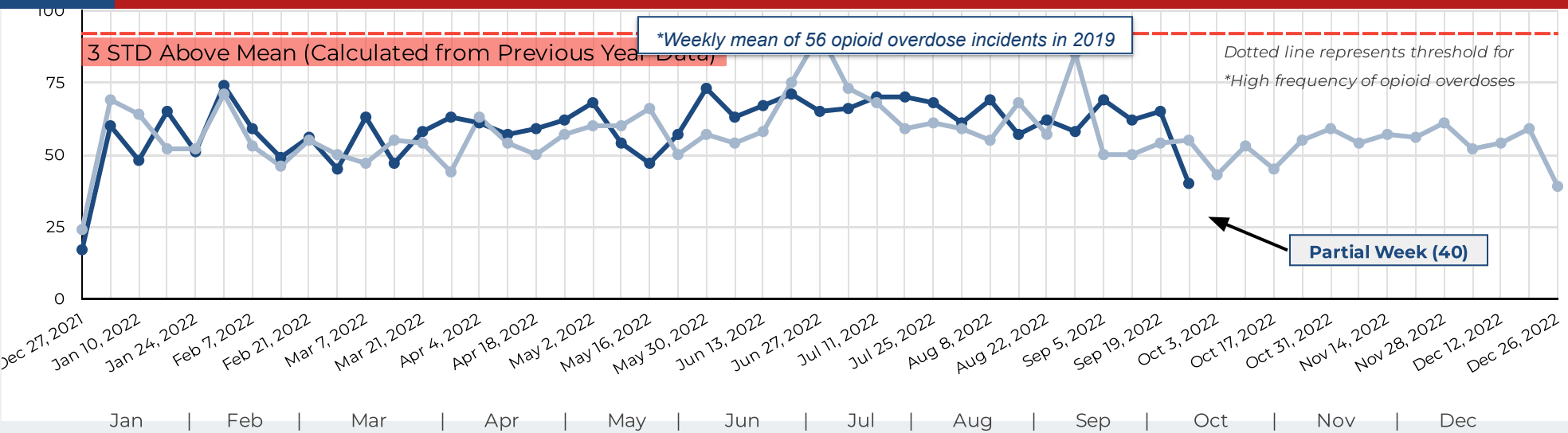


Figure 1 Weekly Comparison of Suspected Opioid Overdose Data (January 1st, 2021- September 30th, 2022)



All overdose incidence rates are monitored using 9-1-1 patient records made available in near real-time data from FirstWatch®, a data platform capturing all patient care report data within the emergency medical service system.

Suspected Opioid Overdose Incident Totals

Comparison to Previous Year (Jan 1st 2021- Sep 30th, 2021)

Opiate Overdose 2022
2,253

↑ 2.6%

Overdose Fatality 2022
123

↑ 17.1%

Comparison to Previous Month

Opiate Overdose August 2022
260

↑ 0.8%

Overdose Fatality 2022
14

↑ 27.3%

Figure 2 Suspected Opioid Overdose & Fatality by Age Group

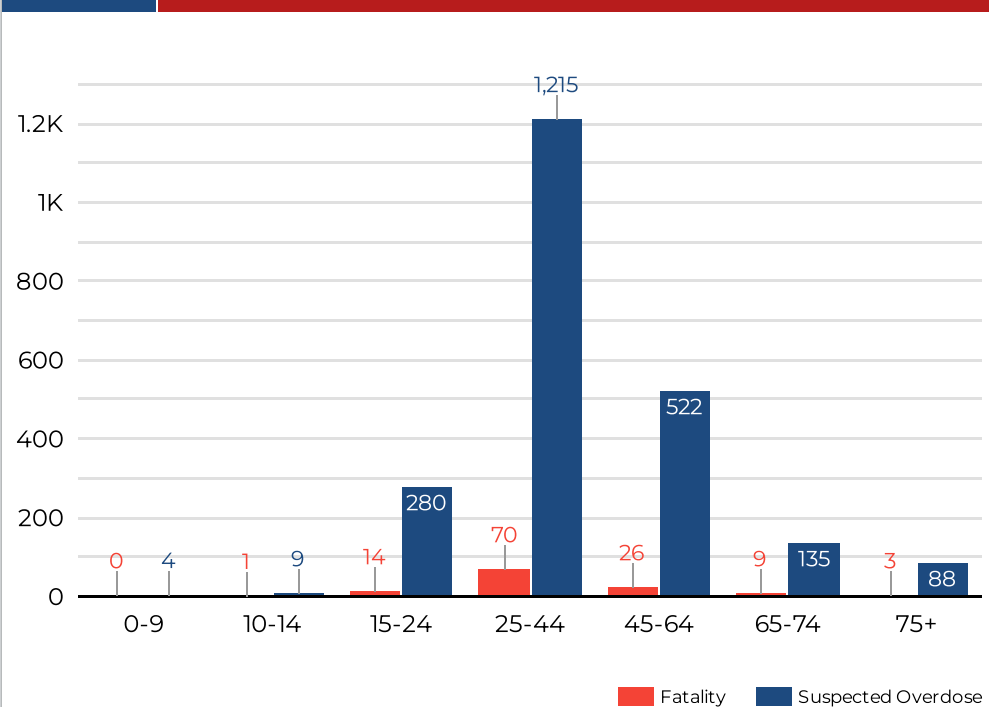
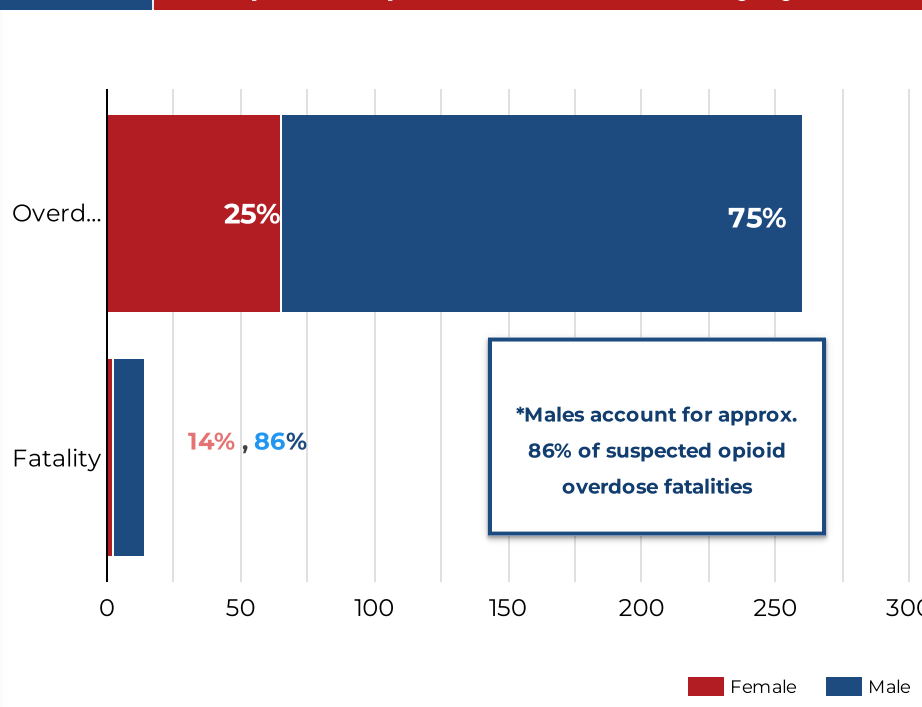


Figure 3 Suspected Opioid Overdose & Fatality by Gender



All Suspected Drug Overdose EMS Incidents (January 1st, 2022- September 30th, 2022)

All Drug Overdoses (Jan-Sep 2022)

3,193

↑ 3.7%

Drug Overdose Fatality (Jan-Sep 2022)

143

↑ 7.5%

Figure 5 All Suspected EMS Overdose Records (2020-2021 Comparison)

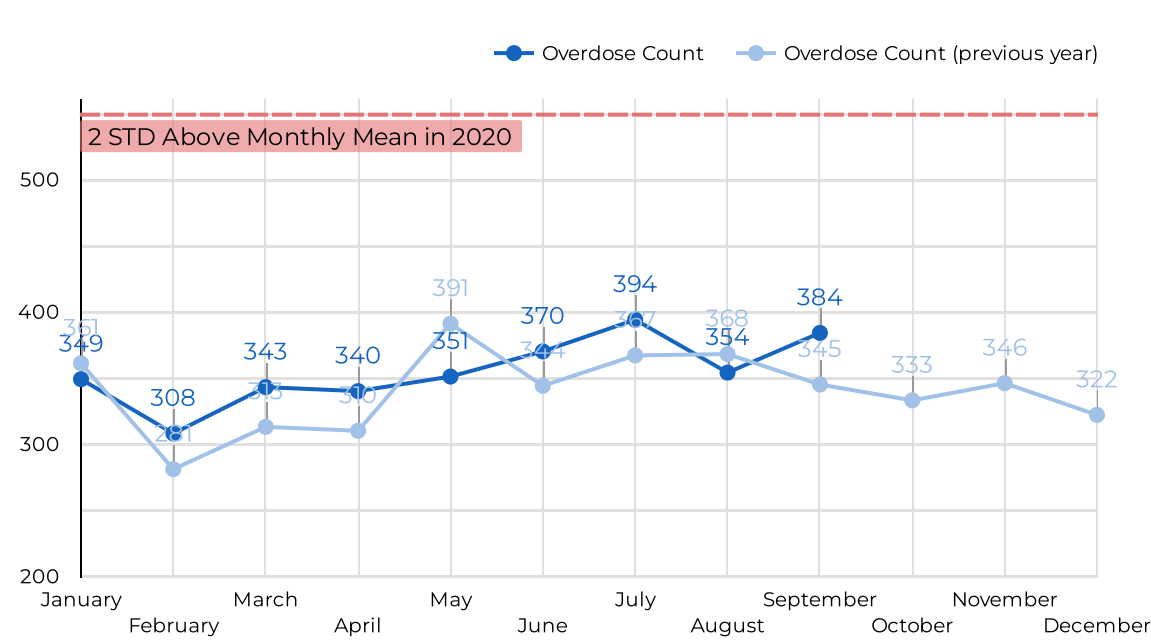


Figure 4 All Suspected EMS Overdose Records by City

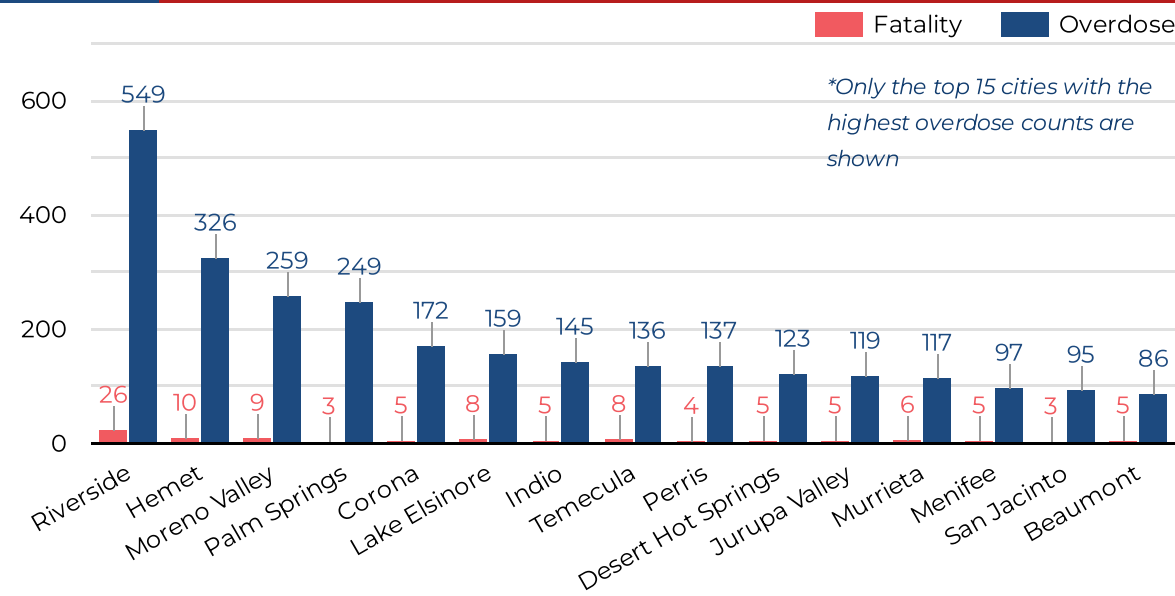


Figure 6 Type of Drug Mentioned in Overdose Calls

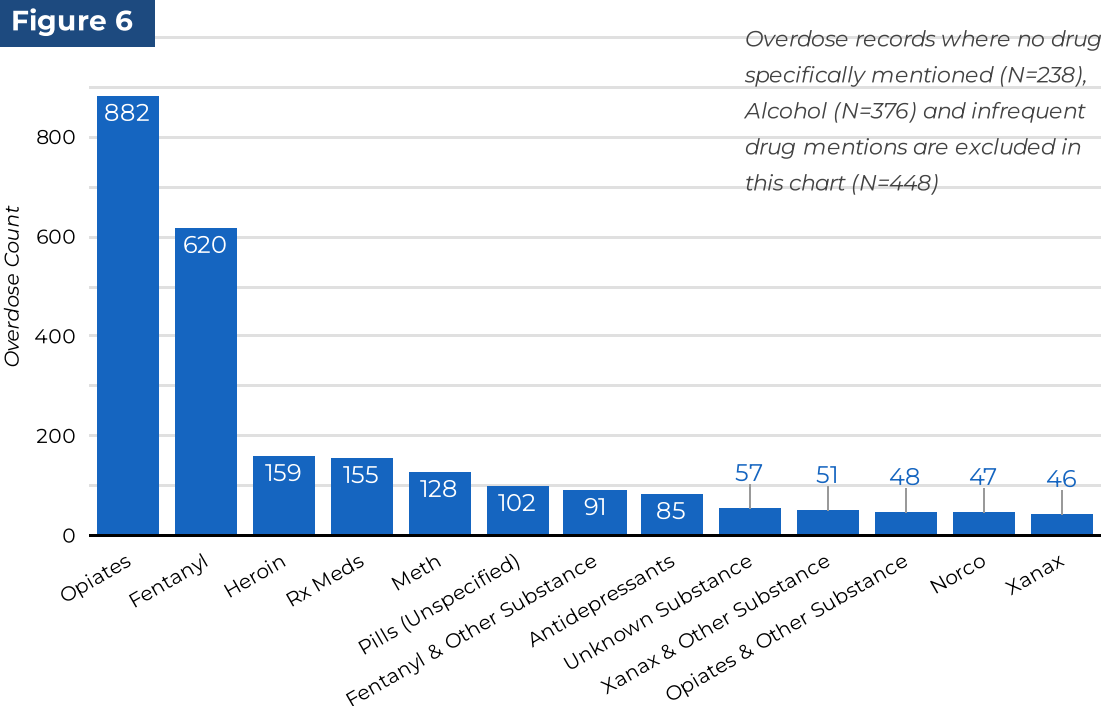
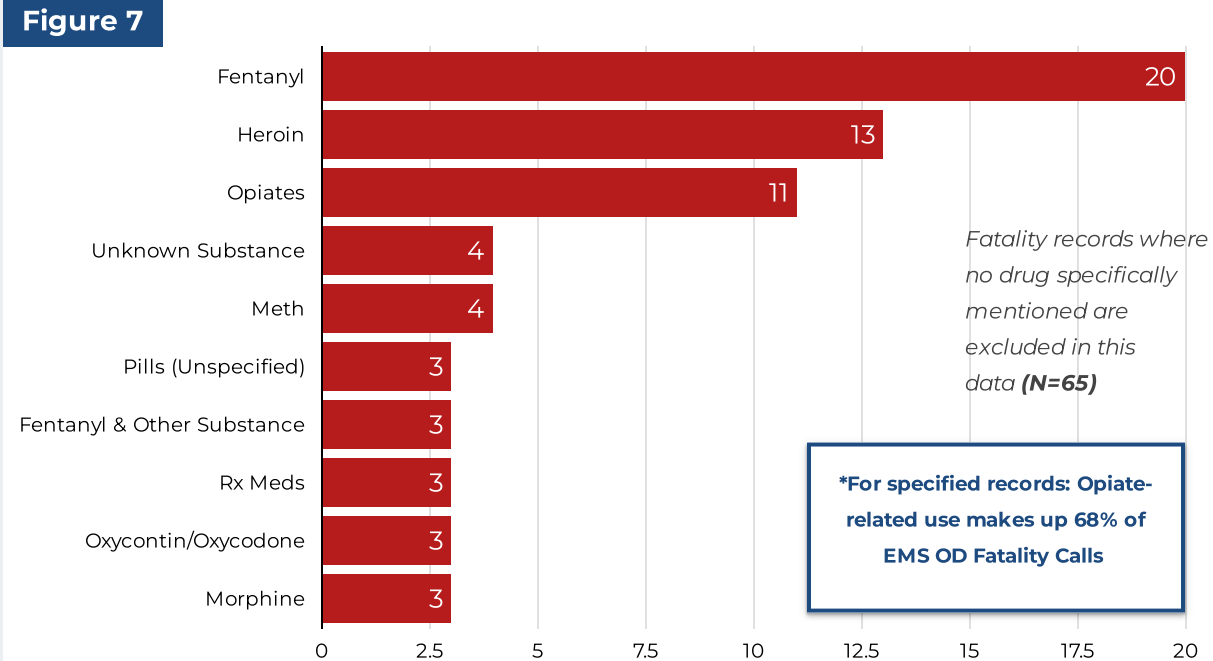


Figure 7 Type of Drug Mentioned in Fatal Overdose Calls



***For specified records: Opiate-related use makes up 68% of EMS OD Fatality Calls**

***All drug categories in Figure 6 and 7 are mutually exclusive**

Overdoses in Patients Experiencing Homelessness and/or Mental Health Crisis

(January 1st, 2022- September 30th, 2022)

Overdose-Homelessness Records 2022

726

Homelessness-Overdose Fatality

15

Mental Health-Overdose Records 2022

194

Mental Health-Overdose Fatality

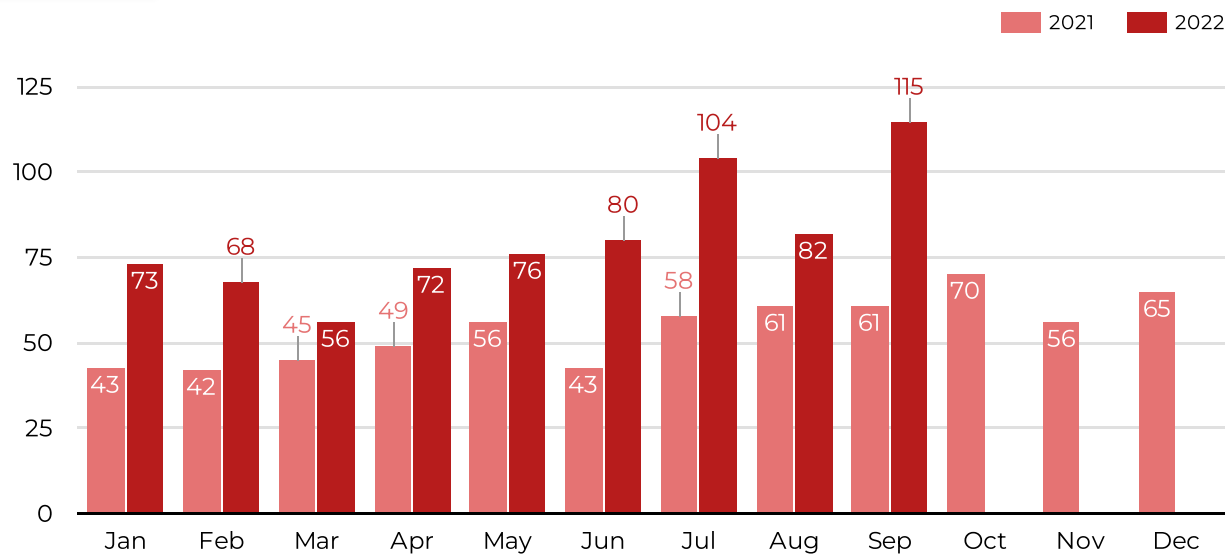
0

According to California Welfare and Institutional Code (WIC), a 5150 (mental health crisis) enables law enforcement and designated medical professionals to place individuals posing imminent risk to self or others on involuntary 72-hour hold. From 1/1/2022-9/30/2022, Riverside County Emergency Medical Services (EMS) providers responded to an average of 22 WIC-5150 emergency and non-emergency transport overdose calls each month in 2022.

Homelessness (unstable housing) is an important factor for resource allocation and understanding all factors that can lead to overdose in the EMS system. Homeless status is established and self-reported by patient to EMS provider and noted in electronic patient care records that display patient as homeless. There are two fields within the record "Patient Home Address"="Homeless" or a checkbox, "Is patient homeless" marked "Yes" to indicate homeless patient status. The data displays all overdose records that involve a patient with homeless status.

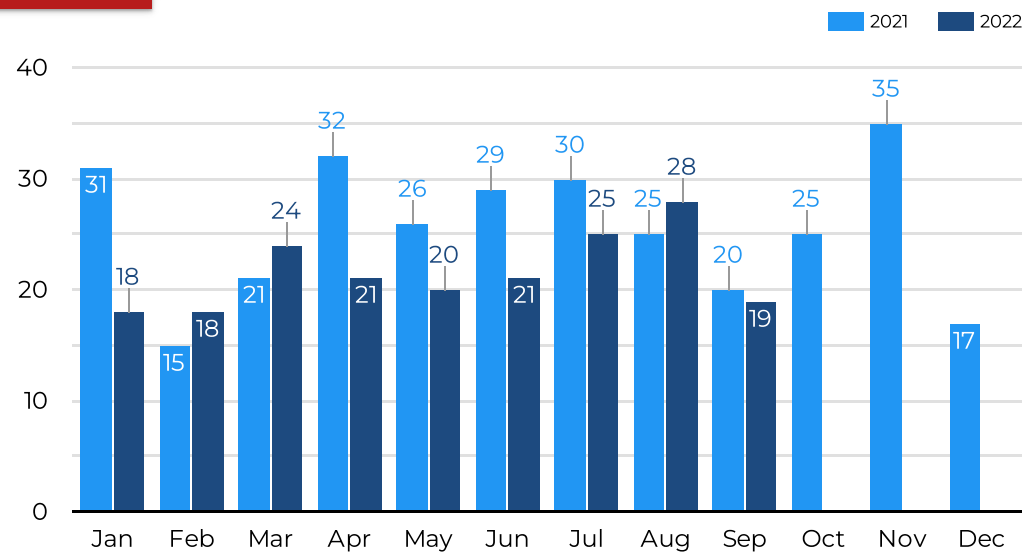
Overdoses in Patients Experiencing Homelessness by Month

Figure 8



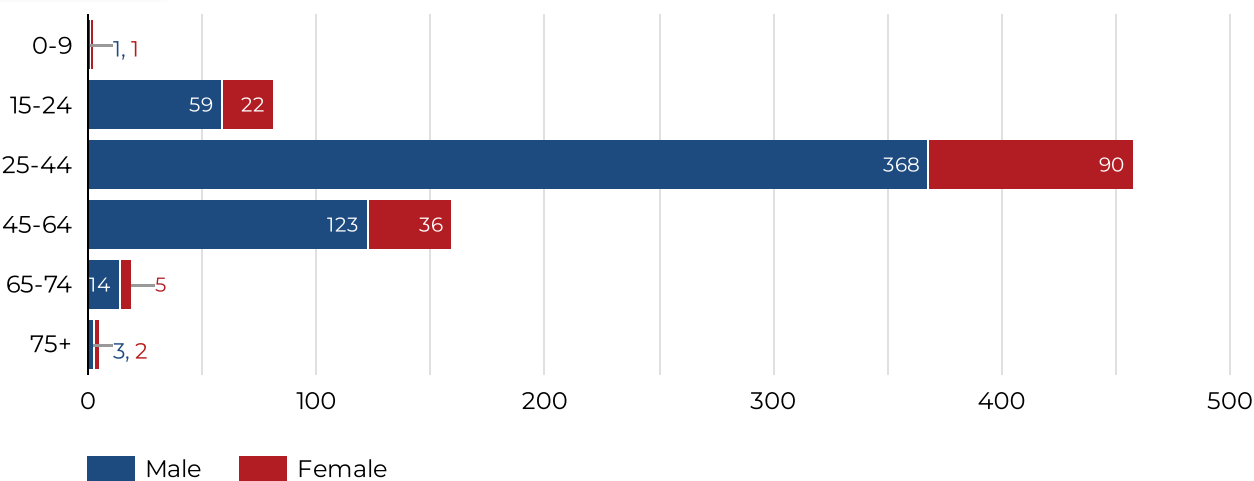
Overdoses in Patients Experiencing Mental Health Crisis by Month

Figure 9



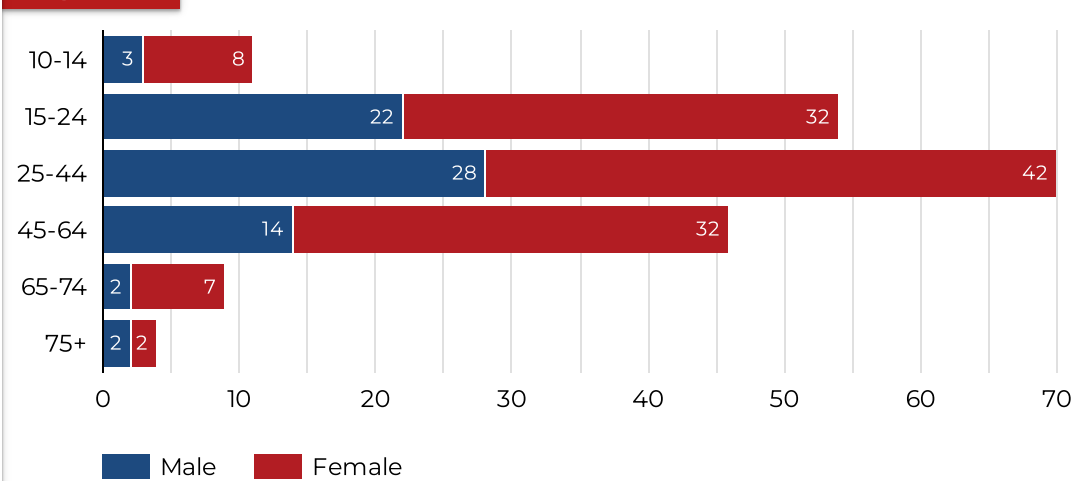
Overdoses in Patients Experiencing Homelessness by Gender & Age Group

Figure 10



Overdoses in Patients Experiencing Mental Health Crisis by Gender & Age Group

Figure 11



Suspected Opiate Overdose Treatment Adherence (January 1st, 2022- September 30th, 2022)

In order to get an in depth look at opioid overdose data, it is important to understand the willingness of patients that are seen and treated by EMS providers to comply with provider recommendations. This provides context and highlights potential obstacles in overdose treatments.

The following data represents patients that go against medical advice (AMA), thereby refuse treatment, or transport to a designated healthcare facility for further treatment. Patients encountered that were determined to be deceased when EMS units arrived are denoted as DOA.

Treated & Transported
2,082

Treated & No Transport
127

Refused Treatment & No Transport
43

Refused Treatment & Transported
2

DOA
123

Figure 12A-B: Count & Proportion of Patients Treated/Transported/Refused for Suspected Opioid Overdose Incidents

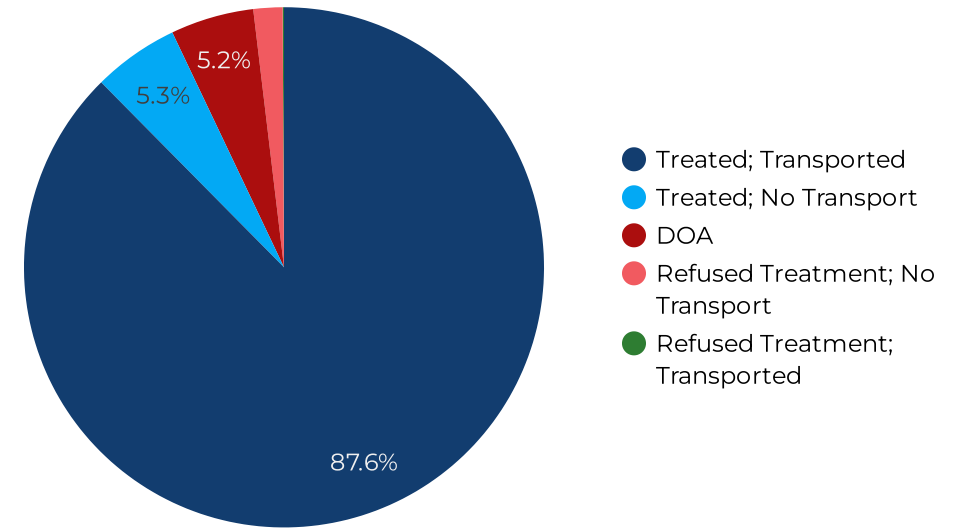
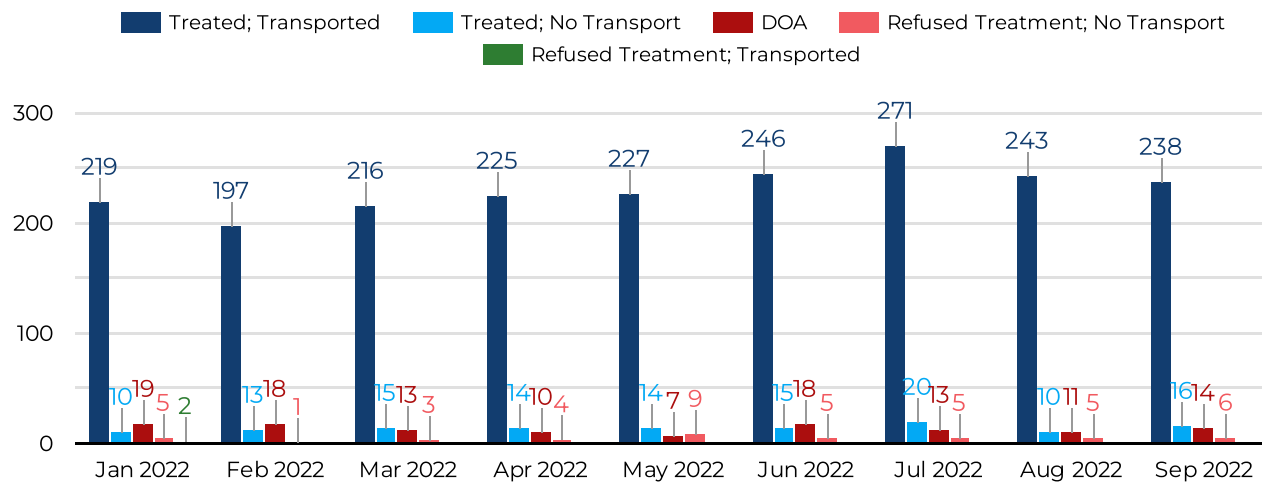


Figure 13: Patients Treated/Transported/Refused for Suspected Opioid Overdose Incidents by Age Group

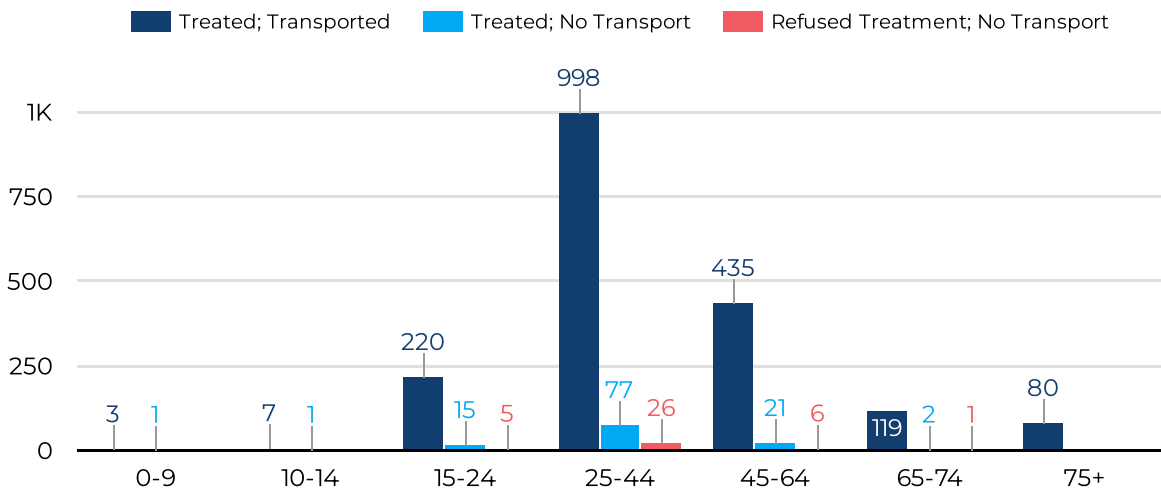
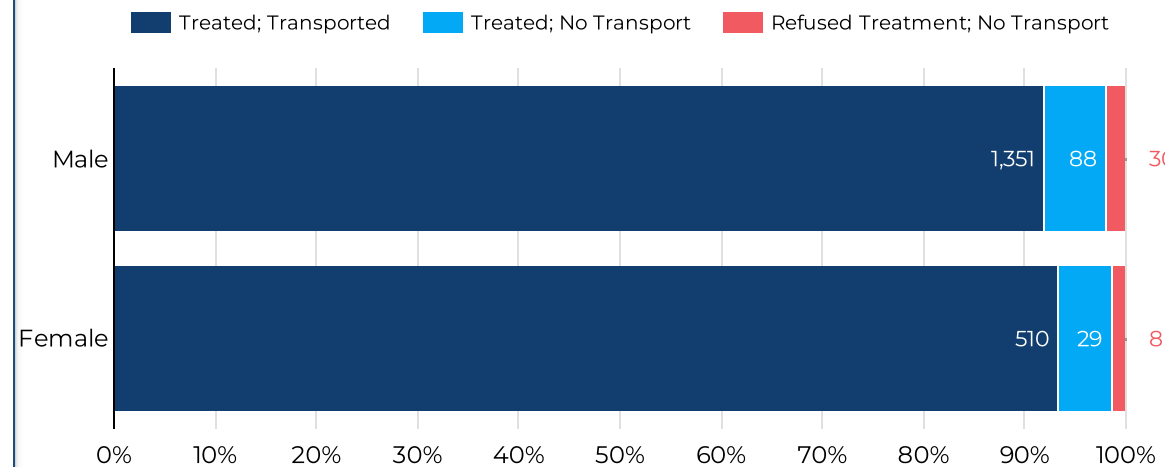


Figure 14: Patients Treated/Transported/Refused by Gender

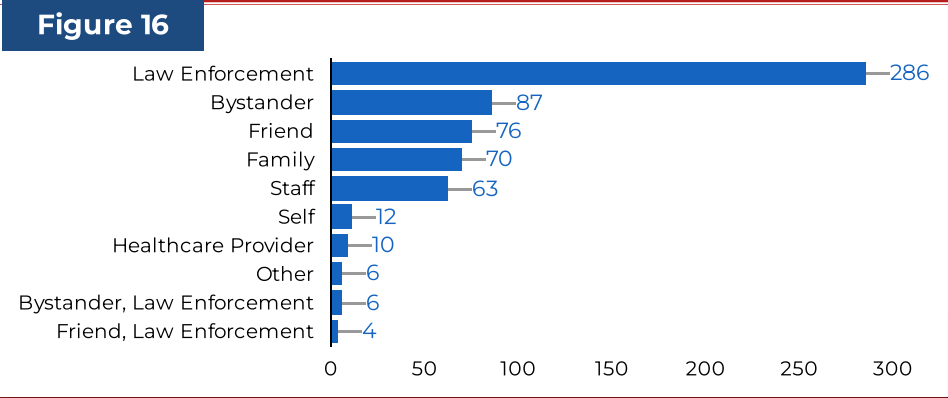


Naloxone Administration in EMS Suspected Opioid Overdose Calls (Jan-Sep 2022)

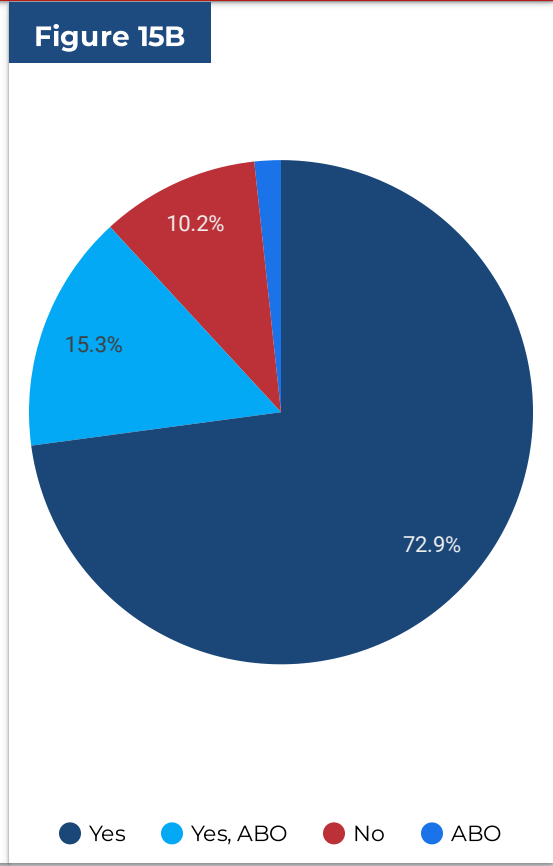
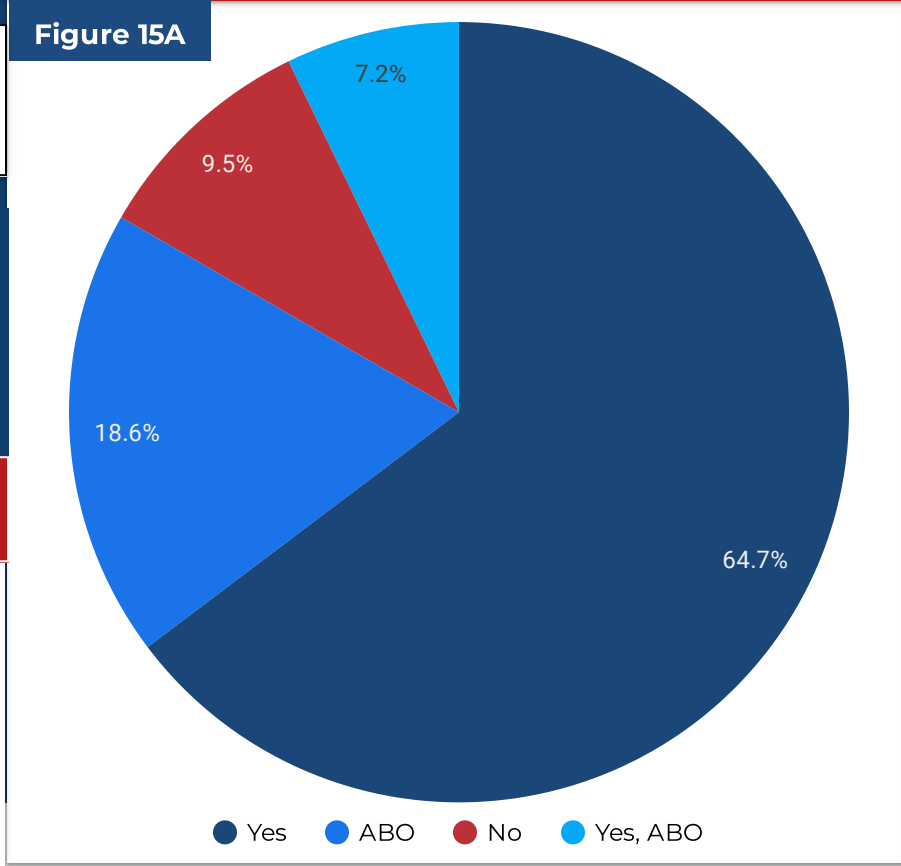
| | | |
|--|--------------------------------------|-------------------------------------|
| Narcan Administered by EMS 1,708 | No Narcan Administered 225 | Administered by Other 614 |
|--|--------------------------------------|-------------------------------------|

Naloxone, aka Narcan, is the name of a generic drug that temporarily reverses the effects of an opioid overdose. First responders in our community have been trained to use narcan when they encounter an overdose while responding to an emergency incident. Understanding its efficacy in suspected EMS overdose incidents can help guide response activities and inform health care providers offering treatment services.

Naloxone Administration Prior to EMS Arrival

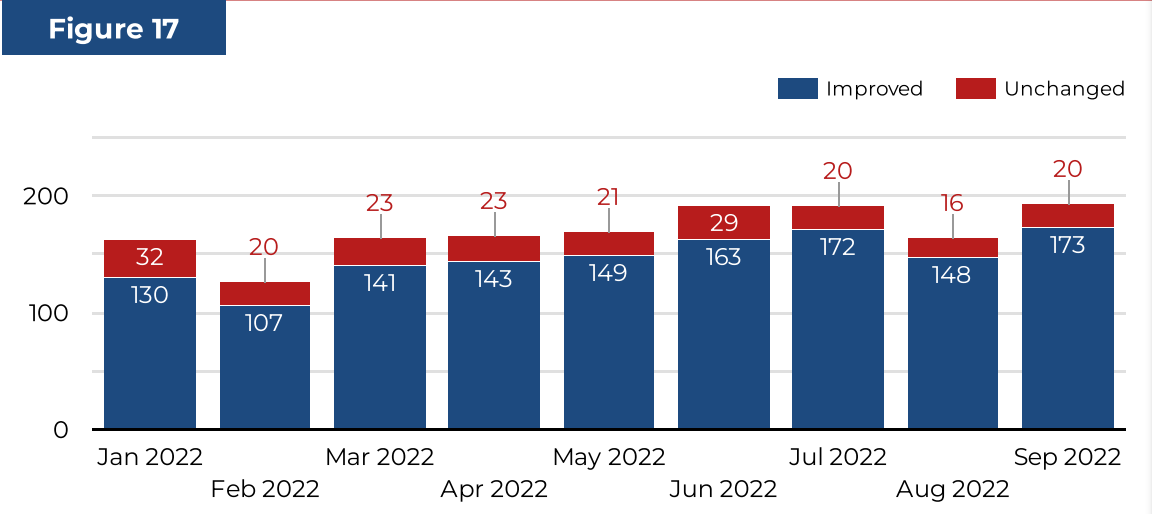


Naloxone Administration in All Suspected Opioid Overdose Calls (15A) & Overdose Fatality Calls (15B)



**ABO (administered by other) refers to naloxone administered by someone other than EMS prior to EMS arrival*
**Yes, ABO refers to naloxone administered by EMS as well as prior to arrival*

Patient Response to Naloxone Administration



% Patient Response to Naloxone Administration

