



# Data Explainer Series

*Week 5: Overdoses and Suicides - Office Hours*

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# Series Schedule

Webinar Date	Office Hours Date	Webinar Title
7/29/2025	8/1/2025	Introduction to Statewide Goals & Access to Care
8/5/2025	8/8/2025	Homelessness
8/12/2025	8/15/2025	Justice-Involvement
8/19/2025	8/22/2025	Removal of Children from the Home
<b>8/26/2025</b>	<b>8/29/2025</b>	<b>Overdoses and Suicides</b> ← <i>You Are Here</i>
9/2/2025	9/5/2025	Untreated Behavioral Health Conditions, Prevention and Treatment of Co-Occurring Physical Health Conditions
9/9/2025	9/12/2025	Care Experience, Quality of Life, Social Connection
9/15/2025	9/19/2025	Engagement in School and Work
9/23/2025	9/26/2025	Institutionalization
9/30/2025	9/30/2025	Collaborating with Local Planning Processes

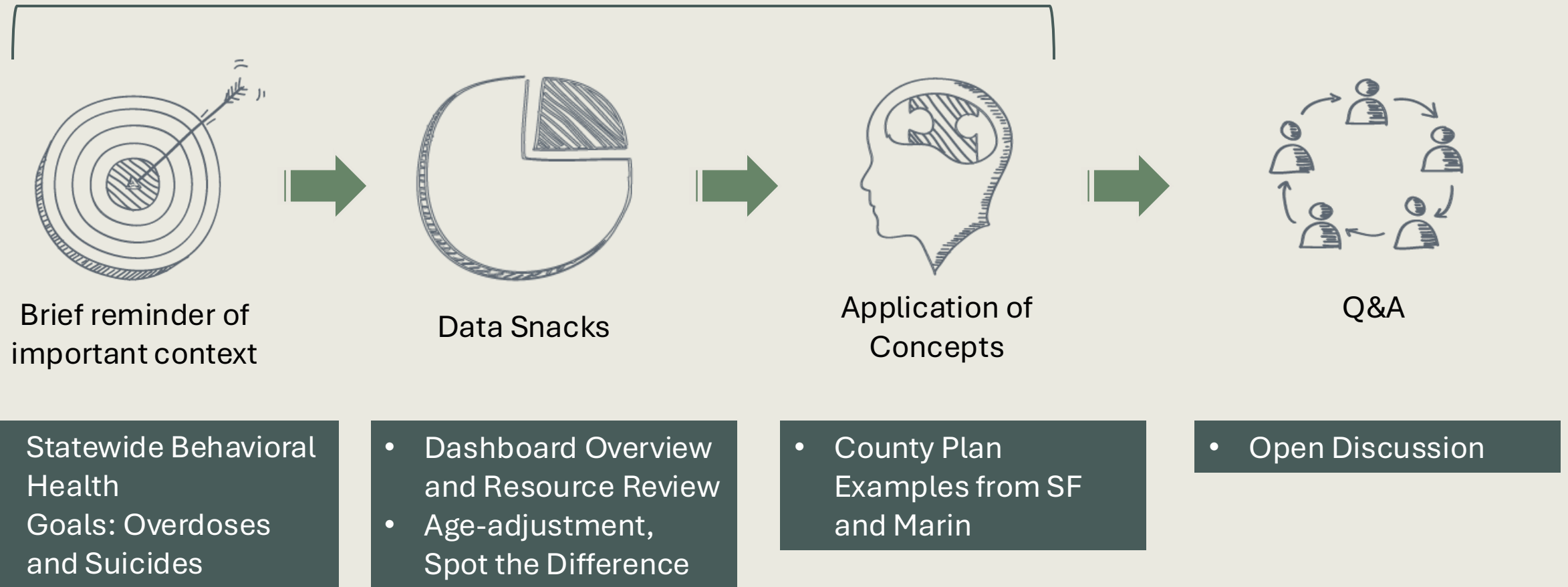
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# Housekeeping

- Each week we have a new webinar topic and corresponding office hours
- The aim of office hours is to dive a bit deeper and respond to questions
- All webinars will be recorded and placed on our website (*office hours will not be recorded*)
- Utilize the Q&A for questions

# Office Hours Grounding

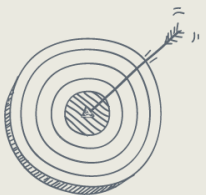
20-30 minutes



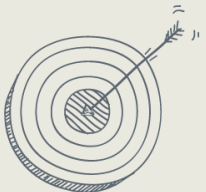
# The Largest Picture

The vision for Behavioral Health Transformation is that all Californians have access to behavioral health services...

... this leads to improved health and happiness for individuals, better overall outcomes and reduced disparities.



# The More Immediate Picture: Integrated Plan



# Overdoses & Suicides

*Additional Goals*



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# BHT Population Health Strategy

Use county performance on the six priority goals and choose one additional goal to inform the Community Planning Process and complete the BHSA Integrated Plan.

Choose at least one



## Priority Goals

1. Access to Care
2. Homelessness
3. Institutionalization
4. Justice-Involvement
5. Removal of Children from the Home
6. Untreated Behavioral Health Conditions

## Additional Goals

1. Care Experience
2. Engagement in School
3. Engagement in Work
4. Overdoses
5. Prevention and Treatment of Co-occurring Physical Health Conditions
6. Quality of Life
7. Social Connection
8. Suicides



# Overdoses & Suicides

## Overdoses

- Occurs when a toxic amount of a drug—or combination of drugs, including prescription medications, illegal substances, or alcohol—overwhelms the body's ability to function.

## Suicides

- Death or non-fatal, potentially injurious harm caused by self-directed behavior undertaken with the intent to die as a result of the action.

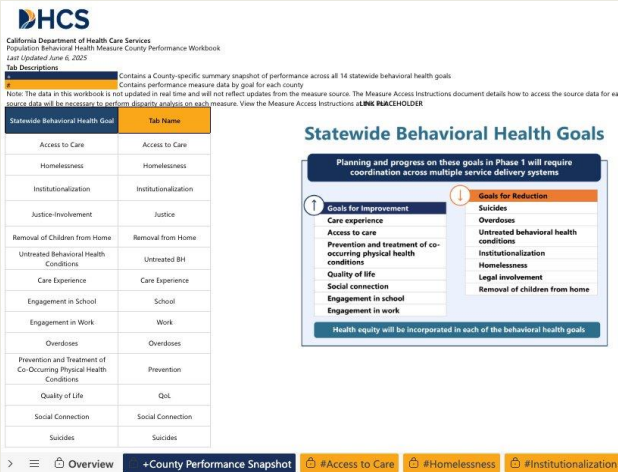
These topics are  
*difficult and personal.*  
Take space if you need it.



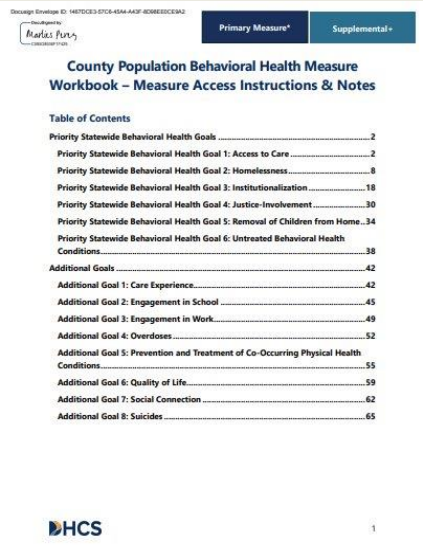
# Dashboard

*Overdoses and Suicides*

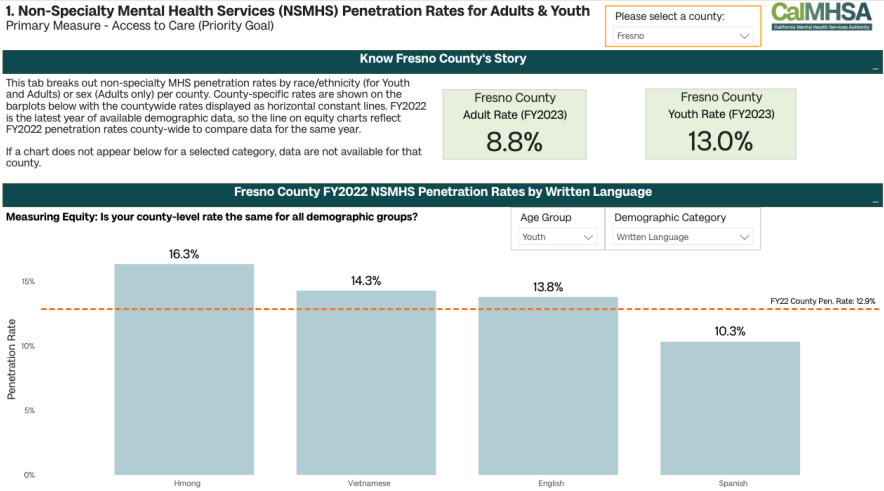
# What are the Sources for CalMHSA's Dashboards?



County Rates directly from DHCS Workbook



County-specific Equity Data extracted from DHCS-recommended data sources



An all-in-one resource for you to complete your IP



# Data Bite: Dashboard Orientation



CalMHSA is hosting an educational series through Sept. 30 to support counties in advancing California's statewide behavioral health goals and population-level measures under the Behavioral Health Services Act. The webinars and corresponding office hours will help counties incorporate these goals into Integrated Plans and strengthen data-informed strategies that improve population health outcomes. *Please note: Live participation in the series is only for county behavioral health staff.*

Visit this web page for links to recordings of each webinar, printable resource materials, and data dashboards as they are developed.

Each week's offering will focus on one or a related grouping of statewide goals and measures and examine them through:

- **Webinars (Tuesdays, 12-1 p.m.):** Focused on understanding the data, including statewide performance metrics, system context, and county health equity and disparity considerations
- **Office Hours (Fridays, 12-1 p.m.):** A collaborative, open forum for discussion and cross-county learning

## CONTENTS

Webinars



Data Dashboards



BHT Planning Documents

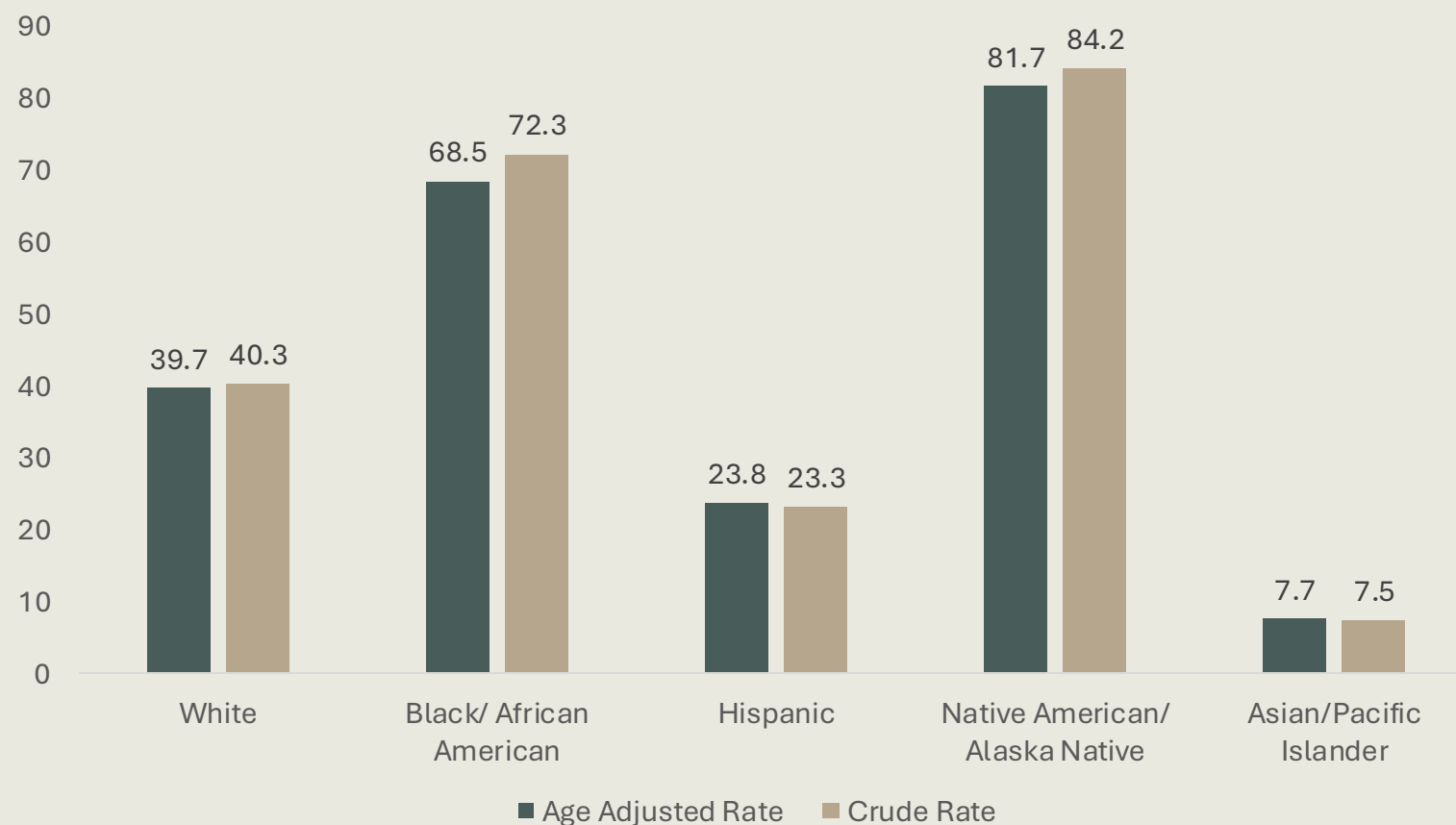


[www.calmhsa.org/data-explainer-series](http://www.calmhsa.org/data-explainer-series)



# Data Snack – What is "Age Adjusted"?

Rate of All Drug-related Overdose Deaths by  
Race/Ethnicity in California - 2023



## Crude Rate:

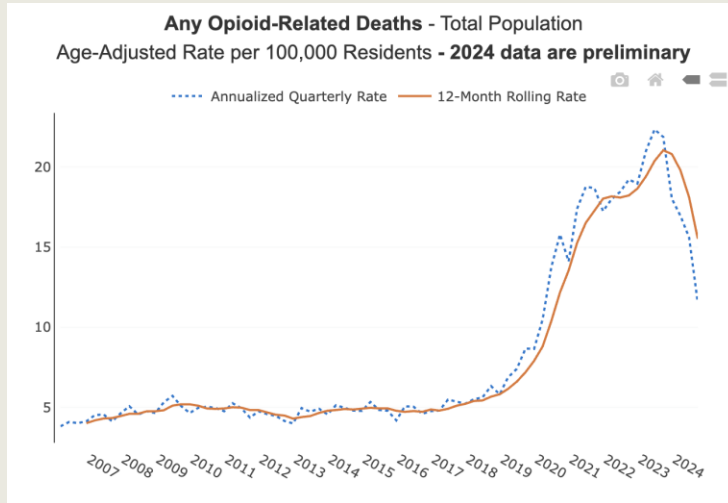
What is the rate of overdose deaths in this group, regardless of age?

## Age-adjusted Rate:

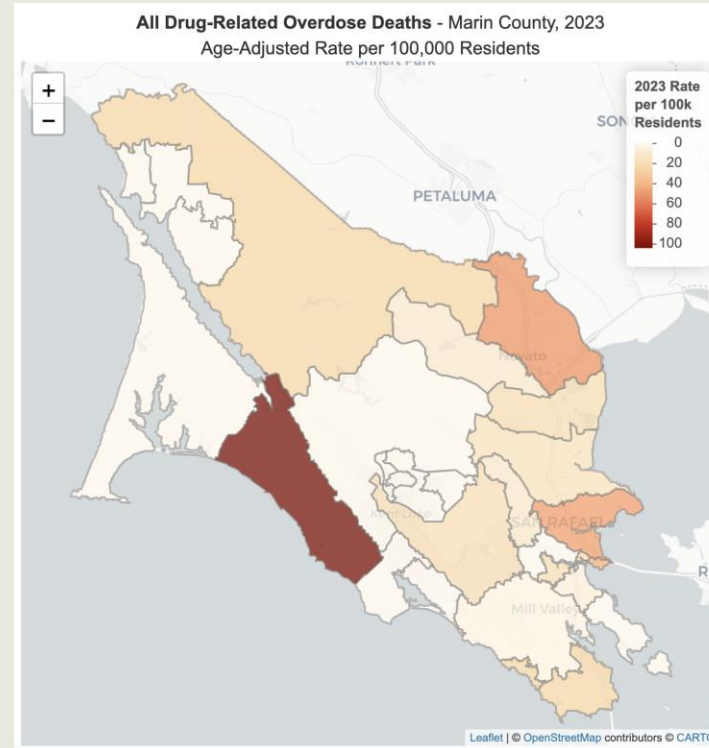
If all groups were the same age, what is the rate of overdose deaths?



# California Overdose Surveillance Dashboard



Trends



Geography (zip code)

Please review the [Data Definitions](#) page for how metrics are defined.

*Selections will be automatically applied*

Select a data source

- ☒ Deaths ☐ ED Visits ☐ Hospitalizations  
☐ Prescriptions

Select the type of drug indicators

- ☒ All Drug/Opioids ☐ Other Drugs

Deaths (per 100,000 residents) related to:

Any Opioid

**Indicator Description:**

Acute poisoning deaths involving opioids such as prescription opioid pain relievers (e.g. hydrocodone, oxycodone, and morphine), heroin, and opium. Deaths related to chronic use of drugs are excluded from this indicator. See the [Data Definitions](#) page for more information about this indicator.

View indicators by

- ☒ Total Population ☐ Sex ☐ Age  
☐ Race/Ethnicity

Select the type of rate

- ☐ Crude Rate ☒ Age-Adjusted

Compare this county with another area?  
(Comparison area included in data downloads)

- ☐ Yes ☒ No

Indicator

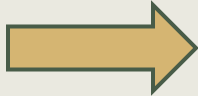
Drug type

Equity data

# EpiCenter – Explore your Data

## Examine

Equity data



Filter by Person

Filter by Place

Filter by Time

Filter by Injury

Injury Intent

Suicide x

Injury Mechanism

filter by injury mechanism - sho

Cut/Pierce

Drowning/Submersion

Fall

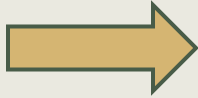
Fire/Burn: Fire/Flame

Fire/Burn: Hot

Object/Substance

Firearm

Machinery



Trends over time



Means

Currently displaying 21,197 injury deaths from 2019 to 2023 among Californians aged 0 to 100 + years,

filtered by:

Injury Intent: Suicide

Custom Table

Time Series

Bar Chart

Group By

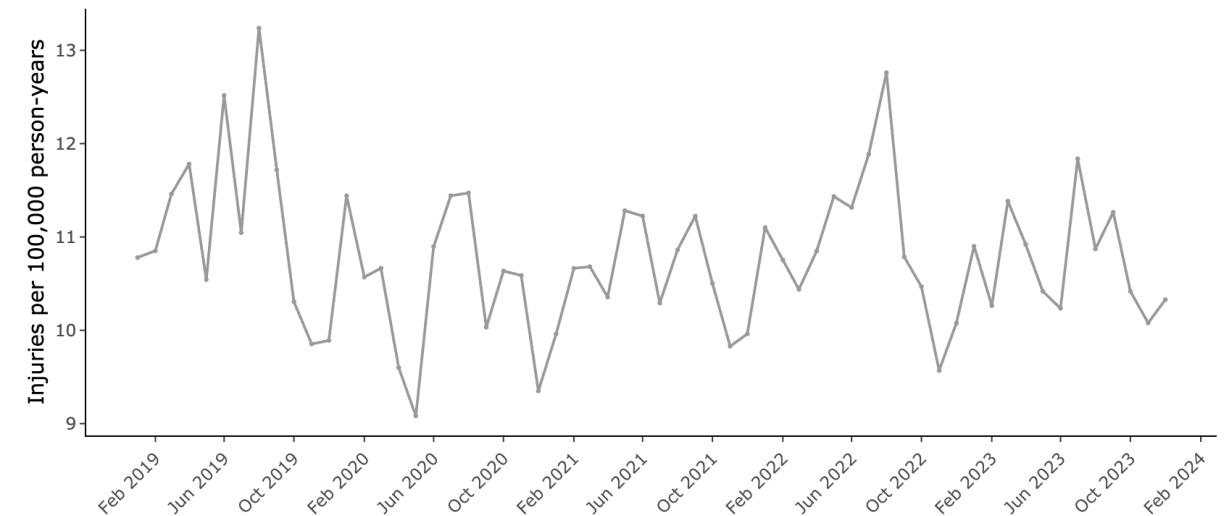
Injury Measure

Time Unit

No Grouping

Rate

Month



[https://skylab4.cdph.ca.gov/epicenter/\\_w\\_58c1b225/?Home-welcome](https://skylab4.cdph.ca.gov/epicenter/_w_58c1b225/?Home-welcome)







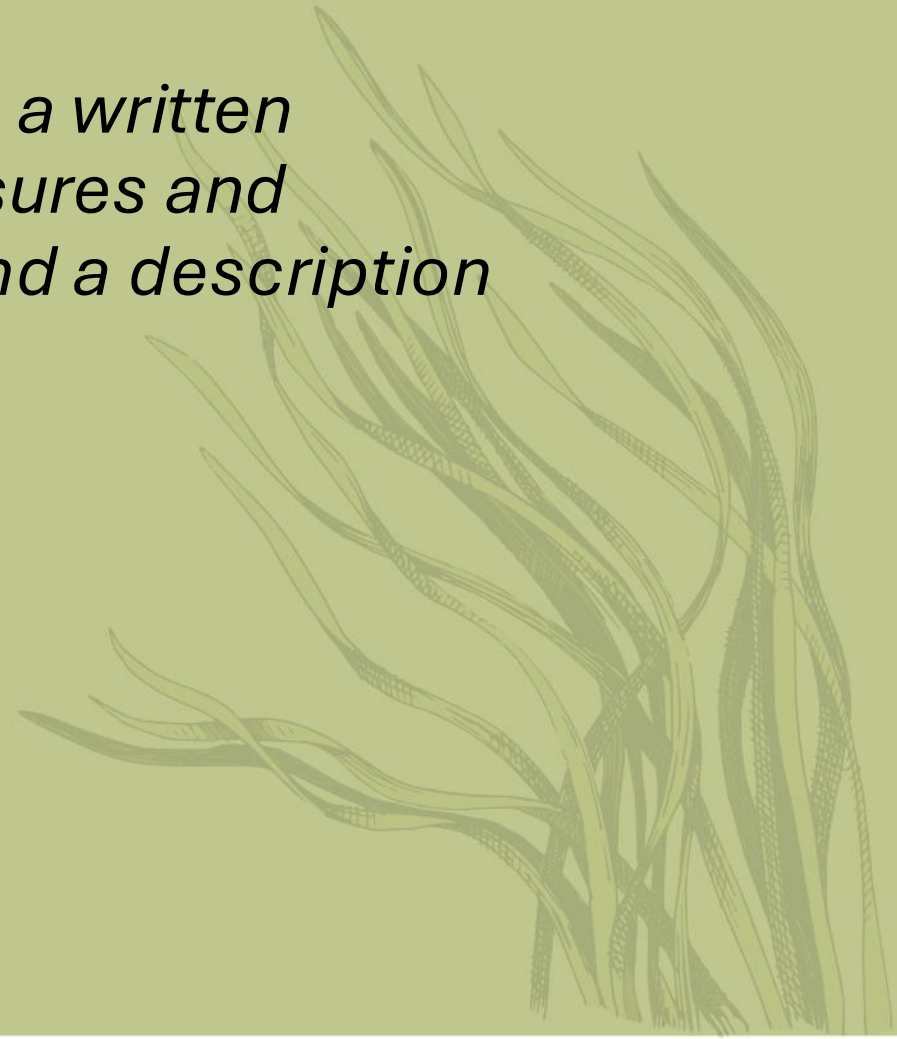
# Equity & Disparities Analysis

*Exploring differences*

# Integrated Plan: Disparities Analysis

*“For any disparities observed, please provide a written summary of your findings, including the measures and population groups experiencing disparities and a description of the data that supported your analysis.”*

(2,000 character limit)



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# Measuring Equity

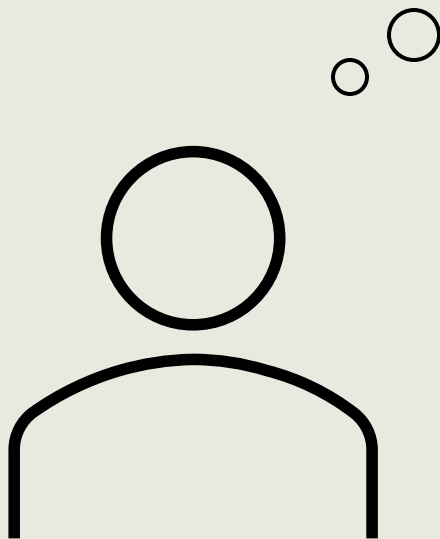
1. **What are the main drivers?** Identify determinants associated with the measures and goal.
2. **Which populations are most affected?** Compare sub-groups to county average and to each another.
3. **Why might you be seeing this result?** Examine potential causes of the result you're seeing.
4. **How do you want to make an impact?** Set specific goals based on inequities identified and locus of control.
5. **Are you meeting your goals?** Monitor progress and adjust when needed, including discussions and feedback from affected communities.



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# Measuring Equity

*Which populations are most affected?*



How do other subgroups compare to the best-performing group?

How do other subgroups compare to the most socially advantaged group?

How far off are different groups from the county-wide rate?

Are all groups meeting minimum performance level targets?\*\*

**\*\* During Phase 1, DHCS does not expect BHPs to meet or exceed specific benchmarks on statewide goals or measures.**

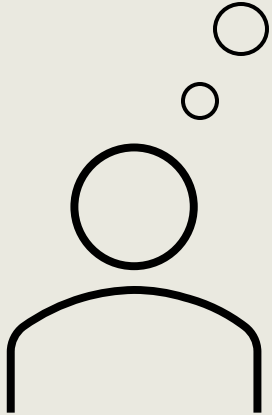
Source: Zyllia E, Stewart A, and Lukanen E. Robert Wood Johnson Foundation. [Health Equity Measurement: Considerations for Selecting a Benchmark](#). Sept 2023.



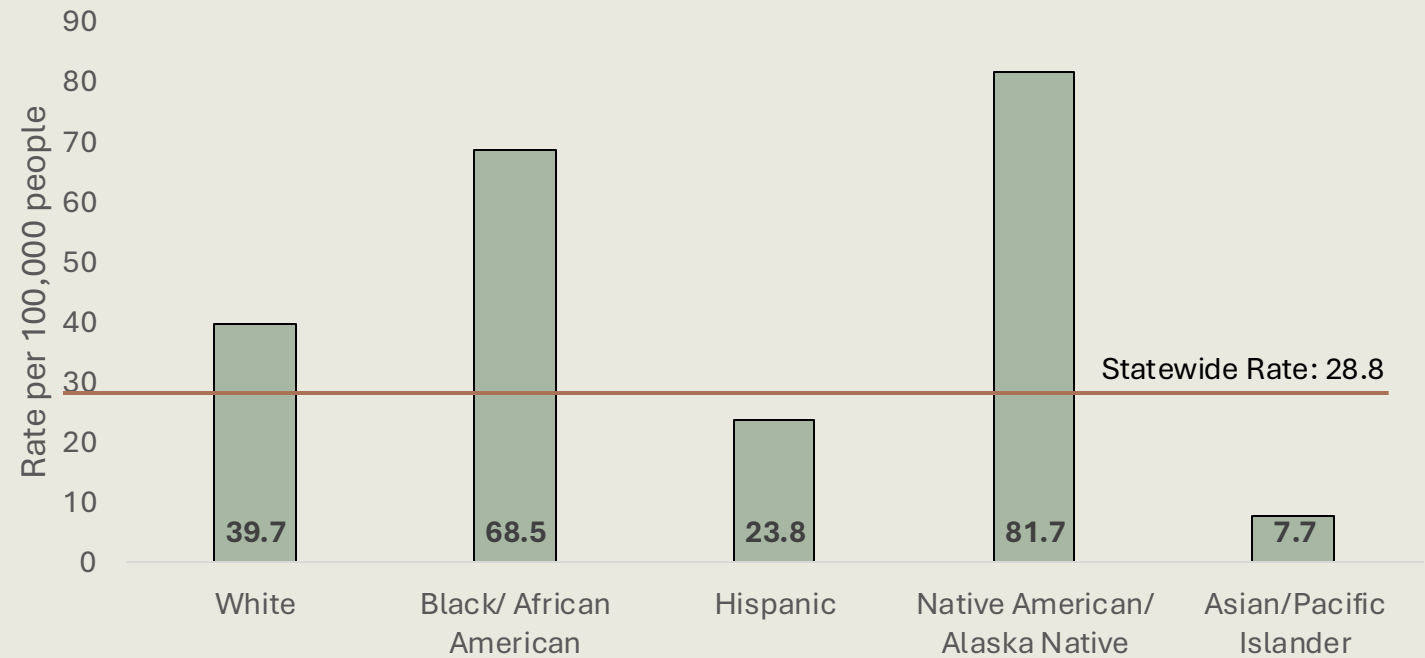
# Spot the Difference

*Which populations are most affected?*

How do subgroups compare to the best-performing group?



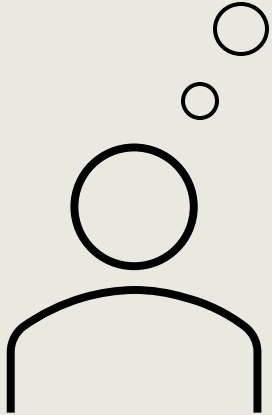
Age-adjusted All Drug-Related Overdose Death Rate – California 2023



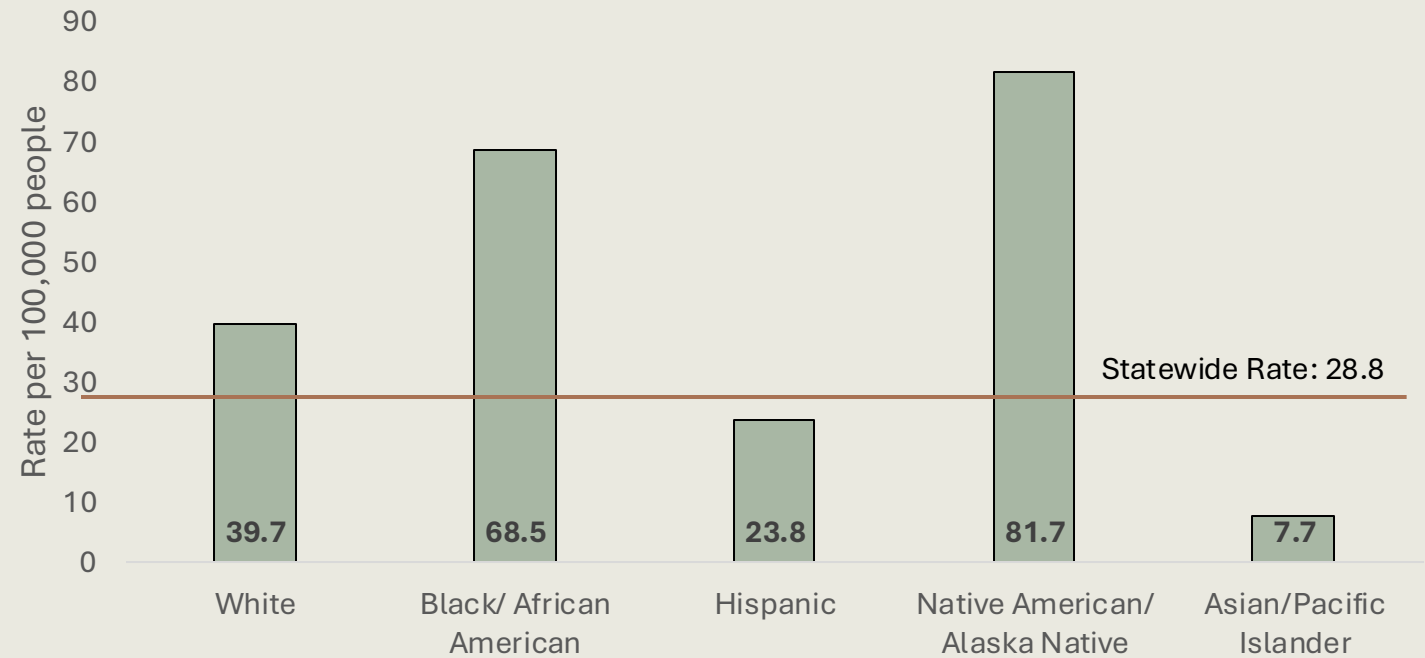
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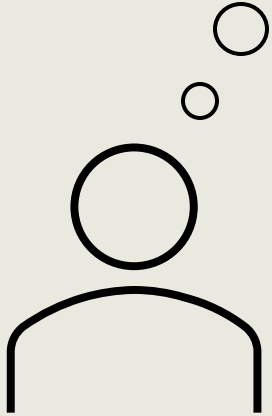
Age-adjusted All Drug-Related Overdose Death Rate – California 2023



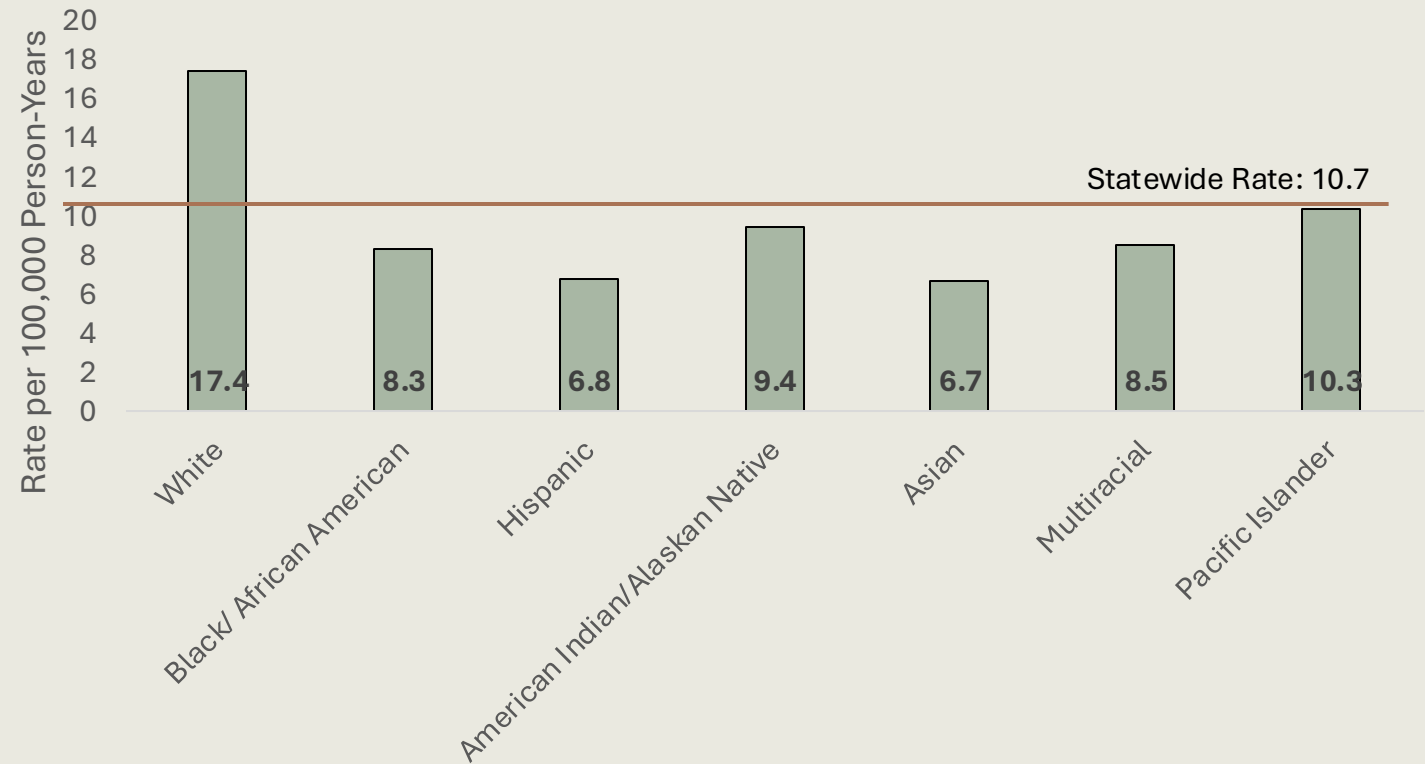
# Spot the Difference

*Which populations are most affected?*

How do subgroups compare to the most socially advantaged group?



Rate of Suicide Deaths per 100,000 Person-Years –  
2023, California



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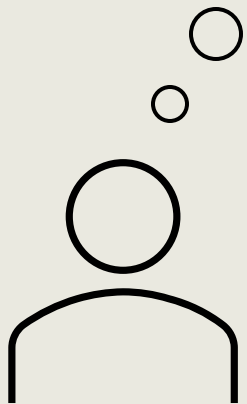
# Now that we know there's a difference, what's next?

*Why might you be seeing this result?*

Are these different  
enough that we should  
take a closer look?

What do these  
differences tell us?

How can we work with  
our partners to  
understand *both* what  
the data “means” and  
how we might do  
something to intervene?





# County Plan Examples

*Following Hunches and Developing  
Strategies*



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# Hunch Insights: Points of Intervention

Specific events or time periods in people's lives present unique risks for overdose and opportunities for intervention, including:

While in  
school/education  
system

When using  
drugs in the  
community

When becoming  
housed

Release from  
hospital/ED\*

During & post-  
release from  
incarceration

\*Including new mothers who may have a SUD and have just given birth





# San Francisco County

## *Navigation-to-Telehealth Buprenorphine Program*

**Problem:** Lack of services during nighttime hours; Low barrier treatment options are needed

**Solution:** Partner with a community-based provider and use telehealth to facilitate buprenorphine starts

"Night Navigators"  
connect patients to  
clinicians via Telehealth



Clinicians prescribe  
buprenorphine and  
connect to follow-up care

2,900 telehealth encounters between March 2024-March 2025

**85%** resulted in a  
buprenorphine prescription

**45%** of these prescriptions  
picked up



[More information available in this article](#)



# Marin County

## *Follow-up after a non-fatal overdose*

**Goal:** Follow-up with people who had a non-fatal overdose after an EMS and/or ED encounter

**Identify non-fatal  
opioid overdose  
EMS visits**

**Result:** Correct  
phone numbers  
often not reported  
in EMS records

**Attempt follow-up  
with all payers via  
Telehealth provider**

**Result:** Not many events  
resulted in successful  
outreach

**Attempt follow-up with trusted  
providers among Medi-Cal +  
Uninsured populations**

**Result:** Provider outreach is  
limited and ability to reach the  
client varies

**Real-time ED engagement and  
ED culture and practice  
change**

**Result:** Excellent engagement  
when Recovery Coach connects at  
the bedside, limited otherwise.

More clients started on MAT in the  
hospital, new warm handoffs to  
residential treatment from  
inpatient, hospital staff stigma  
around SUD reduced





# Marin County

## *Follow-up after a non-fatal overdose*

Strategy	Description	Result
<b>EMS data on non-fatal overdoses for outreach</b>	Providers of clients with recent services in SmartCare receive an email encouraging outreach to the client	Provider outreach is limited and ability to reach the client varies
<b>ED Point Click Care data for outreach</b>	Text and phone “cold calls” to Medi-Cal members with ED visits for SUD	Very limited connection
<b>Real-time ED engagement</b>	Bilingual Recovery Coach engaged by SU Navigator to build trust and ways to support treatment exploration	Excellent engagement when Recovery Coach connects at the bedside, limited otherwise.
<b>ED culture and practice change</b>	SUD Navigator led hospital culture change and built trusting relationships with treatment providers	More clients started on MAT in the hospital, new warm handoffs to residential treatment from inpatient, hospital staff stigma around SUD reduced, resulting in better care.





# Marin County

## *Suicide and Overdose Fatality Review (SOFR) Committee*

### **Purpose:**

- Track near real-time trends via extensive case review, identify individual risk/protective factors, compile recommendations for systems improvements, and design policy or systems improvements to prevent future suicide and overdose deaths.

### **Implementation:**

- Led by Marin County Public Health Department and Division of Behavioral Health and Recovery Services
- Training/TA from nationally recognized expert in SFR and other national suicide and overdose review teams
- Quarterly convening of stakeholders to review up to 2 individuals who died by suicide or overdose in the prior year

### **SOFR Committee:**

- Office of the Sherriff-Coroner
- Healthcare
- Public Safety
- Mental and Behavioral Health providers
- Social services
- Education
- Child Welfare
- Does not include family

### **Funding:**

- OSF can be used

### **Legislation:**

- AB 2871: Overdose Fatality Review Teams
- Penal Code 11174.32: Child Death Review Teams

### **Resources:**

- [Marin's Program](#)
- [Suicide Fatality Review Webinar](#)

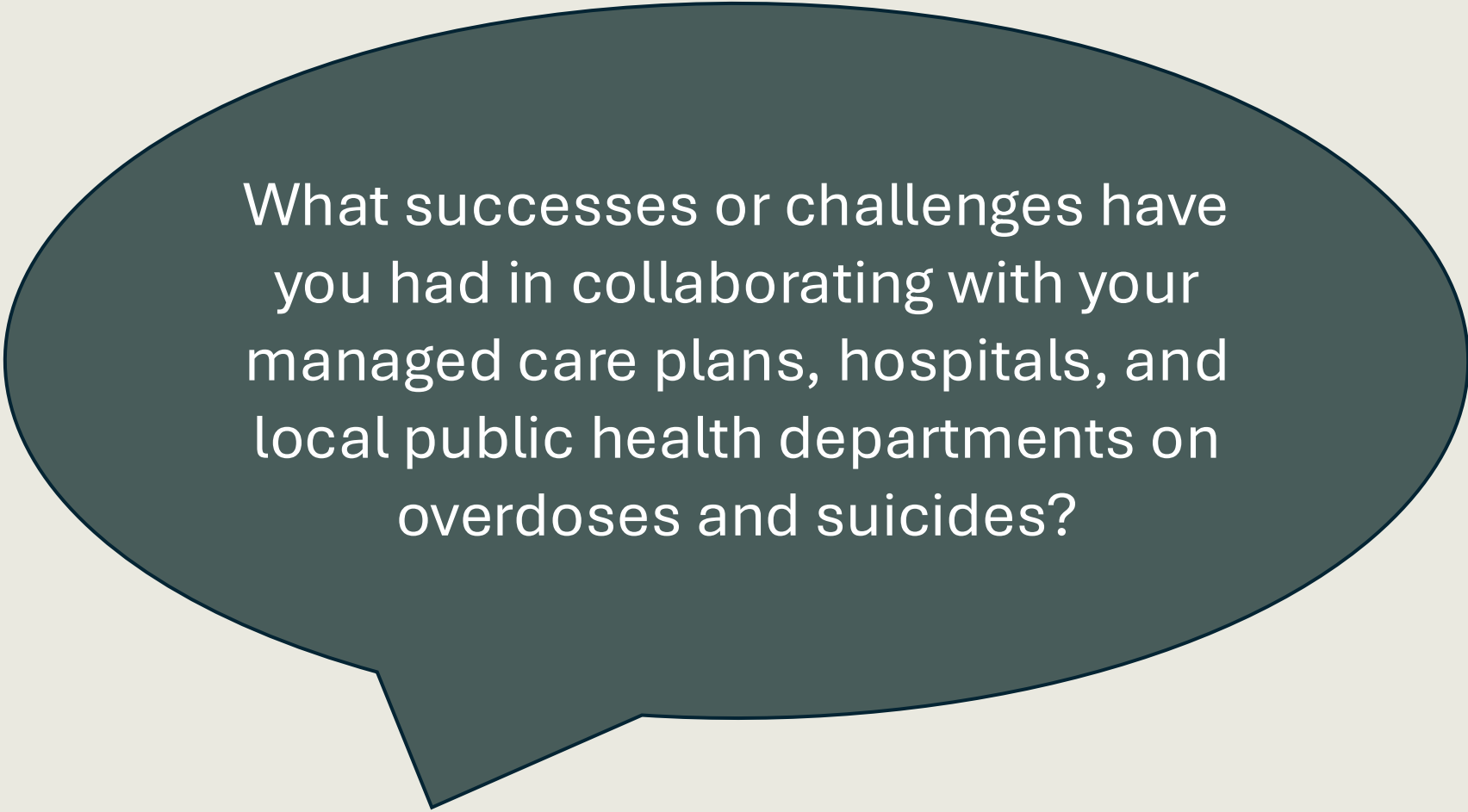


# Open Discussion



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# Discussion Question



What successes or challenges have you had in collaborating with your managed care plans, hospitals, and local public health departments on overdoses and suicides?



# Reminder: There are Six Priority Goals and One Additional Goal

Designing strategies that address more than one goal/measure at once will work in your favor!



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# What's Next?

*Data Explainer Week 6:*

Untreated Behavioral Health  
Conditions & Prevention and  
Treatment of Co-Occurring  
Physical Health Conditions

*Webinar:* Tuesday 9/2 at 12PM

Questions:

[managedcare@calmhsa.org](mailto:managedcare@calmhsa.org)







# Thank You!

[managedcare@calmhsa.org](mailto:managedcare@calmhsa.org)