



City of Milwaukee

200 E. Wells Street
Milwaukee, Wisconsin
53202

Meeting Minutes

CITY-COUNTY HEROIN, OPIOID, AND COCAINE TASK FORCE

ALD. MICHAEL MURPHY, CHAIR

Michael Lappen, Vice-Chair

*James Mathy, Ald. Khalif Rainey, Daniel Bukiewicz, Ken
Ginlack, Cassandra Libal, Courtney Geiger, Michael Wright,
James Hutchinson, Selahattin Kurter and Shaun Doyne
Staff Assistant, Chris Lee, 286-2232, Fax: 286-3456,
clee@milwaukee.gov
Legislative Liaison, Tea Norfolk, 286-8012*

Thursday, February 9, 2023

1:00 PM

Virtual Meeting

This is a virtual meeting. Those wishing to view the proceedings are able to do so via the City Channel - Channel 25 on Spectrum Cable - or on the Internet at <http://city.milwaukee.gov/citychannel>. Those wishing to speak on a particular item should contact the staff assistant listed above to receive the log-in information. Please make this request no later than 24 hours prior to the start of the meeting.

1. Call to order.

The meeting was called to order at 1:01 p.m.

2. Roll call.

*Present (9) - Bukiewicz, Doyne, Geiger, Ginlack, Wright, Libal, Hutchinson, Lappen,
Murphy
Excused (3) - Kurter, Rainey, Mathy*

Also present:

*Sarah Schreiber, Milwaukee Medical Examiner's Office
Dr. Constance Kostelac, Medical College of Wisconsin
Amy Parry, Medical College of Wisconsin
Nicole Fumo, Medical College of Wisconsin
Cap. Gregory Miller, Milwaukee Fire Department
Asst. Chief Joshua Parish, Milwaukee Fire Department
Chief Aaron Lipski, Milwaukee Fire Department
Jeremy Triblett, Behavioral Health Services
Lexy Hann, Milwaukee Health Department Intern*

3. Review and approval of the previous meeting minutes from October 31, 2022.

The meeting minutes from October 31, 2022 were approved without objection.

4. Discussion, review, update, or motion(s) on City-County efforts, programs, initiatives, grants, or activities.

A. Overdose Public Health and Safety Team (OD-PHAST) update

Ms. Schreiber, Dr. Kostelac, Ms. Parry, and Ms. Fumo gave a presentation on OD-PHAST background, guiding principles, SOS process, drug death data, data comparisons, Data Strategy Team (DST) (activities, recommendations, next priorities), and Overdose Fatality Review Team (OFR) updates as follows:

OD-PHAST was a 3-year grant funded project through the federal Bureau of Justice Assistance, part of the Comprehensive Opioid Stimulant and Substance Abuse Program, and through the Medical Examiner's Office at the County level. The focuses were on preventing overdoses (fatal overdoses in particular) and bringing multi-disciplinary partners together.

OD-PHAST had the guiding principles of North Star to reduce overdoses, recognize substance use as a chronic treatable disease, use multi-sector data responsibly to inform those response strategies, and share accountability across the group.

OD-PHAST had a SOS goals process: Shared understanding to develop a common understanding of overdoses in Milwaukee County and evidence-based prevention and intervention strategies, Optimized capacity to collaborate across agencies within the County and State to strengthen capacity and reduce overdoses within the County, and Shared accountability to share responsibility for implementing recommendations to achieve North Star. All meeting activities addressed one or more of these goals.

Confirmed drug deaths in the County 2022 year to date showed 80% of drug deaths involved fentanyl alone or in combination and 57% of drug deaths involved cocaine alone or in combination. 2022 compared to 2021 showed a 5% increase in drug deaths with 644 confirmed drug deaths in 2021 and 678 (524 confirmed and 154 suspected drug deaths) drug deaths for 2022.

OD-PHAST was comprised of the Data Strategy Team (DST) and Overdose Fatality Review Team (OFR). DST provided multi-disciplinary analysis of real-time aggregate data to identify trends. DST analysis of suspected nonfatal overdoses from July 2021 to June 2022 revealed areas of high density varied by racial and Hispanic ethnicity groups. Fall 2022 focused on suspected nonfatal overdoses among Hispanic individuals. Focus area was identified, data was reviewed, presentations were made (from UCC, UMOS, and 16th Street Clinic), and recommendations were developed by DST. There were other presentations by partner agencies in providing additional important context on overall overdose trends and prevention.

The focus area identified for suspected nonfatal overdoses among Hispanic individuals were most concentrated within Pierce St. to the north, Cleveland Ave. to the south, I-94/I-43 to the east, and 38th St. to the west. Adopted recommendations for the focus area included identifying, creating, and/or disseminating overdose prevention educational materials, resources, and trainings in Spanish; distributing harm reduction materials, including Nalox-ZONE boxes, with instructions in Spanish in places that people frequent; conducting targeted outreach in the focus area with information on harm reduction and treatment resources; conducting an overdose prevention and awareness campaign through local Hispanic media; developing and implementing strategies aimed at utilizing evidence to reduce stigma associated with substance use

disorder, treatment, and harm reduction through a unified community approach; and expanding bilingual outpatient substance use disorder services with on-demand access.

DST next priorities were to develop implementation plans for the recommendations and seek assistance if implementation challenges were encountered, repeat the focus area analysis with suspected nonfatal overdoses among other racial and ethnic groups, collaborate with multiple agencies on identifying current locations and types of naloxone availability across the country and how that overlaid with the density of fatal and nonfatal overdose incidents, enhance and expand the current overdose dashboard based on input from the team and other partners, and request a no cost extension through September 2024.

OFR provided a multi-disciplinary, in-depth review of individuals' fatalities to identify gaps and barriers. Staffing was at two positions. Activities have included bereavement support, referrals to County resources, and ongoing interviews with next of kin. Next of kin information had been valuable addition to the case review process. OFR partners have brought concerns about Delta-8 reactions to the OFR team. Presentation was offered by a health care provider. Additional connections were being made for follow-up on this topic.

Chair Murphy inquired about the Hispanic demographic, bereavement, partnering with MORI, and focusing on the African American demographic.

Ms. Parry and Dr. Kostelac replied. Suspected nonfatal overdoses were highest among Hispanic individuals and concentrated on the near southside. Data was mapped and a mapping can be forwarded. Density was a factor. The Medical Examiner's office would contact families of a suspected overdose in 6-8 weeks and refer to MORI for a response for households with a substance use concern. There was strong partnership with MORI and West Allis. The next demographic focus would be African Americans. They would find out about additional needs and share them.

Chair Murphy said it was important to know of barriers and prevention challenges to help decide on future allocations.

B. Milwaukee Overdose Response Initiative (MORI) data and success stories

Cap. Miller, Chief Lipski, Asst. Chief Parish, and Ms. Fumo gave a presentation regarding MORI data on contacts, treatment referrals and resources, demographics, and barriers to treatment referrals as follows:

MORI was a post-overdose outreach program responding to individuals using narcotics and providing harm reduction. Peers with lived experience were part of the response team.

In 2022, MORI made 4,459 contact attempts to a total of 2,045 unique clients following an overdose. Many attempts were unsuccessful at 57% due to incorrect information or no answer at the residence. MORI engaged a total of 616 (30%) unique clients and 200 (32%) family/friends of unique clients. In total MORI had some contact, whether individually and/or with family/friends, with 40% of all unique clients. Contact attempts and successful contacts began increasing significantly following the addition of a second MORI vehicle in March 2022.

A total of 68 engaged clients accepted MORI's referral to treatment. Month-to-month the percent of clients enrolling in treatment ranged from 4% to 16%. MORI, with assistance from partnering agencies, distributed more than 7,000 treatment resources, family support resources, business cards, and harm reduction items (naloxone, fentanyl test strips, referral to needle exchange program). 221 clients had been directly linked to treatment since the start of MORI in 2019.

The majority of MORI clients were over 40 years of age as follows: 10-19 at 1%, 20-29 at 16%, 30-39 at 24%, 40-49 at 18%, 50-59 at 17%, 60-69 at 11%, and 70-79% at 2%. MORI clients by race and ethnicity were predominantly African Americans at 45%, then white at 30%, Hispanic/Latino at 14%, and other race at 6%. 62% of MORI clients were male.

Clients that were engaged by MORI declined services for a variety of reasons. MORI documented conversations with clients, family, and friends in report narratives. The narratives gave insight to reasons why individuals decided against treatment referrals. Reasons included denying of substance misuse, recent overdose, or need for treatment; no desire to seek treatment, already engaged in treatment, or seeking treatment on their own; and personal barriers (family/children, insurance, work responsibilities). Further investigation into personal barriers will be done with MCW.

Chair Murphy said that there was concern with the uptick trend with African Americans and that allocations should be targeted to groups with higher rates.

Dr. Kostelac said that demographics and the trend towards higher rates for African Americans were captured in their dashboard.

Cap. Miller added that MORI would be involved with distributing Voices of Wisconsin surveys citywide to capture community stories and needs. MORI was also engaged with the MAT Behind the Walls project regarding transportation to services for released individuals from the House of Corrections.

A MORI 15-minute testimonial video was shown at <https://www.youtube.com/watch?v=qUZboqFskIY> regarding MORI's collaborations, impact, and successes on several persons with lived experiences. Information was also given on harm reduction services (Vivent Health Prevention Services and UMOS Health Promotions Syringe Exchange) and treatment services (Clean Slate, WisHope, and Community Medical Services). MORI partners included Milwaukee Fire Department, Community Paramedic EMS, Milwaukee Health Department, and Medical College of Wisconsin.

Chair Murphy commended MORI, peer partners, and member Geiger for their work.

C. BHS programs.

Vice-chair Lappen gave an update on BHS services. BHS continues to operate four community-based access points for substance abuse services where individuals can get free assessment and connection to a network of community services to provide treatment, which could occur mobility. There has been innovative prevention and evidence based programming with community partners such as Better Ways to Cope Campaign. Significant harm reduction efforts included supply of naran, fentanyl test strips, Detera medicine disposal envelopes, locked medication bags, and vending machines. There were five recovery coordination teams, collaborations with peer specialists, operation of a sobering center providing withdrawal management and

treatment, support of AOTA residential treatment and room and board funding, expanding of residential options, and recovery support efforts. Safe and sober bridge housing included Outpatient Plus and Oxford House programs. Oxford House was at 12 houses (8 for men, 2 for women, and 2 for women with children) with 111 total beds. There was 91% abstinence rate at Oxford houses. Oxford House continued to be successful despite ongoing zoning and stigma challenges.

Mr. Tribblett gave a presentation as follows:

25 vending machines with prevention and harm reduction materials would be distributed to agencies across the County over a 3-year period. Materials would include fentanyl test strips, nasal narcan, medication lock bags, deactivation bags, and gun locks. Funding source of the vending machines was from the DHS State Opioid Response SMAHSA funds. Partners included HRI Vending and Vivent Health's Lifepoint program. Vivent would managed the machines and replenish them. Training for the chosen agencies, education the surrounding communities on the machines, and careful strategic locating of the machines were important considerations. Also to be considered would the level of resources in areas already. RFP applications was released with eligibility requirements, and 7 applications had been received thus far.

The Better Ways to Cope campaign would hold a Day of Celebration and Collaboration event on Monday, March 6, 2023 from 9 a.m. to 3 p.m. at the old Grand Avenue mall Milwaukee downtown with prevention specialists, recovering people, community members, and program partners invited. Those who lost their lives to substance use would be remembered. There would be community-based presentations, lunch, and networking opportunities.

All BHS funding projects included Coordination of Opioid Prevention Services (\$1.4M) and Aging and Disabilities Services Prevention Project (\$843K) for prevention; Opioid Educator - EMS (\$407,798), Harm Reduction Supplies (\$392K), Harm Reduction Kits (\$98K), and Narcan Deployment and Education (\$67K) for harm reduction; Medication Assisted Treatment - Behind the Walls (\$2.5M), Residential Substance Abuse Treatment Capacity (\$1.1M), Strengthening Opioid and Substance use Education and Treatment for justice Involved youth (\$800K), Opioid Treatment in the Prehospital Environment (\$537K), and Homeless outreach Project (\$482K) for treatment; and Medical Examiner Staffing Needs (\$1.9M), Harm Reduction Data Analytics (\$720K), Portable Body Cooler (\$192K), and Autopsy Carts (\$20K) for other strategies.

D. Milwaukee Health Department (MHD) projects and next steps
i. BJA COSSAP MDROP

Member Geiger presented. END OVERDOSE MKE would post two RFPs to acquire Milwaukee agencies to fund projects targeting underserved areas n the City with limited resources and health disparities. A consultant would be acquired as a strategic partner for various deliverables including community events, annual overdose prevention summit, sDoH and SUD website, communication efforts to various populations in a culturally competent and sensitive matter. There would also be a bridge housing grant to expand/increase bed availability in underserved Milwaukee communities. Other activities include a MHD health strategy and data teams working closely to use data to inform efforts, use of fatal OD data to analyze substance trends and demographics, layering of OD data with locations to identify potential partners for distribution, assisting in informing efforts with the consultant, and staffing a harm reduction intern and coordinator to increase capacity for education and distribution

efforts.

Ms. Hann, MHD intern, presented on narcan and fentanyl test strip trainings. Field staff have done training sessions and events to direct individuals to pathways for help. Misuse is still occurring. There would targeting towards college students at their campuses and at MPS schools. Other places are being engaged with little response such as gas stations, alcohol stores, and bars. Materials such as fyers and graphics have been distributed and also translated to Spanish. Total MHD 2022 narcan and fentanyl strips distribution were 1,546 and 10,954, respectively.

Ms. Schreiber presented on the Milwaukee Drug Rapid-Testing and Outreach Program (MDROP) through BJA COSSAP 2022. The program would allow for near real time analysis of substances in the community with partnership and collaboration. \$1.6 million over 36 months would be provided. Program partnership included the Medical Examiner's Office, CDC Foundation, HIDTA, and community agencies. Program was in the mist of being staffed. Test results would be shared on a MDROP website and overseen by a technical advisory group.

Member Geiger said that MHD next steps included working with community partners to establish a Community Advisory Board to assist the City on the SUD and OD prevention project and program decision making, collaborating with partners to increase access to and education of MAT while working towards reduction of stigma in the community, purchasing nasal narcan to increase access and distribution abilities, possible partnering with TBMM on allocating narcan to pharmacies for distribution when community members utilize TBMM boxes, and continued leveraging of partners to navigate the City's prevention efforts.

Member Geiger added that leadership had met with NACHO and CDC leadership regarding MORI and MDROP in New York recently, and much was learned and gained from that meeting.

E. Opioid litigation funds
i. County

Mr. Triblett presented as follows:

The Milwaukee County Board approved a settlement agreement in December 2021 for the County to receive \$56.6 million in settlement funds. Any unused funds that remained at the end of the year would be carried over to the new year. County department proposal submissions were in October/November 2022. There was a SBP process team review of proposals' eligibility in November 2022, review panel scoring and funding recommendations in November/December 2022, County Executive's approval of funding recommendations in December 2022, and County Board of Supervisors' approval of funding authorization in February 2023.

Litigation funds through Milwaukee County CARS was for 19 municipalities involving a more defined focus on treatment, various funding streams re-granting process, and harm reduction machines. There was partnership with Milwaukee Health Department for referral mechanism, elimination of COOP-ATITION, HOPE kits, leveraging of resources, and community start/end process.

There would be Milwaukee County Virtual Community Conversation sessions via Zoom to solicit feedback on the regranting of opioid settlement funds to organizations with

innovative ideas for Tuesday, February 21, 2023 from 3:30 p.m. to 5:30 p.m. and Tuesday, February 23, 2023 from 10 a.m. to 12 p.m. Registration was required. An in-person session(s) would also be planned for March in the south side, smaller municipalities, and across the County.

ii. City of Milwaukee

In addition to joint activities with the County, Member Geiger said that City litigation funds via the Milwaukee Health Department would be used towards END OVERDOSE MKE, MORI, harm reduction training and distribution, RFP for a consultant to act as a strategic partner, work with the recovery community, and towards targeted neighborhood approach.

F. Other

Chair Murphy concluded that much activities were being done from both the County and City and he was hopeful to see impact and reduction in overdoses.

5. Public comments.

There were no public comments.

6. Agenda items for the next meeting.

To be determined.

7. Set next meeting date and time.

To be determined.

8. Adjournment.

The meeting adjourned at 2:31 p.m.

*Chris Lee, Staff Assistant
Council Records Section
City Clerk's Office*

Meeting materials for the task force for 2023 can be found within the following file:

[221434](#)

Communication relating to the 2023 activities of the City-County Heroin, Opioid and Cocaine Task Force.

Sponsors: THE CHAIR

This meeting can be viewed in its entirety through the City's Legislative Research Center at <http://milwaukee.legistar.com/calendar>.