implementing Comprehensive Heroin and Opioid Abuse Screening at the Department of Juvenile Services and the Department of Human Resources

The Task Force recommends that the Department of Juvenile Services develop a questionnaire that will be specifically designed to guide Department of Juvenile Services staff in a productive discussion with the youth and parent regarding opiates, including heroin, fentanyl, and prescription opioids, and other drugs. Similarly, the Task Force recommends that the Department

of Human Resources implement a comprehensive screening tool to identify clients and families affected by heroin and opioid use.

2. Establishing the Maryland Center of Excellence for Prevention and Treatment under the Behavioral Health Advisory Council

The Task Force recommends that a Center of Excellence for Prevention and Treatment be established under the Behavioral Health Advisory Council and housed in an academic setting. The Center would serve as the main body to provide critical oversight, a unifying strategy, and accountability for all prevention and treatment programming across the State. It would also serve as a source of independent information, data analysis, and evaluation of the effectiveness and coordination of prevention and treatment programming in Maryland; and to provide oversight such that programming is fully accountable across all agencies in accordance with metrics, outcome measures, standards of care, and performance evaluation.



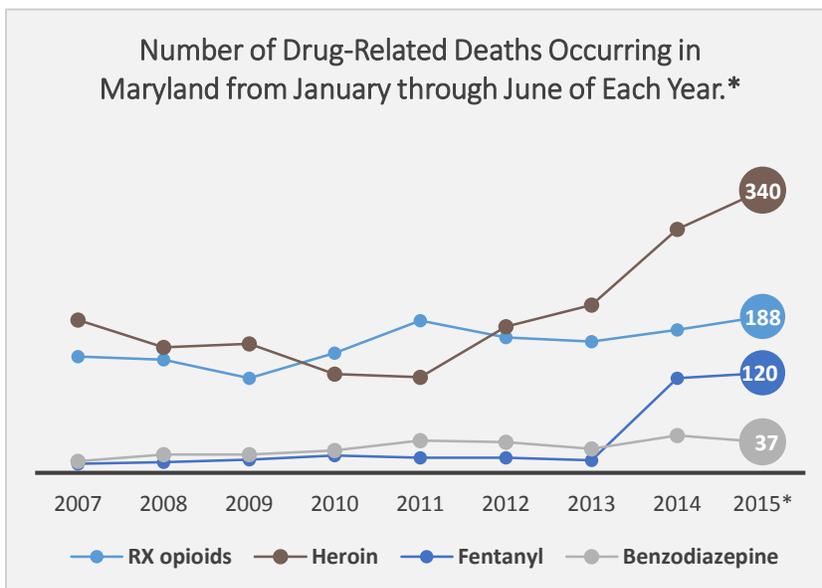
III. INTRODUCTION

For the past eight years, Maryland has seen rising rates of drug- and alcohol-related overdose deaths. In 2013, there were 464 heroin overdose deaths versus 387 homicides and 482 motor vehicle fatalities. In 2014, there were 578 heroin overdose deaths versus 421 homicides and 511 motor vehicle fatalities. There has been a 60 percent rise in the total number of fatal drug- and alcohol-related overdoses in Maryland, from 649 deaths in 2010 to 1,039 deaths in

2014. According to the most recently available data, the number of deaths continued to increase in 2015. There were 599 drug- and alcohol-related deaths in the first half of 2015 (January to June), almost double the number of deaths that occurred in the same period in 2010.

The overall rise in the number of drug- and alcohol-related deaths is largely attributable to increases in the number of heroin and fentanyl-related deaths. In 2015, heroin-related overdose deaths increased by 186 percent, from 119 to 340, when comparing the first six months of 2010 to the first six months of 2015; this increase is in stark contrast to the 35 percent decline that occurred during the first six months of 2007 to the first six months of 2010. Data from recent years demonstrates that increases in heroin-related deaths have occurred among all demographic groups and across all regions of the state. Evidence suggests that the rise in heroin-related deaths may, in part, originate from increased prescription opioid misuse, as heroin is a cheaper, more potent, and widely available alternative.

An emerging threat in Maryland is the spike in fentanyl-related overdose deaths. Beginning in late 2013, there were sudden and large increases in the number of deaths involving fentanyl in a number of states, including Maryland. The majority of these deaths were not the result of overdoses of pharmaceutical fentanyl, but instead involved an illicit, powdered form of fentanyl that was mixed with, or substituted for, heroin or other illicit substances. Fentanyl is many times more potent than heroin, and greatly increases the risk of an overdose death.



DATA SOURCE: MARYLAND DEPARTMENT OF HEALTH AND MENTAL HYGIENE
*2015 COUNTS ARE PRELIMINARY