Florida Overdose Data to Action: Improving Surveillance to Drive Local Prevention Strategies
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Overdose Data to Action (OD2A)

- Centers for Disease Control and Prevention (CDC)
  - September 1, 2019 through August 31, 2022

- Opportunity for state and local public health partners to improve mobilization of surveillance and prevention efforts in addressing opioid and all-drug overdose crisis
OD2A Funded Jurisdictions

- 47 States
- 15 Cities & Counties
- 3 Districts & Territories

Source: CDC, National Center for Injury Prevention & Control
OD2A Goals

LONG-TERM GOALS

- Decreased rate of opioid misuse and opioid use disorder
- Increased provision of evidence-based treatment for opioid use disorder
- Decreased rate of emergency department (ED) visits due to misuse or opioid use disorder
- Decreased drug overdose death rate, including prescription and illicit opioid overdose death rates
Disseminate timely and actionable surveillance data to:
- Enhance the implementation of prevention activities
- Stakeholders working to reduce drug overdoses
- CDC to rapidly inform the public and key regional and national stakeholders

Strategies
1. Morbidity Surveillance
2. Mortality Surveillance
3. Innovative Surveillance

Capacity Building
Senior Opioid Epidemiologist
Five Epidemiology Fellows assigned to local health departments
Preventing Opioid Misuse and Overdose in the States and Territories: Public Health Framework

Developed by Association of State and Territorial Health Officials (ASTHO) and National Association of State Alcohol and Drug Abuse Directors (NASADAD)

- Improve classification of opioid overdose deaths
- Monitor progress in substance misuse prevention efforts
- Establish data sharing agreements across state agencies
- Increase resources for state health surveillance needs
- Optimize use of Prescription Drug Monitoring Program (PDMP)
- Expand the use of innovative, real-time surveillance systems
- Create a data dashboard that provides timely and accurate substance misuse and overdose information statewide
Planning a Robust Surveillance System

Emergency Medical Services

Emergency Department

Syndromic Surveillance

Prescribers / Dispensers

Electronic Health Records

Prescription Drug Monitoring Program

Opioid/NAS Surveillance

Emergency Department (Final)

Hospital Discharge (Final)

Hospital Discharge (Provisional)

Death Certificate

Birth Certificate

Medical Examiner Reports

Vital Statistics

Poison Control Center
State Health Improvement Plan (SHIP) Goals:
1. Decrease the number of newborns experiencing NAS
2. Decrease opioid overdose deaths

Florida Health CHARTS Opioid Profile – www.flhealthcharts.com
• State and county level dashboards
• Indicators available quarterly
• Years 2015-2020
Surveillance Spotlight: ESSENCE

• Electronic Surveillance System for the Early Notification of Community-based Epidemics (ESSENCE)
  • Florida’s syndromic surveillance system

• Collects emergency department chief complaint data from participating hospitals
  • Reported at least once daily
  • Other data feeds: urgent care centers, Florida Poison Information Center Network, reportable disease data, and mortality data

• Provides epidemiologists with the data sources and analytic tools needed to identify outbreaks or unusual trends more rapidly, leading to a more timely public health response
Data in Action: ESSENCE

- Standardized queries:
  - All-drug
  - Opioid
  - Heroin
  - Stimulant
- Reported to CDC every two weeks
- Available to staff at state and local health department
  - Email alerts
Surveillance Spotlight: Neonatal Abstinence Syndrome (NAS)

NAS – A Reportable Condition
  • Added to the List of Reportable Diseases/Conditions on June 4, 2014
  • Florida was the third state to make NAS a reportable condition

Passive Surveillance and Reporting

Birth Certificate Records \(\rightarrow\) Data Linkage \(\rightarrow\) Hospital Discharge Records

Reported NAS Cases
  • Florida Resident
  • ICD-9-CM 779.5 or ICD-10-CM P96.1
  • Infant Age <29 days
Data in Action: NAS

NAS Counts
(State Count = 7,329)
- 5 - 68
- 69 - 242
- 243 - 478
- 479 - 698

NAS Rate (per 10,000 live births)
(State Rate = 65.8)
- 3.6 - 43.1
- 43.2 - 83.4
- 83.5 - 145.8
- 145.9 - 288.7
- *Less than 5 cases

Florida NAS Trends, Counts and Rates per 10,000 Live Births

Source: Florida Department of Health, Birth Defects Registry

*Counts and rates suppressed for counties with fewer than 5 cases to prevent possible identification of cases
Lessons Learned & Opportunities

Limitations
• Reporting timelines
• Administrative data
• Resources
  • Staffing
  • Technical capacity
• Linkage project challenges

Opportunities
• Standardized tracking national, state, local levels
• Integrate into state and local infrastructure
• Communication templates to share data with stakeholders