

Meeting Minutes

CITY-COUNTY HEROIN, OPIOID, AND COCAINE TASK FORCE

ALD. MICHAEL MURPHY, CHAIR Michael Lappen, Vice-Chair Karen Loebel, James Mathy, Ald. Khalif Rainey, Brian Peterson, Christine Westrich, Marisol Cervera, Michael Vann, Ryan Shogren, Daniel Bukiewicz, and Jeanette Kowalik Staff Assistant, Chris Lee, 286-2232, Fax: 286-3456, clee@milwaukee.gov Legislative Liaison, Tea Norfolk, 286-8012

Friday, April 12, 2019 9:0	00 AM	Room 301-B, Third Floor, City Hall
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1. Call to order.

Meeting called to order at 9:04 a.m.

2. Roll call.

Present 9 - Murphy, Lappen, Loebel, Mathy, Westrich, Vann, Shogren, Bukiewicz, Bhattacharyya Excused 2 - Peterson, Cervera Absent 1 - Rainey

Mr. Sanjib Bhattacharyya serving as a member for this meeting in place of member Jeanette Kowalik.

Member Mathy joined the task force at 9:17 a.m. during item 6.

3. Introduction of new member.

Chair Murphy welcomed member Vann as a new member being appointed by Milwaukee County Dept. of Human and Health Services director and representing a person with lived experience.

Member Vann made brief remarks. He has 42 years of sobriety from heroin use and is a Clinical Substance Abuse Supervisor at the Wisconsin Resource Center mental health facility. He hopes to help those incarcerated persons with substance abuse. People are dying after being released, and the Dept. of Corrections should do more to address the recidivism issue.

4. Review and approval of the previous meeting minutes from November 30, 2018.

Vice-chair Lappen moved approval, seconded by member Westrich, of the meeting minutes from November 30, 2018. There was no objection.

5. Review of Dayton, Ohio opioid report and harm reduction strategies.

Vice-chair Lappen commented. The City of Dayton was impacted severely and was able to improve with prevention and treatment efforts with much paralleling task force efforts. Their report, strategies, and efforts are a great example of improvement happening elsewhere.

Chair Murphy commented. Ohio took advantaged of federal Medicaid funding to save many lives there. The desire is for Wisconsin to acquire those same federal resources. The prior Wisconsin administration had refused those federal resources.

6. Presentation on the cost effectiveness of Naloxone distribution.

Individuals appearing: Tiffinie Cobb, Milwaukee Health Dept. Isbah Noor Bader, UW-Milwaukee Zilber School of Public Health Master of Public Health candidate

Member Mathy joined the task force at 9:17 a.m.

Ms. Bader gave an overview on Overdose Education and Naloxone Distribution (OEND) *Programs as follows:*

OEND programs train laypersons to recognize an overdose, take appropriate steps, and administer naloxone. The programs vary in format and targeted audiences. Goals are to increase access to naloxone and reduce community overdose mortality rates.

OEND programs are cost-effective. Bystanders are more likely to administer naloxone in a timely manner. It is cheaper to administer medication outside of a hospital setting. If EMS services are still required, patients are likely to appear in hospitals in better condition, requiring less costly resources.

Midwest OEND program costs and outcomes for 2017-2018 were \$100,000 and 73 overdose reversals for the Waukesha Health and Human Services Dept. (WI), \$103,000 and 25 overdose reversals for the Sauk County Health Dept. (WI), \$502,000 and 600 overdose reversals for the Grand Rapids Red Project (MI), \$225,000 and 121 overdose reversals for the Kane County Health Dept. (IL), and \$65,000 and 140 successful treatment referrals (2018) for the East End Community Services (OH).

Conversations for Change from Dayton, Ohio can be a potential event model for Milwaukee County. The goals were to engage those with addiction through education and recovery-oriented program and integrate naloxone distribution with recovery support through 1:1 counseling, 30 plus community partners, Medicaid sign-ups, and naloxone training. Outcomes as of May 2018 showed 20% or 141 participants successfully having sought treatment after attending the event. There were cost-savings resulting from Narcan distribution in addition to successful treatment referrals. Treatment is less expensive than the non-treatment of those with addiction or incarcerated. Every dollar spent on treatment yields a return of \$4-7 in reduced crime-related costs.

Recommendations include pairing naloxone training/distribution with other intervention approaches whenever possible to yield maximum cost-savings, targeting opioid users and their social networks, using intervention as a collaborative opportunity, and building data collection, data sharing, and program evaluation methods into program.

Members inquired about Milwaukee OEND efforts compared to the efforts of Dayton,

laws protecting bystanders, expired naloxone, program funding, and data collection.

Ms. Bader replied. Dayton had Medicaid expansion, created a task force, created Conversations for Change, created programs, and visited homes. Milwaukee's task force is a first step and can expand from there. There are Good Samaritan laws protecting bystanders. The program was grant funded with a nonprofit doing outreach, logistics, and partnering with health agencies to supply Narcan. She can inquire with Dayton and respond back on the issue of expired naloxone.

Ms. Cobb said that the Milwaukee Health Dept. has a partnership with the Zilber School of Public Health where data collection and research can be done.

Chair Murphy said that there are existing programs and agencies that can be utilized to do a similar event in Milwaukee with the assistance of the Milwaukee Health Dept.

Vice-chair Lappen commented. There is people power to do a pilot event and bring representatives for 1:1 opportunities. The Behavioral Health Division can be a sponsor, and philanthropic sponsors are possible.

Ms. Bader added that the event needs buy-in from everyone, is very viable, an obstacle is funding, and grants are available to obtain Narcan.

7. City-County efforts, programs, initiatives, grants or activities update.

Ms. Cobb gave an update. The Milwaukee Health Dept. received \$40,000 from the State to enhance public health preparedness efforts, is engaged with law enforcement, and will implement a public awareness campaign along with other creative implementation. More information about other activities, partnerships, and programs will be shared as they develop.

Chair Murphy gave an update. There is in the City budget funds for the Milwaukee Fire Dept. to expand service to victims with further personnel support beyond supplying people with referral cards. The program will be announced in early May and will be applied first on the south side where overdose has been most prevalent. Recent data from the Medical Examiner's office has shown the constant of fentanyl deaths, small drop in heroin deaths, and increase (doubling) of cocaine deaths, and a large footprint of acetylfentanyl in the County.

Vice-chair Lappen gave an update. Community Medical Services (CMS), a new Medication-Assisted Treatment provider, had an open house on March 21st. It will be Wisconsin's first 24-hour opioid treatment program and was made possible by federal strategic opioid funds and state grant. The County is in process of contracting with CMS to fund those without health insurance to receive their services. BHD will contract with and assist Oxford House with funding, logistical support, and a community outreach worker to acquire properties and establish sober housing in Milwaukee. Oxford Houses are self-governed and operated sober housing operating nationally and in Wisconsin. A hope is to establish 3 to 5 Oxford housing in one year. There has been a challenge to find a location for one sober house under the Outpatient Plus program. The vendor failed to get special use approval for one proposed location that would have served 36 persons.

Lesley Wimmer Kelly, Community Medical Services, appeared and commented. Licenses are in place. Anticipated opening is in the next few weeks when medication have been ordered.

8. Discussion on task force extension, purpose, tasks, and responsibilities.

Chair Murphy said that the task force was extended to meet quarterly to continue studying the problem of opioid, heroin, and synthetic analog and cocaine (in both powder and crack form) misuse and addiction in Milwaukee and to review and monitor the progress of its recommendations to reduce fatal and nonfatal overdose within the community.

Ms. Cobb questioned the task force on what to collectively accomplish for the year, what efforts it would take to be successful, how to be accountable for achievements, what is missing from task force work, and the next steps moving forward.

For an accomplishment members discussed getting funds to implement a program like the City of Dayton, having a long term 3-5 strategic plan that is flexible, taking into account the prevalence of methamphetamine, focusing on data collection and sharing with existing resources, and being more involved with opioid public health sectors.

For efforts to be successful members discussed tracking the success and failures of programs via data, demanding accountability from agencies to share data, having a central data point (i.e. Milwaukee COPE or Health Dept.), focusing services on targeted populations especially for those incarcerated, maximizing available resources, having creative funding mechanisms from nontraditional sources, implementing cost saving strategies like the new St. Anthony Apartments homeless housing, and increasing access to Vivitrol to reduce recidivism.

For accountability members discussed developing and applying proper metrics towards recommendations, having evaluations of those metrics, demanding vendors to share and integrate data, and addressing the long term.

For missing components members discussed adding to the task force membership the Milwaukee Fire Department as a representative of the impactful Mobile Integrated Health, possibly by the next meeting.

For next steps members discussed lobbying to the State to expand Medicaid care with a letter and implementing everything discussed.

9. Public comments.

Individuals appearing to testify: Megan Bielinski, Milwaukee Community Acupuncture Paul Mozina Kristen Grimes, AIDS Resource Center of Wisconsin

Ms. Bielinski testified advocating for acupuncture of the ear as an assessible and affordable solution to reduce stress and substance addiction. MCA will be doing training in May, is looking for partnerships, and is doing awareness outreach.

Mr. Mozina testified that the definition of substance abuse disorder should be reconsidered, to advocate changing the laws to decriminalize unwanted drugs such as cannabis, to advocate repealing the federal Controlled Substances Act, to have a long term strategy to teach people early on to be accountable for their own bodies, that 3

police officers needlessly died pursuing persons using self-medicating drugs such as cannabis, and that government cannot legislate its way out of the issue.

Ms. Grimes testified that ARCW gets funding for naloxone distribution, had served 2038 individuals in 2018, does training and education via the needle exchange program and community visits, does 1:1 training on demand, is piloting fentanyl testing strips, and provides data to the State.

Chair Murphy said for ARCW to supply its data to the task force via Ms. Cobb and Bader.

10. Agenda items for the next meeting.

To be determined.

11. Set next meeting date and time.

To be determined for late July or early August.

12. Adjournment.

Meeting adjourned at 10:18 a.m.

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

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

Materials from this meeting can be found within the following Common Council file:

181805Communication relating to the 2019 activities of the City-County Heroin,
Opioid and Cocaine Task Force.

<u>Sponsors:</u> THE CHAIR