Purpose: The NH Drug Monitoring Initiative (DMI) is a holistic strategy to provide awareness and combat drug distribution and misuse. In line with this approach the DMI will obtain data from various sources (to include, but not limited to, Public Health, Law Enforcement, and EMS) and provide monthly products for stakeholders as well as situational awareness releases as needed.

Drug Environment Report—UNCLASSIFIED

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<th>Page #</th>
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Substance Use Disorder Treatment/Recovery Directory | 14

Previous versions of the Drug Environment Report can be found at: https://www.dhhs.nh.gov/dcbcs/bdas/data.htm

The monthly online DMI viewer can be found at: https://nhvieww.nh.gov/IAC/DMI/


Year/month overview charts are based on annual estimates from the above website. County charts are based on a 2018 estimated population of each county.

If your agency is looking for further breakdowns than what is in this document please contact the NHIAC.
Overview: Trends for Narcan, ED Visits, Treatment Admissions, and Overdose Deaths:

EMS Narcan Administration, Opioid Related ED Visits, and Treatment Admissions per 100,000 Population
May 2019-April 2020

Source: NH Division of Public Health Services, NH Bureau of Drug & Alcohol Services, and NH Bureau of EMS

Drug Overdose Deaths By Year
Data Source: NH Medical Examiner's Office

2019 numbers are finalized, and are based on analysis as of 19 May 2020
Drugs Overdose Deaths:
Data Source: NH Medical Examiner’s Office

Trends:
- As of 19 May there were 411 total, confirmed drug overdose deaths for 2019. The 2019 numbers are finalized.
- In 2019, Strafford County had the highest suspected drug use resulting in overdose deaths per capita, at 4.38 deaths per 10,000 population.
- The age group with the largest number of drug overdose deaths is 30-39 years, which represents 32% of all overdose deaths for 2019.
- As of 19 May there are 79 confirmed drug overdose deaths and 78 cases pending toxicology for 2020.

*** IMPORTANT DATA NOTES***
- Analysis is based on county where the drug(s) is suspected to have been used.
- 2019 numbers are finalized and are based on analysis as of 19 May 2020.

Overdose Deaths by Age 2019*
Data Source: NH Medical Examiner’s Office

Overdose Deaths by Year per 100,000 Population
Data Source: NH Medical Examiner’s Office

Overdose Deaths by County per 10,000 Population
Data Source: NH Medical Examiner’s Office
Cocaine and/or Fentanyl Combination Related Drug Deaths 2019

<table>
<thead>
<tr>
<th>Drug Combination</th>
<th># of Deaths</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fentanyl</td>
<td>118</td>
</tr>
<tr>
<td>Cocaine, Fentanyl</td>
<td>42</td>
</tr>
<tr>
<td>Fentanyl, Methamphetamine</td>
<td>33</td>
</tr>
<tr>
<td>Ethanol, Fentanyl</td>
<td>20</td>
</tr>
<tr>
<td>Alprazolam, Fentanyl, Cocaine</td>
<td>11</td>
</tr>
<tr>
<td>Clonazepam, Ethanol, Fentanyl</td>
<td>11</td>
</tr>
<tr>
<td>Methamphetamine, Fentanyl</td>
<td>8</td>
</tr>
<tr>
<td>Oxycodone, Methadone</td>
<td>7</td>
</tr>
<tr>
<td>Cocaine, Ethanol, Fentanyl</td>
<td>6</td>
</tr>
<tr>
<td>4-ANPP, Ethanol, Fentanyl</td>
<td>4</td>
</tr>
</tbody>
</table>

*2019 numbers are finalized, and are based on analysis as of 19 MAY 2020
Source: NH Medical Examiner’s Office

**Notes:**
- Cells filled with gray indicate combinations noted twice.
- Related Drug Deaths that were noted once or twice.

**Data Source:** NH Medical Examiner’s Office

---

Drug Overdose Deaths (Continued):

Data Source: NH Medical Examiner’s Office
Overdose Deaths by Town* - 2019 *
(Data Source: NH Medical Examiner’s Office)
*Location where the drug(s) is suspected to have been used.
+2019 data was reported on May 19, 2020
2019 data is finalized.

0 CASES PENDING
14 Cases have an unknown location

Number of Overdose Deaths by Town
*Location where the drug(s) is suspected to have been used.

- 1 - 4 (76 towns)
- 5 - 10 (11 towns)
- 11 - 25 (3 towns)
- 26 - 50 (2 towns)
- 51 - 100 (1 town)

NH Information & Analysis Center
Prepared by:
EMS Narcan Administration:
Data Source: NH Bureau of Emergency Medical Services (EMS)

Trends:
- EMS Narcan administration incidents decreased by 10% from March to April.
- In April, Strafford County had the most EMS Narcan administration incidents per capita with 1.88 incidents per 10,000 population. Belknap County had the second highest with 1.62 incidents per 10,000 population.
- The age group with the largest number of EMS Narcan administration incidents was 30-39, representing 28% of all EMS Narcan administrations in April.

*** IMPORTANT DATA NOTES***
- **UPDATE: TEMSIS, New Hampshire’s Trauma and EMS Information System, has been updated and now reflects current data.**
- Narcan data in this report involves the number of incidents where Narcan was administered, NOT the number of doses of Narcan during a certain time period. Multiple doses may be administered during an incident.
- Narcan may be given for a decrease in alertness or respirations due to an overdose or unknown cause. Therefore, it cannot be concluded that all reported Narcan incidents actually involved drugs.
**EMS Narcan Administration (Continued):**

Data Source: NH Bureau of Emergency Medical Services (EMS)

---

**EMS Narcan Administration - Lives Saved %**

**May 2019 - April 2020**

- Lives Saved
- No Improvement
- Some Improvement
- Negative Improvement

RODS, or Revised Over Dose Score, is based on the combined delta of documented respiratory rate (RR) and Glasgow Coma Score (GCS - measure of alertness) before and after Narcan administration. For example, RR improved from 6/min to 12/min (delta of 6) and GCS improved from 10-13 (delta of 3), the RODS score would be 9. The delta of the vital signs is calculated per incident, so the patient may have received more than one dose of Narcan to achieve the effect in the RODS.

---

**EMS Narcan Administration - Lives Saved**

<table>
<thead>
<tr>
<th>Source: NH Bureau of EMS</th>
<th>May</th>
<th>June</th>
<th>July</th>
<th>Aug</th>
<th>Sept</th>
<th>Oct</th>
<th>Nov</th>
<th>Dec</th>
<th>Jan</th>
<th>Feb</th>
<th>Mar</th>
<th>Apr</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>RODS Outcome</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lives Saved</td>
<td>113</td>
<td>90</td>
<td>75</td>
<td>88</td>
<td>54</td>
<td>81</td>
<td>67</td>
<td>73</td>
<td>68</td>
<td>54</td>
<td>62</td>
<td>60</td>
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<tr>
<td>RODS Score of 8+</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Some Improvement</td>
<td>22</td>
<td>26</td>
<td>15</td>
<td>22</td>
<td>14</td>
<td>9</td>
<td>13</td>
<td>20</td>
<td>17</td>
<td>13</td>
<td>14</td>
<td>8</td>
</tr>
<tr>
<td>RODS Score of 1-7</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>No Improvement</td>
<td>66</td>
<td>50</td>
<td>52</td>
<td>39</td>
<td>46</td>
<td>48</td>
<td>43</td>
<td>52</td>
<td>37</td>
<td>20</td>
<td>38</td>
<td>40</td>
</tr>
<tr>
<td>Negative Improvement</td>
<td>15</td>
<td>10</td>
<td>20</td>
<td>9</td>
<td>18</td>
<td>15</td>
<td>16</td>
<td>19</td>
<td>11</td>
<td>8</td>
<td>11</td>
<td>5</td>
</tr>
<tr>
<td>Negative RODS Score</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>216</td>
<td>176</td>
<td>162</td>
<td>158</td>
<td>132</td>
<td>153</td>
<td>139</td>
<td>164</td>
<td>133</td>
<td>95</td>
<td>125</td>
<td>113</td>
</tr>
</tbody>
</table>

RODS, or Revised Over Dose Score, is based on the combined delta of documented respiratory rate (RR) and Glasgow Coma Score (GCS - measure of alertness) before and after Narcan administration. For example, RR improved from 6/min to 12/min (delta of 6) and GCS improved from 10-13 (delta of 3), the RODS score would be 9. The delta of the vital signs is calculated per incident, so the patient may have received more than one dose of Narcan to achieve the effect in the RODS.

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**EMS Narcan Administration by County per 10,000 Population**

<table>
<thead>
<tr>
<th>County</th>
<th>Feb</th>
<th>March</th>
<th>April</th>
</tr>
</thead>
<tbody>
<tr>
<td>Belknap</td>
<td>0.97</td>
<td>1.46</td>
<td>1.62</td>
</tr>
<tr>
<td>Carroll</td>
<td>0.41</td>
<td>0.21</td>
<td></td>
</tr>
<tr>
<td>Cheshire</td>
<td>1.03</td>
<td>1.03</td>
<td></td>
</tr>
<tr>
<td>Coos</td>
<td>0.59</td>
<td>0.55</td>
<td></td>
</tr>
<tr>
<td>Grafton</td>
<td>0.44</td>
<td>0.78</td>
<td>0.99</td>
</tr>
<tr>
<td>Hillsborough</td>
<td>0.73</td>
<td>0.93</td>
<td></td>
</tr>
<tr>
<td>Merrimack</td>
<td>0.44</td>
<td>0.81</td>
<td>1.13</td>
</tr>
<tr>
<td>Rockingham</td>
<td>0.45</td>
<td>0.65</td>
<td></td>
</tr>
<tr>
<td>Strafford</td>
<td>1.72</td>
<td>1.88</td>
<td></td>
</tr>
<tr>
<td>Sullivan</td>
<td>0.45</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Source: NH Bureau of EMS

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UNCLASSIFIED

UNCLASSIFIED—AUTHORIZED FOR PUBLIC RELEASE
EMS/Narcan Administration by Town
5/1/2019 - 4/30/2020
Data Source: New Hampshire Bureau of EMS

INDEX
Belknap
1 - Casco Harbor
Carroll
2 - Wolfeboro
3 - Moultonborough
Coos
4 - Holderness Purchase
5 - Benton Grant
6 - Cotton Grant
7 - Surgoins Purchase
8 - Pemiscot Grant
9 - Coe Purchase
10 - Chausseur Purchase
11 - Lake & Bartholomew Grant
12 - Thompson & Ewing Purchase
13 - Greene Grant
14 - Minutes Location
15 - Ensign Grant
16 - Woonsocket Location
17 - Jackson & Sterling Academy Grant

*Incidents Where Narcan Was Administered*

- 1 - 10
- 11 - 25
- 26 - 50
- 51 - 100
- 101 - 200
- 201 - 500

Scale: 1:1,150,000

Prepared by:
NH Information & Analysis Center

UNCLASSIFIED - AUTHORIZED FOR PUBLIC RELEASE

8
Opioid Related Emergency Department Visits:
Data Source: NH Division of Public Health Services

**Important Note** the data being reported for 2020 has different collection criteria than previous months. Due to the new collection criteria, new data is no longer comparable to previous data.

**Trends:**
- Opioid related ED visits decreased by 40% from March to April.
- In April, residents from Strafford County had the most opioid related ED visits per capita with 1.41 visits per 10,000 population.
- In April, Sullivan County residents had the second highest number of opioid related ED visits per capita with 1.36 visits per 10,000 population.
- In April, the age group with the largest number of opioid related ED visits was 20-29 year olds, with 28%.

*** IMPORTANT DATA NOTES***
- County represents where the opioid use patient resides.
- These data represent any encounter with the term “heroin, opioid, opiate, or fentanyl” listed as chief complaint text. These data also represent any encounter with an ICD-10 code that was designated for heroin and opioids.
- Currently all but one (1) of the hospitals are sending ICD-10 data.
- These data include other opioid-related encounters such as poisonings, withdrawals, and detox.
- These data are now collected using criteria the CDC established for their Overdose Data to Action (OD2A) grant “making this report more transparent.”

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*Source: NH Division of Public Health Services*
Opioid Related Emergency Department Visits (Continued):

Data Source: NH Division of Public Health Services

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Emergency Department Opioid Use Visits per 100,000 Population

January 2020 - April 2020

Source: NH Div. of Public Health Services

---

Emergency Department Opioid Use Visits by County per 10,000 Population

Source: NH Div. of Public Health Services
Trends:

- Opioid/opiate, Methamphetamine, & Cocaine/Crack treatment admissions decreased 2.5% from March to April.
- In April, residents from Hillsborough County were admitted at the highest per capita rate for opioid/opiate treatment, with 1.55 admissions per 10,000 population.
- More males than females were admitted to treatment programs in April for Opioid/Opiate, Methamphetamine, & Cocaine/Crack use.
- Methamphetamine treatment admissions decreased 7% from March to April.
- Cocaine/Crack treatment admissions decreased 35% from March to April.
- Heroin/Fentanyl treatment admissions increased by 2% from March to April.

*** IMPORTANT DATA NOTES***

- County represents where the patient resides.
- These data represent treatment admissions to state funded facilities.
- These data have decreased due to numerous factors. The Affordable Care Act has been fully implemented, resulting in increased access to affordable health insurance and coverage for substance use disorder treatment in NH. New Hampshire expanded its Medicaid program, which also provided increased opportunities for substance use disorder treatment in the state. Substance use disorder treatment in the state has increased sharply in response to these policies which has shifted clients served by State of New Hampshire contracted treatment providers to other payment models and facilities.
Treatment Admissions (Continued):
Data Source: NH Bureau of Drug & Alcohol Services

Heroin/Fentanyl, Rx Opiate, Methamphetamine, & Cocaine/Crack Treatment Admissions by Month per 100,000 Population
May 2019 - April 2020

Opioid/Opiate Treatment Admissions by County
per 10,000 Population

Source: NH Bureau of Drug & Alcohol Services
**Situational Awareness:**

**Seacoast firefighters now have Narcan “leave – behind kits”**

PORTSMOUTH — Firefighters in Portsmouth, Dover and Hampton now have kits containing the overdose-reversal drug Narcan, which they will leave where people have overdosed, along with information about how and where to get help.

The initiative is grant-funded, called New Hampshire Project First Responders Initiating Recovery, Support and Treatment (FIRST), and is designed to support their efforts to reduce overdose fatalities.

Portsmouth Fire Chief Todd Germain said his program includes training all fire personnel on opioid use disorder, building partnerships with treatment/recovery programs and having 100 kits for distribution to at-risk individuals and their loved ones.

Germain said the leave-behind kits contain a single dose of Narcan and personal protective equipment to be used by family members or friends when CPR is needed for someone overdosing. Also in the kits, he said, is a list of local recovery resources. Germain said a fire truck and ambulance responds to all overdose calls and the kits will be kept on all Fire Department vehicles. He said ambulances will transport patients to the hospital and the fire truck will stay behind so firefighters/EMTs can provide the kits and talk to family and friends on scene.

Source: [www.seacostonline.com](http://www.seacostonline.com) 04/30/2020

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**New Hampshire Safe Stations**

<table>
<thead>
<tr>
<th>Manchester</th>
<th>Nashua</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>As of 04/20/2020</strong></td>
<td><strong>As of 05/15/2020</strong></td>
</tr>
<tr>
<td>Number of requests at MFD/NFR for Safe Station:</td>
<td>Number of requests at MFD/NFR for Safe Station:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>26</td>
<td>7,049</td>
</tr>
<tr>
<td>Number of participants transported to hospitals:</td>
<td>Number of participants transported to hospitals:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>5</td>
<td>1,541</td>
</tr>
<tr>
<td>Number of participants taken to Substance Misuse Treatment Facilities:</td>
<td>Number of participants taken to Substance Misuse Treatment Facilities:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>8</td>
<td>5,419</td>
</tr>
<tr>
<td>Average length of time company “Not Available”:</td>
<td>Average length of time company “Not Available”:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>11.0 Min</td>
<td>13.8 Min</td>
</tr>
<tr>
<td>Number of UNIQUE participants:</td>
<td>Number of UNIQUE participants:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>0</td>
<td>3,901</td>
</tr>
<tr>
<td>Number of REPEAT participants:</td>
<td>Number of REPEAT participants:</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td>8</td>
<td>3,393</td>
</tr>
<tr>
<td>Number of unique participants seen in both City’s Safe Station Program</td>
<td>Number of unique participants seen in both City’s Safe Station Program</td>
</tr>
<tr>
<td>Q2 2020</td>
<td>Total</td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

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**NH Drug Deaths Have Declined, But COVID-19 Brings New Uncertainty**

In 2019, the state saw drug deaths drop for the second year in a row, according to data from the N.H. Office of the Chief Medical Examiner. But with no end to the COVID-19 outbreak in sight, how the virus will affect the opioid crisis remains to be seen.

As of April 10, the state had confirmed 406 fatal overdoses for 2019, with the cause of five additional deaths still pending toxicology testing. A death toll of 411 would represent a 12.7 percent decline from the 471 the state reported the year before.

That year, New Hampshire recorded its first dip in fatal overdoses — down about 4 percent from 2017 — since 2012. The recent reductions could be tied to a handful of factors — increased education on substance-use disorder, wider access to overdose-reversing drugs like Narcan and state-led initiatives to combat the crisis, such as such as the hub-and-spoke referral model launched in January of 2019.

Source: [www.sentinelsource.com](http://www.sentinelsource.com) 04/29/2020
Substance Use Disorder Treatment/Recovery Directory:
State funded treatment facilities in NH (NOT a complete list) - Data Source: NH Department of Health and Human Services

**BETHELHAM**
North Country Health Consortium (NCHC)/ Friendship House
262 Cottage Street. Suite 230
Bethlehem, NH
Phone: 603-259-3700

**DOVER**
Southeastern NH Alcohol and Drug Abuse Services
272 County Farm Road
Dover, NH
Crisis Center: 603-516-8181
Main: 603-516-8160

**DUBLIN**
Phoenix House Comprehensive Addiction Treatment Services
3 Pierce Rd. Dublin, NH
Phone: 603-563-8501, Option 1

**FRANKLIN**
Farnum Center North
*Ray House (Women)*
14 Holy Cross Road. Franklin, NH
Phone: 603-263-6287

**KEENE**
Phoenix House Comprehensive Addiction Treatment Services
106 Roxbury Street. Keene, NH
Phone: 603-358-4041, Option 1

**LEBANON**
Headrest
14 Church Street
Lebanon, NH
Phone: 603-448-4400

Alice Peck Day Hospital
10 Alice Peck Day Drive
Lebanon, NH
Phone: 603-448-4400

West Central Services, Inc.
9 Hanover Street, Suite 2
Lebanon, NH
Phone: 603-448-0126

**MANCHESTER**
Dismas Home of NH, Inc. (*Women*)
102 Fourth Street
Manchester, NH
Phone: 603-782-3004

Families in Transition - New Horizons
293 Wilson Street
Manchester, NH
Phone: 603-641-9441 ext. 401

Farnum Center
140 Queen City Avenue
Manchester, NH
Phone: 603-622-3020

**NASHUA**
Greater Nashua Council on Alcoholism
12 & 1/2 Amherst Street
Nashua, NH
Phone: 603-943-7971 Ext. 3

Greater Nashua Council on Alcoholism: Keystone Hall
615 Amherst Street
Nashua, NH
Phone: 603-881-4848

Greater Nashua Mental Health Center
110 West Pearl Street
Nashua, NH
Phone: 603-889-6147

**ROCHESTER**
Hope on Haven Hill
PO Box 1271
Rochester, NH 03867
Phone: 603-247-2043

A full list of Substance Use Disorder Treatment Facilities can be found [here](#).
A treatment locator can be found [here](#).