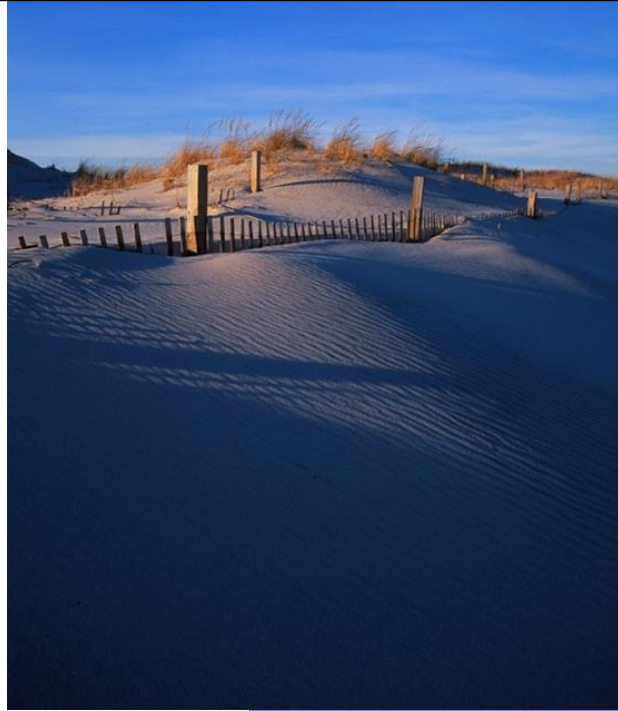


2018

Ocean County Fatality Review Pilot Program Annual Report



Ocean County Overdose Fatality Review Pilot Program (OC-OFRPP) Annual Report January 1, 2018 – December 31, 2018

The OC-OFRPP uses a methodological approach examining the interaction of the complex systems of residents including their family history, environment, and autonomous agents of impact (experiences). The analysis of these collective systems can provide a conceptual framework for local substance use disorder and overdose. The OC-OFRPP utilizes two approaches to data collection: 1) a “social autopsy” process which reviews individual and system trends experienced by an overdose decedent and 2) a countywide data collection efforts on the opioid epidemic. Both data collection processes aims to find the local denominator for addiction in our county. An output of the OC-OFRPP will be comprehensive county opioid report that will be published at the end of the project. The comprehensive county opioid report will provide narrative and context around circumstances associated with abuse and overdose specific to Ocean County. At the end of 2018, 36 agencies were affiliated to conduct social autopsies with the Ocean County Overdose Fatality Review Pilot Program representing state, county and local entities. A total of 58 cases had been reviewed with 38 male cases (66%) and 20 female cases (34%). The ages in the reviewed decedent cases ranged from the youngest decedent who died at the age of 18 to the oldest who died at the age of 67. In review of all cases from January 1, 2018-December 31, 2018, the following has been found: *Please note this information is obtained by multiple agencies. Some data may be missing.

- ❖ 38 or 66% were reported to have fair to poor health
- ❖ 33 or 57% had been linked to substance use treatment
- ❖ 32 or 55% were known IV users
- ❖ 33 or 57% had a known criminal history
- ❖ 30 or 52% had been diagnosed or linked to mental health treatment
- ❖ 13 or 22% had been convicted of a DUI
- ❖ 8 or 14% had been diagnosed and known to have Hep C

The OC-OFRPP is looking to develop a profile on Substance Use Disorder (SUD) and overdose for Ocean County to drive program development, changes in policy, and increased access to prevention, treatment and recovery. The below framework comes from Lake County, Ohio which has a similar model as Ocean County. This framework provides an example of what Ocean County will establish at the conclusion of the OC-OFRPP.

Figure 1. Conceptual ABM Pathway

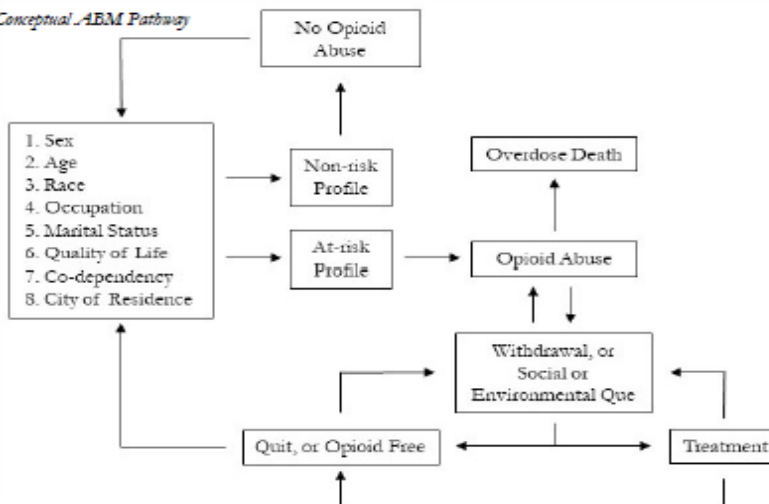


Image from “Modeling Opioid Abuse: An Agent-based Framework for Opioid Abuse Surveillance in Lake County, Ohio.” Matthew Nichols, PhD, MPH

Key Issues Identified in 2018

In 2018, there were 58 decedent cases reviewed. At the January 2018 meeting, four cases were reviewed and in the nine other meetings held throughout the year, six cases were reviewed at each meeting. Each monthly social autopsy meeting is facilitated using the same process. Once the meeting is called to order, the facilitator will review each decedent case with the affiliated partners. A timeline is developed of the decedent's life focusing on key events such as first use, hospitalizations, substance use treatment, criminal history, and naran reversals. During the social autopsy, affiliated members discuss the larger system issues that are observed in the decedent case. Since January 2018, the recommendations and observations of the OC-OFRPP could be organized into five general categories:

- 1) **Client Trends:** These trends were observed in the majority of decedent cases in 2018.
- 2) **Needed Programs/Gaps:** Evident gaps exist in the Ocean County system of care, if these programs were developed, they could provide needed recovery capital to residents with the potential of reducing future overdose death.
- 3) **Agency Policy and Procedures:** Agencies need to be revisiting their policies and procedures to ensure clients are receiving the best level of care.
- 4) **County Level Issues:** Local agencies need to communicate with one another for the client. The Prescription Monitoring Program (PMP) needs to be checked with every resident.
- 5) **State Level Issues:** State level systems like the New Jersey Substance Abuse Monitoring System should be updated for better information sharing amongst agencies. There needs to be standardization in data collections. Local and state agencies should be able to share records.

It is the recommendation of the OC-OFRPP that Ocean County providers should look at the issues below to see if they can facilitate any changes in their processes to address the items listed below.

Client Trends	Needed Programs/Gaps	Agency Policy and Procedures	County Level Issues	State Level Issues
Primary Support issues -parental, spousal use -domestic violence -lack of support Use of benzodiazepines Chronic pain reported DUII prevalence Suicidal Ideation History Trauma (ACE) High doses of methadone Polysubstance use	Case management for those with SUD Workforce development/case management More education for doctors and primary care Housing for those in recovery Services for children of incarcerated parents Grief groups for children with parents/guardians that overdosed	Enhanced supervision for clinicians and recovery specialist Discharge summaries with secured referrals, follow up procedures to ensure compliance Ensure consents are being obtained to get an accurate history Tracking of client's after discharge for compliance, provide assistance if needed	Silo's in treatment Need for improved communication PMP being checked	NJSAMS Access to school records Need for standardization in data Flexibility in record sharing

OC-OFRPP Program Ideas 2018

The goal of the OC-OFRPP is to reduce overdose death in Ocean County. Below are some of the programming ideas from the CY2018 meetings. Please see if your agency could add these ideas into existing programs or develop these ideas to help combat the overdose epidemic in our county.

Workforce Development/Case Management

During the meetings, a reoccurring trend was residents that re-entered the workforce and subsequently relapsed and/or overdosed. The group deconstructed this and identified that those entering “blue collar” or manual labor jobs were often surrounded by co-workers that were using substances. If a workforce development/case management program was developed to assist those in early recovery as they re-enter the workforce, there could be a reduction in relapse and the ability for that resident to gain meaningful recovery capital.

Grief counseling for youth whose parents/guardians died from a drug overdose

Justice Involved Case Management for SUD

57% of 2018 decedent review cases had a criminal history. A case management program could assist residents by providing case management and assistance as residents navigate the legal system both at a Municipal court and Superior Court. A program could also be developed to provide case management to residents leaving the Ocean County Jail either after bail reform or after being in the jail.

Sober Living and Housing

The OC-OFRPP membership discussed the need for sober living and sober housing opportunities for residents with SUD. Using the Supportive Housing model found in Mental Health, a housing program that is paired with case management for residents in early recovery with the goal of sustainable housing and sobriety would be an ideal program for Ocean County residents.

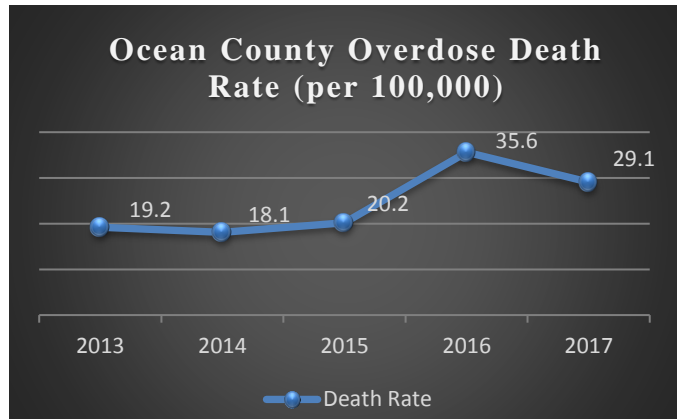
Case Management for youth whose parents are incarcerated

Ocean County Data

The OC-ORFPP aims to have transparency in its process and corresponding data collection. In order to make change in Ocean County and reduce overdose death, data sets need to be available for program development and grant writing opportunities. The OC-ORFPP uses decedent information obtained for the Ocean County Prosecutor's Office (OCPO). The OCPO has been a vital partner in the fatality review initiative.

Ocean County Overdose Death Rate (per 100,000)			
Year	Total No of Deaths	OC Population	Death Rate
2013	112	583,090	19.2
2014	106	585,916	18.1
2015	119	588,721	20.2
2016	211	592,497	35.6
2017	174	597,943	29.1

Note: Death Rate calculated per 100,000



Ocean County experienced a significant increase in overdose death rate from 2015 to 2016. As per qualitative reports and key informant interviews, this increase is due to fentanyl and fentanyl analogues entering Ocean County.

Ocean County Overdose Age Distribution 2013-2017 Percentage of Overdose decedents is highest in 26-35 years (2013-2017)

Age Range	2013	2014	2015	2016	2017
16-25	18%	12%	13%	13%	8%
26-35	29%	30%	29%	34%	33%
36-45	20%	26%	25%	20%	22%
46-55	19%	19%	24%	23%	23%
56-65	9%	11%	8%	9%	12%
66-75	5%	1%	2%	0%	2%
76-85	1%	0%	0%	0%	0%

As per OCPO overdose data, the ages of 26-35 are the highest number of deaths. This matches NJSAMS data until 2017 when admissions from 35-44 were slightly higher.

Ocean County Overdose Age Distribution Percentage 2013-2017 NJSAMS Admissions¹

	2013	2014	2015	2016	2017
Under 18	5%	1%	2%	2%	1%
18-21	11%	10%	8%	8%	7%
22-24	14%	16%	13%	13%	10%
25-29	20%	20%	21%	21%	21%
30-34	16%	18%	18%	17%	18%
35-44	16%	17%	19%	20%	22%
45-54	12%	12%	12%	13%	14%
55 +	5%	5%	4%	6%	7%

Ocean County Overdoses by Sex(Percentage)

	2013	2014	2015	2016	2017
Female	NA	NA	29.4	25.1	21.8
Male	NA	NA	70.6	74.9	78.2
Total	NA	5NA	119	211	174


Gender was not captured in 2013 and 2014. Starting in 2015, the significant proportion of overdose death occurring in males averaging 74.5%. Similar percentages are found in NJSAMS¹ admissions with males making up an average of 64% of admissions.

1. <https://www.state.nj.us/humanservices/dmhas/publications/statistical/>

Ocean County Percentage of Overdose Decedents by Municipality 2013-2017

Township	2013	2014	2015	2016	2017*
Barnegat Township	4%	3%	2%	3%	4%
Barnegat Light	NA	NA	1%	NA	NA
Bay Head	NA	NA	1%	NA	NA
Beach Haven	NA	NA	NA	NA	NA
Beachwood	6%	1%	3%	NA	NA
Berkeley-Bayville	7%	7%	11%	9%	8%
Brick	13%	15%	19%	13%	14%
Toms River	22%	18%	24%	22%	18%
Eagleswood	NA	NA	NA	NA	NA
Harvey Cedars	NA	NA	NA	NA	NA
Island Heights	NA	1%	NA	NA	NA
Jackson	3%	5%	6%	7%	15%
Lacey	6%	6%	7%	5%	4%
Lakehurst	1%	NA	1%	1%	NA
Lakewood	5%	8%	5%	8%	5%
Lavallette	NA	NA	NA	NA	NA
Little Egg Harbor	3%	5%	3%	6%	4%
Long Beach Township	NA	1%	NA	NA	1%
Manchester	8%	8%	8%	8%	7%
Mantoloking	NA	NA	NA	NA	NA
Ocean Gate	1%	1%	NA	1%	1%
Pine Beach	NA	NA	1%	NA	NA
Plumsted	2%	NA	1%	NA	1%
Point Pleasant Borough	4%	2%	1%	2%	3%
Point Pleasant Beach	2%	1%	4%	1%	1%
Seaside Heights	5%	6%	1%	3%	2%
Seaside Park	1%	3%	3%	NA	1%
Ship Bottom	NA	NA	NA	NA	NA
South Toms River	1%	2%	NA	2%	1%
Stafford	6%	5%	1%	5%	6%
Surf City	NA	NA	NA	NA	NA
Tuckerton	NA	2%	NA	1%	1%
Waretown	2%	3%	2%	4%	2%



Conclusions from the Data:

Lake County Ohio Model	Adding in Ocean County information	Ocean County Information
<ol style="list-style-type: none"> 1. Sex 2. Age 3. Race 4. Occupation 5. Marital Status 6. Quality of Life 7. Co-Dependency 8. City of Residence 		<ol style="list-style-type: none"> 1. Male 2. Age 26-35 3. Not captured 4. Blue Collar/Labor 5. Not captured 6. Poor Health, History of SUD treatment, History of MH treatment, Criminal History 7. Polysubstance found in majority of cases 8. Top Municipalities: Toms River and Brick

*Note in 2017, decedent overdoses from other states equaled 2%

Ocean County's Vision: Following the North Star

At the Opioid Response Strategy Symposium held in Cleveland, Ohio, Chauncey Parker, Director of NY/NJ HIDTA, spoke about finding the North Star for combatting the opioid epidemic. The North Star Framework serves as an overarching vision for a community. The North Star Framework recognizes the strengths and contributions of each agency and sector from prevention, treatment and recovery to private, non-profit and grassroots efforts to public health and law enforcement and how collectively, we are all following the same North Star to save lives in Ocean County. Although agencies have different goals and approaches in addressing SUD and overdose, we all have the same vision to reduce and stop overdose death in Ocean County. Below outlines the current North Star Vision Framework for the OC-OFRP. If you would like your agency and/or initiative added, please contact Kimberly Reilly.

		Ocean County Overdose Fatality Review Program 2018 Est. 2017 Goal: To reduce overdose death in Ocean County			 Public Health Prevent. Promote. Protect.	
↓		↓			↓	
Data Collection for Program Development and Policy Change		Provider Education and Networking			Funding for Program Development	
Ocean County Overdose Fatality Review Program Executive Committee	Ocean County Overdose Fatality Review Program	Ocean County Municipal Specific Fatality Reviews	Ocean County Partner Meetings	Review of Funding Opportunities		
The Ocean County Fatality Review Program (OC-OFRP) Executive Meeting meets quarterly to discuss the overarching trends and issues observed in the OC-OFRP, data sets from local, state and federal partners, and ways to utilize partnerships to develop programming and policy change in Ocean County	The Ocean County Overdose Fatality Review Program (OC-OFRP) meets monthly to conduct a social autopsy on overdose decedents to identify trends within those with Substance Use Disorder (SUD) and gaps in the Ocean County system of care	Using the expertise for local Municipalities, the OC-OFRP will expand in 2019-2020 to hold focus groups with municipal police departments and school systems	Various Ocean County agencies host monthly meetings; these meetings provide opportunities to discuss SUD and overdoses as well as address the program and policy changes identified. These meetings bring together partners to break down silo's and partner to ensure residents have access to appropriate clinical care	OCHD review of federal, state and local opportunities for funding to support local agencies and partners to develop programming needs identified in various planning meetings		
← Collaboration throughout the continuum →						
Key Partners: Ocean County Health Department (OCHD) Ocean County Prosecutor's Office (OCPO) Ocean County Medical Examiner (OCME)	Key Partners: See last page for listing of the 2018 Affiliated Providers	Key Partners: Municipal Police Departments and School Districts	Key Partners: Local Advisory Committee on Alcoholism and Drug Abuse (LACADA), Provider Advisory Committee on Alcoholism and Drug Abuse (PACADA), Community Alliance Steering Sub-Committee (CASS), Mental Health Board (MHB), Human Services Advisory Council (HSAC), Children's Interagency Coordinating Counseling (CIACC), DART Regional Prevention Coalition and others	Key Partners: OCHD OCPO OCME		

Reflections on 2018

Successes	Barriers
<p>The OC-OFRPP had a lot of success in 2018. There was fantastic collaboration and affiliation from different agencies in Ocean County and in New Jersey.</p> <p>The OCHD presented at a poster session on the fatality review program at the June 5, 2018 New Jersey Department of Health “Better Together: An Integrated Approach to Address the Opioid Epidemic” and received a certificate of recognition for the Best Integrated Health Poster.</p> <p>Kimberly Reilly presented at the 2018 Public Health Forum on the OC-OFRPP and its success hoping to encourage other counties to participate in the project.</p> <p>On July 20, 2018, Kimberly Reilly and Richa Sharma attended the fatality review in Baltimore, Maryland. Maryland’s fatality review was the foundation for Ocean County in the development of their project.</p> <p>On November 28 and 29, Kimberly Reilly and Daniel Regenye were invited to attend the Opioid Response Strategy Symposium in Cleveland Ohio to learn about different federal and state initiatives regarding the opioid epidemic.</p> <p>On December 17, 2018, Kimberly Reilly, Daniel Regenye, and Richa Sharma attended the New York City Fatality Review.</p> <p>The highlight of 2018 is the collaboration with our partners at HIDTA and DEA as well as all of our local and state partners!</p>	<p>A continued barrier for the OC-OFRPP is that some agencies are unable to participate in the fatality review due to confidentiality. This has resulted in significant gaps in information. To combat these issues, the OC-OFRPP will look to develop different ways to collect data in 2019.</p> <p>The OCHD applied for a grant in Fall 2018 that would support a full time social worker that would work alongside the Medical Examiner to interview the next of kin of decedents to gather more information about the life of the decedent. Unfortunately, the OCHD did not receive the grant. The OCHD recognizes that this could be an instrumental data collection process and is dedicated to find ways to support this position and project in 2019.</p>

Thank you to all of our partners in 2018: Barnabas Health Behavioral Health Center, Board of Social Services, Brick Township Schools, Center for Health Education, Medicine and Dentistry (CHEMED), Community Medical Center, Daytop Village of NJ, Gilmore and Monahan, Governor’s Council on Alcoholism and Drug Abuse (GCADA), Healy Counseling Associations, Lifelines Recovery Services, Maryville, Inc., Mental Health Association, New Hope Integrated Behavioral Health Care, NJ Re-Entry, NJ State Police, NJ/NJ HIDTA, Ocean County Department of Human Services, Ocean County Health Department staff, Ocean County Jail, Ocean County Medical Examiner, Ocean County Prosecutor’s Office, Ocean Health Initiative, Ocean Medical Center, Ocean Mental Health Services, Ocean Partnership for Children, Ocean’s Harbor House, Preferred Behavioral Health of NJ, Psychiatric Emergency Screening Services, RWJBarnabas Institute for Prevention and Recovery, Seashore Family Services of NJ, State Parole Board.

Thank you to the Ocean County Board of Chosen Freeholders and Ocean County Board of Health for your support!

For more information on the Ocean County Overdose Fatality Review Program, please contact:

Kimberly Reilly, MA, LPC
 Chief of Administrative Services
 Ocean County Health Department
 Toms River, NJ 08753

Kreilly@ochd.org or 732-341-9700 x7536

