













COVID-19 Behavioral Health Task Force

December 18, 2020



Behavioral Health Task Force Agenda

- Housekeeping: Lauren Prole
- Welcome: Dr. Sara Salek
- ❖ ADHS Update: Teresa Ehnert
- Opioid & Suicide Data: Sheila Sjolander
- Suicide Prevention Updates: Kelli Williams
- HIDTA Update: Shelly Mowrey
- Crisis Data: Alex Herrera
- Questions, Open Discussion & Wrap-Up: All



ADHS Update

Teresa Ehnert
Bureau Chief, Public Health Emergency Preparedness
Health Emergency Operation Center/ ESF8
PHEP/HPP Director, Arizona



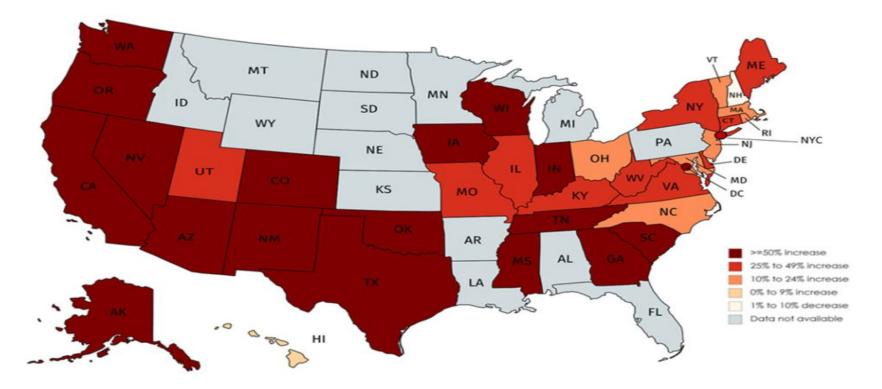
Update on Arizona's Opioid Crisis

Sheila Sjolander, MSW
Assistant Director, Prevention Services
ADHS





Figure 3: Percentage change in 12-months ending provisional^a count of fatal overdoses involving synthetic opioids^b, 36 states, the District of Columbia, and New York City^c: Deaths from 12-months ending in June 2019 to 12-months ending in May 2020^d



Opioid Deaths 2019 & 2020

Confirmed through death certificates reported to ADHS Vital Records

| Month | 2019 | 2020* |
|--------------------|------|-------|
| January | 105 | 142 |
| February | 81 | 118 |
| March | 105 | 156 |
| April | 103 | 144 |
| May | 110 | 181 |
| June | 89 | 199 |
| July | 133 | 209 |
| August | 128 | 190 |
| Total Jan August | 854 | 1339 |
| Year to Date Total | 1359 | 1563 |

^{*}Preliminary Reported as of 12/14/2020

Opioid Deaths by County Confirmed through death certificates reported to ADHS Vital Records

| County | 2019 | 2020** |
|------------|------|--------|
| Cochise | 15 | 23 |
| Coconino | 11 | 16 |
| Maricopa | 959 | 1048 |
| Mohave | 29 | 24 |
| Pima | 210 | 270 |
| Pinal | 37 | 57 |
| Santa Cruz | * | 12 |
| Yavapai | 45 | 54 |

^{*}Data is suppressed for counties with numbers fewer than 10

^{**2020} data is preliminary through 12/14/2020

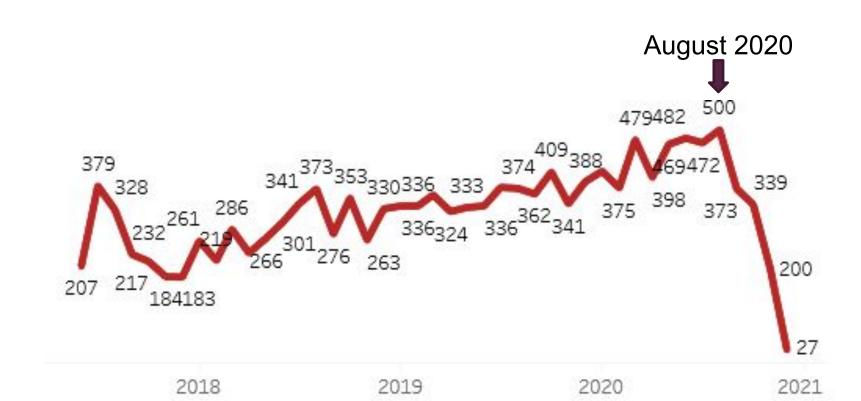
Opioid Deaths by Age Confirmed through death certificates reported to ADHS Vital Records

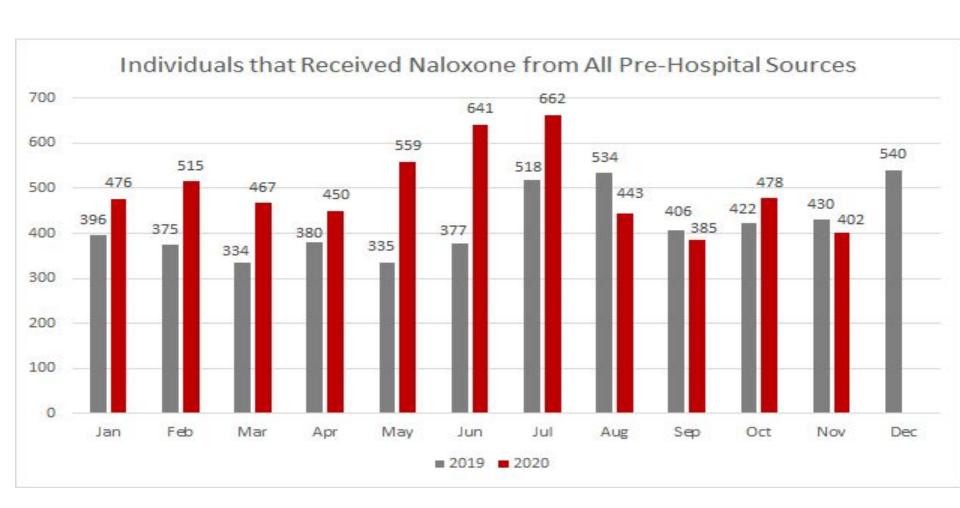
| Ages | 2019 | 2020** |
|----------------|------|--------|
| Under 15 years | * | 13 |
| 15 to 24 | 227 | 293 |
| 25 to 34 | 362 | 479 |
| 35 to 44 | 300 | 319 |
| 45 to 54 | 203 | 240 |
| 55 to 74 | 188 | 159 |
| 65 to 74 | 57 | 49 |
| 75+ | 18 | 10 |

^{*}Data is suppressed for age categories with numbers fewer than 10

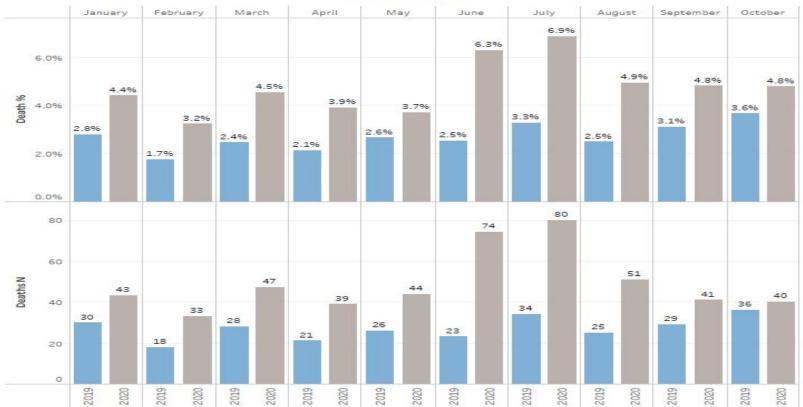
^{**2020} data is preliminary through 12/14/2020

Verified Opioid Overdoses by Month June 2017 – December 11, 2020



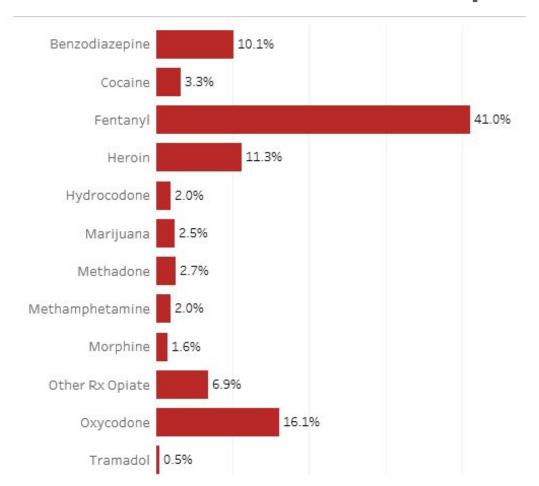


Bureau of EMS & Trauma System EMS Calls for Opioid Deaths. AZPIERS: 2019-2020

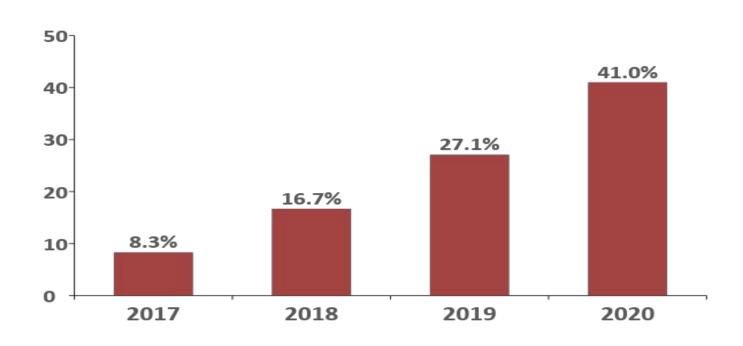


In order to do the comparision between the years 2019 and 2020, those agencies submitted data in 2020 and not in 2019 are excluded from this analysis. Therefore, opioid data for the year 2020 may not reflect the actual incidents reported in the AZPIERS.

Substances involved in verified opioid overdoses 2020

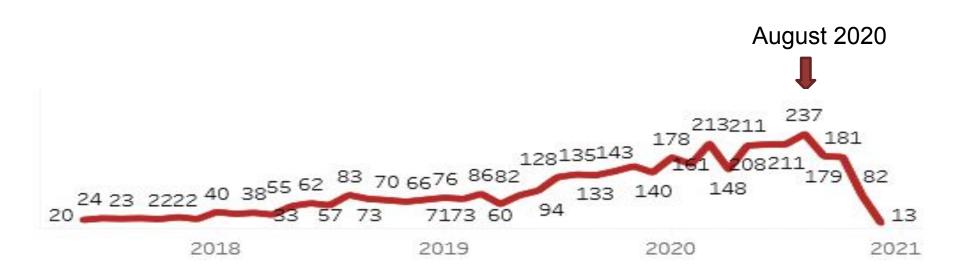


Percentage of Verified Overdoses with Fentanyl Involved, 2017 - 2020



Fentanyl Overdose Trends

Number of verified overdoses involving fentanyl peaked in August 2020**



^{*2017} is a partial year – data collection began June 15, 2017 **2020 is through December 11, 2020; data is incomplete for recent months

Fentanyl involved in verified opioid overdoses 2020 By Age & Gender

| Age | Female | Male |
|--------------------|--------|------|
| 17 years & younger | 3% | 6% |
| 18 – 24 years | 6% | 20% |
| 25 – 44 years | 14% | 38% |
| 45 – 64 years | 5% | 10% |
| 65 years & older | 0% | 0% |

Suicide Deaths 2019 & 2020

Confirmed through death certificates reported to ADHS Vital Records

| Month | 2019 | 2020* |
|--------------------|------|-------|
| January | 138 | 131 |
| February | 99 | 105 |
| March | 140 | 137 |
| April | 137 | 111 |
| May | 143 | 104 |
| June | 139 | 108 |
| July | 133 | 126 |
| August | 118 | 142 |
| Total Jan August | 1041 | 964 |
| Year to Date Total | 1478 | 1291 |

^{*}Preliminary reported as of 12/14/2020

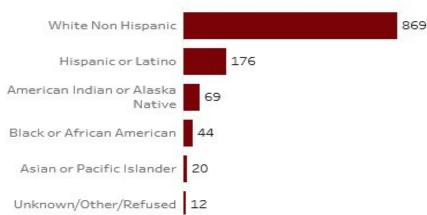
Suicide Dashboard: azhealth.gov/suicide

Number of AZ Resident Suicides by Gender

Select a bar below for more detailed information

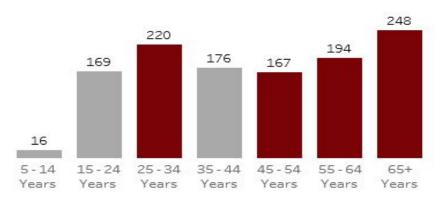


Suicides by Race/Ethnicity



Suicides by Age Group

Select a bar below for more detailed information.



Arizona Health Improvement Plan: Mental Well-being

- 3 key areas of focus:
 - Social Isolation and Loneliness
 - Substance Misuse
 - Suicide
- ADHS will host a virtual forum to learn about, and contribute to, the Mental Well-being AzHIP priority: January 12, 12:00 - 2:00 p.m.
- Please register for this event here.
 https://docs.google.com/forms/d/e/1FAIpQLSftW5wNao6Y5Pmfquq40gNiRl1-M0LithDm6FEDZ3ddl6Fmg/viewform?usp=sf_link
- Contact <u>azhip@azdhs.gov</u> for more information.

For more information:

<u>azhealth.gov/opioid</u>

<u>www.azhealth.gov/suicide</u>

<u>www.azdhs.gov/oarline/</u>

Questions/Comments: <u>azopioid@azdhs.gov</u> <u>sheila.sjolander@azdhs.gov</u>





Suicide Prevention Update

Kelli Donley Williams, MPH
AHCCCS



Trends, Projects, Priorities

- Suicide data
 - 41% decrease in youth related suicides from 2018-2019
 - Pandemic data is not finalized; 6 month lag
- Partnerships with ADHS, ADE, DVS
- Priorities remain reducing suicide among all in Arizona, especially those age 65 and older, American Indians, Veterans, youth



Opioid Prevention Shelly Mowrey

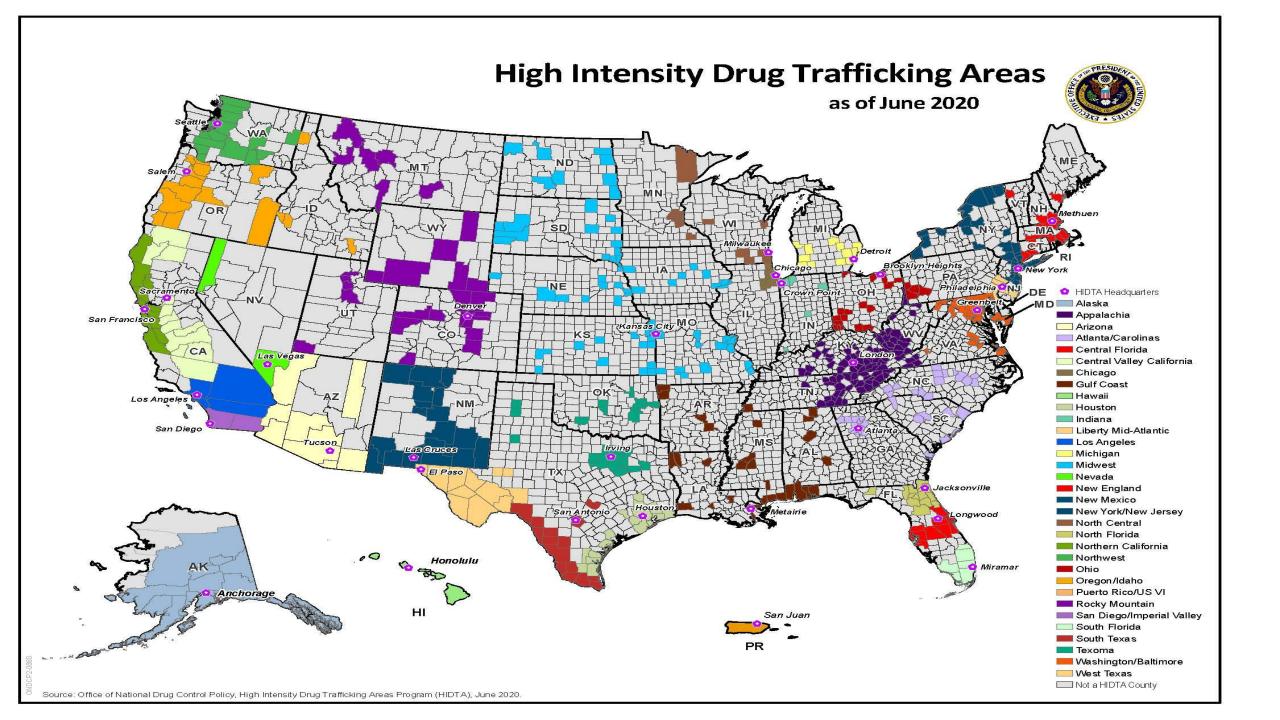




High Intensity Drug Trafficking Area

Shelly Mowrey

Public Health/Public Safety Initiative Commander



Arizona HIDTA coordinates and supports the efforts of 620 full-time and 177 part-time participants from 71 agencies.

25 Initiatives (task forces) are located in the nine HIDTA designated Counties.



2020 Threat Assessment: Top Drug Threats

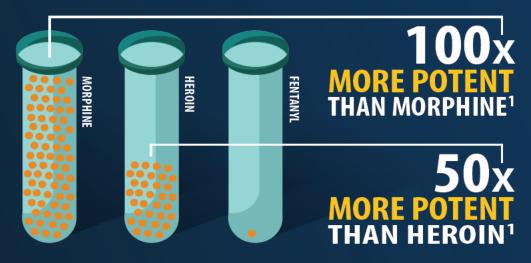
- 1. Methamphetamine
- 2. Fentanyl/Synthetic Opioids
- 3. Marijuana/THC Derivatives
- 4. Heroin
- 5. Cocaine





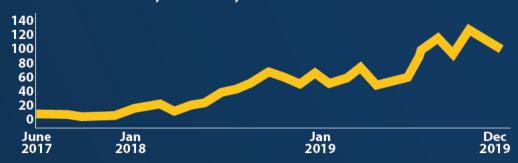
FENTANYL: Overdoses On the Rise in Arizona

Fentanyl is a synthetic opioid approved for treating severe pain, such as advanced cancer pain. **Illicitly manufactured fentanyl** is the main driver of recent increases in synthetic opioid deaths.



FENTANYL OVERDOSES IN ARIZONA

Verified Non-Fatal Fentanyl Overdoses by Month



Fentanyl involvement in verified opioid overdoses increased the most since July 2017²

COUNTERFEIT PILL SEIZURES WITH FENTANYL 490% 2018 TO 2019 INCREASE IN ARIZONA4

ILLICITLY MANUFACTURED

FENTANYL

Fentanyl is often used to cut other illicit substances including **heroin**, **cocaine**, and **methamphetamine** to increase the potency as well as increase profit potential for manufacturers and distributors³

OFTEN MIXED WITH OTHER DRUGS WITH OR WITHOUT USER KNOWLEDGE

References:

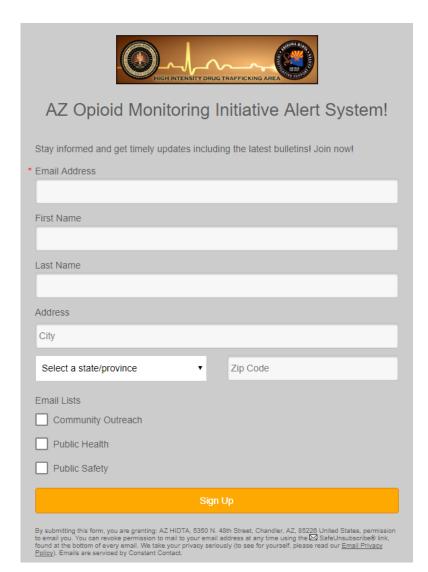
- 1,3 DEA Drugs of Abuse Resource Guide 2020
- ² Arizona Department of Health Services Opioid Update & Surveillance Data Summary February 2020
- ⁴ Arizona HIDTA as of January 09, 2020

Created and Distributed by the Arizona High Intensity Drug Trafficking Area.

Arizona HIDTA Fentanyl

- Overdose Investigations
- Overdose Response Strategy
 - Opioid Monitoring Initiative
 - Public Health Analyst (CDC)
 - Drug Intelligence Officer
- Training
- Demand Reduction Program

Opioid Monitoring Initiative Alert System





<u>Advanced Search</u>

A-Z Index

Q

Emergency Preparedness and Response

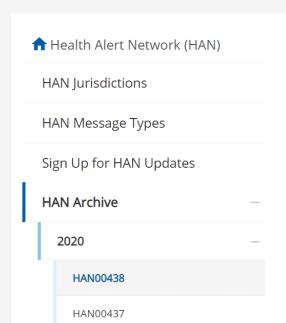
Resources for Emergency Health Professionals > Health Alert Network (HAN) > HAN Archive > 2020











HAN00436

HAN00435

HAN00434

HAN00433

HAN00432

HAN00431

Increase in Fatal Drug Overdoses Across the United States Driven by Synthetic Opioids Before and During the COVID-19 Pandemic





Distributed via the CDC Health Alert Network December 17, 2020, 8:00 AM ET CDCHAN-00438

Summary

The purpose of this Health Alert Network (HAN) Advisory is to alert public health departments, healthcare professionals, first responders, harm reduction organizations, laboratories, and medical examiners and coroners to—

- (1) substantial increases in drug overdose deaths across the United States, primarily driven by rapid increases in overdose deaths involving synthetic opioids excluding methadone (hereafter referred to as synthetic opioids), likely illicitly manufactured fentanyl;
- (2) a concerning acceleration of the increase in drug overdose deaths, with the largest increase recorded from March 2020 to May 2020, coinciding with the implementation of widespread mitigation measures for the COVID-19 pandemic;
- (3) the changing geographic distribution of overdose deaths involving synthetic opioids, with the largest percentage increases occurring in states in the western United States;
- (4) significant increases in overdose deaths involving psychostimulants with abuse potential (hereafter referred to as

Overdose Spike Alert

NOT FOR PUBLIC RELEASE - LAW ENFORCEMENT & FIRE DEPARTMENTS ONLY

The purpose of this email is to inform you of a new zip code that appeared on our radar today. According to the Arizona Department of Health Services (ADHS), in the past 60 days, there have been 10 suspected fatal or non-fatal opioid overdoses for (Specific Zip code).

Please note that the data provided by ADHS is based on Healthcare and/or Medical Examiner cases reported to the Medical Electronic Disease Surveillance Intelligence System (MEDSIS) based on the patient's zip code of residence and not actual overdose location. It is important to note that the patient is a resident of the city noted.

Additional information in the alert

- -Number of Schools in that zip code
- -Treatment Information
- -Naloxone Information
- -Coronavirus Cases



HOME

AGENCIES

IMPLEMENTATION

HOW IT WORKS

SPIKE ALERTS

RAINING IN T

IN THE NEWS

USER STORIES: ODMAP IN ACTION



Jeff Beeson, Dep. Director, Washington/Baltimore HIDTA | Aliese Alter, Senior Program Manager, Washington/Baltimore HIDTA

David Sweat, Cheif of Epidemiology | Courtney Serra, Opioid Epidemiologist, Shelby County, TN Health Department



ODMAP New Jer...

Brian Gould, Assitant Chief, Cheektowaga PD | Cheryll Moore, Medical Care Administrator, Erie County, NY Department of Public Health

LT. Piotrowski, New Jersey State Police

THE ODMAP TEAM REPORTS

COVID-19 Impact on US National Overdose Crisis

Click Here to Read the ODMAP Team Report

Overdose Response Strategy

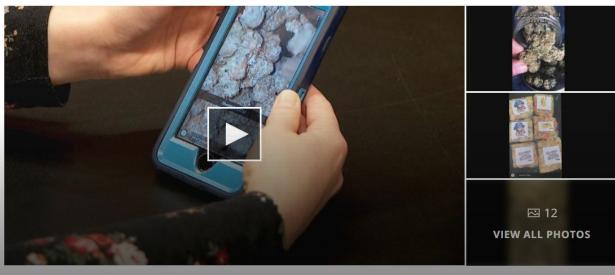
CDC Foundation and HIDTA

VN EDIDEWIG

Drug dealers find potential young customers on Snapchat, social media

by Jim Spiewak & Maren Jensen | Tuesday, November 19th 2019





Addicted Utah: Drug dealers find potential young customers on Snapchat, social media (Photo: KUTV)

SALT LAKE CITY (KUTV) — If your children have Snapchat, there's a good chance they are seeing ads from drug dealers.

Training



TRENDING



Family wants answers after dogs attack Tulsa woman, forcing her to undergo three surgeries 🗈 🖂



Police: Woman dismembered while alive, then killed after 'disrespecting' fiancé's name

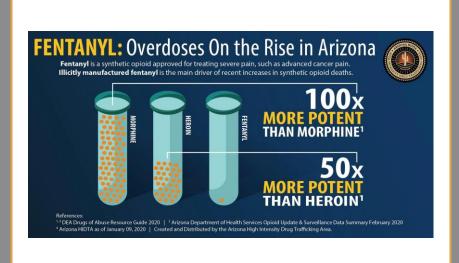
esses on controversial USU call heard president's LDS nent 🕞 🖂

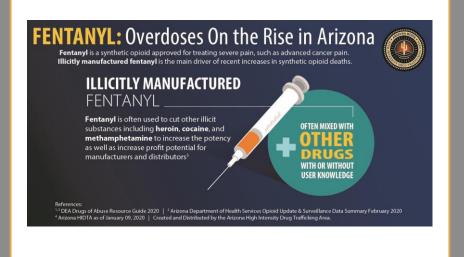




March 29 & September 27
AZDrugSummit.org

Demand Reduction Prevention





FENTANYL: Overdoses On the Rise in Arizona



Fentanyl is a synthetic opioid approved for treating severe pain, such as advanced cancer pain. **Illicitly manufactured fentanyl** is the main driver of recent increases in synthetic opioid deaths.

COUNTERFEIT PILL SEIZURES

WITH FENTANYL



490% 2018 TO 2019 INCREASE IN ARIZONA



References:

- 1,3 DEA Drugs of Abuse Resource Guide 2020
- ² Arizona Department of Health Services Opioid Update & Surveillance Data Summary February 2020
- ⁴ Arizona HIDTA as of January 09, 2020

Created and Distributed by the Arizona High Intensity Drug Trafficking Area.

FENTANYL[†] SAFETY RECOMMENDATIONS FOR PUBLIC HEALTH/PUBLIC SAFETY PERSONNEL

- ▶ The abuse of drugs containing fentanyl† is killing Arizonans. Misinformation and inconsistent recommendations regarding fentanyl† have resulted in confusion in the first responder community.
- You as a public health/public safety worker are increasingly likely to encounter fentanyl† in your daily activities ((e.g., attending to patients in the emergency department, conducting in-home services or visits, responding to overdose calls, conducting traffic stops, arrests, and searches).
- ▶ This document provides scientific, evidence-based recommendations to protect yourself from exposure.

WHAT YOU NEED TO KNOW

- ▶ Fentanyl[†] can be present in a variety of forms (e.g., powder, tablets, capsules, solutions, and rocks).
- Inhalation of airborne powder is MOST LIKELY to lead to harmful effects, but is less likely to occur than skin contact.
- Incidental skin contact may occur during daily activities but is not expected to lead to harmful effects if the contaminated skin is promptly washed off with water.
- Personal Protective Equipment (PPE) is effective in protecting you from exposure.
- Slow breathing or no breathing, drowsiness or unresponsiveness, and constricted or pinpoint pupils are the specific signs consistent with fentanyl† intoxication.
- ▶ Naloxone is an effective medication that rapidly reverses the effects of fentanyl[†].

To protect yourself from exposure

- ▶ Wear gloves when the presence of fentanyl[†] is suspected.
- AVOID actions that may cause powder to become airborne.
- Use a properly-fitted, NIOSH-approved respirator ("mask"), wear eye protection, and minimize skin contact when responding to a situation where small amounts of suspected fentanyl[†] are visible and may become airborne.
- Follow your department guidelines if the scene involves large amounts of suspected fentanyl[†] (e.g., distribution/storage facility, pill milling operation, clandestine lab, gross contamination, spill or release).

When exposure occurs

- Prevent further contamination and notify other first responders and dispatch.
- Do not touch your eyes, mouth, nose or any skin after touching any potentially contaminated surface.
- ▶ Wash skin thoroughly with cool water, and soap if available. Do NOT use hand sanitizers as they may enhance absorption.
- Wash your hands thoroughly after the incident and before eating, drinking, smoking, or using the restroom.
- If you suspect your clothing, shoes, and PPE may be contaminated, follow your department guidelines for decontamination.

If you or a co-worker exhibits

- Slow Breathing or No Breathing
- Drowsiness or Unresponsiveness
- Constricted or Pinpoint Pupils
- ▶ Move away from the source of exposure and call EMS.
- Administer naloxone according to your department protocols. Multiple doses may be required.
- If naloxone is not available, rescue breathing can be a lifesaving measure until EMS arrives. Use standard basic life support safety precautions (e.g., pocket mask, gloves) to address the exposure risk.
- ▶ If needed, initiate CPR until EMS arrives.























https://www.whitehouse.gov/ondcp/key-issues/fentanyl

Collaborative Support From:

Actions to take

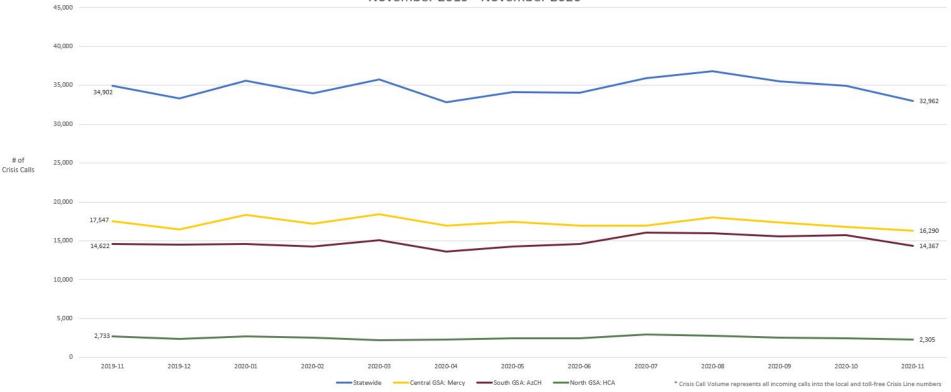
- · American College of Emergency Physicians
- American College of Medical Toxicologists
- American Industrial Hygiene Association
- Association of State and Territorial Health Officials Association of State Criminal Investigative Agencies
- · Fraternal Order of Police
- International Association of Chiefs of Police
- International Association of Fire Chiefs
- International Association of Fire Fighters
- Major Cities Chiefs Association Major County Sheriffs of America
- National Alliance of State Drug Enforcement Agencies
- National Association of Counties
- · National Association of County and City Health Officials
- National Association of Emergency Medical Technicians National Association of EMS Physicians
- National Association of State EMS Officials
- National Governor's Association
- National HIDTA Directors Association
- National Narcotic Officers' Associations' Coalition
- National Sheriffs' Association
- National Volunteer Fire Council
- · Police Executive Research Forum
- Police Foundation

Crisis System Update

Alex Herrera
Crisis Administrator / BH Project Manager
DHCM

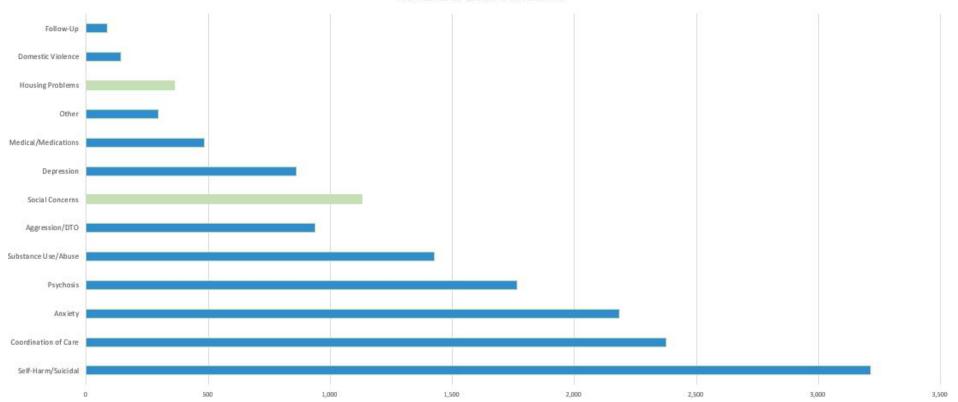


Crisis Call Volume November 2019 - November 2020



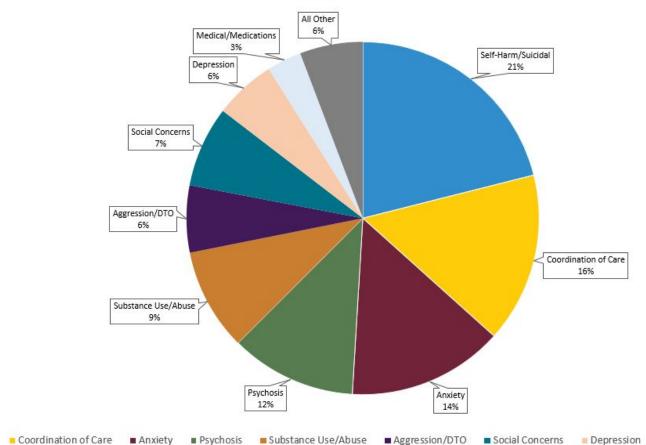


Crisis Call Center - Top Reasons for Calls November 2020 Statewide





Crisis Call Center - Top Reasons for Calls November 2020 Statewide





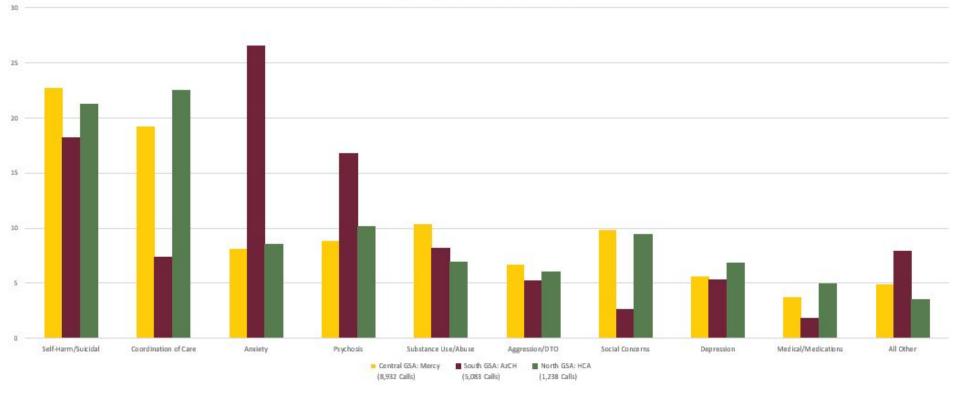
■ Self-Harm/Suicidal

■ All Other

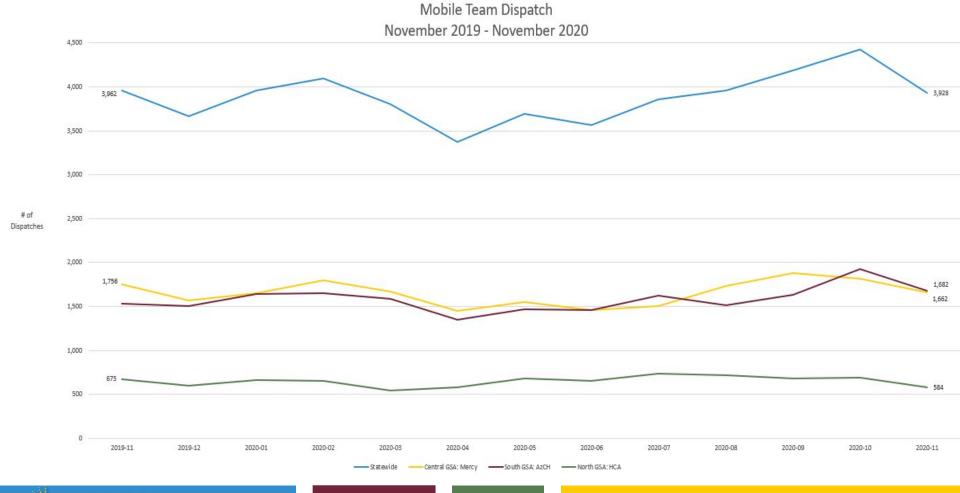
Medical/Medications

Crisis Call Center - Top Reasons for Calls November 2020

(By RBHA/GSA, Rate Per 100 Calls)

















Questions, Open Discussion & Wrap Up

Next Meeting - January 15th

(1/1/2021 Meeting Cancelled)

Happy New Years!



Thank You.

See the Behavioral Health Task Force web page for meeting past meeting presentations - https://www.azahcccs.gov/AHCCCS/CommitteesAndWorkgroups/BehavioralHealthTaskForce.html

Send future topics you want to discuss to lauren.prole@azahcccs.gov

