

Plymouth County Outreach

2018 ANNUAL REPORT

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Plymouth County Outreach 2018 Annual Report

Part I: 2018 Overall Incident Data

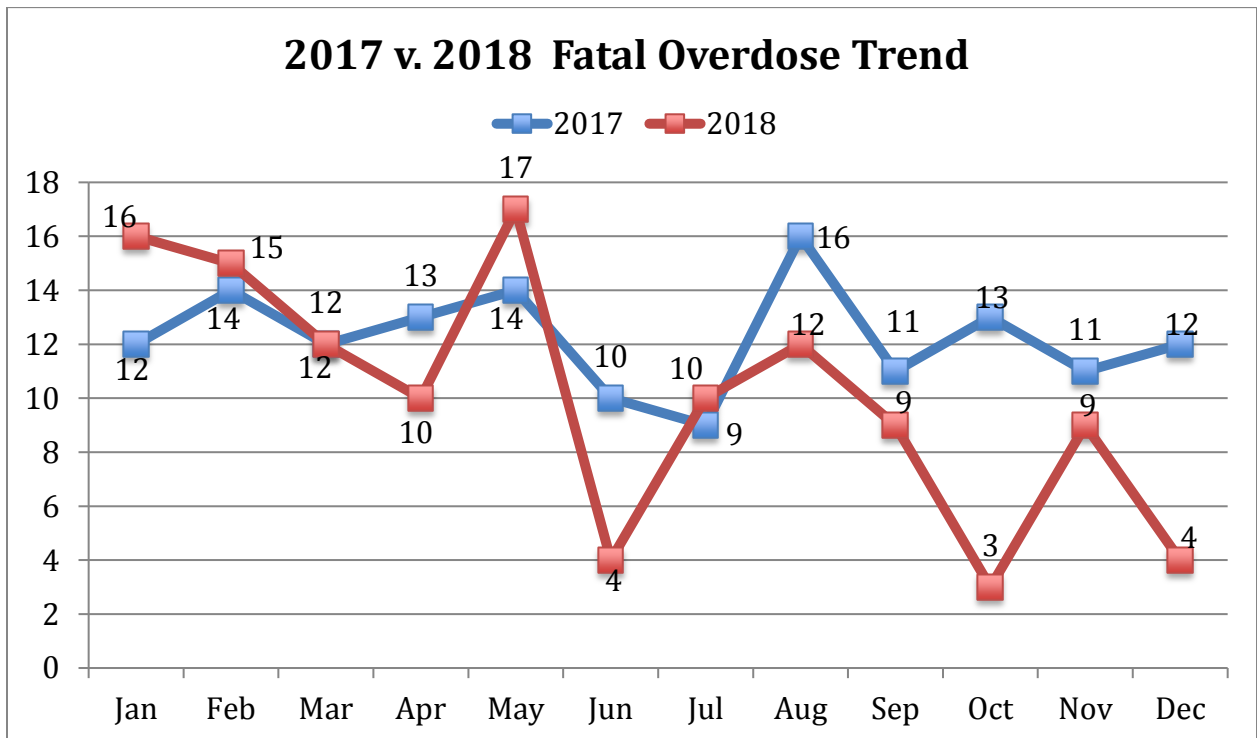
Total Overdoses Reported

There were **1,618 total incidents** entered into the PCO system for the time frame of 1/1/18 and 12/31/18*. This represents an **8% decrease** over the 2017 total of 1,756.

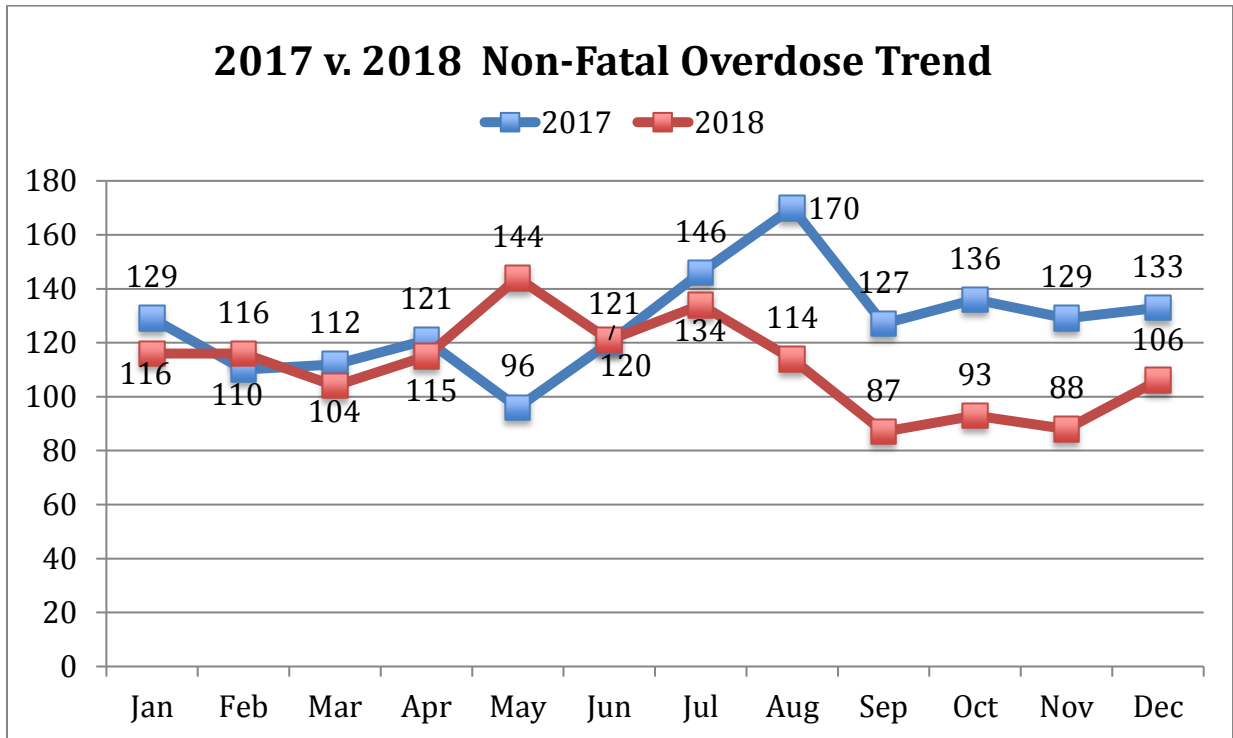
Incident Type	2017	2018	% Change 2017 v 2018
Non-Fatal	1,529 (87%)	1,338 (83%)	-13%
Fatal	147 (8%)	121 (7%)	-18%
At-Risk	80 (5%)	159 (10%)	+99%
Total	1756 (100%)	1,618 (100%)	-8%

*See Appendix A for a table of totals for each category for each town.

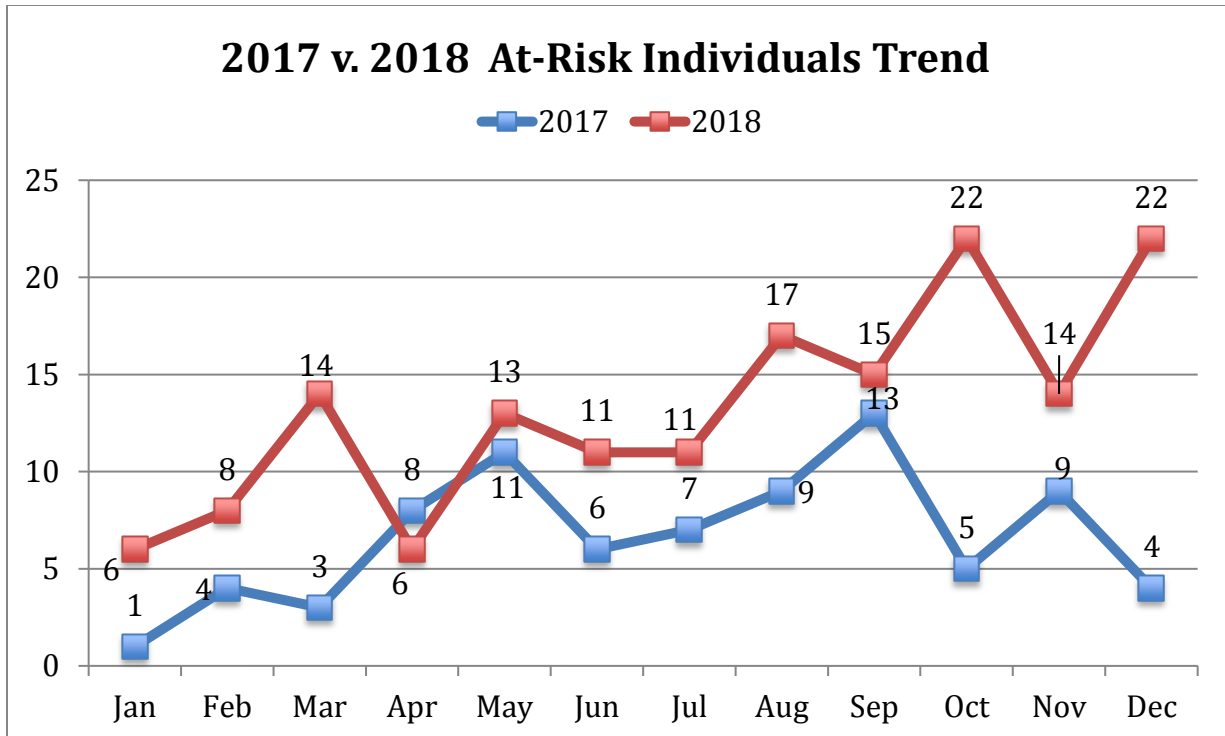
2017 v. 2018 Overall Trends



There was on average 10.1 fatal ODs per month in the County in 2018. This is an 18% decrease over the 2017 monthly average of 12.3. The highest monthly total in 2018 occurred in May (17) and the lowest monthly total in 2018 occurred in October (3).



There was on average 111.5 non-fatal ODs per month in the County in 2018. This is a 13% decrease over the 2017 monthly average of 127.4. The highest monthly total in 2018 occurred in May (144) and the lowest monthly total in 2018 occurred in September (87).



There was on average 13.3 at-risk individuals identified per month in the County in 2018. This is a 99% increase over the 2017 monthly average of 6.7. The highest monthly total in 2018 occurred in both October and again in December (22). The lowest monthly total in 2018 occurred in both January and April (6). It should be noted that the definition of an at-risk individual evolved during 2018 from just those using opiates and at-risk for overdose that were referred by a family or other local police or probation department to incidents reported to police of attempted suicide and mental illness that involved taking medications or drugs (legal and illegal).

Total Overdoses & At-Risk by District

- North 1,043 (65%)
- South 575 (35%)

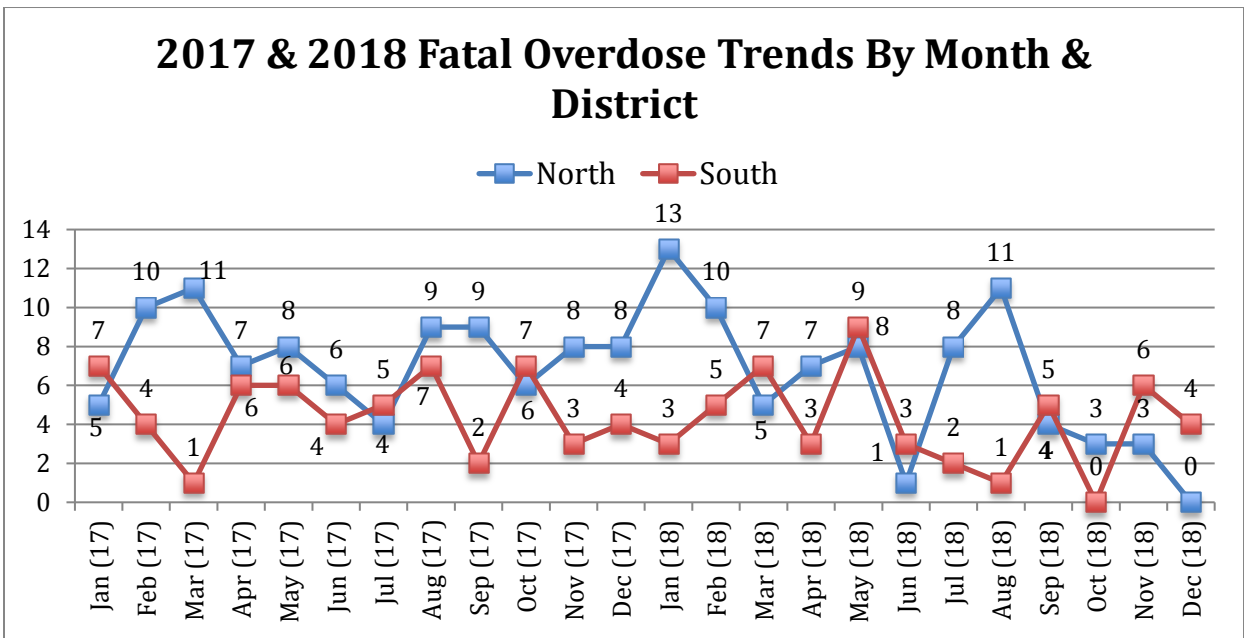
Sixty-five percent of the incidents (1,043) reported in the PCO system occurred in the “North” district including: Abington, Bridgewater, Brockton, East Bridgewater, Halifax, Hanson, Hingham, Hull, Norwell, Rockland, Scituate, West Bridgewater, and Whitman. The other 35% (575) occurred in the “South” district including: Carver, Duxbury, Kingston, Hanover, Lakeville, Marion, Marshfield, Mattapoisett, Middleborough, Pembroke, Plymouth, Plympton, Rochester, and Wareham.

Incident Category & District

	North	South
At-Risk	106 (10%)	53 (9%)
Fatal	73 (7%)	48 (8%)
Non-Fatal	864 (83%)	474 (83%)
Total	1,043 (100%)	575 (100%)

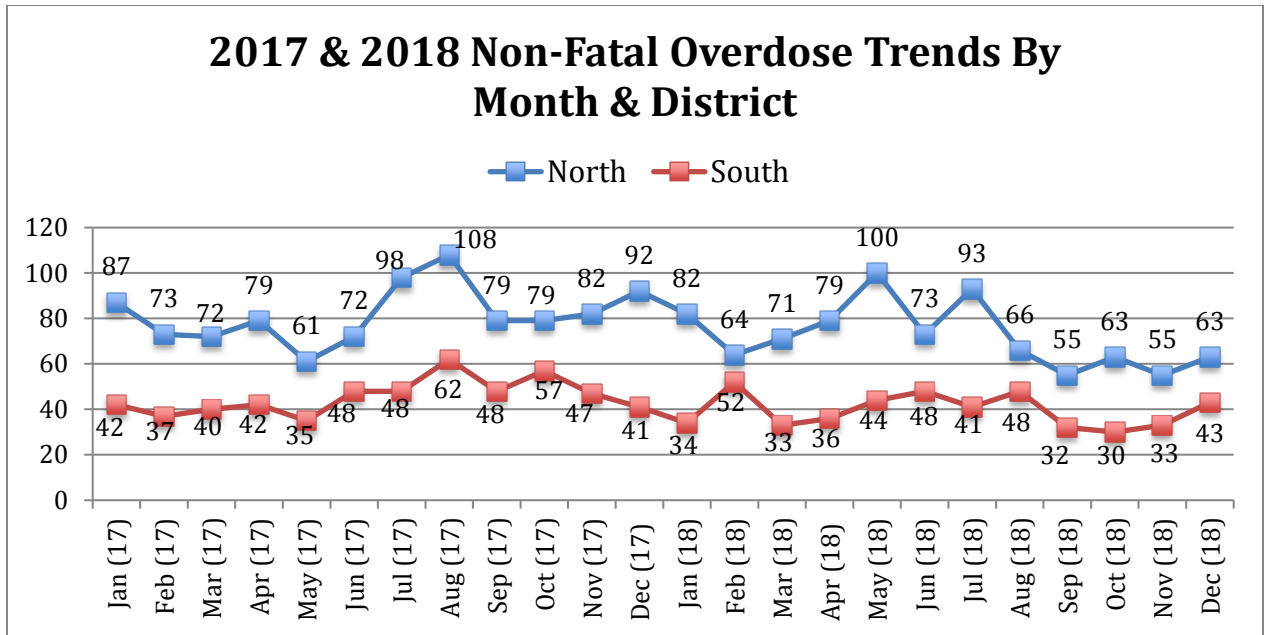
Of the 1,043 incidents recorded in the North district, 83% (864) were non-fatal incidents, 7% (73) were fatal incidents and 10% (106) were categorized as at-risk individuals. The South had fewer incidents but similar percentage of incidents by category. The South had a slightly higher percentage, compared to the North, of fatal incidents with 8% (48) and the same percentage of non-fatal incidents 83% (474) and a slightly lower percentage, compared to the North, of at-risk cases with 9% (53).

2017 & 2018 District Trends

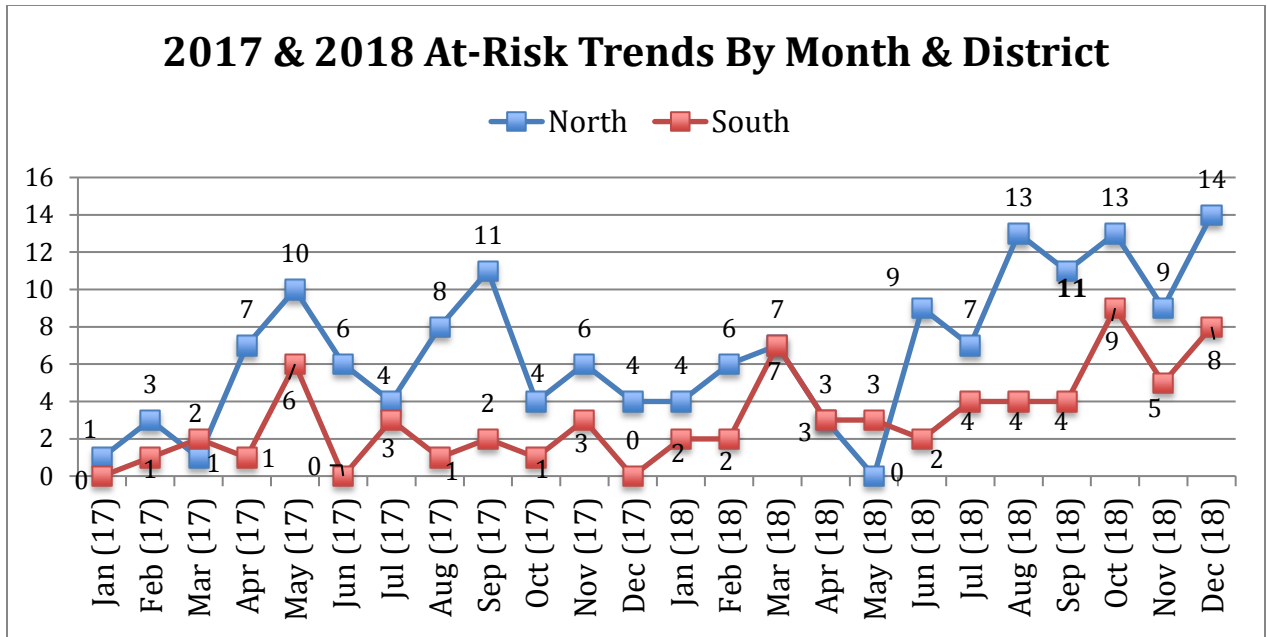


In 2018, there was on average 6.1 fatal ODs per month in the North district versus 4 fatal ODs per month in the South district. In comparison, in 2017, there was on average 7.6 fatal ODs per month in the North district versus 4.7 fatal ODs per month in the South district. In 2018, the North had zero fatal overdoses in December while the South had zero fatal overdoses in October 2018. The least number of fatal overdoses in the North in 2017 occurred in July (4) and the least number of fatal overdoses in the South in 2017 occurred in March (1). The highest number of fatal overdoses for the North over the 24-month period occurred in January 2018 (13).

The highest number of fatal overdoses for the South over the 24-month period occurred in May 2018 (9).



In 2018, there was on average 72 non-fatal ODs per month in the North district versus 39.5 non-fatal ODs per month in the South district. In comparison, in 2017, there was on average 81.8 non-fatal ODs per month in the North district versus 45.6 non-fatal ODs per month in the South district. The least number of non-fatal overdoses over the 24-month period in the North occurred in September 2018 (55) and November 2018 (55). The least number of non-fatal overdoses in the South over the 24-month period occurred in October 2018 (30). The highest number of non-fatal overdoses for the North over the 24-month period occurred in August 2017 (108) and the highest number of non-fatal overdoses for the South over the 24-month period also occurred in August 2017 (62).



In 2018, there was on average 8.8 at-risk individuals identified per month in the North district versus 4.4 at-risk individuals per month in the South district. In comparison, in 2017, there was on average 5.4 at-risk individuals per month in the North district versus 1.3 at-risk individuals per month in the South district. The least number of at-risk identifications over the 24-month period in the North occurred in January 2017 (1) and March 2017 (1). The least number of at-risk identifications in the South over the 24-month period occurred in January 2017 (0), June 2017 (0), and December 2017 (0). The highest number of at-risk identifications for the North over the 24-month period occurred in August 2018 (13) and October 2018 (13). The highest number of at-risk identifications for the South over the 24-month period also occurred in October 2018 (9).

2018 Overdose Incident Information

The following analysis involved the 1,459 non-fatal and fatal overdose incidents only.

Top Five Communities

Seventy-five percent (1,093) of the total fatal and non-fatal overdoses (1,459) reported in the County occurred in the following five communities:

- Brockton 661 (45%)
- Plymouth 168 (12%)
- Wareham 159 (11%)
- Middleborough 54 (4%)
- Rockland 51 (4%)

Jurisdiction Information

- Same Jurisdiction 1,077 (74%)
- Different Jurisdiction 382 (26%)

Over one-quarter of the overdose incidents (26%, n=382) involved individuals that did not live in the same town that the overdose occurred in or were recorded as homeless individuals.

Jurisdiction & District

	North	South	Countywide
Jurisdiction Same	699 (75%)	378 (72%)	1,077 (74%)
Jurisdiction Different/Homeless	238 (25%)	144 (28%)	382 (26%)
Total	937 (100%)	522 (100%)	1,459 (100%)

This analysis indicates in 2018 there were more cross-jurisdictional overdoses occurring in the South district (28%) than in the North district (25%). This is very different from the 2017 data which indicated that 40% of the overdoses that occurred in the North district were cross-jurisdictional events. The 2017 cross-jurisdictional information for the South district was exactly the same as 2018 with 28% of the overdoses involving individuals that lived in a town different from the where they overdosed.

Opiate Involvement

- Suspected Opiate Involvement 811 (55%)
- Known Opiate Involvement 579 (40%)
- No Opiate Involvement 69 (5%)

The vast majority, 95% (1,390), of the 2018 overdose incidents involved a known or suspected opiate. Only 5% (69) of the overdose incidents recorded in the PCO system involved some other type of drug. The vast majority of the fatal overdoses (98%, n=118) involved a known or suspected opiate. There were only 3 fatal overdoses that did not involve an opiate.

Naloxone Administration

- Yes 916 (63%)
- No 543 (37%)

In almost two-thirds of the overdose incidents, 63% (916), Naloxone was administered at the scene. Of the 916 Naloxone administrations, the agency/person administering the naloxone was identified for 772 (84%) incidents. The remaining incident entries (16%, n=144) did not identify who had administered the naloxone. Of those 772 known administrations:

- EMS Administered 357 (46%)
- Police Administered 337 (44%)
- 3rd Party Administered 201 (26%)
- Fire Administered 110 (14%)

As a note, this data can add to more than 100% since multiple agencies/individuals can administer Naloxone at one incident. EMS administered Naloxone at 46% (357) of the overdose incidents where it was necessary, and Police administered Naloxone at 44% (337) of the overdose incidents where it was necessary. Some other 3rd Party (friend/family/passers-by) administered Naloxone in 26% (201) of the overdose incidents and the Fire Department was noted as administering the Naloxone in 14% (110) of the overdose incidents. Of note, the number of 3rd party Naloxone administrations increased by 32% from 152 in 2017 to 201 in 2018.

Of the 916 incidents where Naloxone was administered, 95% (871) of the individuals survived the overdose. The remaining 45 incidents (5%) resulted in a fatality.

Hospital Transports

- Yes 1,375 (94%)
- No 84 (6%)

Individuals were transported to the hospital in 94% (1,375) of the overdose incidents recorded in the PCO system.

The 1,375 individuals were transported to the following hospitals:

- Brockton Hospital 474 (34%)
- Good Samaritan 314 (23%)
- BID Plymouth 203 (15%)
- Tobey Hospital 193 (14%)
- South Shore Hospital 134 (10%)
- Morton Hospital 46 (3%)
- St. Luke's Hospital 7 (1%)
- Mass. General Hospital 1 (<1%)
- Unknown 3 (<1%)

Children Involved

Seventy-two overdose incidents (5%) occurred with children present at the scene and 56 (78%) of those overdose incidents involving children resulted in a 51A being filed. Eighty (6%) of the individuals that overdosed were reported to have school aged children associated with them, whether they were present at the scene or not.

Part II. Demographic Data

Total Individuals Involved (ODs and At-Risk)

The 1,618 total overdoses and at-risk events involved 1,310 unique individuals.

- 1,123 (86%) individuals had one event recorded in CIMS in 2018
- 125 (10%) individuals had two events recorded in CIMS in 2018
- 35 (3%) individuals had three events recorded in CIMS in 2018
- 17 (1%) individuals had four events recorded in CIMS in 2018
- 6 (<1%) individuals had five events recorded in CIMS in 2018
- 1 (<1%) individual had six events recorded in CIMS in 2018
- 1 (<1%) individual had seven events recorded in CIMS in 2018
- 1 (<1%) individual had thirteen events recorded in CIMS in 2018
- 1 (<1%) individual had sixteen events recorded in CIMS in 2018

The 187 individuals with multiple events recorded in 2018 were involved in 495 (31%) of the reported overdose or at-risk incidents.

Unique Individual Demographic Information (1,310 Individuals)

Gender

- Male 830 (63%)
- Female 480 (37%)

The majority of individuals (63%, n=830) involved in overdose and at-risk incidents reported in 2018 were male. In comparison, in 2017, males made up 67% of the individuals involved in overdose or at-risk incidents. The percentage of females increased from 33% in 2017 to 37% (480) in 2018.

Incident Category & Gender

	Male	Female
Fatal	77 (9%)	32 (7%)
Non-Fatal	684 (83%)	374 (78%)
At-Risk	69 (8%)	74 (15%)
Total	830 (100%)	480 (100%)

Nine percent (77) of the males died as a result of the overdose event while 7% (32) of the females died following the overdose. The percentage of males and females being recorded as At-Risk individuals increased significantly between 2017 and 2018, with females increasing from 6% (26) to 15% (74) and males increasing from 4% (37) to 8% (69).

Age

- 19 or younger 55 (4%)
- 20 – 29 357 (27%)
- 30 – 39 498 (38%)
- 40 – 49 192 (15%)
- 50 – 59 151 (12%)
- 60+ 45 (3%)
- Unknown 12 (1%)

Sixty-five percent (855) of the individuals involved in an overdose or at-risk event in 2018 were between the ages of 20 and 39. Fifty-five (4%) of the individuals were 19 or younger. The youngest individual recorded was one year old and the oldest individual was 71 years old.

	19 or younger	20-29	30-39	40-49	50-59	60+	Unk
Fatal	1 (2%)	28 (8%)	41 (8%)	16 (8%)	18 (12%)	5 (11%)	0 (0%)
Non-Fatal	42 (76%)	286 (80%)	417 (84%)	152 (79%)	113 (75%)	36 (80%)	12 (100%)
At-Risk	12 (22%)	43 (12%)	40 (8%)	24 (13%)	20 (13%)	4 (9%)	0 (0%)
Total	55 (100%)	357 (100%)	498 (100%)	192 (100%)	151 (100%)	45 (100%)	12 (100%)

The age range of 50 – 59 had the highest percentage of fatalities (12%, n=18) with the 60+ category having the second highest percentage of fatalities (11%, n=5). The age range of 30 – 39 years old had the highest percentage of non-fatal overdose incidents (84%, n=417). The age range of 19 or younger had the highest percentage of At-Risk individuals (22%, n=12).

Race

- White 1,146 (87%)
- Black/ AA 142 (11%)
- Cape Verdean 10 (1%)
- Other 10 (1%)
- Unknown 2 (<1%)

The vast majority (87%, n=1,146) of individuals involved in overdose or at-risk events were categorized as White in CIMS.

Incident Category & Race

	White	Black/AA	Cape Verdean	Other	Unknown
Fatal	99 (9%)	9 (6%)	1 (10%)	0 (0%)	0 (0%)
Non-Fatal	921 (80%)	117 (83%)	9 (90%)	9 (90%)	2 (100%)
At-Risk	126 (11%)	16 (11%)	0 (0%)	1 (10%)	0 (0%)
Total	1,146 (100%)	142 (100%)	10 (100%)	10 (100%)	2 (100%)

Nine percent (99) of the White individuals recorded in CIMS died as a result of an overdose, 6% (9) of the Black/AA individuals recorded in CIMS died as a result of an overdose, and 10% (1) of the Cape Verdean individuals recorded in CIMS died as a result of an overdose. Eleven percent of both the White (126) and Black/AA (16) individuals recorded in CIMS were considered At-Risk individuals.

Homelessness

Nine percent (121) of the unique individuals involved in an overdose or at-risk event in 2018 were homeless at the time of the incident. Of those 121 individuals, 79% (96) overdosed in the City of Brockton. The other 25 individuals listed as homeless overdosed in ten other towns in Plymouth County.

Part III. Follow-Up Visit Data

Of the 1,618 overdose and at-risk incidents in 2018, 62% (1001) of the overdoses warranted a follow-up visit and in 73% (727) of those 1,001 cases a follow-up visit was also intended. A follow-up visit is warranted if hospital partners indicate this during the PCO notification process, or for most of the at-risk entries that do not involve a hospital partner. This would indicate to the team that the individual that overdosed or was referred needed additional services. A follow-up visit is intended if the town where the individual resides intends to visit the home with the outreach team. Some reasons why a follow-up would be warranted but not intended would include: the person is homeless so there is no address to visit; the person lives out of the program jurisdiction; or the person had a warrant, or a Section 35 has been requested.

There were 987 attempted home visits throughout 2018. Of these 987 attempted home visits, the teams were successful in contacting someone in 60% (590) of these visits. Successful contact was made with:

- Contact with Family/Friend 257 (44%)
- Contact with Individual that Overdosed 227 (38%)
- Contact with BOTH (F/F and Individual) 106 (18%)

In 333 (56%) of the successful follow-up visits (590) the Outreach team had contact with the individual who had overdosed. The outcomes of the 333 visits include:

- Person Accepted Services 143 (43%)
- Person Declined Services 86 (26%)
- Person was Already Seeking Treatment 62 (19%)
- No Response Provided 42 (12%)

Forty-three percent (143) of the 333 successful visits where the individual who overdosed was contacted, resulted in that person accepting treatment options from the Outreach Team. Another 19% (62) of these individuals were already seeking treatment by the time the Outreach Team conducted the home visit. Twenty-six percent (86) of the individuals contacted by the team declined assistance at that time and 12% (42) of the successful contacts did not have an outcome recorded.

In 363 (62%) of the successful follow-up visits (590) the Outreach team had contact with a family member or friend of the individual who had overdosed. The outcomes of the 363 visits include:

- Family/Friend Accepted Services 101 (28%)
- Family/Friend Declined Services 78 (21%)
- No Response Provided 184 (51%)

Twenty-eight percent (101) of the 365 successful visits where a family/friend was contacted, resulted in that family/friend accepting support services from the Outreach Team. Twenty-one percent (78) of the family/friends contacted by the team declined support services at that time and 51% (184) of the successful family/friend contacts did not have an outcome recorded.

Additional assistance provided at the follow-up visits include providing information about community resources for the family and the individual with substance use disorder. Of the 590 successful follow-up visits, 80% (473) of these visits involved the individuals being advised of the nearest Drop-In Center including:

- EB/Plymouth HOPE 90% (425)
- Champion Plan 46% (219)
- Scituate Drop-In 11% (52)*

*can add to more than 100% since individuals can be referred to multiple locations.

In addition, while on these home visits, 210 Family/Friend resource packets were provided to the families and 293 resource packets for the individual with substance use disorder were also distributed. Finally, 32 (5%) of the 590 successful follow-up visits resulted in a Section 35.

The 987 attempted follow-up visits by the Outreach Teams were conducted with the following police departments:

Town	Follow-Ups Attempted	Town	Follow-Ups Attempted
Abington	15 (2%)	Marshfield	27 (3%)
Bridgewater	32 (3%)	Mattapoisett	12 (1%)
Brockton	309 (31%)	Middleborough	37 (4%)
Carver	14 (1%)	Norwell	5 (1%)
Duxbury	21 (2%)	Pembroke	23 (2%)
East Bridgewater	107 (11%)	Plymouth	91 (9%)
Halifax	2 (<1%)	Plympton	3 (<1%)
Hanover	5 (1%)	Rochester	12 (1%)
Hanson	11 (1%)	Rockland	33 (3%)
Hingham	8 (1%)	Scituate	21 (2%)
Hull	24 (2%)	Wareham	119 (12%)
Kingston	6 (1%)	West Bridgewater	8 (1%)
Lakeville	3 (<1%)	Whitman	34 (4%)
Marion	5 (1%)		

Part IV. Repeat Overdose Analysis

Analysis of the data between January 2016 and December 2018 indicate **3,366 unique** individuals overdosed or had an at-risk referral to Plymouth County Outreach. Of these 3,366 unique individuals, 2,570 (76%) experienced only one overdose/at-risk referral and 796 (24%) experienced multiple overdoses/at-risk referrals.

Of the 3,366 unique clients, 2,570 (76%) had only one overdose/referral between January 2016 and December 2018, 467 (14%) had 2 overdoses/referrals, and 329 (10%) had 3 or more. Individuals who experienced 2 overdoses/referrals accounted for 19% (934) of all incidents. The 329 individuals with 3+ overdoses/referrals accounted for 29% (1,424) of all events since the inception of the program.

	# Clients	# of All ODs/ Referrals	% of All ODs/ Referrals
SUDs w 1	2570 (76%)	2570	52%
SUDs w 2	467 (14%)	934	19%
SUDs 3+	329 (10%)	1424	29%
Total	3,366 (100%)	4,928	100%

The following analysis focuses on the **most recent referral** documented for each of the 3,366 unique clients. At-risk referrals accounted for 197 (6%) of all **most recent** incidents/referrals, fatal overdoses 378 (11%) incidents, and non-fatal overdoses 2,791 (83%) incidents. A similar percentage of at-risk referrals (79%), fatal overdoses (75%), and non-fatal overdoses (76%) were accounted for by individuals with only 1 documented incident. The percentages were similarly consistent for those with both 2 and 3+ incidents.

OD/ Referral Group	At-Risk Referral	Fatal OD Event	Non-Fatal OD Event	Total
1 incident	156 (79%)	283 (75%)	2,131 (76%)	2,570 (76%)
2 incidents	25 (13%)	52 (14%)	390 (14%)	467 (14%)
3+ incidents	16 (8%)	43 (11%)	270 (10%)	329 (10%)
Total	197 (100%)	378 (100%)	2,791 (100%)	3366 (100%)

The final analysis below presents information for the **796 individuals** with 2 or more at-risk referrals/overdoses during the project period. The information presented below compares the referral/overdose incident type at the point of the “relapse” event, compared with the time between the first and second incident. For the 53 individuals with a fatal relapse event, 42 (79%) occurred after 31 or more days, 9 (17%) occurred between 8-30 days, and 2 (4%) within 1 week. Among the 705 non-fatal incidents, 532 (75%) occurred after 31 days, 100 (14%) between 8-30 days, and 73 (10%) within 1 week.

Time 2 OD/Referral Type	“Relapse” Time Group			
	1 Week	8-30 days	31 Days or More	Total*
At-Risk Referral	3 (8%)	2 (5%)	33 (87%)	38
Fatal OD Event	2 (4%)	9 (17%)	42 (79%)	53
Non-Fatal OD Event	73 (10%)	100 (14%)	532 (75%)	705
Total	78	111	607	796

* The marginal totals in this table do not equal those to the cells in the “2” and “3+” cells referenced in the table above. The former table compares the “**most recent OD/referral event**” while this table compares relapse time and referral type between OD/referral events 1 and 2 where an individual had 2+ ODs/referrals.

Gender

	1 OD/ Referral	2 Ods/ Referrals	3+ Ods/ Referrals	Total
Female	929 (80%)	148 (13%)	85 (7%)	1,162 (100%)
Male	1,641 (75%)	319 (14%)	244 (11%)	2,204 (100%)
Total	2,570 (76%)	467 (14%)	329 (10%)	3,366 (100%)

When comparing the prevalence of overdose frequency across gender categories, a larger percentage of females had only 1 OD/referral (80%) during the program period compared to males (75%). Conversely, a largely percentage of males had 3 or more ODs/referrals (11%) compared to females (7%).

Age at First Overdose Recorded

	1 OD	2 ODs	3+ ODs	Total
19 and Younger	101 (83%)	10 (8%)	10 (8%)	121 (100%)
20-29	774 (72%)	167 (16%)	134 (12%)	1,075 (100%)
30-39	858 (74%)	189 (16%)	114 (10%)	1,161 (100%)
40-49	412 (80%)	57 (11%)	43 (8%)	512 (100%)
50-59	312 (85%)	36 (10%)	21 (6%)	369 (100%)
60+	79 (84%)	8 (9%)	7 (7%)	94 (100%)
Missing	34 (100%)	0 (0%)	0 (0%)	34 (100%)
Total	2,570 (76%)	467 (14%)	329 (10%)	3,366 (100%)

The analysis above compares age at first OD/referral to the frequency groups. The analysis reveals important findings. Those at highest risk for more than 1 OD/referral were between 20-39 at their first overdose. Those between 20-29 at their first overdose were at greatest risk of experiencing 3 or more ODs/referrals during the project period.

Appendix A Overall Incidents by Category/Year/Town

Highlighted entries are increases in number between 2017 and 2018.

Town/City	Fatal OD Incidents		Non-Fatal OD Incidents		At-Risk Individuals	
	2017	2018	2017	2018	2017	2018
Abington	3 (2%)	7 (6%)	33 (2%)	22 (1%)	8 (10%)	1 (1%)
Bridgewater	3 (2%)	4 (3%)	37 (2%)	37 (3%)	0 (0%)	0 (0%)
Brockton	40 (27%)	32 (26%)	673 (44%)	629 (47%)	6 (7%)	32 (20%)
Carver	4 (3%)	1 (1%)	29 (2%)	18 (1%)	1 (1%)	1 (1%)
Duxbury	0 (0%)	0 (0%)	7 (<1%)	6 (<1%)	0 (0%)	14 (9%)
E. Bridgewater	4 (3%)	4 (3%)	21 (1%)	28 (2%)	17 (21%)	32 (20%)
Halifax	2 (1%)	1 (1%)	14 (1%)	7 (1%)	0 (0%)	0 (0%)
Hanover	1 (1%)	0 (0%)	9 (1%)	6 (<1%)	0 (0%)	1 (1%)
Hanson	1 (1%)	2 (2%)	14 (1%)	13 (1%)	4 (5%)	5 (3%)
Hingham	1 (1%)	2 (2%)	15 (1%)	7 (1%)	0 (0%)	6 (4%)
Hull	10 (7%)	4 (3%)	33 (2%)	23 (2%)	15 (19%)	14 (9%)
Kingston	4 (3%)	4 (3%)	12 (1%)	17 (1%)	1 (1%)	1 (1%)
Lakeville	1 (1%)	1 (1%)	8 (1%)	8 (1%)	0 (0%)	0 (0%)
Marion	2 (1%)	1 (1%)	7 (<1%)	5 (<1%)	0 (0%)	1 (1%)
Marshfield	4 (3%)	6 (5%)	23 (1%)	24 (2%)	2 (3%)	5 (3%)
Mattapoisett	1 (1%)	4 (3%)	10 (1%)	14 (1%)	4 (5%)	2 (1%)
Middleborough	7 (4%)	3 (2%)	56 (4%)	51 (4%)	2 (3%)	6 (4%)
Norwell	2 (1%)	1 (1%)	9 (1%)	7 (1%)	3 (4%)	0 (0%)
Pembroke	4 (3%)	0 (0%)	26 (2%)	15 (1%)	0 (0%)	7 (4%)
Plymouth	12 (8%)	13 (11%)	215 (14%)	155 (11%)	4 (5%)	14 (9%)
Plympton	1 (1%)	0 (0%)	3 (<1%)	3 (<1%)	0 (0%)	0 (0%)
Rochester	1 (1%)	0 (0%)	7 (<1%)	8 (1%)	1 (1%)	1 (1%)
Rockland	15 (10%)	11 (9%)	67 (4%)	40 (3%)	5 (6%)	0 (0%)
Scituate	1 (1%)	1 (1%)	9 (1%)	10 (1%)	1 (1%)	2 (1%)
Wareham	15 (10%)	15 (12%)	144 (9%)	144 (11%)	0 (0%)	0 (0%)
W. Bridgewater	2 (1%)	2 (2%)	14 (1%)	7 (1%)	3 (4%)	2 (1%)
Whitman	6 (4%)	2 (2%)	34 (2%)	34 (2%)	3 (4%)	12 (7%)
Totals	147 (100%)	121 (100%)	1529 (100%)	1,338 (100%)	80 (100%)	159 (100%)