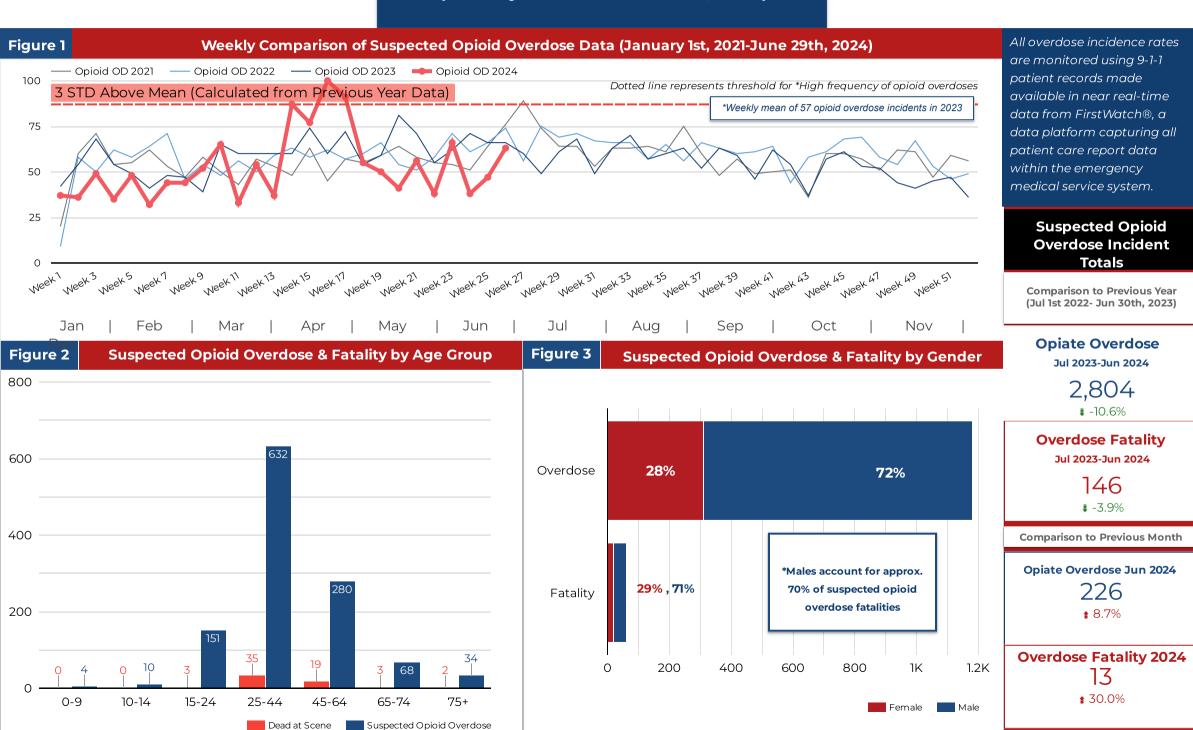


June 2024 Surveillance Report



(January 1st, 2024-June 30th, 2024)



All Suspected Drug Overdose EMS Incidents (January 1st, 2024-June 30th, 2024)

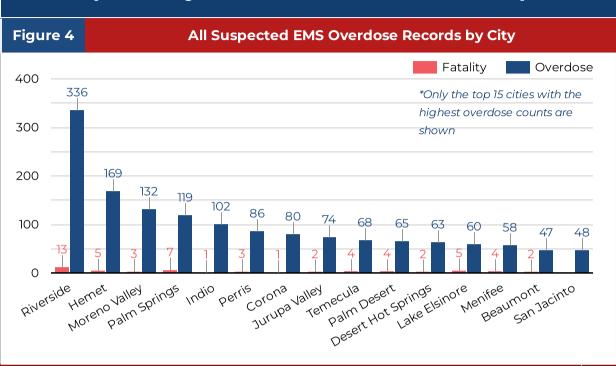
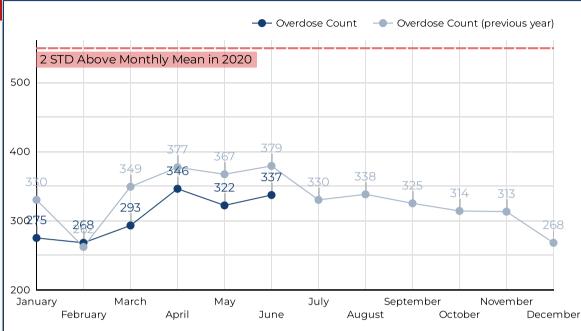


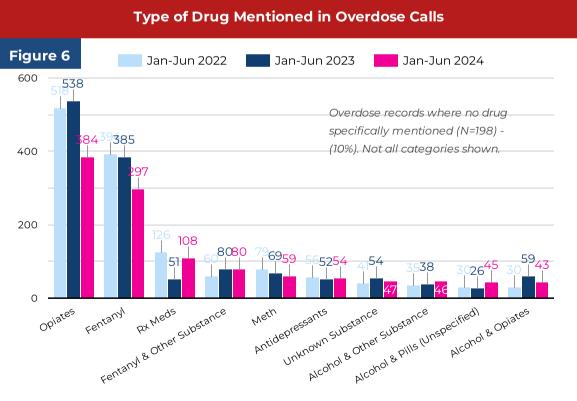


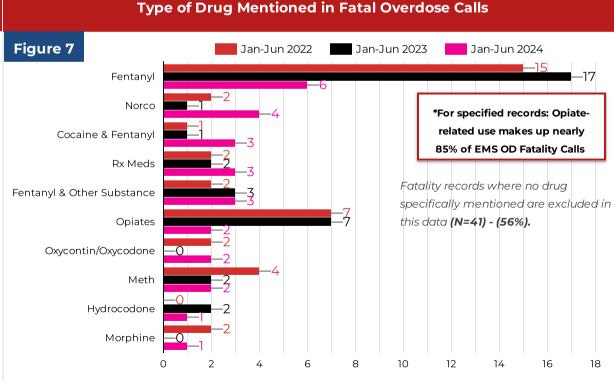
Figure 5











Overdoses in Patients Experiencing Homelessness and/or Mental Health Crisis

(January 1st, 2024-June 30th, 2024)

Overdose-Homelessness Records
448

Mental Health-Overdose Records

Mental Health

136

Homelessness-Overdose Fatality

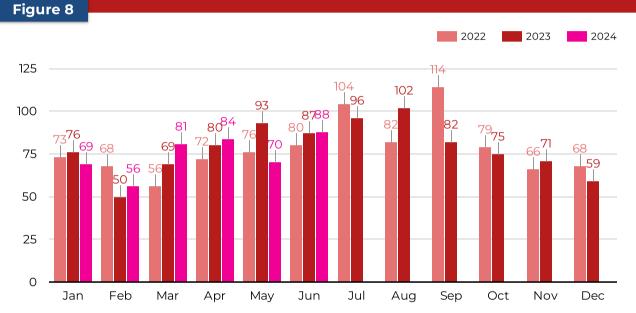
Mental Health-Overdose Fatality

7

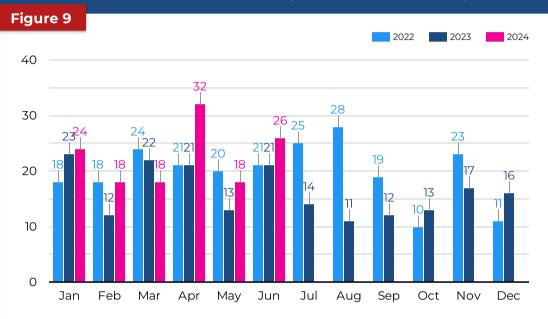
According to California Welfare and Institutional Code (WIC), a 5150 (mental health crisis) enables law enforcement and designated medical professionals to place individuals posing imminent risk to self or others on involuntary 72-hour hold. From 1/1/2024-6/30/2024, Riverside County Emergency Medical Services (EMS) providers responded to an average of 26 WIC-5150 emergency and non-emergency transport overdose calls each month.

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.

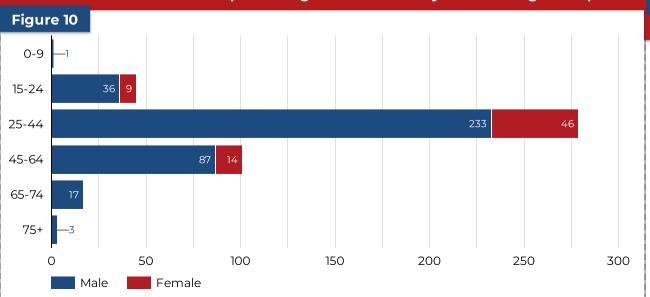
Overdoses in Patients Experiencing Homelessness by Month



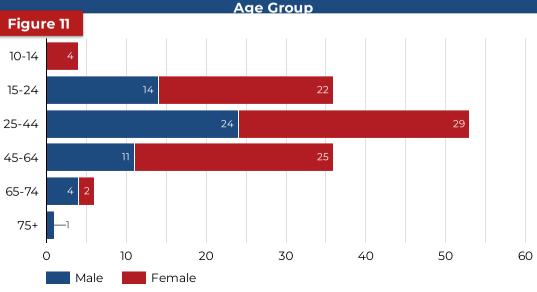
Overdoses in Patients Experiencing Mental Health Crisis by Month



Overdoses in Patients Experiencing Homelessness by Gender & Age Group



Overdoses in Patients Experiencing Mental Health Crisis by Gender &



Suspected Opiate Overdose Treatment Adherence (January 1st-June 30th, 2024)

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.

Treated & Transported 1,046

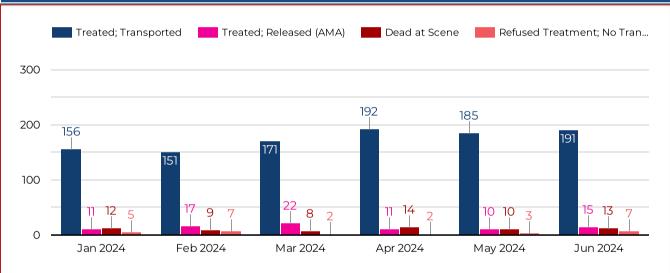
Treated & Released (AMA) 86

Refused Treatment & No Transport 26

Refused Treatment & Transported

Dead at Scene

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



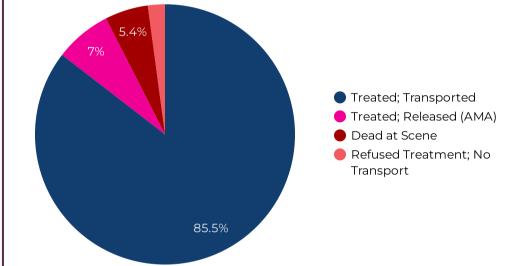


Figure 13: Patients Treated/Transported/Refused for Suspected Opioid Overdose Incidents by Age Group

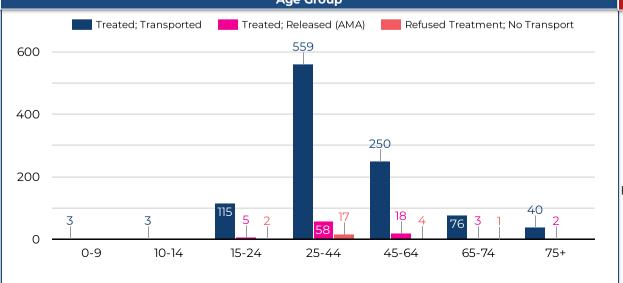


Figure 14: Patients Treated/Transported/Refused by Gender



Naloxone Administration in EMS Suspected Opioid Overdose Calls (Jan-Jun 2024)

Narcan Administered by EMS

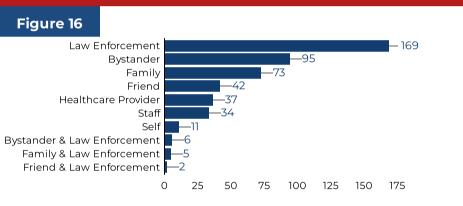
No Narcan Administered

47

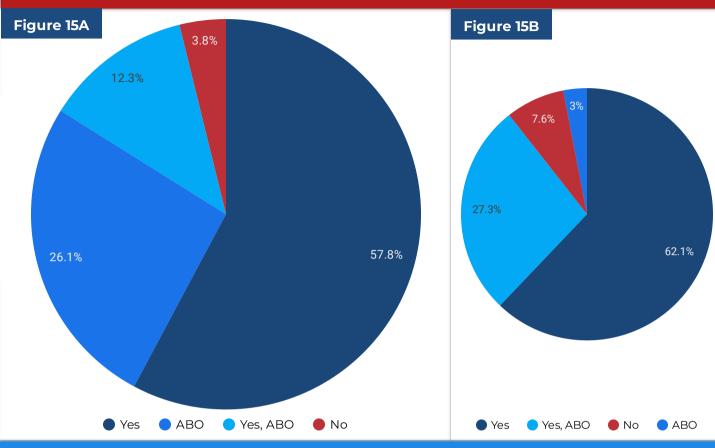
Administered by Other 470

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

Figure 17 Unchanged Improved 200 187 29 173 170 150 159 100 50 Jan 2024 Jun 2024 Feb 2024 Mar 2024 Apr 2024 May 2024

% Patient Response to Naloxone Administration

Figure 18

