



Substance Abuse Task Force Regular Meeting

City Hall, 697 Vista Ave, Page AZ
November 19, 2025 at 5:30 PM

NOTICE OF PUBLIC MEETING AND AGENDA

Pursuant to Arizona Revised Statutes § 38-431.02, notice is hereby given to the members of the City of Page Substance Abuse Task Force and the general public that the Page Substance Abuse Task Force will hold a meeting open to the public in Page City Hall located at 697 Vista Avenue, Page, Arizona. Members of the Substance Abuse Task Force will attend either in person or virtually.

1. Call to Order

2. Roll Call

Camilla Adams, Chair

Vacant

Michael Barnes

Madison Kavaia

City Council Liaison, David Auge

Ron Macdonald

Ricky Cottrell, Vice Chair

Bunny Cochran

3. Hear from the Citizens

The public is invited to speak on any item or area of concern. Items presented during the Citizens portion which are not on the agenda, cannot be acted upon by the Substance Abuse Task Force.

Individual members are prohibited by the Open Meeting Law from discussing or considering the item among themselves unless the item is officially on an agenda.

4. Reports/Presentations

A. Page Magistrate Court Update

B. Page Police Department Update

C. Canyonlands Healthcare Update

D. Catholic Charities Update

E. Encompass Health Update

F. Coconino County Health Update

5. Unfinished Business

A. Discussion and Possible Action Pertaining to Attending Other Events and Purchasing Some Impairment Goggles (Madison Kavaia)

6. New Business

A. Discussion and Possible Action Pertaining to the Evidence-Based Prevention & Treatment Model (Bunny Cochran)

7. Adjourn

FOR YOUR INFORMATION

Next Regular Meeting Wednesday, December 17, 2025, at 5:30 p.m.

Persons with disabilities should call the City of Page at 928-645-8861 for program and services information and accessibility.

If you would like to receive City Council and Board agenda notifications via email, please visit our public portal and sign-in or create an account to subscribe: <https://pageaz.portal.civicclerk.com/>.

DISCLAIMER: Agenda Items may be taken out of order. This agenda may be subject to change up to 24 hours prior to the meeting. Please see the local crier boards or our website at cityofpage.org for the current agenda.

CERTIFICATION OF POSTING OF NOTICE

The undersigned hereby certifies that a copy of the attached notice was duly posted at the following places: City Hall Bulletin Board located at 697 Vista Avenue, Page, Arizona; Justice Building Bulletin Board located at 547 Vista Avenue, Page, Arizona; U. S. Post Office Lobby located at 44 Sixth Avenue, Page, Arizona, on the ____ day of _____, 20__, at _____ a.m./p.m.

By:

_____ City of Page

COCONINO COUNTY
OVERDOSE
FATALITY
REVIEW

ANNUAL REPORT
2023





Introduction

OFR Board Members

Methodology

Coconino Overdose
Data

Fatality Review Data

Commonalities

Recommendations

Conclusions

Resources



“This publication was made possible by grant number H79TI087838 from SAMHSA. The views, opinions, and content of this publication are those of the author and do not necessarily reflect the views, opinions, or policies of SAMHSA or HHS.”

Introduction

The Coconino County Overdose Fatality Review (OFR) Team is a multidisciplinary group dedicated to preventing overdose deaths. The Team reviews the lives and circumstances of individuals who have died from an overdose, identifying patterns, trends, and contributing factors. Based on these findings, the Team develops recommendations and supports strategies to reduce future overdose deaths.

In 2023, Coconino County Health and Human Services (CCHHS) was notified of 32 overdose deaths by the Arizona Department of Health Services (ADHS) and the Coconino County Medical Examiner's Office. Most of these individuals were Coconino County residents who died either within the county or elsewhere in Arizona; a few cases were non-residents who died while in Coconino County. The OFR Team reviewed 16 of these cases during quarterly meetings held between August 2024 and February 2025.

This report contains the data, trends, and recommendations identified by the Coconino County OFR Team.

Background

The Coconino County Overdose Fatality Review (OFR) Team was established in 2019 with support from State Opioid Response (SOR) funding provided by the Arizona Department of Health Services (ADHS). Its formation was also made possible by the passage of A.R.S. §36-198, which authorizes the collection and sharing of confidential records for the purpose of reviewing the circumstances surrounding overdose deaths.

Since holding its first meeting in June 2019, the Coconino County OFR Team has reviewed a total of 75 overdose deaths.

OFR Team Members



Coconino County Health and Human Services

- CCHHS Opioid Overdose Prevention Program
 - CCHHS Medical Examiner's Office
 - CCHHS Opioid Crises Response Program
 - CCHHS Leadership
 - CCHHS Epidemiology
 - CCHHS Pathways Program
-



Judicial System

- Flagstaff Police Department
 - Northern Arizona University Police Department
 - Coconino County Sheriff's Office
 - Coconino County Detention Facility
 - Coconino County Attorney's Office
 - Coconino County Adult Probation
 - Coconino County Recovery Court
-



Healthcare & Behavioral Health

- Northern Arizona Healthcare
- Southwest Behavioral Health Services
- The Guidance Center
- Terros Health
- Guardian Medical Transport
- Arizona Department of Health Services
- Community Bridges

Methodology

Coconino County Health and Human Services (CCHHS) receives notifications of overdose deaths from the Arizona Department of Health Services (ADHS) and the Coconino County Medical Examiner's Office. Staff from the Coconino County Overdose Fatality Review (OFR) Program then request records from various sources, including healthcare providers, behavioral health agencies, and the judicial system. All records are requested, transmitted, stored, and shared among team members using a secure platform, in strict accordance with the team's confidentiality policies.

The OFR Team meets quarterly to review selected cases. These typically include:

- Coconino County residents who die from a drug overdose within the county or elsewhere in Arizona
- Non-residents who die from an overdose while in Coconino County
- Cases involving deaths from health or environmental causes (e.g., heart attack, heat-related illness) that occur in conjunction with substance use

The OFR Team does not review the following cases:

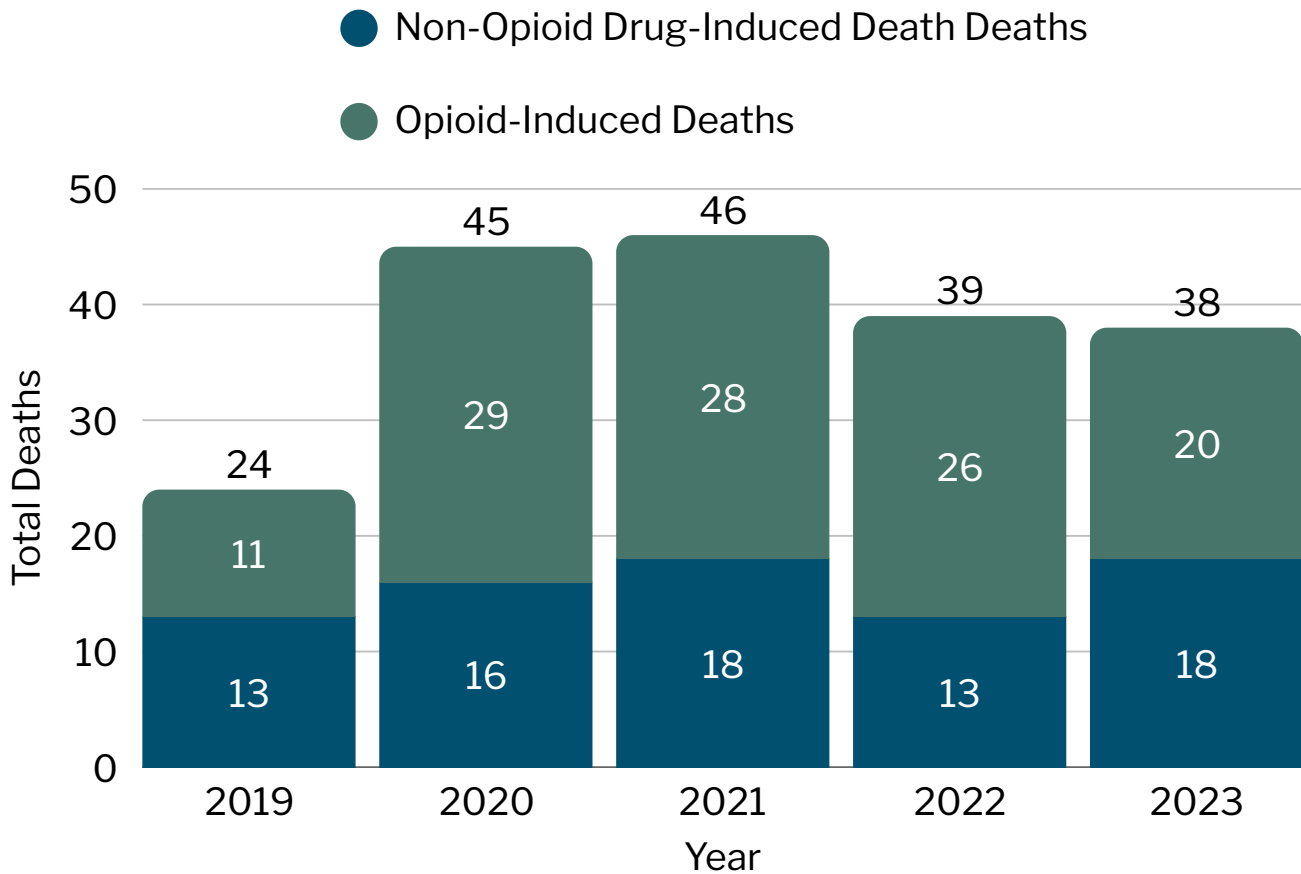
- Overdose deaths of individuals under the age of 18 (the Coconino County Child Fatality Review Team reviews these cases)
- Overdose deaths classified as intentional suicides (the Coconino County Suicide Mortality Review Team reviews these cases)
- Deaths caused by alcohol poisoning
- Deaths resulting from injuries related to alcohol or substance use

In 2023, 16 overdose cases, of the reported 32 overdose deaths, were reviewed. Cases were selected for review based on the ability to obtain complete records. Unfortunately, it is not possible to review all cases due to time constraints.

Coconino Overdose Data

The table below illustrates the significant impact of opioids—particularly fentanyl—on drug-related fatalities in Coconino County. Nearly 60% of all fatal overdoses in the county involved opioid use. Please note this table does not include fatalities in which alcohol use was the sole cause of death.

Drug and Opioid-Induced Deaths (2019-2023)



Data for this section was obtained through ADHS Vital Statistics. To protect confidentiality, the tables in this section do not contain numbers lower than six. Drug and alcohol-induced deaths are identified on the decedent's death certificate as the underlying cause of death. See Appendix A for a definition of ICD-10-Codes used to categorize deaths as drug or alcohol-induced.

Substances Involved in Drug-Induced Deaths

The table below presents the most commonly identified substances involved in drug-induced deaths among Coconino County residents. Of the 192 deaths reviewed, nearly half involved fentanyl. Many cases involved the use of more than one substance, a pattern known as polysubstance use. Deaths attributed solely to alcohol are not included in this data ; however, alcohol was identified as a contributing substance in 30% of the cases. Percentages will not add up to 100% due to multiple drugs contributing to a death.



Between 2019 and 2023, 47% (n = 91) of drug deaths involved multiple drugs, also known as polysubstance deaths.

<u>Substances</u>	<u>Percent of Drug-Induced Deaths</u>
Synthetic Opioids (IE: Fentanyl)	48%
Methamphetamine	39%
Alcohol	30%
Other Opioids	14%
Sedatives	11%
Other Substances	15%

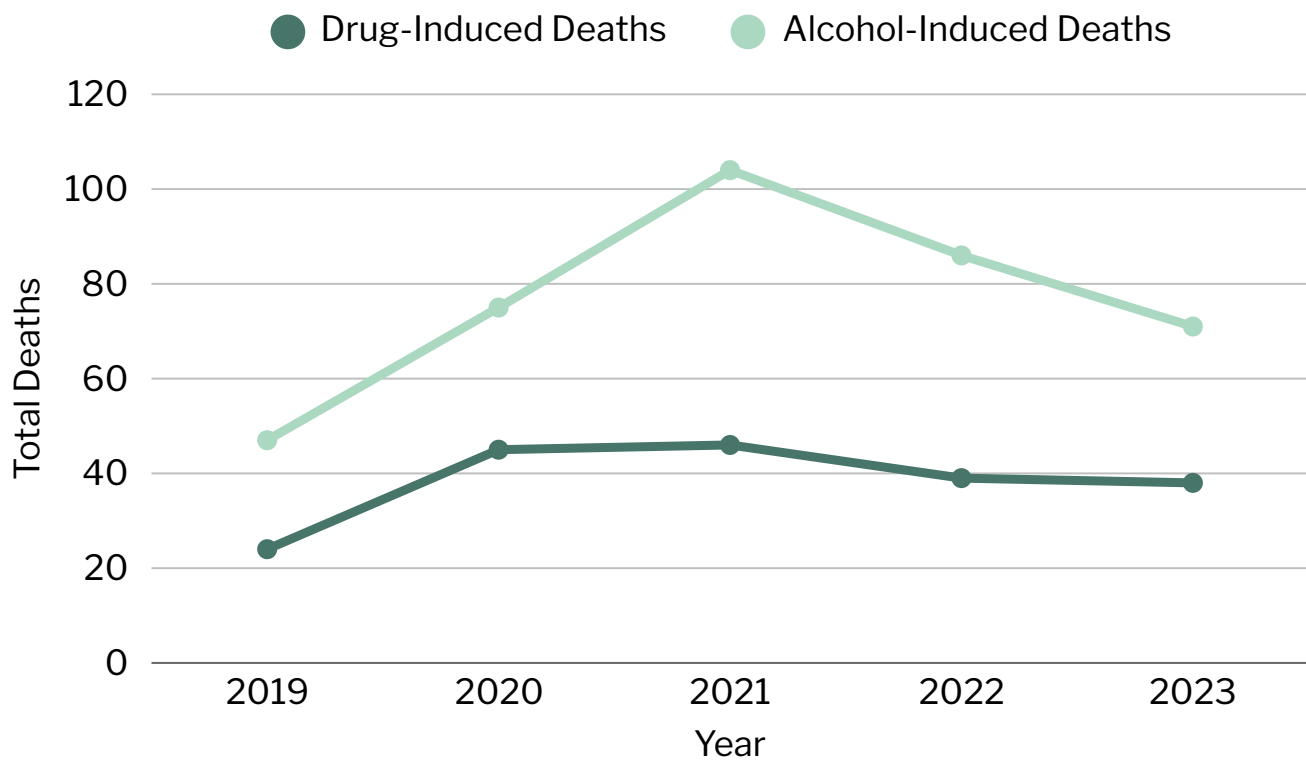


Coconino County Drug and Alcohol-Induced Death Data

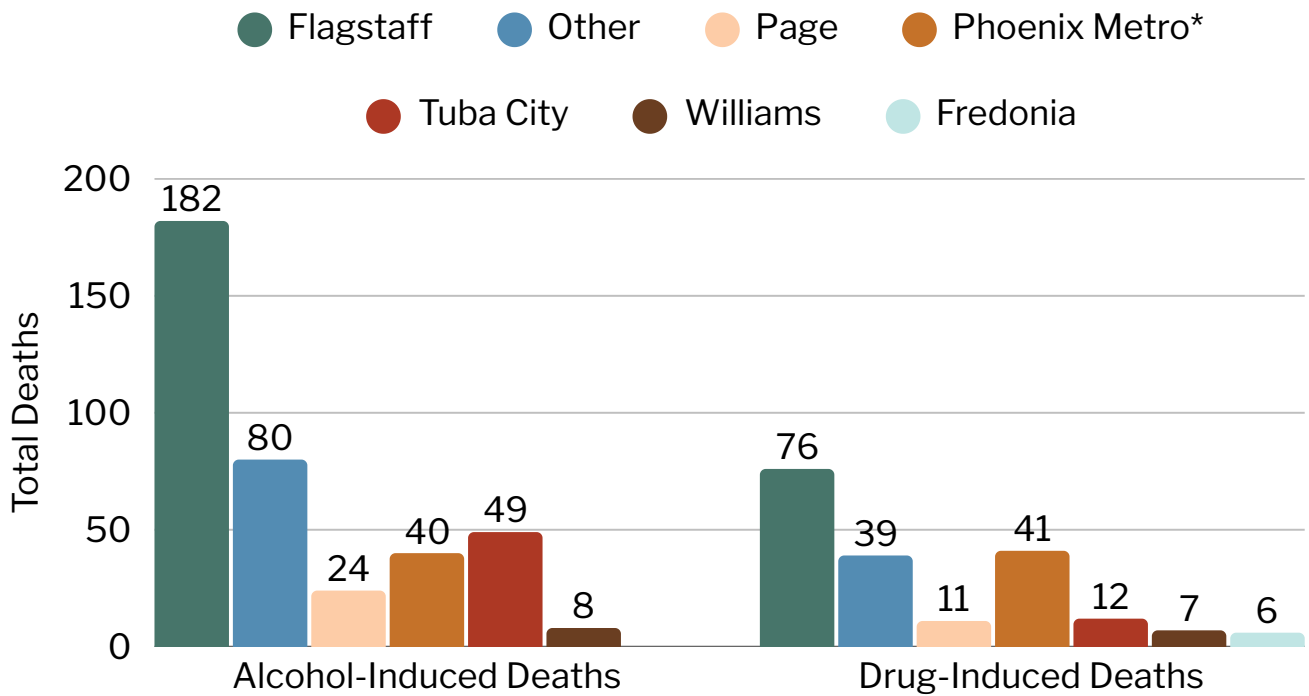
The following tables contain information about both drug-induced deaths and alcohol-induced deaths in Coconino County. Between 2019 and 2023, there were twice as many alcohol-induced deaths (n=383) as drug-induced deaths (n=192) among Coconino County residents.

Data for this section was obtained through ADHS Vital Statistics. To protect confidentiality, the tables in this section do not contain numbers lower than six. Drug and alcohol-induced deaths are identified on the decedent's death certificate as the underlying cause of death. See Appendix A for a definition of ICD-10-Codes used to categorize deaths as drug or alcohol-induced.

Drug and Alcohol-Induced Death (2019-2023)

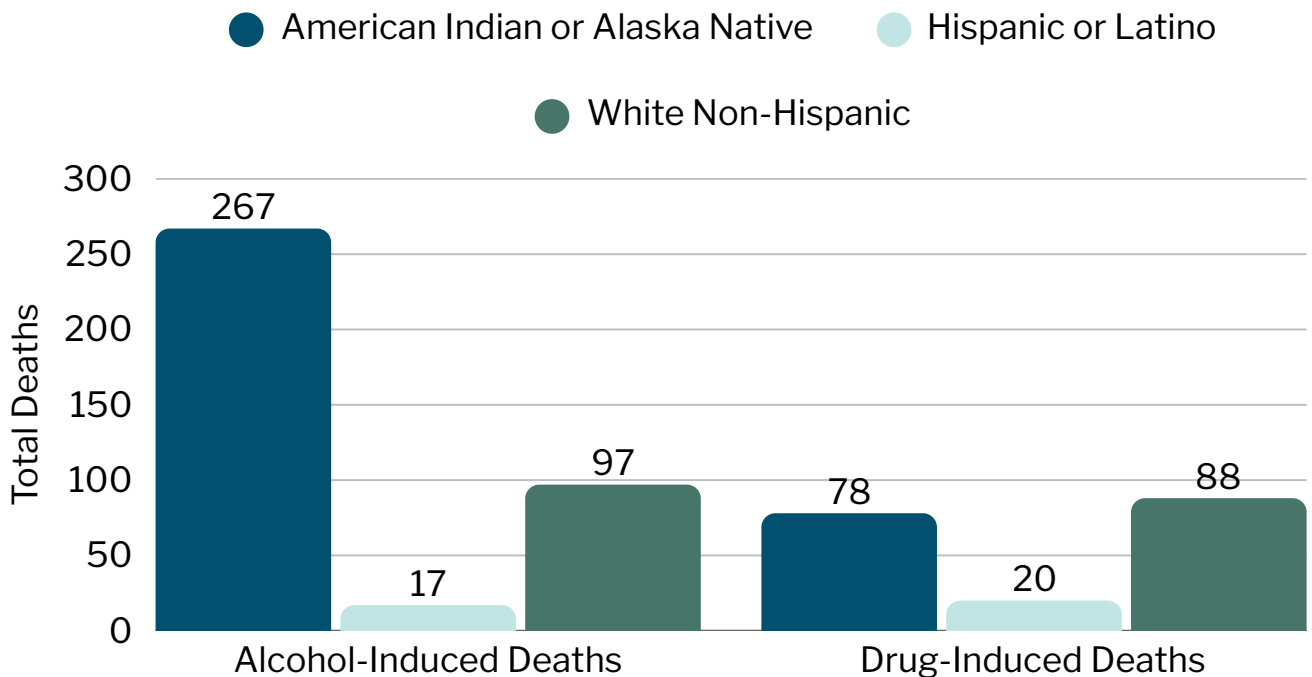


Drug and Alcohol-Induced Deaths by Location (2019-2023)

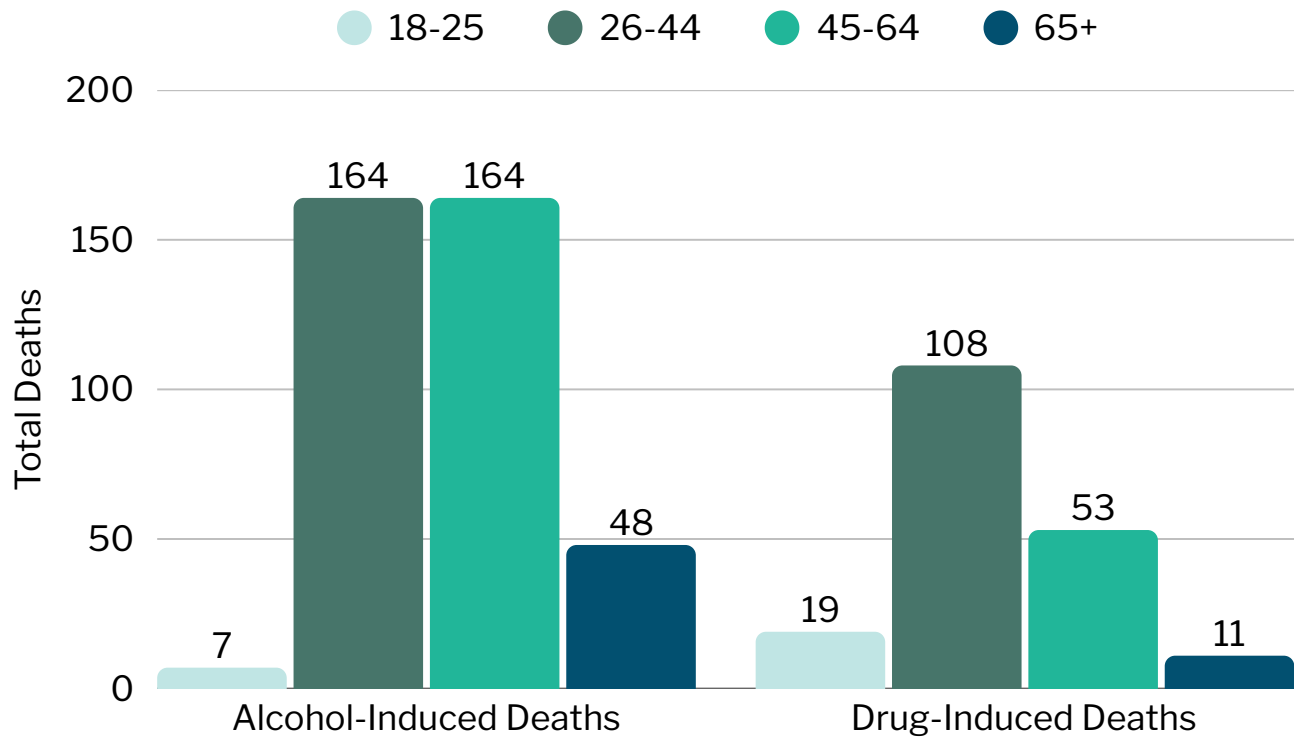


*Deaths of Coconino County residents who died of an overdose in the Phoenix Metropolitan area

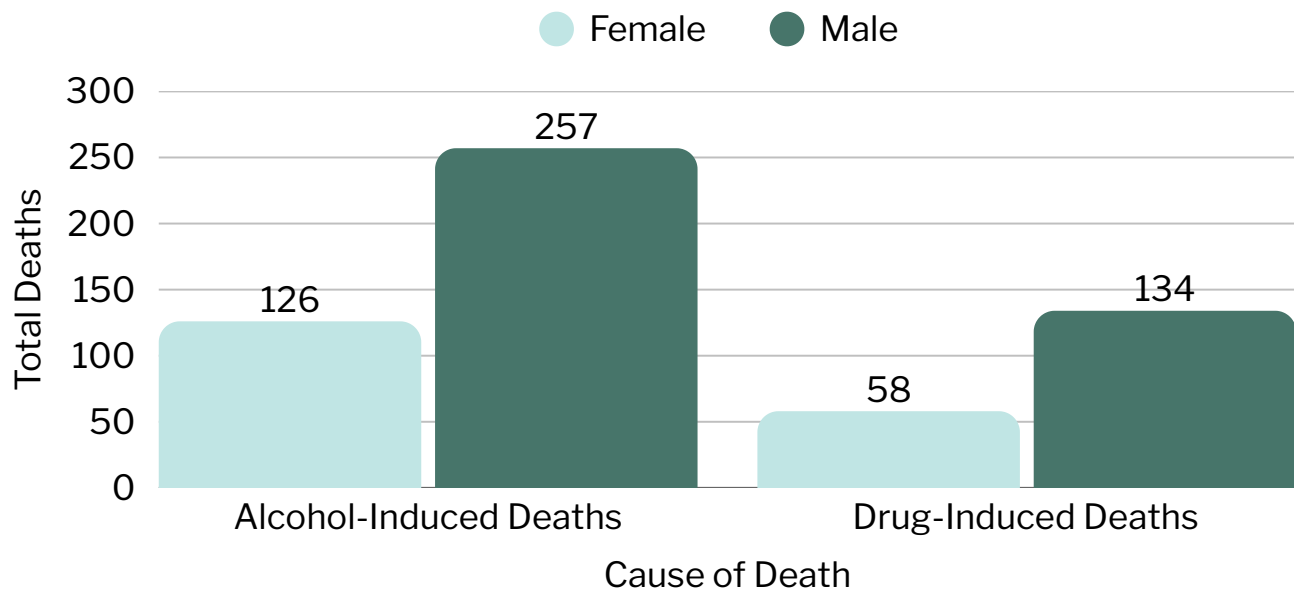
Drug and Alcohol-Induced Deaths by Race (2019-2023)



Drug and Alcohol-Induced Deaths by Age Group (2019-2023)



Drug and Alcohol-Induced Deaths by Sex (2019-2023)



*See Appendix B for additional data using age adjusted mortality rates

OFR Data

In 2023, Coconino County Health and Human Services (CCHHS) reviewed 16 overdose death cases involving county residents.

Of the 16 reviewed cases:

- **Substances involved:**

- 9 decedents tested positive for methamphetamine*
- 9 tested positive for fentanyl*
- 11 deaths involved **polysubstance use**, most commonly methamphetamine, fentanyl, and alcohol (listed in order of prevalence)*
- Additional substances in polysubstance deaths included oxycodone (1 case), heroin (1 case), and cocaine (1 case)

*Cases do not add up to 16 because many deaths involved more than one substance.

- **Demographics and locations:**

- 12 of the decedents were **male**
- 12 were **under the age of 45**
- Places of death:
 - 5 in **Flagstaff**
 - 3 in **Page**
 - 1 in **Phoenix** (Coconino County resident who died in Phoenix)
 - 7 in **rural communities**: Tuba City, Williams, Cameron, Hotevilla, and Kaibeto
- 9 individuals died in their **own residence**
- 13 were **employed** at the time of death
- 9 were identified as **White**, and 5 as **Native American**

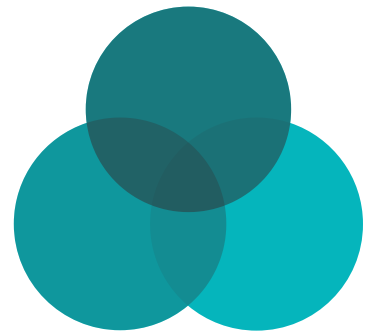
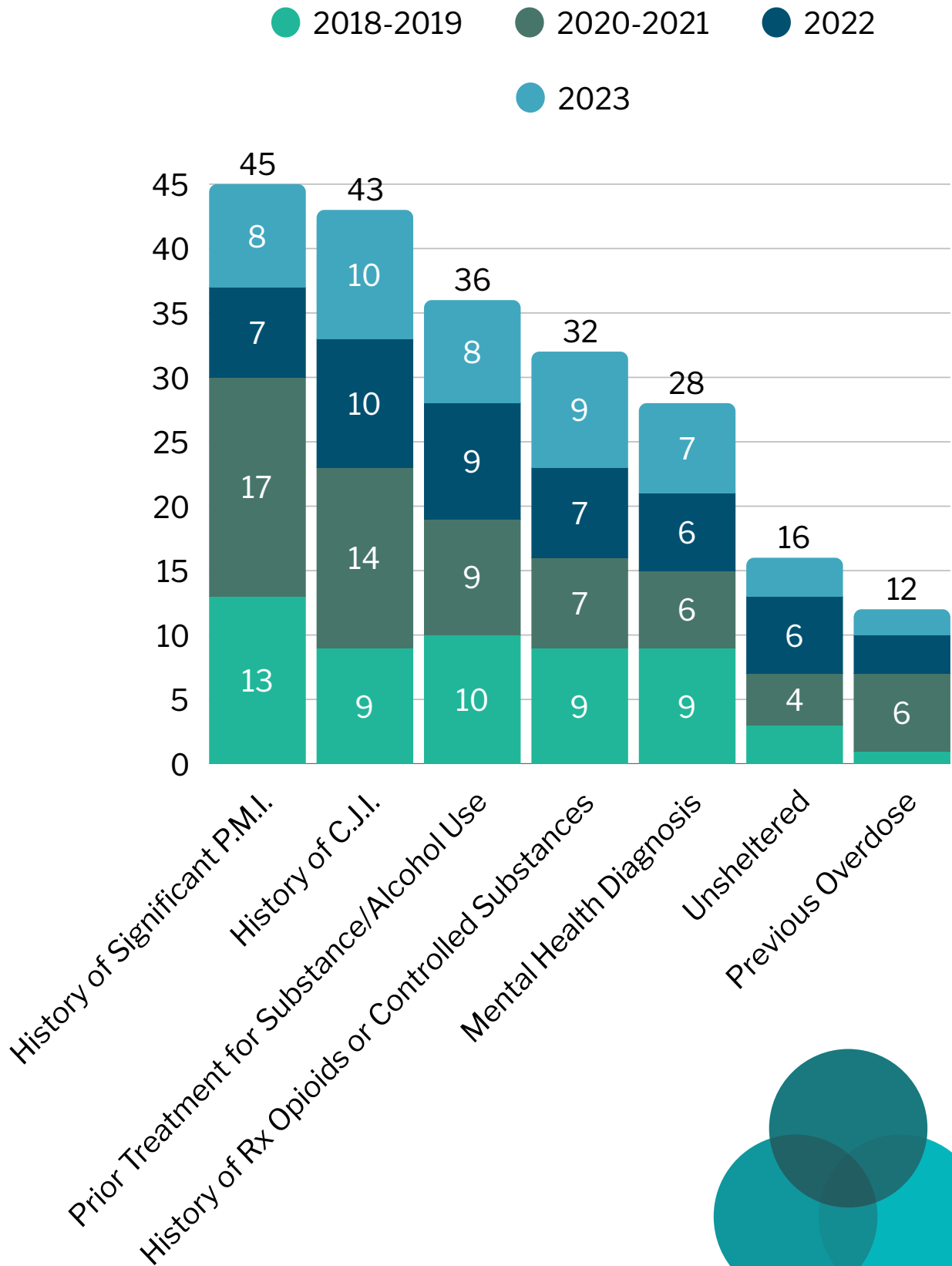
Commonalities

Commonalities refer to shared characteristics or life experiences observed among individuals whose cases are reviewed by the CCHHS OFR Team. While these commonalities do not imply causation, they may help identify potential risk factors associated with fatal overdoses.

Due to limitations in record availability, it is not always possible to determine whether a commonality applies to a particular individual. For the purposes of OFR reporting, only confirmed commonalities are documented. As a result, some commonalities may be underreported and could exist in additional cases, but could not be verified through available records.

Commonality	2018-2019	2020-2021	2022	2023	2018-2023
History of Significant Physical Medical Issue (PMI)	13	17	7	8	45
History of Criminal Justice Involvement (CJI)	9	14	10	10	43
Prior Treatment for Substance/Alcohol Use	10	9	9	8	36
History of Prescribed (Rx) Opioids or Controlled Substances	9	7	7	9	32
Mental Health Diagnosis	9	6	6	7	28
Previous Overdose	1	6	3	2	12
Unsheltered	3	4	6	3	16
Total Cases Reviewed	28	31	16	16	91

Commonalities



OFR Recommendations

Treatment for Substance Use Disorder

- Strengthen policies and procedures within treatment facilities to promote consistent, coordinated care for all individuals.
- Expand access to a broader range of evidence-based therapies, with a focus on rural communities. Priorities include:
 - Culturally responsive therapies that incorporate Indigenous beliefs and practices,
 - Medications for opioid and alcohol use disorders, along with education and support for prescribers,
 - Cognitive Behavioral Therapy (CBT), Dialectical Behavior Therapy (DBT), step-down programs, and peer support.
- Continue to research and implement evidence-based approaches for reducing methamphetamine use.
- Provide individuals in recovery—and their families and support networks—with clear, honest information about relapse risks and warning signs.

Healthcare

- Expand access to peer support services within healthcare settings.
- Strengthen case management systems to ensure patients are consistently connected to comprehensive, wraparound services.
- Integrate routine screening for substance and alcohol use into all medical visits,
- Reduce stigma among healthcare providers to encourage honest disclosure of substance and alcohol use by patients.
- Offer safety-focused interventions to patients who disclose substance or alcohol use but are not yet ready or willing to stop.

OFR Recommendations

Behavioral Health

- Provide support, services, and education for individuals experiencing grief and trauma, including those who have lost a loved one to overdose.
- Continue efforts to reduce stigma and expand access to timely, comprehensive care.

Judicial System

- Explore deflection programs within local law enforcement agencies.
- Expand access to and utilization of specialty courts, such as drug courts and mental health courts.
- Provide access to Medications for Opioid Use Disorder (MOUD) in alignment with best practice standards.
- Identify opportunities to expand the scope and reach of correctional programs.

Education / Safety-Focused Interventions

- Explore alternative methods to deliver life-saving and safety-focused education to individuals in rural and hard-to-reach areas.
- Provide ongoing education about drug tolerance and the increased risk of overdose following periods of abstinence, particularly for individuals in treatment or recovery.
- Improve access to opioid reversal medications for residents of recovery housing.

Conclusion

Over the past year, the Coconino County Overdose Fatality Review (OFR) Board dedicated six hours to reviewing the cases of 16 community members who died from overdose. Behind each case were many additional hours spent gathering records and thoughtfully reconstructing each individual's life, ultimately presented to the Board in a short summary. It is important to recognize that substance use was only one part of their story. These individuals leave behind loved ones—family, children, friends, pets—and the lives they built. While many of their stories include hardship, they also reveal moments of resilience and hope. The OFR Board is deeply honored to remember and reflect on these lives, and to contribute to efforts that may prevent future loss.

Resources

Coconino County Health and Human Services, Opioid Crises Response Program

Peer support, safety-focused education, linkages to treatment, and supportive services.
(928) 679-8643 or ocr@coconino.az.gov

Coconino County Health and Human Services, Opioid Overdose Prevention Program

Offers free opioid reversal medication, fentanyl test kits, education, and other safety-focused interventions
(928) 679-7279 or Prevention@coconino.az.gov

Arizona Department of Health Services

Find statewide data, resources and reports
<https://www.azdhs.gov/opioid/>

SAMHSA Treatment Locator

Confidential and anonymous website for locating local treatment facilities in the United States
<https://findtreatment.gov/locator>

Terros Health

Mobile crises unit in Coconino County and connects patients with various treatment facilities
1(877)756-4090

Opioid Assistance and Referral (OAR) Line

Statewide hotline that offers patients, providers, and family members opioid information 24/7 - 1(888) 688-4222

Never Use Alone Hotline

National hotline that people can call when they're using by themselves, with no one to call for help.
1(800)484-3731 or 1(877)696-1996

Appendix A

For this report, drug induced and alcohol induced deaths are defined by Arizona Department of Health Services algorithm for classifying causes of death.

Drug induced deaths are defined as deaths containing the following ICD-10 codes in the underlying cause of death field:

F110-F115, F117-F119, F120-F125, F127-F129, F130-F135, F137-F139, F140-F145, F147- F149, F150-F155, F157-F159, F160-F165, F167-F169, D521, D590, D592, D611, D642, E064, E160, E231, E242, E273, E661, G211, G240, G251, G254, G256, G444, G620, G720, I952, J702, J703, J704, L105, L271, L270, M102, M320, M804, M814, M835, M871, R502, R781, R782, R783, R784, R785, Y10-Y14, F170, F173, F175, F177, F179, F180, F185, F187, F189, F190, F195, F197, F199, K853, X40-X44, X60-X64, X85

Opioid induced deaths are defined as deaths containing the following ICD-10 codes in the underlying cause of death field: F110-F115, F117-F119

Additionally, deaths can also be defined as opioid induced deaths in cases where a death contains the following codes in the underlying cause of death field: Y11-Y14, X41-X44, X61-X64, X85 and the following codes in any of the contributing cause of death fields: T400, T401, T402, T403, T404, T40

Alcohol Induced Deaths are Defined as deaths containing the following ICD-10 codes as the underlying cause of death: F10, K70, X45, X65, Y15, G312, G621, I426, K292, R780, Y15, E244, G721, K852, K860

The following substances were classified using “T” ICD-10 codes in the contributing cause of death fields;

- Other Opioids: T400, T401, T402, T403
- Synthetic Opioids: T404
- Cocaine: T405
- Sedatives: T42
- Antidepressants: T431, T432, T434, T435, T438, T439
- Methamphetamines: T436
- Ethanol/Alcohol: T51
- Other Substances: T36, T37, T38, T39, T50

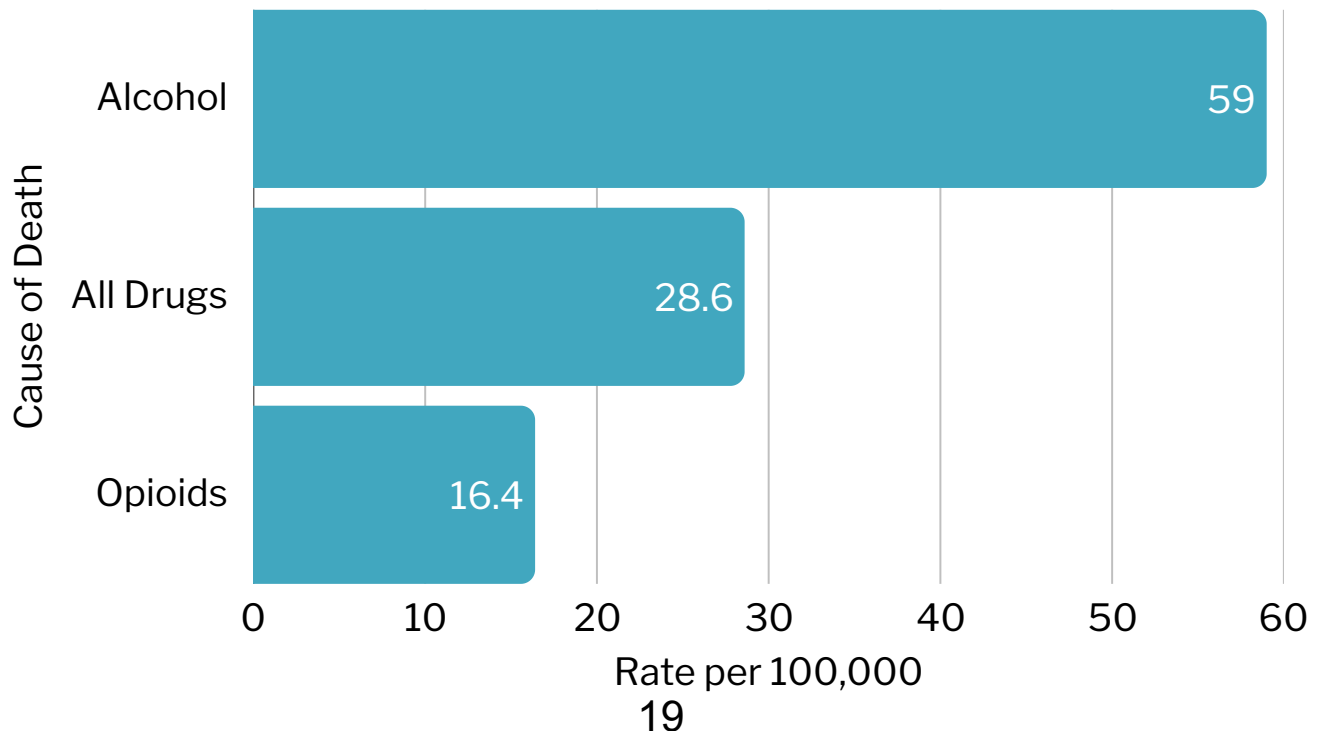
Appendix B

AGE ADJUSTED YEARLY MORTALITY RATES

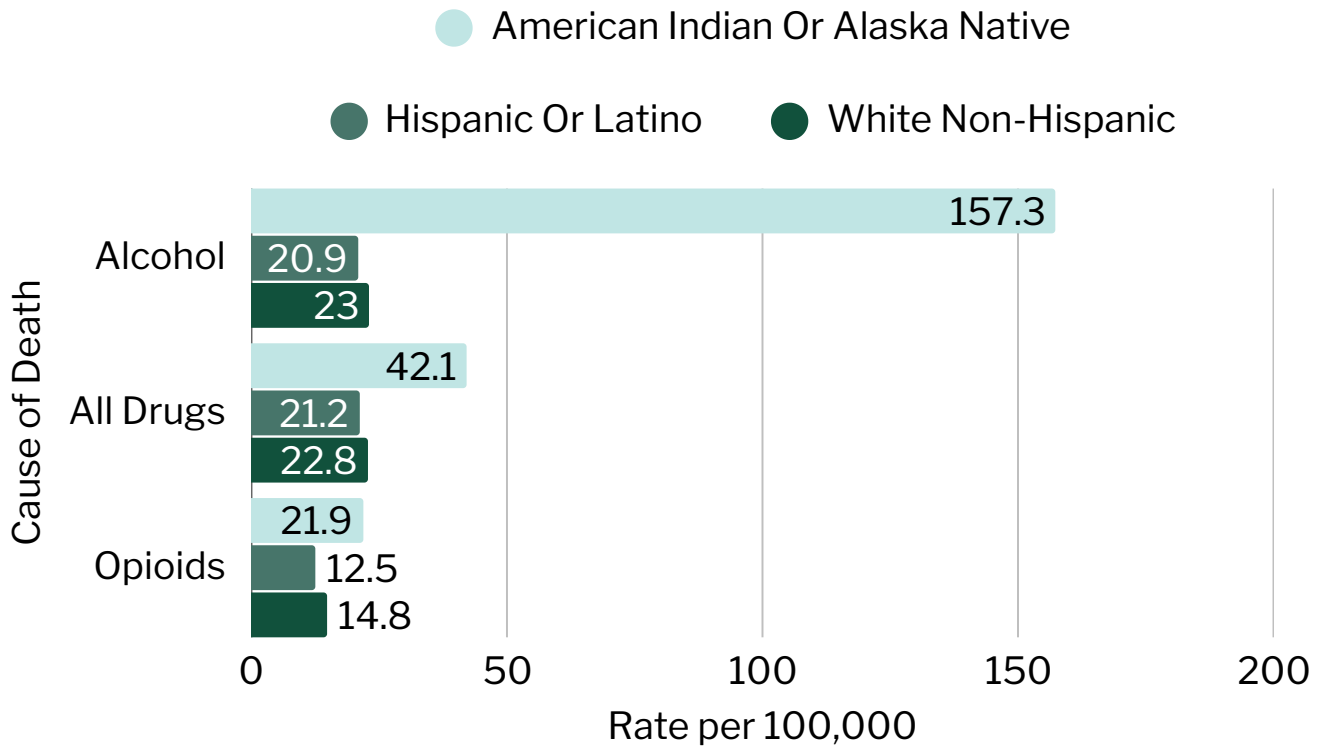
Mortality Rate is the measure of individuals that die of a certain cause over a defined time period. This rate is typically expressed as per 100,000 individuals per year. This is calculated by dividing the number of deceased individuals by the total population and then multiplying by 100,000.

Age Adjusted Mortality Rate refers to age standardization, which allows for the standard comparison between different populations which may have varying age structures. It is considered a weighted average of age-specific crude rates, where weights are the proportions of individuals in a corresponding age group in a population.

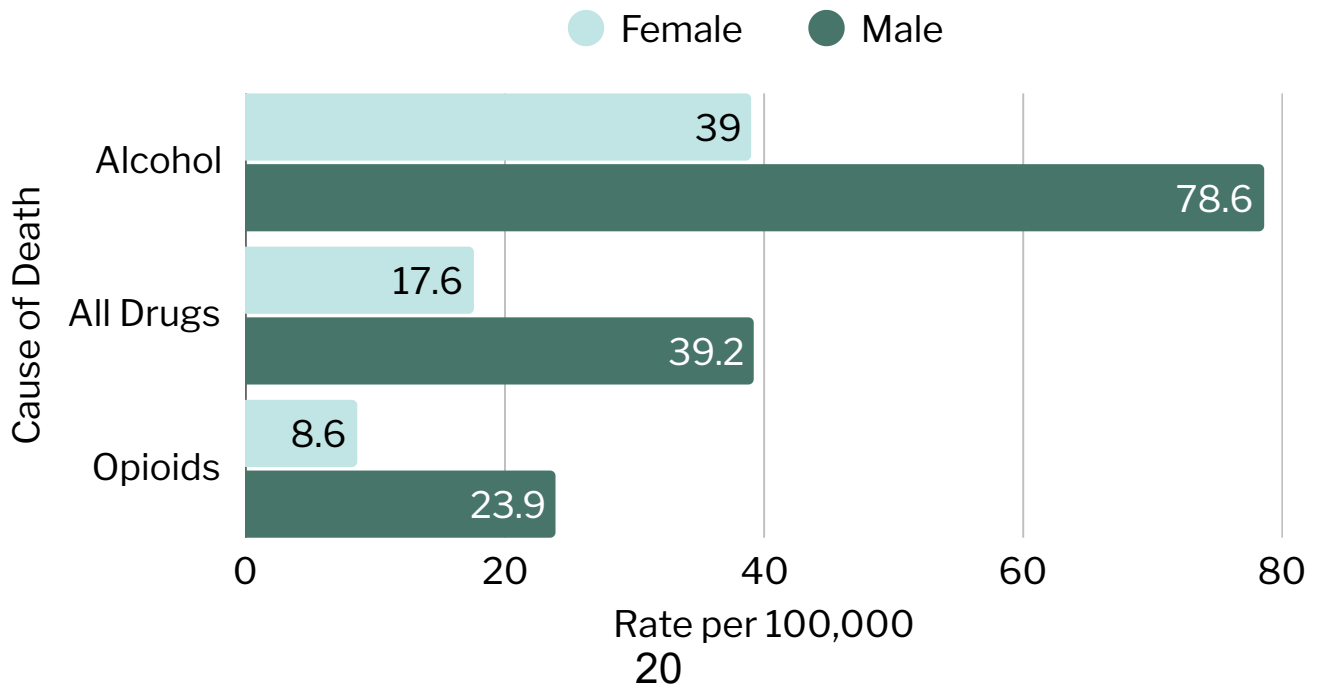
Age-Adjusted Mortality Rates by Cause of Death (2019-2023)



Age-Adjusted Mortality Rates by Race (2019-2023)



Age-Adjusted Mortality Rates by Sex (2019-2023)



New Vaping Education Products Are Here - Equip Your Program Today! [LEARN MORE](#)

[Home](#) / [Alcohol Goggles](#) / [Alcohol Goggles](#) / [Fatal Vision® Impairment Goggles](#)



FATAL VISION® IMPAIRMENT GOGGLES

The Fatal Vision® Alcohol Goggles provide impactful lessons on impaired driving, underage drinking, and substance abuse. They simulate the behaviors of individuals impaired by alcohol at different BAC levels, making the experience memorable and educational.

Order in Bulk and Save

Pricing will automatically be applied in the cart when you add your products.

Quantity	Price (each)
1 - 10	\$169.00
11 - 20	\$164.00
21 - 30	\$159.00
31 - 40	\$154.00
41 - 50	\$149.00
51+	\$144.00





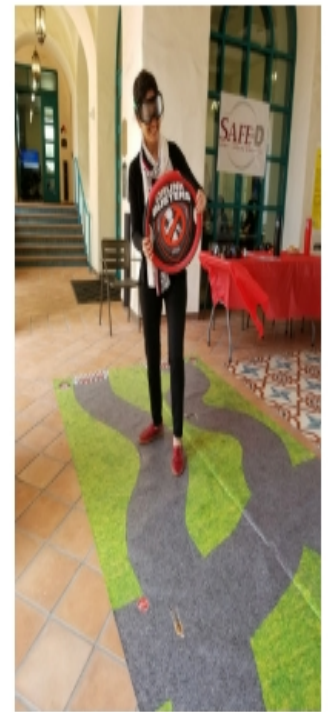
Drunk Busters 6-Pack of Goggles
Includes a FREE CARRYING BAG!
\$549.00



Drunk Busters 12-Pack of
Goggles - pick the 12 you want.
SALE PRICE Includes a FREE
CARRYING BAG!
MSRP: ~~\$999.00~~
\$949.00



Drunk Busters Carrying Bag
\$25.00



Drunk Busters Challenge Activity
Mat with steering wheel and .08
- .15 Goggle
\$369.00



Drunk Busters Field Sobriety Test
Mat
\$269.00



Drunk Busters Cup Stacking
Challenge
\$49.00



Drunk Busters Steering Wheel
\$25.00



Drunk Busters T-shirts with our
vintage logo! Celebrating 30
years.
\$15.00



EVIDENCE BASED PREVENTION & TREATMENT MODEL