



## City of Long Beach

Working Together to Serve

## Memorandum

Date: February 6, 2020

To: Thomas B. Modica, Acting City Manager *T.M.M.*

From: Kelly Colopy, Director of Health and Human Services *KC*

For: Mayor and Members of the City Council

Subject: **Report on Opioid-Related Addiction, Overdose and Death in Long Beach**

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At its October 8, 2019 meeting, the City Council directed the City Manager to provide a report within 90 days on drug use, addiction, overdose, and death statistics in Long Beach over the past five years, as well as summarize the City's approach to address these issues. This memorandum provides the information requested by the City Council.

### **Actions Taken Regarding Opioid Prescribing**

Since its memorandum to the City Council dated March 19, 2019, the Department of Health and Human Services (Health Department) has taken the following actions:

- Developed a webpage dedicated to opioids on the City of Long Beach (City) site that contains information on preventing opioid abuse and overdose. The webpage contains a media campaign developed by the Los Angeles (LA) County Public Health Department and information from the Centers for Disease Control and Prevention. The site contains educational content specific to patients as well as to health care providers; a link to the Controlled Substance Utilization Review and Evaluation System (CURES), the State data base for providers, which includes prescribing guidelines; treatment resources for those suffering from addiction; information on safe pain management; and Long Beach specific data for opioid deaths for the years 2013-2017. The site can be found here: [www.longbeach.gov/opioids](http://www.longbeach.gov/opioids).
- Referred people seeking treatment to providers in Long Beach through our Homeless Services, Clinical Services and Public Health Nursing. When people call about Substance Use Disorder treatment they are referred to the LA County website, and more recently to the Long Beach website referenced above.
- Engaged in discussions regarding the possibility of initiating a harm reduction and treatment connection pipeline through the creation of a needle exchange program. These discussions continue as part of the Everyone Home Long Beach plan and the City's STD/HIV Strategy but are not yet ready for implementation.
- A Health Alert from the City's Health Officer to Long Beach providers and pharmacists is in process and will be released early 2020.

### Update on SB 482 and the State's Implementation of the Controlled Substance Utilization Review and Evaluation System

- The California Department of Justice (DOJ) operates the Controlled Substance Utilization Review and Evaluation System (CURES), California's prescription drug monitoring database. It allows providers to see whether a patient has other prescriptions for certain drugs. Effective October 2, 2018, health care practitioners authorized to prescribe, order, administer, or furnish a controlled substance were mandated to consult CURES prior to prescribing Schedule II, III or IV controlled substances to a patient for the first time and at least once every four months thereafter, if that substance remains part of the patient's treatment.

### Comprehensive Data on Opioid Addiction and Overdose, as well as calls for service, and deaths related to any form of illegal, prescription, or synthetic opioids

- Long Beach Police Department (LBPD) data were requested for the number of arrests made for violations to California Health and Safety Codes 11377HS and 11350HS with district breakdown of such arrests. Breakdown by district was not possible, however booking charges for years 2017-2019 were analyzed. In the most recent year, 2019, 953 arrests were made for simple possession of methamphetamine/ ecstasy/Gamma-hydroxybutyric acid, down from a high of 1,191 in 2017; 142 arrests were made for simple possession of heroin/Cocaine, down from a high of 270 in 2017.

#### Booking Charges by Year for 11377HS & 11350HS

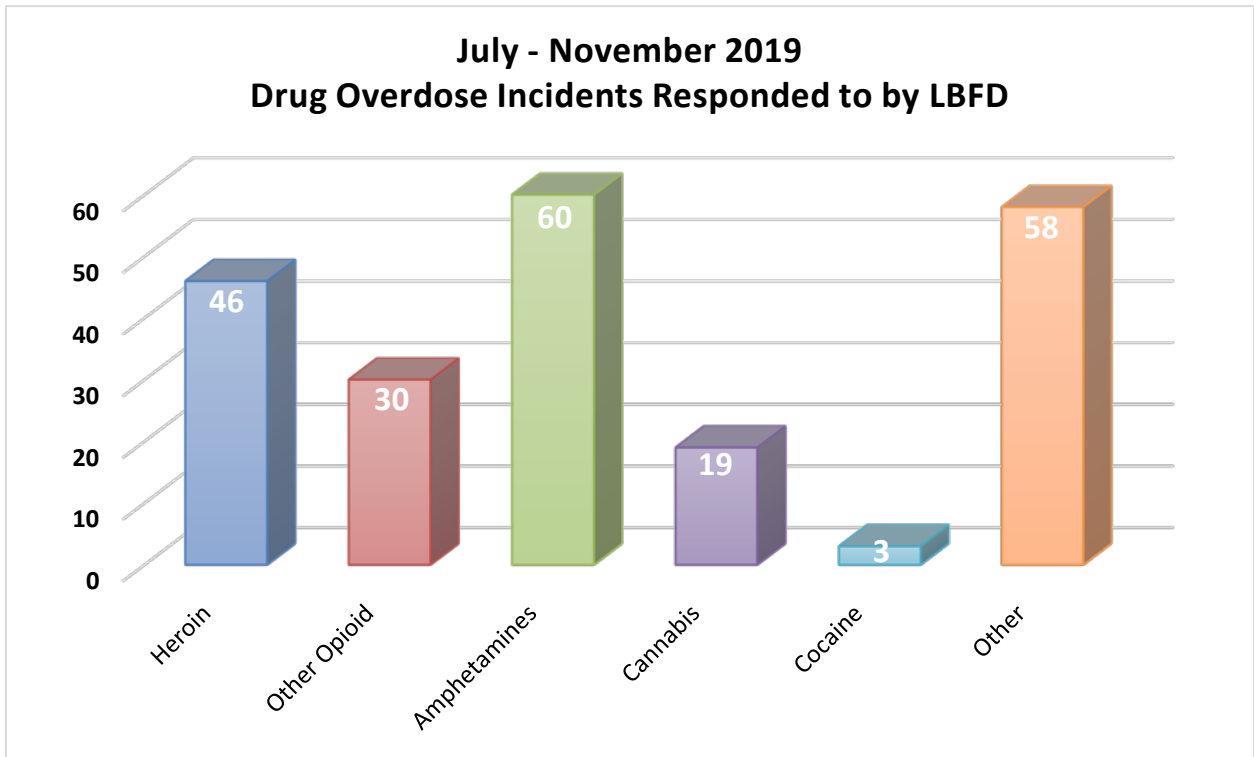
Booking Charge	2017	2018	2019	Total
11377(A)HS - Simple Possession: Methamphetamine/Ecstasy/Gamma-hydroxybutyric acid (GHB)	1,191	951	953	3,095
11350(A)HS - Simple Possession: Heroin/Cocaine	270	186	142	598

#### Notes

1. Booking Counts include primary and additional charge information for 11377HS and 11350HS.
2. The data contained within this summary is derived from databases that are continuously updated. This report represents a particular point in time and may not reflect current numbers.

Source: RMS Arrests - Narcotics.rpt; Long Beach Police Department ( Jan. 1, 2017 - Dec. 31, 2019)

In 2014, simple drug possession was reduced to a misdemeanor. Since this change, the LBPD has experienced a decline in drug possession arrests.



- The Long Beach Fire Department reports a total of 406 overdose incidents involving suspected drug use in Long Beach in the 18 months from June 2018 through November 2019. During this period, Narcan was administered during 335 overdose incidents.

Beginning July 2019, the Fire Department was able to separate data for opioid overdoses from other drugs – 187 overdoses occurred during the five-month period July through November 2019. Heroin comprised 46 of the overdoses, and an additional 30 people overdosed on other opioids, for a combined total of 76 opioid overdoses, or 40 percent of the 187 total overdoses. Amphetamines comprised 60 of the 187, or 32 percent, for the same five-month period.

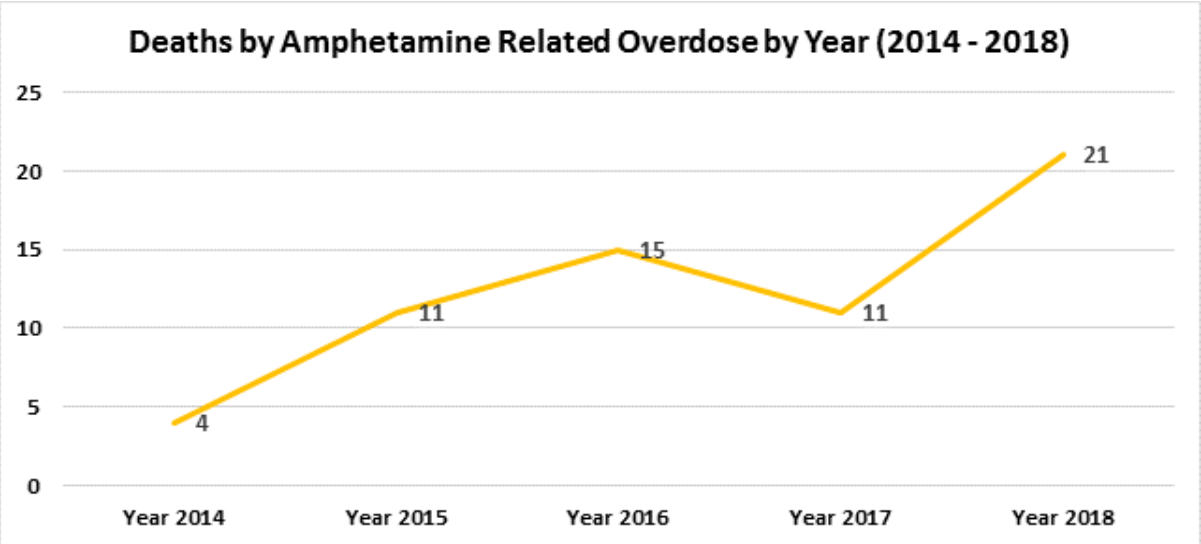
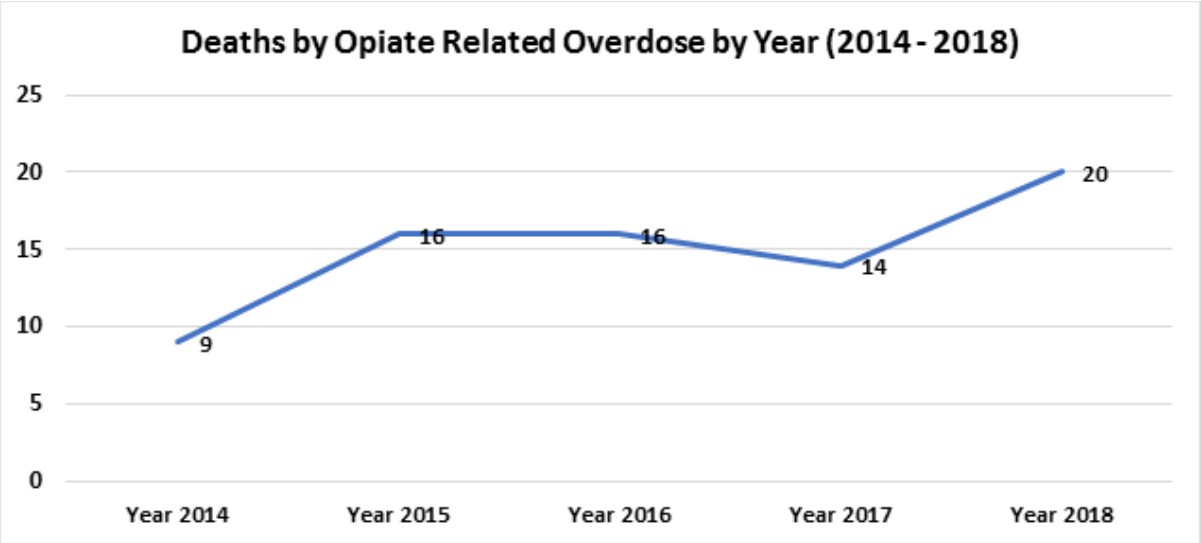
- The Health Department analyzed substance use related deaths in Long Beach<sup>1</sup> for the five-year period, from 2014-2018. During that time, 286 substance related deaths occurred in the city. Of these, 178 were listed as having home addresses in Long Beach. Death data were analyzed by omitting those whose home addresses fell outside of the city, and those with no address listed. Missing data on addresses prevents the Health Department from identifying those who may have been experiencing homelessness at the time of death. Death certificates listing alcohol as the primary cause of death were omitted as well.

The remaining group consists of 163 Long Beach residents who died a substance-related death in Long Beach; 137 deaths involved opioids and/or amphetamines.

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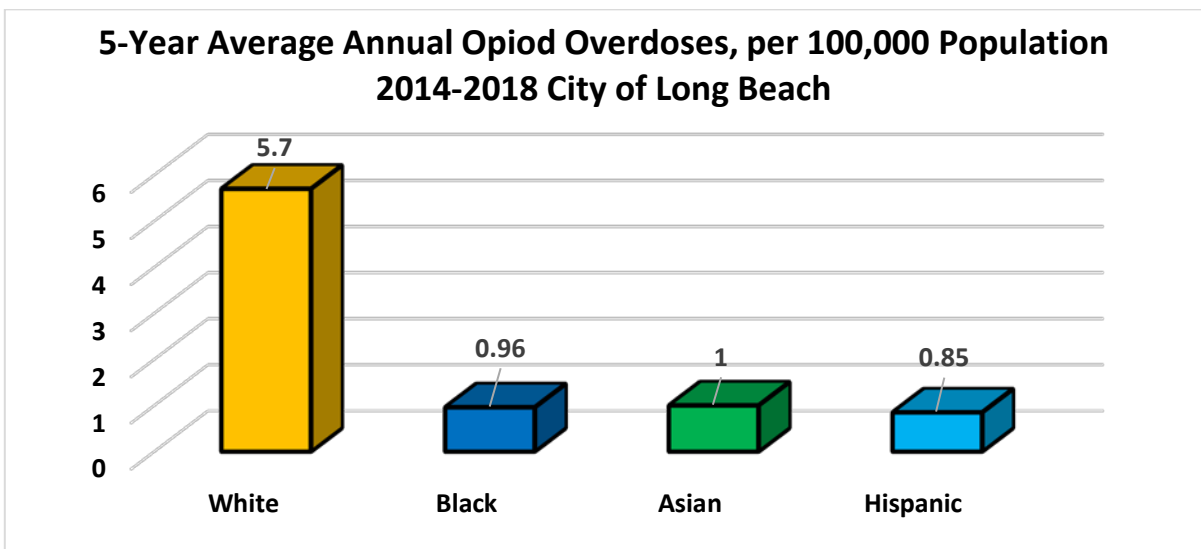
<sup>1</sup> California Department of Public Health. (2018) Vital Records Business Intelligence System (VRBIS) [Data File and Code Book].

Opioids as the leading cause of death accounted for 75 deaths during the five-year period. Amphetamines as the leading cause accounted 62 deaths during the five-year period. Deaths for both opioids and amphetamines had a small decline in 2017, then experienced larger increases in 2018. The increase was steeper for amphetamines.

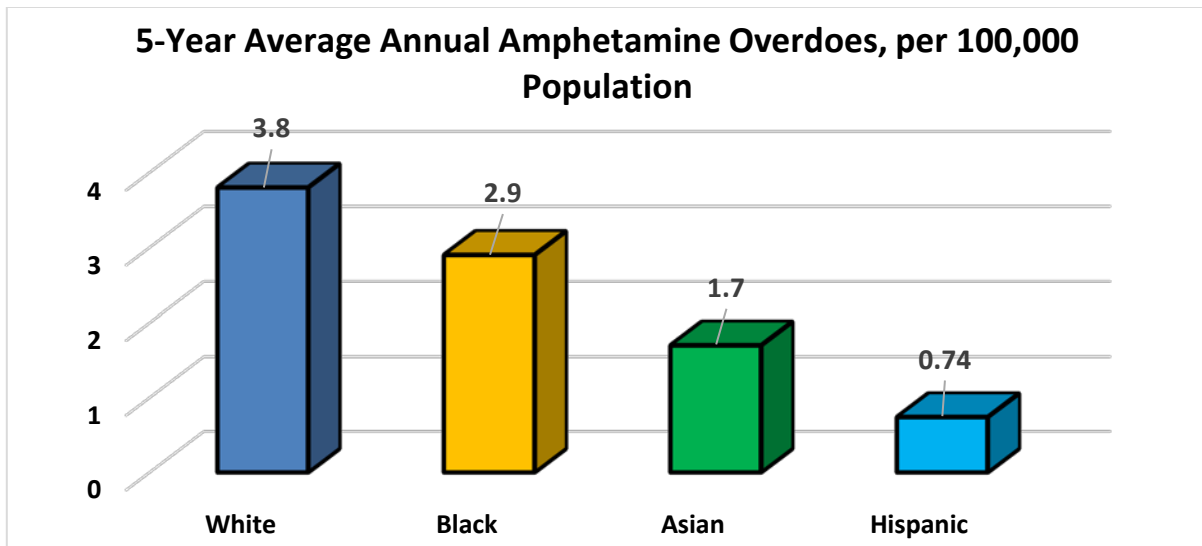


Whites overdosed on opioids at a much higher rate than other groups. Whites also overdosed on amphetamines at a higher rate than other groups.

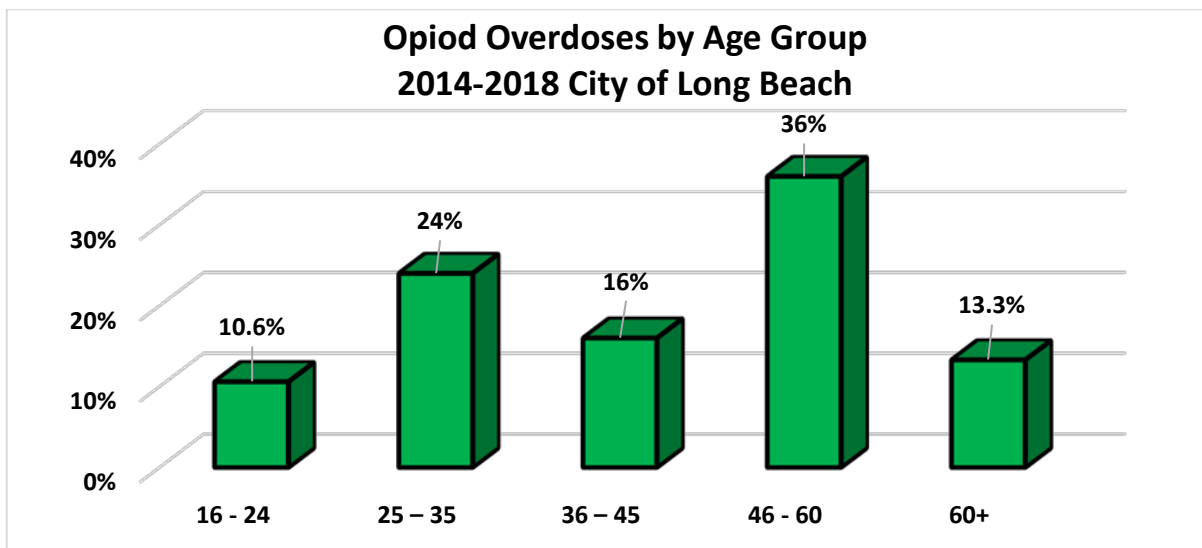
Average Overdose by Race, Opiates Only				
Race	White	Black	Asian	Hispanic
Population	213,066	62,603	59,496	188,412
Percent Pop.	46.1%	13.5%	12.9%	40.8%
Actual Deaths	61	3	3	8
Average Annual Opiate Overdose (Per 100,000 Population)	5.7	.96	1	.85

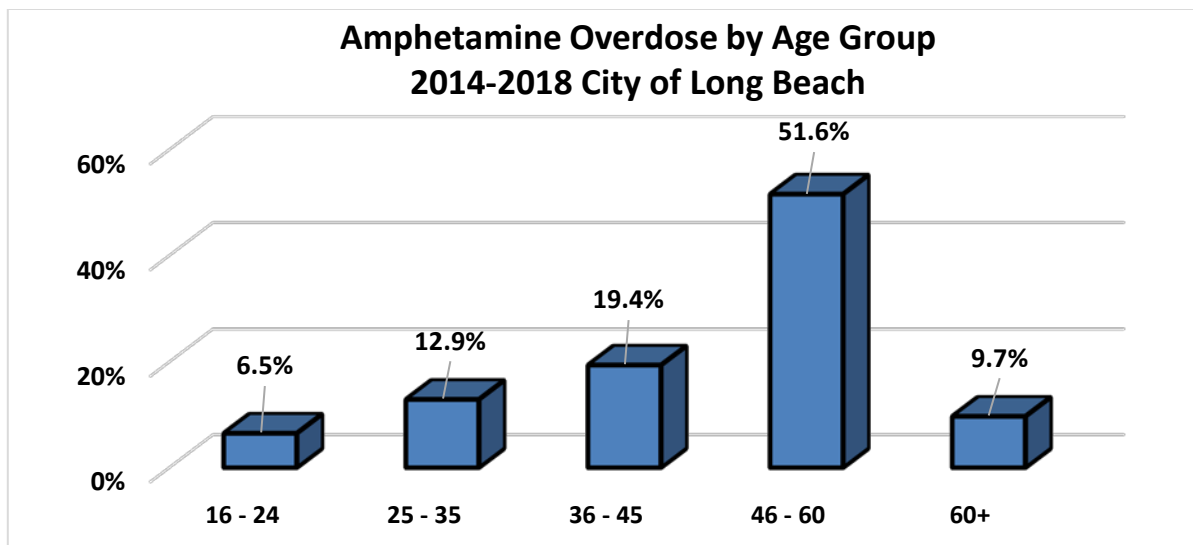


Average Overdose by Race, Amphetamines Only				
Race	White	Black	Asian	Hispanic
Population	213,066	62,603	59,496	188,412
Percent Pop.	46.1%	13.5%	12.9%	40.8%
Actual Deaths	40	9	5	7
Average Annual Amphetamine Overdose (Per 100,000 Population)	3.8	2.9	1.7	.74



Overdoses are highest in the 46-60 age group for both opioids and amphetamines.





### Grant Opportunities Available for Opioid Education and Abuse Prevention

The Health Department conducted a broad search of public and private funding opportunities that address opioid prevention and education. The analysis reveals limited eligibility of funds across all sectors for city governments.

Federal agencies including the Substance Abuse and Mental Health Services Administration (SAMHSA) and the Center for Disease Control and Prevention (CDC) pass funds through to the fifty states and five territories for grants administration. In 2018, only 23 percent of federal funds from SAMHSA and CDC were designated for opioid prevention and education.<sup>2</sup> The State of California focuses its resources on rural counties with high rates of opioid overdose deaths.<sup>3</sup> In 2017, Modoc, Humboldt, and Mendocino counties had 23.6, 21.0, and 19.3 opioid overdose deaths per 100,000, respectively. These rates are significantly higher compared to LA County's opioid overdose death rate (4.2 per 100,000).<sup>4</sup> As a result, no current grant opportunities exist at the local level. Though LA County Department of Public Health Substance Abuse Prevention and Control (SAPC) recently released a Master Agreement for as-needed substance use prevention services, city agencies are not eligible to apply.

Several funding opportunities are currently available directly through federal agencies to support families and opioid recovery. Unfortunately, city agencies are not eligible to apply. The Health Department meets eligibility requirements for a funding opportunity through the U.S. Department of Health and Human Services to prevent opioid abuse among older adults<sup>5</sup>; however, it is extremely competitive with only three expected awards across the nation.

<sup>2</sup> Tracking Federal Funding to Combat the Opioid Crisis. Bipartisan Policy Center, <https://bipartisanpolicy.org/wp-content/uploads/2019/03/Tracking-Federal-Funding-to-Combat-the-Opioid-Crisis.pdf>. March 2019

<sup>3</sup> Approach to the Opioid Crisis. Department of Health Care Services, April 2019.

<sup>4</sup> Los Angeles County Opioid Death Statistics. <https://www.livestories.com/statistics/california/los-angeles-county-opioids-deaths-mortality>

<sup>5</sup> Improving Management of Opioids and Opioid Use Disorder in Older Adults. February 20, 2020 deadline.

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The philanthropic agencies that prioritize opioid prevention and intervention focus on U.S. regions with the highest rates of opioid abuse and overdose. Many foundations such as the Aetna Foundation and Merck Foundation restrict their giving to Pennsylvania, North Carolina, and West Virginia. The City of Long Beach would not be eligible for these funding opportunities.

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