



Meeting Minutes

CITY-COUNTY HEROIN, OPIOID, AND COCAINE TASK FORCE

BEVAN BAKER, CHAIR Michael Lappen, Vice-Chair Karen Loebel, James Mathy, Ald. Michael Murphy, Ald. Khalif Rainey, Mayor CoryAnn St. Marie-Carls, Brian Peterson, Christine Westrich, E. Brooke Lerner, Marisol Cervera, and Michael Macias

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Friday, December 1, 2017

9:00 AM

Room 301-B, Third Floor, City Hall

1. Call to order.

Meeting called to order at 9:08 a.m.

2. Roll call.

Mayor Tom Barrett appeared and gave brief remarks. The opioid and heroin crisis is very serious. Current data is shocking and depicts a true crisis. He is appreciative for the collaboration between the County and City. The view of the current crisis as compared to the heroin and crack crisis in the 1990s is telling. A book called "Dreamland" book describes how the opiate epidemic got to where it is today. Task force recommendations will be taken seriously.

- Present 8 Murphy, Rainey, Baker, Peterson, Marie-Carls, Lerner, Mathy and Lappen
- Absent 1 Macias
- Excused 3 Westrich, Loebel and Cervera

3. Review and approval of the previous meeting minutes from Aug. 18, Oct. 21, and Oct. 28, 2017.

The meeting minutes from August 18, October 21, and October 28, 2017 were approved without objection.

Ald. Murphy commented. He participated at a Marquette University panel yesterday on the opioid crisis. The panel was made up of individuals with local, national, and medical perspectives. The panel was well attended with about 350 people. Much of the focus was on best practices going forward to address the problem. There has been research done on drugs being used to counter opioid and heroin addiction, such as Vivitrol and antibiotics. He raised a few points at the panel. The crisis is getting worse, and solutions are needed at all levels. The racial dynamics of the current crisis when compared to the 1980s and 1990s crack epidemic shows the disparity of negative treatment and incarceration of the poor, Blacks, and Latinos back then as opposed to the treatment response being given towards the white community today. The view is changing to show that substance abuse is a brain disease. More people are dying due to opioid and heroin use than those who died from the whole Vietnam War. The opioid and heroin crisis has not received the same level of emergency response and resources as those given to other diseases, such as the Zika virus. The fire departments are doing a tremendous job of saving lives with Narcan administration. About 2900 people have been saved with Narcan administration through the Milwaukee Fire Department. Surprisingly very few who overdose were repeat users in the City, and a majority (about 2500) of those who overdosed lived in the City as opposed to coming in from outside the City. The County has received state and federal grants. The City has allocated in its 2018 budget \$50,000 towards a media/messaging prevention campaign. The Medical College of Wisconsin and Zilber Family Foundation are also contributing funds for the campaign.

Commissioner Baker commented. He had attended a grand opening of the CleanSlate this week in Glendale. The new facility is one of the best for medication assisted facilities.

4. Review of public comments from community meetings.

Commissioner Baker commented. Member should discuss possibly incorporating recommendations from the two community meetings from October 21 and 28, 2017 into the task force work plan. Much of the public testimony showed firsthand impact and investment to be part of the solution.

Mayor St. Marie-Carls remarked. A recommendation, from nurses who had testified, is to incorporate the need for a more transitional care or comprehensive support team for those in substance abuse recovery at the same degree as the level of care given to individuals suffering from other medical issues. There is transitional care out there; however, the stroke model, which is very successful, needs to be mimicked.

Ald. Murphy said that those in substance abuse recovery, oftentimes, lack comprehensive assistance, are referred to resources, and have to depend upon themselves to seek treatment or assistance.

Administrator Lappen said that the County has a program called Comprehensive Community Services (CCS). The CCS program offers successful team supportive services to those in substance abuse recovery, is client driven, is funded through Medicaid, has capacity for about 1400 participants, is fully funded through State, has no cap, is underutilized, and is fighting against stigma and a lack of awareness. Many can be enrolled into CSS on the same day.

Dr. Lerner commented. A recommendation to incorporate from the public testimony is to partner with schools to address the youths for early awareness and prevention. West Allis/West Milwaukee has been doing pilots their schools.

Commissioner Baker commented. A long-term comprehensive case management transitional recovery care model for substance abuse needs to be looked at as well as its reimbursement scheme. Current lack of funding and reimbursement schemes do not allow for such a capacity to occur. The stigma of substance abuse has been the biggest barrier to full comprehensive treatment. The CSS program needs to be utilized and should not be underutilized. Perhaps the anticipated City media campaign can include the CSS program and schools. Perhaps a school campaign should

include screening students and parents.

Mayor St. Marie-Carls added that the Intergovernmental Collaboration Council (ICC) will contribute \$10,000 towards a kickoff awareness event with the involvement of health departments (WALHDAB) and buy-in from local mayors. A goal would be to include a wake-up room showing the signs of addiction.

5. City-County efforts, programs, initiatives, grants or activities.

a. Take Back Your Meds media and communication plan

Individuals appearing: Jonathan Richards, Take Bake My Meds MKE Coalition (TBMMM) Thad Nation, Nation Consulting Susan Seidelman, Victoria Communications Kathy Schmidt, Medical Society of Milwaukee County Steve Jacquart, Milwaukee Metropolitan Sewerage District (MMSD)

Mr. Richards commented. TBMMM is comprised of 4 core principal groups: Medical Society of Milwaukee County, Clean Wisconsin, MMSD, and Public Policy Institute. The goal of the coalition is to make it as easy for County residents to safely dispose of unused medications. Less than 10% is being collected in the County. The connection between the opioid crisis and unused medication is clear. 80% of heroin users have previously used nonprescription drugs for medical reasons and get the vast majority of the medicines from friends and family. The messaging for drug take back is underfunded and fragmented. Few know about where to dispose of unused medicines and the connection between unused medicine and the opioid crisis. TBMMM is working on improving its messaging and has created a communications plan for the community to use for drug take back. TBMMM is requesting for any available funding to go towards the TBMMM public awareness campaign and for the task force to adopt the TBMMM communications plan into its work plan.

Mr. Nation said that the communication plan can target multiple populations electronically, go into hotspots with social media, test populations, be an active campaign, get live responses, link people to resources, and be incorporated into the newsletters or vehicles of public officials and through other platforms.

Ms. Seidelman commented. The plan includes full branding guidelines, a media plan, a citizen engagement campaign, an advertisement campaign, and a timeline. Core messaging has been created to inform the general public to safely dispose medication through TBMMM drop boxes. Digital messaging is effective and a focus. Facebook page and advertisement is being utilized and is effectively driving people to the TBMMM official website recently. The TBMMM website has a map of drop box locations. 92% of website visitors live in Wisconsin and 80% live in the County. The coalition is working to recruit more sponsors for drop boxes and increase the network. The budget goal is for up to \$150,000 for digital media implementation of the plan. Additional funding beyond \$150,000 would enable a larger campaign and use of radio and television advertising.

Ms. Schmidt said that the plan is targeting 6 audiences: pharmacies to host new drop sites, be supplied materials, and for their staff be trained; businesses and organizations to sponsor drop boxes and be supplied materials; physicians to talk with patients and give them disposal information; law enforcement to be supplied with

materials and signage; funeral directors to be trained on giving disposal information; and politicians to be supplied content for their newsletters.

Mr. Jacquart commented. Pouring medicines into the water and sewerage system posed a threat to the water resource system and Lake Michigan. Water reclamation facilities are not designed to remove drug contaminants. MMSD commission has committed \$15,000 to the communications plan. MMSD has in-house ability to produce public service announcements.

Members questioned the number of drop boxes, prioritization of drop box sites, costs involved, and take back events.

Mayor St. Marie-Carls said that that planned kickoff event would include TBMMM.

Mr. Richards replied. There are 46 drop boxes in County, 7 in each district police station, and 5 in the City. Drop boxes have been widespread in the County wherever possible. The first adopted drop box is at 55th St. and Burleigh St. at Hayat Pharmacy. TBMMM is trying to expand the number of drop boxes with the goal to have a drop box at every pharmacy. Installing a drop box at a pharmacy involves contracting with reverse distributor for the supply of the drop box, transport of medicines, and destruction of medicines. The reverse distributor is simple, is used by Hayat Pharmacy, Walgreens, and around the country, and is different from the police department model. The police can take and hold unused medicines for evidence. There is an issue of sponsorship and costs. There was reuse of a mailbox being converted into a drop box at St. Francis City Hall. Irrespective of the location of drop boxes, people need to know and be educated to use them. Take back events should be an everyday event and not periodically every six months or so.

Commissioner Baker said that TBMMM should look at possibly pursuing the settlement money that would result from County litigation efforts towards pharmaceutical companies (Big Pharma).

Mayor St. Marie-Carls left the committee at 10:04 a.m.

b. Milwaukee Fire Department Narcan use and calls for service

Individuals appearing:

Steven Riegg, Milwaukee Fire Department EMS Deputy Chief Shaun Doyne, Milwaukee Police Department Narcotics and HIDTA

Chief Riegg gave a PowerPoint presentation and overview. There are 36 fire houses in the City with information on the number of overdose calls within the boundaries of each station from January 1, 2017 to December 9, 2017. The top 5 stations that received the most number of overdose calls were station 26 (26th St. and Greenfield Ave.), station 31 (8th St. and Hayes Ave.), station 13 (30th St. and Locust St.), station 23 (9th St. and Greenfield Ave.), and station 34 (60th St. and Burleigh St.). 3 out of the 5 top stations are on the near south side. Station 26 received about overdose calls, and Narcan was administered 112 times in response to those calls. STA-26 station 26th and Greenfield area - 230 overdose calls, 112 narcan administered from those calls.

Ald. Murphy commented. The data shows that individuals are taking drugs close to where they purchase or acquire them, there is a hotspot or corridor in the near south side between National Ave. and Greenfield Avenue from 1st St. to 60th St. Much

dealing is occurring in this area. The data is helpful for law enforcement to target resources.

Ald. Murphy inquired about interdiction efforts for the identified near south side area.

Officer Doyne replied. Data is being looked at, and police are focused on the near south side. The near south side is a problem area with much higher occurrences in the houses. On search warrants, Narcan has been found inside homes. Sex trafficking has a role with prostitutes found to be addicts. Police is going after mid-to-high level dealers to disrupt the supply. There were two such cases that created a vacuum afterwards in the near south side.

Ald. Murphy commented. There does not seem to be as many Hispanic deaths when compared to Caucasian deaths. Fentanyl is being made in China, sent to Mexico, and brought up to the state. Cartels are involved in transporting fentanyl up to Chicago and Milwaukee.

Administrator Lappen said that there is opportunity for collaboration between law enforcement and communities to extend treatment options to individuals in response to the vacuum created from interdiction.

Officer Doyne commented. The overdose rates for fentanyl have exceeded street heroin and is truly driving the problem. There is no longer a pure heroin supply. PDMP has made pills harder to get resulting in people going to heroin, which is becoming more potent with fentanyl mixed in. Fentanyl is more profitable than heroin and costs less than heroin. Cartels are using the same routes of cocaine and heroin to bring in fentanyl. Interdiction may recover all 3 drugs. There have been arrests for those with smaller amounts of fentanyl, and police is always looking to arrest a kilo suppler. The Drug Enforcement Administration (DEA) has the 360 Program that includes treatment after a roundup.

Ald. Murphy commented. Perhaps the media campaign can target and bring awareness to prostitutes and users directly through short-term collaboration with police, DEA, and fire departments. Fire department responders may be more appropriate to have direct contact with users due to their more trustful appeal. Everyone should think about DEA best practices and treatment on concentrated areas and treatment.

Ald. Murphy questioned the responses of users and the high of fentanyl compared with that of heroin.

Officer Doyne replied. Addicts should be encouraged to do test doses. Other cities have done test dose campaigns, which can be challenging. Some users are afraid of fentanyl while others are not. Some want to use fentanyl due to being a hot drug. Fentanyl is a better high but does not last as long as heroin. Fentanyl is being mixed with heroin. There have not been any pill mills seen with fentanyl disguised as oxycodone. HITDA is looking into incorporating an overdose map system that would allow first responders to instantly enter overdose locations, see real-time information, and direct resources immediately through interdiction or via public health community partners to infiltrate an area. Data being looked at now is oftentimes old information and is too late for police to react to. The overdose map is being looked at to be part of the CAD system.

Dr. Lerner commented. A key piece other than enforcement for impact with regards to a mapping software is to identify a community partner to engage or inform users. Any mapping should be shared with the community.

Officer Doyne commented. A partner has not been identified. HIDTA is co-located with Safe and Sound, which can be a community partner. The problem cannot be solved through arrests. Arresting people may not benefit them. People may be at risk with a lower tolerance after release from jail.

Chief Riegg continued the PowerPoint overview. A large clumping of addresses that were dispatched as or found to be as overdose addresses were in the near south side more so than that of any other part in the City. There were 2909 patients from 2876 incidents, which show that some incidents involved more than one overdose patient.

Ald. Murphy inquired about instances of repeat offenders.

Chief Riegg replied. The expectation was for a large number of repeat offenders. Surprisingly, a majority of patients seen were overdosing for first time. Few were second offenders. A very few, about 5 to 10 people have been called to from 9-1-1 more than 3 times with the most being is 5 times for the year. Incidents of Narcan administration was 1088 patients from 1069 incidents. The largest cluster of Narcan administration was in the near south side. Based on patient identification, a majority of patients reside in city, 281 reside outside the city but within the state, and 41 live outside the state.

Commissioner Baker commented. The game has changed. All avenues must be to address the epidemic. Metrics do not lie and show that the County and City region is the epicenter of the crisis in the state. First responders are to be commended for their efforts thus far.

Ald. Rainey left the committee at 10:27 a.m.

The meeting adjourned at 10:27 a.m. due to the lack of quorum.

- 6. Review of work plan.
- 7. Public comments.
- 8. Task force final findings and recommendations (no later than February 2018).
- 9. Next meeting dates and times.
- **10.** Agenda items for the next meeting.
- 11. Adjournment.

The meeting adjourned at 10:27 a.m. after item 5 due to the lack of quorum.

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

Matters to be considered for this meeting and materials related to activities of the task force can be found within the file:

- **161554** Communication relating to the 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.