



DATA SHORTS

Potential Outcomes Measurement System (OMS) Indicators for Those At Risk of Overdose-Related Deaths

Over the past several years, the number of deaths both in Maryland and the United States related to drug overdoses, especially heroin and other opioids, has increased rapidly. For each Maryland jurisdiction, the map shows the average annual overdose-related death rate (per 100,000 residents) for the period from January 2007 through April 2015. There were a total of 6,603 such deaths during this time. Statewide, the rate was 16.5. Seven jurisdictions had rates higher than the State rate. They include a mix of rural (Allegany, Caroline, Cecil and Washington) and suburban (Baltimore and Harford) counties as well as Baltimore City, which has the highest rate in Maryland.

There are many efforts underway to reverse this trend. Several efforts analyze available data about those individuals whose deaths involved drug overdoses, including matching the records of this group of decedents to other Public Behavioral Health System databases. The Outcomes Measurement System (OMS) is one of those data sources. Nearly 18% of these decedents had at least one OMS interview. This Data Short examines some OMS factors that appear to be associated with risk of an overdose-related death for those individuals receiving mental health services. The analysis compares some of the items from the most recent OMS interview of decedents with the most recent interviews of all OMS adult participants seeking mental health services.

The first graph compares the results on the BASIS 24® scales for the most recent OMS interview for decedents and all other adults. (Scores on the scales range from 0 to 4, with a higher score indicating more frequent and/or more severe symptoms). Average scores for decedents were above those for all others on all scales, with the greatest difference on the Substance Abuse scale.

The second graph compares several OMS items for decedents and adults seeking mental health treatment. Decedents were more likely to report having been homeless, arrested, and/or smoking in the past six months compared to the overall mental health group.

This data suggests that there are constellations of factors that can alert clinicians to potential problems. If an individual presenting for mental health treatment also has an elevated Substance Abuse scale score, the presence of additional factors—including some combination of elevated symptom scores, a history of homelessness, of arrests, and of smoking—should alert the clinician that the individual may be at increased risk for a drug overdose. In such cases, substance use may merit special clinical attention and perhaps necessitate a referral for specialty substance use services.

Average Annual Overdose-Related Death Rates January 2007 through April 2015

