Overdose Fatality Review (OFR)
Stark County 2021: Annual Report

UNINTENTIONAL OVERDOSE

In 2021, the Overdose Fatality Review (OFR) committee met quarterly and reviewed all of the 2021 unintentional overdose deaths that occurred in Stark County. Data was collected from coroner reports, death certificates, and the Stark Criminal Justice Information Systems. All data is reported aggregately due to confidentiality laws. There were 143 overdose deaths in Stark County in 2021. Stark County had seen a decline in the number of overdose deaths until 2018. However, since 2019 overdose deaths have increased (See Figure 1).

The OFR committee is comprised of members from public health, mental health, addiction services, coroner's office, physicians, hospitals, and law enforcement. The overarching goal of this team is to decrease overdose deaths in the community. It is the team's intention to accomplish this through a comprehensive review of available data that recommendations can be made to identify opportunities for reducing unintentional opiate related deaths and overdoses. These efforts will also help increase community awareness surrounding this issue.

With the recent passing of legislation ORC 307.631-639, the committee edited the by-laws to review cases individually. The recent legislation offered more protection when having individual case reviews.

The committee will continue to review demographic information in aggregate format.

DRUG OVERDOSE PREVENTION (DR22) GRANT

The DR22 grant began in September 2021. This grant was awarded to the Stark County Health Department (SCHD) from the Ohio Department of Health (ODH). The main strategies of the grant are:

1. Participation in the Stark County Opiate and Addiction Task Force
2. Data and Information Gathering
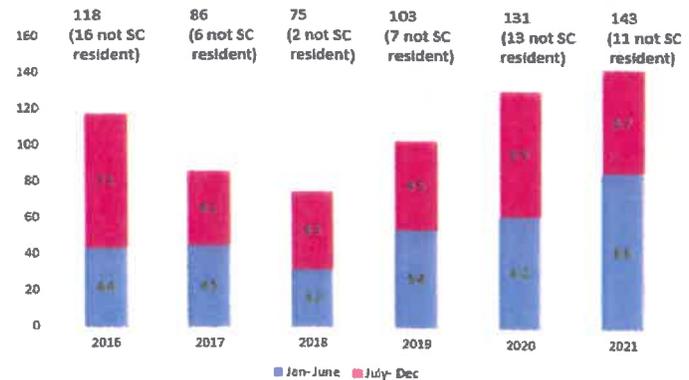3. Implementation of an Awareness Campaign

The grant helped to fund an awareness campaign for Beat the Stigma. The ad to the right is an example of the education provided to the community which focuses on decreasing stigma. The ad also encourages people to challenge what they know about addiction by taking a 10 question quiz.

This grant will continue until August 31, 2022, and has been renewed for the next year.

Using this data, trends will be identified and several cases will be picked for individual case reviews and also picked randomly. Because of the individual case reviews, the meeting now uses a closed format and requires partnering agencies to sign an OFR confidentiality agreement and data (sharing) confidentiality agreement prior to receiving the meeting invite.
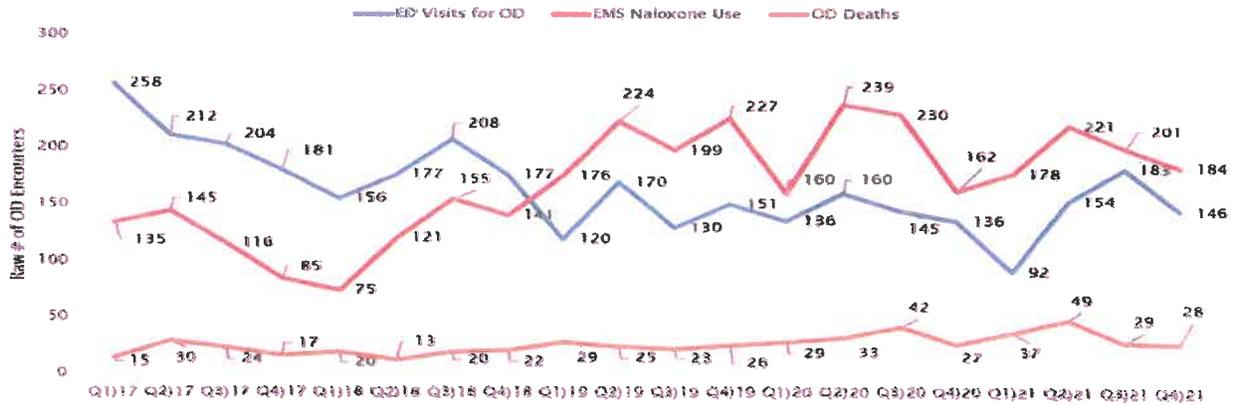
The agencies that do not attend the meeting but who would still like to receive the meeting minutes will be required to sign the OFR confidentiality and data (sharing) confidentiality agreement as well.

Figure 1: Stark County 6 Year Comparison of OD Deaths

| | 118 (16 not SC resident) | 86 (6 not SC resident) | 75 (2 not SC resident) | 103 (7 not SC resident) | 131 (13 not SC resident) | 143 (11 not SC resident) |

Jan-June ■ July-Dec
2016 2017 2018 2019 2020 2021

Challenge what you know about addiction.

Addiction is a disease, not a decision.

BeatTheStigma.org

Ohio Opioid Education Alliance

For more information or a digital copy of the report - visit StarkHealth.org.

Figure 2 : Stark County Fatal vs. Non-Fatal Overdoses

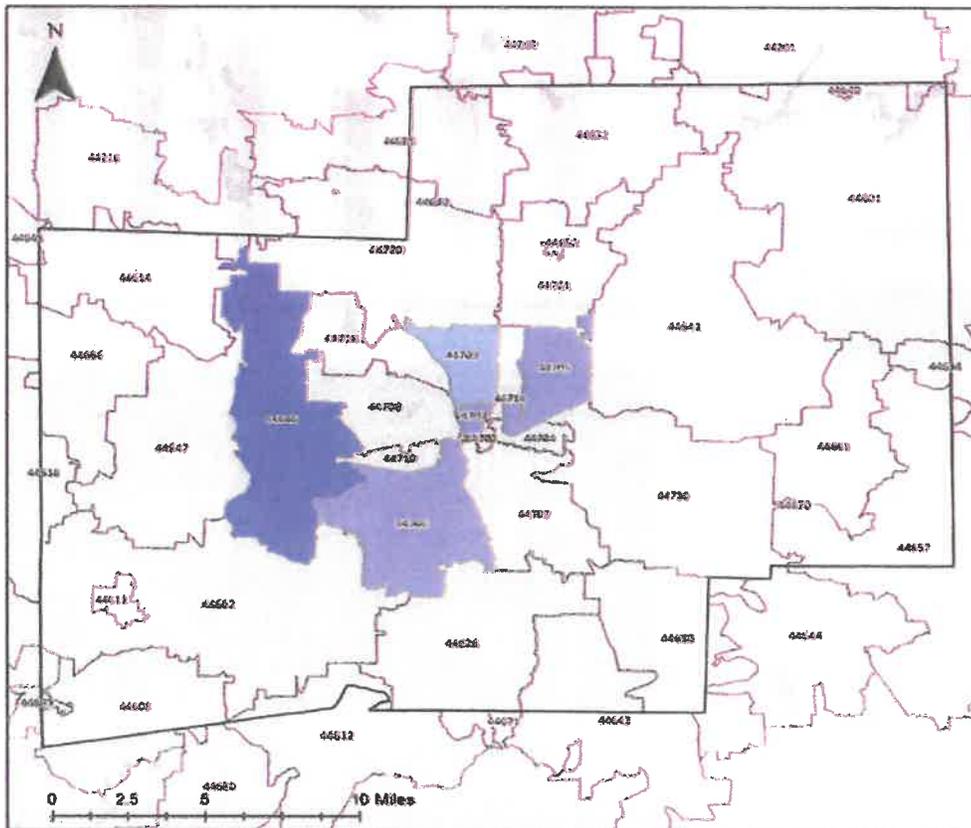Legend: ED Visits for OD — EMS Naloxone Use — OD Deaths

TRACKING NON–FATAL OPIOID OVERDOSES

Tracking non fatal opioid overdoses (OD) has continued to be a focus of the OFR team. The data above in Figure 2 was collected from the following sources: Stark County Coroners Office, EMS Incident Reporting System, and Ohio's EpiCenter. This data provides a comparison of overdose deaths, EMS administration of naloxone, and emergency department visits. When looking at data from quarter 1 in 2019, more naloxone was used with fewer visits to the emergency department, Figure 2. It is important to note that in the middle of 2019 the epicenter classifier which filters the ED visits at the state level changed to more specifically reflect OD visits in Ohio ED settings. SCHD monitors EpiCenter ED visits on a weekly basis and these reports can be found using the link below.
http://www.starkcountyohio.gov/public-health/nursing-services/overdose-prevention.
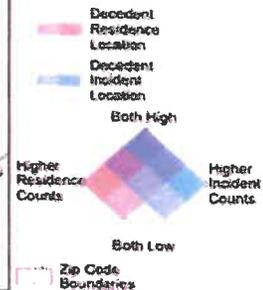
OVERDOSE DEATHS BY ZIP CODE

January - December 2021 Overdose Decedent Counts

This map uses a bivariate color scheme to represent the drug overdose deaths in Stark County from January to September 2021 by the decedents' residence and incident locations, mapped by zip code.

A bivariate color scheme displays two variables by using a grid of colors. For this map, the lighter colors mean fewer counts and darker colors mean more counts. Pink colors mean higher residence location counts, blue colors mean higher incident location counts, and purple colors mean a similar amount of both variables.

Areas shown with no color have less than 10 counts and have been suppressed for confidentiality

Created 05/17/2022 | Projection: NAD 1983 (ft.) StatePlane Ohio North | Credits: Stark County Health Department

STARK COUNTY UNINTENTIONAL OVERDOSE DEMOGRAPHICS

Of the unintentional overdose (OD) deaths that occurred in Stark County, the majority continue to be non Hispanic white males. In Figure 4, the age group with the highest rate in previous years has been 25-34. However, in 2019, this age group shifted to be 35-44 and this continues to be the case for 2021. There continues to be an increase in the 55 and over age group when compared to previous years.

Overall in 2021, OD deaths were highest among white individuals, at 80%. However, when looking at race-specific mortality rates, black rates are significantly higher at 100.4 deaths per 100,000 in 2021, when compared to the OD death rate for white individuals, at 35.2 deaths per 100,000 in Stark County (Figure 5). Additionally, the black OD death rate has doubled since 2019 (50.7 per 100,000).

The majority of OD deaths have been male. However, in recent years we have seen a fluctuation in female deaths. The female death rate in 2019 compared to the rate in 2020 increased from 20.4 to 25.5 and then in 2021 the rate decreased again to 20.4.

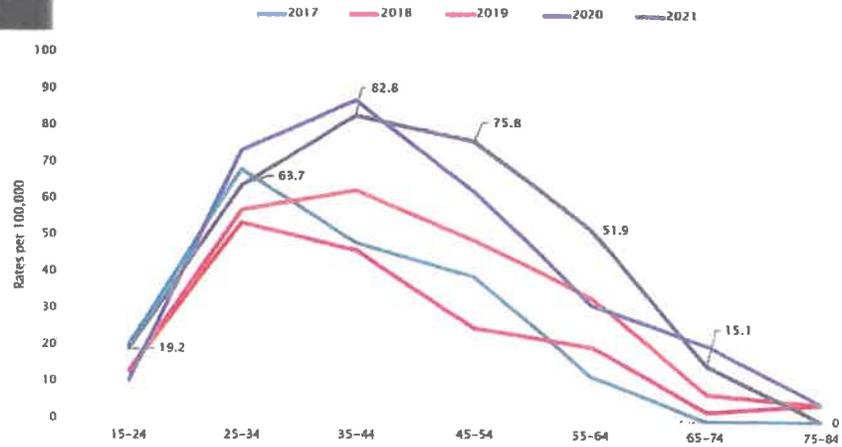### Figure 4: Stark County Unintentional Overdose Death Rate by Age Group

Figure 5: Stark County Death Rate by Race per 100,000

Race	2017 Rate	2018 Rate	2019 Rate	2020 Rate	2021 Rate
White Rate	23.9	19.4	27.2	33.5	35.2
Black Rate	*26.2	*33.7	50.7	69.1	100.4

(*) Rates with a numerator of less than 10 may be unstable.

COALITION EVALUATION—STARK COUNTY MENTAL HEALTH & ADDICTION RECOVERY (STARKMHAR)

The strategic planning leadership committee, through the Stark County Mental Health and Addiction Recovery (StarkMHAR), evaluated the Opiate and Addiction Task Force early in the year (OATF).

The leadership developed the following implementation strategies to help improve coalition membership and retention:

- Improve awareness of resources and training available to OATF members
  - Cultural Humility Training
  - Stigma Reduction campaigns available
  - Public data sources available
  - Updates on public data resources
- Increase Networking among members
  - Develop interactive activities for participants
  - Develop a directory of members
- Improve diversity of OATF through increased promotion
  - Ask a friend to attend next meeting
  - Ask members to provide a contact
  - Send invite to Police/Fire Chiefs
  - Advertise within community Opiate and Addiction Task Force
  - Give members opportunity to select agenda topics

Figure 6: StarkMHAR Newly Developed Business Card Invite

IDENTIFIED TRENDS

Figure 7: Count/Percent of Decedents Positive for Opiate Drug Combinations

Drug Combination	Count	Percentage
Opiate/Stimulant (cocaine, methamphetamine, amphetamine)	67	47%
Opiate/Sedative (benzodiazepine, anticonvulsant, gabapentin, anti-histamine, phenobarbital, lyrica, alcohol)	55	39%
Opiate/Marijuana	12	8%

Figure 7, shows positive toxicology results for drug combinations of Stark County Overdose decedents. An opiate could represent prescription or illicit drugs. Drug combinations continue to be a high risk factor for overdose. Additionally, fentanyl present in the toxicology screens has steadily increased since 2017 with a slight decrease from 2020 to 2021 from 72% to 68%. 18% of the 131 decedents in 2020 were non-opiate related overdose deaths, with one of those being an insulin overdose. In 2021, 26% of the 143 decedents were non-opiate related overdose deaths.
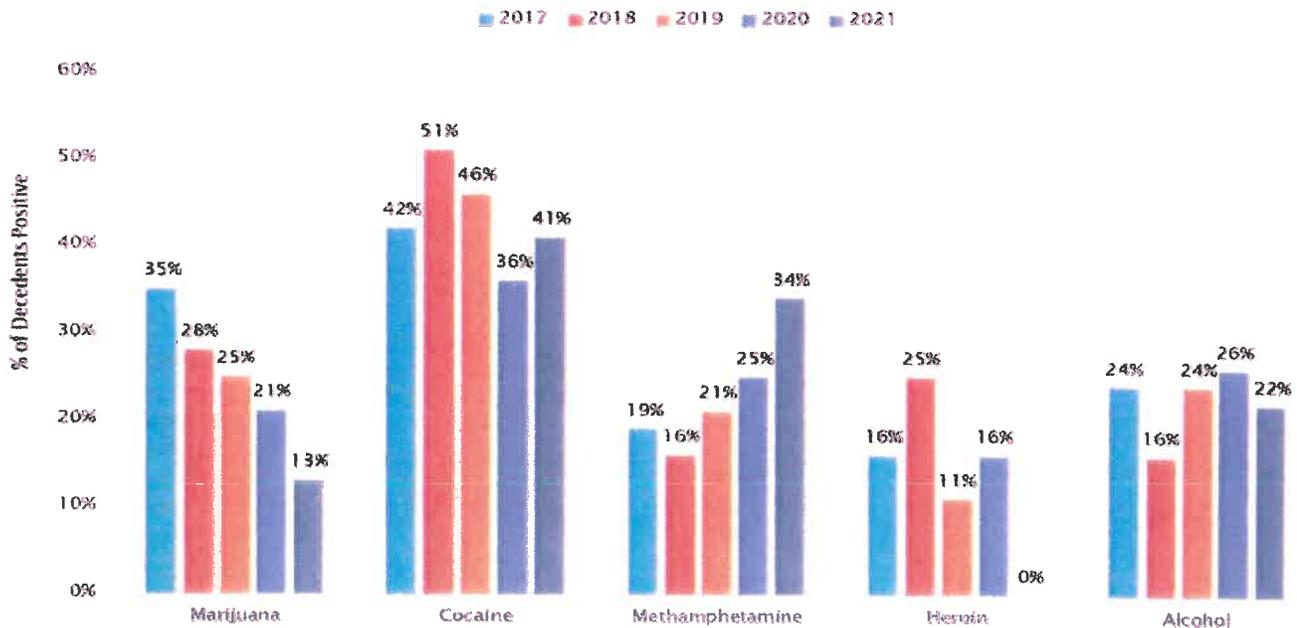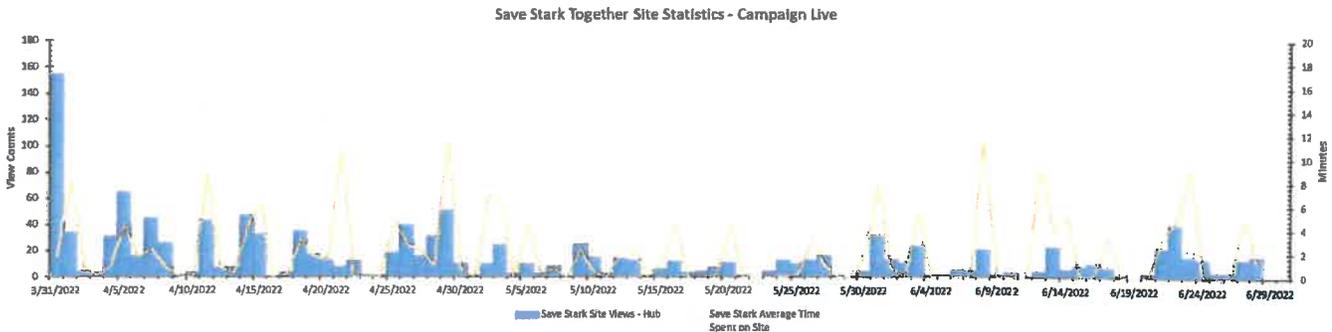
Figure 8: Illicit Drugs and Alcohol

Figure 8, above illustrates the percentage of illicit substances and alcohol present in the 2021 unintentional overdose decedents. Marijuana has decreased steadily over the past several years. Methamphetamine has steadily increased over several years while cocaine increased in 2021 after several years of decline. Alcohol has slightly fluctuated overall but has consistent percentages of decedent testing positive. Heroin positive toxicology results continue to decrease.

SAVE STARK LANDING PAGE

Figure 10: Landing Page Metrics as of 06/29/2022

Save Stark Together Site Statistics - Campaign Live

The Stark County Health Department team launched the Beat the Stigma campaign in March. The Beat the Stigma campaign (link on Save Stark) is a 60 second quiz that residents can take to test their knowledge of substance use disorder and mental health. The team also created the Save Stark landing page in conjunction with the launch of the campaign. The page is filled with local resources, locator maps, and helpful links. The page has had over 1,300+ visits which is an average of 14 visitors per day since the site launched on March 31, 2022. Those visiting spend an average of 3 minutes searching the site for treatment, recovery, harm reduction or prevention resources.

The campaign efforts have included Beat the Stigma language and a link to the Save Stark page on 45 SARTA buses, a mailer to 17,000+ homes in some of the highest incident areas, social media posts, and a poster campaign to local providers. Collectively social media (paid and organic) has reached approximately 24,000+ individuals on Facebook alone. The Save Stark page has also reached national attention from Esri, creator of the landing page technology, and was featured at the 2022 Esri Health and Human Services National Conference. There are links to the presentation, the success story, and the landing page below.

Save Stark Success Story by Esri

Communicating to Audiences with the Use of GIS Presentation

Save Stark Landing Page

References:

1. Death Statistics were from the Stark County Coroners Office, data was pulled from the Ohio Department of Heath's EpiCenter database. Gender and Population data (death rates) was taken from the 2018 5-year estimate from Census Bureau website- subject to change https://www.census.gov/programs-surveys/acs 2021 numbers based on 2019 5-year estimate

2. Ohio Department of Public Safety, Division of Emergency Medical Services, EMS Incident Reporting System

3. Ohio Automated Prescription Reporting System (OARRS) Ohio Board of Pharmacy

RECOMMENDATIONS

Figure 9: OFR Recommendations

1. The OFR committee encourages and supports the innovative distribution of naloxone through law enforcement, Project DAWN sites, jails, emergency departments, leave behind programs, treatment centers, pop-up sites, syringe exchange program and mail in order.

2. The OFR committee recommends the use of screening tools in both medical/dental provider's offices and emergency departments to screen for individuals who are at risk of or currently suffering from substance use disorder.

3. The OFR committee recommends implementation of a comprehensive referral system in the emergency department which includes peer support/harm reduction services.

4. The OFR committee recommends Medication Assisted Treatment (MAT) availability through emergency department settings within Stark County and continue MAT through jail settings.

5. The OFR committee supports the development/implementation of real time data tracking software systems focused on overdose information such as High Intensity Drug Trafficking (HIDTA) OD map and local dashboards.

6. The OFR committee encourages more access to treatment efforts and awareness programs related to addiction resources, educational materials and harm reduction services such as expansion of innovative treatment programs.

7. The OFR committee recommends community based programs to address the racial and gender disparities among overdose victims.

8. The OFR committee recommends that local health departments, StarkMHAR, local government leadership, local law enforcement, EMS, Hospitals, the Coroners office, EMA and treatment centers participate in reporting increase overdose activity and actively participate in assigned roles when the Community Response Plan is initiated.

9. The OFR committee supports the efforts and initiatives of the Opiate and Addiction Task Force hosted by StarkMHAR.

10. The OFR committee recommends that information be shared by community partners within the committee as it relates to individual case reviews and the recently passed ORC.

Figure 9 The guiding principles of the OFR committee as it relates to the purpose are as follows: The "North Star" is the shared goal of reducing overdose deaths, overdose deaths are preventable, substance use disorder is a chronic treatable disease, use of multisector data to inform response strategies and continually improve the OFR process and prevention activities. The recommendations were developed utilizing a variety of surveys, OFR data/trends identified from coroners reports, and the Centers for Disease Control and Prevention evidence-based strategies for preventing opioid overdose and remain the same as previous years except number ten. Future recommendations will be developed utilizing individual case review data.

COMPREHENSIVE SUSTAINABLE SYSTEM—FQHC

Figure 10 Infographic of Comprehensive Sustainable System Components

Developing a Comprehensive Sustainable System (CSS) within a Primary Care Setting builds upon a newly developed behavior health specialist position within the organization. Strategies were developed to create a continuum of prevention, harm reduction and treatment access. Several components of the CSS were already in place, and gaps were identified as screenings, peer support referrals and naloxone distribution. The second year of the grant, from September 2022 to August 2023, will focus on new components of the CSS, such as Medically Assisted Treatment (MAT) and strengthening newly developed strategies from the previous year.