# NNCN Northern Nevada's COSSAP News



### **COSSAP Grant**

## Comprehensive Opioid, Stimulant, and Substance Abuse Program

In 2022, Nevada received a grant through the Bureau of Justice Assistance, Office of Justice Programs to support programs that "identify, respond to, treat, and support those impacted by illicit opioids, stimulants and other drugs of abuse." Nevada already has many programs that work with people impacted by substance use, and that work to divert our neighbors away from justice system involvement, toward recovery services. Connection to services can provide stability for people with mental health issues and substance use disorders - stability that can help our neighbors in recovery.

As we move into the new year, many of Nevada's programs are gearing up to provide even more support to neighbors in crisis. This publication will cover two such programs funded under the COSSAP grant, FASTT and MOST, and will also include important insights from the ODMAP tool showing trends in overdoses and naloxone administration across Northern Nevada.

#### FASTT ..... p. 3

Forensic Assessment Services Triage Teams (FASTT) provide rapid assessment and service connections for people incarcerated in local jails. FASTT works to set neighbors up for success, so they can avoid continuing justice system involvement.

#### MOST \_.... p. 4

Nevada's Mobile Outreach Safety Teams (MOST) involve collaboration between law enforcement and mental health professionals. MOST works with neighbors in crisis to provide support, connection to resources, and importantly, to prevent unnecessary justice system involvement.

#### ODMAP ..... p. 5

The Overdose Detection Mapping Application Program (ODMAP) maps overdose cases across the state, and can provide important insights into opioid overdose trends. In 2021, Nevada implemented an API that pulls overdose data from the state EMS database for more reliable information.

## Greetings



A letter to COSSAP's program partners

This is the first edition of the COSSAP monthly newsletter, which I hope will be of use to service providers, decision-makers, and community members, to keep apprised of the programs working to make a difference in our communities!

This first edition takes a look back at last year - including the FASTT and MOST evaluation highlights, and provides some baseline information from the Overdose Detection Mapping Application Program.

Many of you already know me as a researcher who has been working for years with the program evaluation teams for FASTT and MOST through the Nevada Center for Surveys, Evaluation, & Statistics. As I move into a new role as a data analyst for the northern region, I am excited to be more involved in the FASTT and MOST program data on a daily basis. I am excited because this will allow me to work directly with the teams to spot trends in the data, and provide useful and actionable insights.

Over the next month, I look forward to connecting with our program partners in our regional meetings and one-on-one to learn more about how I can best support you, so that you can continue to do what you do best!

Until then, all the best, Katie M. Snider





## FASTT: FORENSIC ASSESSMENT SERVICES TRIAGE TEAMS

#### **FASTT TRENDS**

FASTT teams have been hard at work in 2022! Not only did they serve a record number of consumers, but frontline FASTT staff have been working closely with BitFocus to streamline their client management information system (CMIS) so that they can spend more time on consumer services and less time on administrative tasks!



The evaluation, which was conducted by the Nevada Center for Surveys, Evaluation, and Statistics at the University of Nevada, Reno, highlights difficulties that FASTT teams experienced in obtaining clean and complete data from CMIS. Despite these challenges, the report data showed that opioids are an important concern among FASTT consumers. For example, 40% of screened consumers across four counties reported use of methamphetamines, and nearly 12% reported use of heroin.

Recent efforts between FASTT staff and the BitFocus team to streamline CMIS will shape future evaluation reports by providing higher quality data that is easier to enter, and easier to access. Importantly, changes to CMIS will make it easier to gauge the true prevalence of opioid use among the FASTT consumer population, *and* to understand the impact of FASTT program participation for consumers, including program impacts on substance use service connections and recovery.

#### **Evaluation Snapshot**

#### **Carson City**

**Carson City** FASTT reported data for a total of 300 unique enrollees during the first year evaluation. Nearly all (91.1%) **FASTT** enrollees in Carson City scored moderate to high risk on the **CSST**, and 100% of enrollees screened on the CST received comprehensive case planning and case management services.

#### **Churchill County**

**Churchill County** FASTT reported data for a total of 114 unique enrollees during the first year evaluation, and screened an impressive 85.1% of referrals using the CSST. Churchill County reported 76 referrals to social services, and more than 30 connections each to mental health services, substance use services, and social services.

#### **Douglas County**

**Douglas County** FASTT reported data for a total of 63 unique enrollees for a three month period covered in the evaluation report. Nearly 75% of consumers screened using the CSST scored moderate/high risk. **Douglas County** also screened more than 60% of referrals using the Brief Jail Mental Health Screen and the CAGE-AID tool.

#### **Lyon County**

**Lyon County** FASTT reported data for a total of 236 unique enrollees during the first year evaluation. Lyon County completed CST screenings for 32.2% of consumers who scored moderate/high risk on the CSST. Nearly 15% of consumers were connected to substance use services.

#### **Nve County**

Nye County FASTT reported data for a total of 34 unique enrollees during the first year evaluation. Nye County conducted **CSST** screenings for 100% of referrals, and conducted CST screenings for 56.7% of those who scored moderate/high on the CSST.

## NEVADA MOST TEAMS

**Nevada's Mobile Outreach Safety Teams (MOST)** are co-responder teams that involve law enforcement and mental health professionals. When a neighbor is in crisis, they or someone witnessing the crisis can reach out to MOST for assistance. MOST works to provide support, connection to resources, and importantly, to prevent unnecessary justice system involvement.

The Douglas County MOST Team submits standardized data through UNR's Qualtrics Platform - data which has helped them to answer their monthly and quarterly reporting obligations, but which also provides valuable insights about MOST!



Douglas County MOST Staff Recorded Nearly 240 Hours of Direct Service to Consumers in 2022: August was the busiest month, 34 Hours Spent with Consumers



#### **Evaluation Snapshot**

#### **Carson City**

#### **Data Reported**

July 27, 2021 to Sept. 22, 2021

Initial Contact: 53 Follow-ups: 64 Type Blank: 13 Total Contacts: 130

#### **Top 3 Reasons for Call**

Psychotic Behavior - 37 Neglect Basic Needs - 16

ARCI - 13

#### Transports - 14.6%

Hospital - 2 Jail - 1 Homeless Shelter - 3 Home/Family -

Triage/Detox - 6

#### Service Referrals - 44.6%

Provider - 23 OP Mental Health - 19 CCBHC - 8 Services - 7

#### **Douglas County**

#### **Data Reported**

July 22, 2021 to March 31, 2022

Initial Contact: 178 Follow-ups: 243 Type Blank: 12 Total Contacts: 433

#### **Top 3 Reasons for Call**

Psychotic Behavior - 88 Suicidal Behavior - 63 Cannot Meet Basic Needs - 52

#### Transports - 2.1%

Hospital - 5 Jail - 0 Homeless Shelter - 1 CCBHC - 3 OP Mental Health - 1

#### Service Referrals – 61.7%

Provider - 199
OP Mental Health - 91
CCBHC - 77
Rural Clinics - 25

#### **Lyon County**

#### Data Reported

July 28, 2021 to March 31, 2022 Initial Contact: 302

Follow-ups: 1,112 Type Unknown: 2 Total Contacts: 1,416

#### Top 3 Reasons for Call

Suicidal Behavior - 114 Psychotic Behavior - 88 ARCI - 32

#### Transports - 3.0%

Hospital - 14 Jail - 0 Homeless Shelter - 3 Home/Family - 2 Triage/Detox - 22

#### Service Referrals – 46.9%

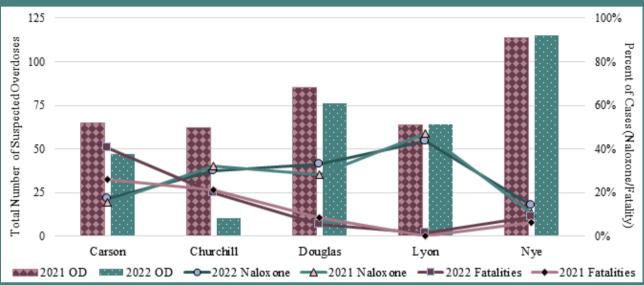
Provider - 157 OP Mental Health - 60 CCBHC - 442 Case Manager - 39

### **ODMAP**

## Overdose Detection Mapping Application Program

The Overdose Detection Mapping Application Program (ODMAP) is a national mapping application for states to track reported overdose incidents, including incidents involving Naloxone administration and fatalities. With ODMAP, states can gain insight into the movement and impacts of opioids within and between states. In early 2021, the Nevada Attorney General's Office implemented an API (Application Programming Interface) to pull data from the state EMS data base into ODMAP. This system has provided a clearer picture of the opioid crisis in Northern Nevada.

#### Lyon County had the highest reported Naloxone rate, lowest Fatality Rate



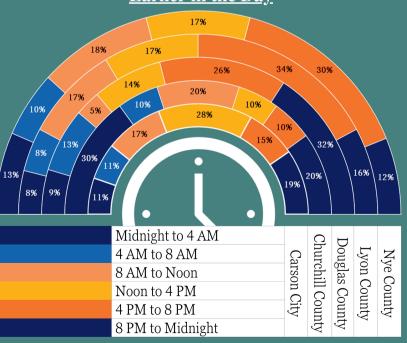
Note: Data reported in ODMAP for Naloxone administration do not automatically capture use of Naloxone when adminstered by a bystander prior to the arrival of an EMS team.

Data from ODMAP shows an average of 196 overdoses per month in 2022, compared to 164 per month in 2021. Almost every county represented in this newsletter saw decreases in overall suspected overdoses from 2021 to 2022, and the overall average percent of suspected overdoses that resulted in fatalities decreased slightly from 6.46% in 2021 to 6.38% in 2022 across all counties.

On average for the year, overdose incidents were more common in the overnight hours.

- Lyon and Nye county had more reported overdoses in the afternoon between 4 and 8 PM
- Douglas saw the majority of their overdoses between 8 PM and Midnight
- Churchill saw their peak between Midnight and 4 AM
- Carson City had peak overdose incidents between Noon and 4 PM

#### Late afternoons are High Risk Times for Overdoses - but Carson Sees More Incidents Earlier in the Day



## Overdose Detection Mapping Application Program

September was the busiest month for overdoses in the region in 2022, followed by April. November had the fewest reported overdoses.



#### **Naloxone Provision**

The Northern Nevada Counties reported on here had an overall increase in the percent of overdose cases with reported Naloxone use, from 22.6% in 2021 to 25.9%. While the ODMAP data at this point do not support a statistically significant relationship between Naloxone use and fatalities, is notable that Lyon County, which had the highest percent of cases of Naloxone use compared to overall suspected overdose cases also have the lowest percent of cases resulting in fatalities. However, Carson City saw a reversal of this trend, where they had a higher percent of fatalities than reported cases of Naloxone use.

Region	Total ODs (% Population)	Fatal ODs	ODs with Naloxone (fatal and nonfatal)
Nevada (Statewide)	0.27%	3.5%	35.4%
Carson City	0.08%	40.4%	17.0%
Churchill County	0.04%	20.0%	30.0%
Douglas County	0.15%	5.3%	32.9%
Lyon County	0.11%	1.6%	43.8%
Nye County	0.22%	8.7%	13.9%

The FASTT team in Lyon County provides Naloxone kits to FASTT consumers as part of their reentry plan. The percentage of overdose fatalities is incredibly low in Lyon County, with only a single fatality reported in 2022, while nearly half (43.8%) of suspected overdoses reported in Lyon County involved Naloxone administration. Douglas and Nye County also had relatively low overdose fatality rates, though both were above the average for the state. Douglas and Churchill County also had relatively high Naloxone administration rates, though they were still below the state average.

