

# Meeting Minutes: Opioid Epidemic Response Advisory Council (OERAC) Meeting

**Date and time of meeting:** June 18, 2021 from 8:30am to 11:30pm

**Meeting Location:** Microsoft Teams meeting

**Participants:** Nicole Anderson; Dave Baker; Heather Bell; Joe Clubb; Chris Eaton; Dana Farley, Sarah Grosshuesch; Alicia House; Katrina Howard; Tiffany Irvin; Erin Koegel; Gertrude Matemba-Mutasa; Toni Napier; Kathryn Nevins; Darin Prescott; Anne Pylkas; Jolene Rebertus; Judge D. Korey Wahwassuck; Randy Goodwin (future DOC representative); Minnesota Management and Budget (MMB): Kristin van Amber; Minnesota Department of Human Services (DHS): Boyd Brown; Tara Holt; Sam Nord; Johanna Schels

## Meeting Goals

Meeting goals per the agenda, dated 18-June-2021, and emailed to OERAC members by Tara Holt on 16-June-2021:

1. Motion to approve the next steps identified by the OERAC Health Equity Subcommittee
2. Continuation of discussion to determine 2021 funding priorities

## Ground Rules, Welcome, Meeting Goals, Agenda

Kristin van Amber - 8:30am - 8:45am

- Kristin van Amber reviews the ground rules and welcomes guests. She explains the meeting goals and reviews the agenda.
- OERAC members introduce themselves.
- Kristin van Amber explains the procedure for the public comment period to guests and advises OERAC members that a quorum is needed for the motions on the agenda.

## The Office of Minnesota Attorney General Keith Ellison --

Eric Maloney - 8:45am - 8:50am

Since the OERAC meeting on 19-February-2021, there is no update on the McKinsey settlement in connection with consulting services to Purdue Pharma and other opioid producing companies. For details about the settlement, please refer to the OERAC meeting minutes, dated 19-February-2021, or go to the website, The Office of Minnesota Attorney General Keith Ellison:

[https://www.ag.state.mn.us/Office/Communications/2021/02/04\\_McKinsey.asp](https://www.ag.state.mn.us/Office/Communications/2021/02/04_McKinsey.asp)

The Office of the Minnesota Attorney General has been meeting with officials of cities and counties across Minnesota within the frame of a general outreach, because cities and counties will receive the funds from the settlement.

## Opioid Legislative Status

Tara Holt - 8:50am - 8:55am

DHS has been waiting on the Legislature to pass the Health and Human Services budget. As of 18-June-2021, it is unknown if and how OERAC may be affected by the budget when it has been passed.

## Public Comment

8:55am - 9:15am

Colleen Ronnei, Executive Director of Change the Outcome – 10 minutes

- Change the Outcome is a program for “prevention education for youth.” Colleen Ronnei and her staff work closely with schools across Minnesota to share their program’s curriculum and to teach students about what they need to know:
- What are the current trends with regards to high-risk drugs?
- How do I advocate for myself? Students are encouraged to ask their health care providers questions about medications and how to use them safely.
- Students learn about genetics and mental health issues as a risk for substance use disorder (SUD).
- How do I recognize a drug overdose? Students receive a card explaining signs of drug overdose, steps to take, and whom to contact.
- Students learn about Steve’s Law and about Narcan and how the medication works, including how to access it and how to administer it.
- Students learn that SUD is a chronic disease and how to avoid it.

Colleen Ronnei met with the Minnesota Department of Education (MDE) to discuss the subject, prevention education for youth in Minnesota’s schools. MDE seemed not very interested, which is difficult to understand given the ongoing opioid epidemic in Minnesota. Since 2017, staff of the program, Change the Outcome, met with 40,000 students, educators, parents, and community members in schools, universities, faith communities, parent organizations, and business organizations. It seems Minnesota schools are interested in offering this curriculum to their student populations. Why is MDE not interested?

Colleen Ronnei also met with Dana Farley of the Minnesota Department of Health (MDH); Dana is an OERAC member. MDH welcomes efforts of any organization that works toward effective intervention and prevention of drug use, including opioid use disorder. For example, the increased use of the synthetic opioid, Fentanyl, by youth must be discussed. Fentanyl is often mixed with heroin, methamphetamine or cocaine. Counterfeit pills, also known as fake medicines, must also be discussed as a high-risk drug trend. With respect to prevention education for opioids, the program, Change the Outcome, works with Law Enforcement as well.

Most students are not familiar with Steve’s law, also known as Minnesota Good Samaritan/Naloxone legislation: Minnesota Statute 604A.04 Good Samaritan Overdose Prevention

The program, Change the Outcome, wants to change that. Kids should know about the law, and this is why an effective curriculum is needed in schools. Again, teachers and students in schools across Minnesota have been asking for this curriculum. The program, Change the Outcome, conducted almost 10,000 student surveys to back up their claim.

The components of the program, Change the Outcome, are:

- Pre-program survey
- View documentary
- Classroom “panels” provide honest open conversations with students
- Student information sheets/Call for help card
- Post-program survey
- Results of pre/post data sent to teacher (Refer to PowerPoint presentation: Change the Outcome, Colleen Ronnei, Executive Director, dated June 18, 2021)

Dana Farley of MDH helped develop the student information sheet.

Colleen Ronnei expresses her gratitude to the OERAC and hopes to work with them on prevention education issues.

## **Open Public Comment**

Max Coleman requested public comment. He has been pursuing a Master of Social Work and identifies as American Indian. He has experienced a lot of hardship in the last few months, because of a friend dying from a drug overdose. He expressed concerns about the reactionary response by an OERAC member in the OERAC meeting on 21-May-2021. The response pertained to American Indian representation on OERAC. Max suggested reactionary comments of OERAC members should be called out and there needed to be equitable representation on OERAC.

## **Motion on the OERAC Health Equity Subcommittee Recommendations**

Tara Holt - 9:15am - 9:20am

OERAC Health Equity Subcommittee update by Tara Holt of BHD/ DHS:

DHS has been working on some aspects of prevention and will provide an update as soon as possible.

Motion to approve the meeting minutes for the OERAC meeting on 21-May-2021.

Motion was passed. The meeting minutes for the OERAC meeting on 21-May-2021 have been approved.

Motion to approve the OERAC Mission Statement, Part 1 and Part 2 (please refer to slide 11 of PowerPoint presentation, Opioid Epidemic Response Advisory Council, dated June 18, 2021, by Kristin van Amber of MMB).

Mission statement, part 1: [...] to ensure responsive... (This will be corrected.)

Motion was passed. Part 1 and part 2 of mission statement have been approved.

Motion to approve Proposed Plan, Part 1 and Part 2 (please refer to slide 12 of PowerPoint presentation, Opioid Epidemic Response Advisory Council, dated June 18, 2021, by Kristin van Amber of MMB).

Motion did not pass. This plan needs more work.

Introductory paragraph and Part 1: Social Drivers of Health (SDOH)

A definition is needed for SDOH to ensure all understand this term in the same way. The suggestion is to develop a glossary with technical and legal terms, and to attach it to the plan.

Part 2: Change “evaluation plan” to “outcome monitoring” to mirror the legal language.

Regarding the Proposed Plan, the consensus of OERAC members is:

Request for Proposal (RFP) language should be drafted by applying the “lens of equity.” All involved, OERAC and BHD/ DHS, aim to reach out to possible grantees (of OERAC funding) to ensure that OERAC and BHD/ DHS, as the grantors, understand what grantees want to do with the funding and how they want to implement, operate, and expand their programs. It is important to simplify the language in the RFP so that organizations with less resources increase their chances to win a grant award.

There must be a balance between a) simplicity of responding to an RFP, using user-friendly, fillable forms and b) the capacity of the responding organization and their ability to perform what they promise. OERAC cautions that some small possible grantees may not be able to look at an RFP through the “SDOH” lens. If OERAC and BHD/ DHS want a perfect response to a RFP, they will not get it from a community that needs the funding most. The words are direct but clear: simplify the RFP content so that the most vulnerable communities have a chance to receive funding.

Next step: The OERAC Health Equity Subcommittee is responsible for collecting the communities’ responses to the RFP (Tara Holt).

## Break

9:20am - 9:25am

## 2021 Funding Priorities Planned Presentation Discussion

Kristin van Amber - 9:25am - 11:00am

Kristin van Amber of MMB reviews what OERAC members worked on in the OERAC meeting on 21-May-2021.

- Review of the OERAC legislation funding requirements
- Review of the 2020 funding priorities

- Review of the 2021 funding priorities process proposal
- Identification and prioritization of topic areas covered in the MDH opioid overdose deaths presentation

In today's OERAC meeting, the tasks are:

- Review the Community Survey results
- Discuss how community members will be selected
- Discuss the process for posing questions

## Community Survey

### Survey question 1:

Which 3 communities below would you most want to hear from at an upcoming OERAC meeting?

African American; American Indian; Asian communities; BIPOC community; East African Communities; Homeless population; Latino communities; Youth.

### Survey question 2:

Which 3 groups below would you most want to hear from at an upcoming OERAC meeting?

Chronic pain community; Individuals in active opioid [fill in]; Individuals that are [fill in]; Homeless individuals; Urban and rural areas.

### Survey question 3:

Which 2 or 3 professional communities below would you most want to hear from at an upcoming OERAC meeting?

Alternative medicine; Business communities; Detox/Withdrawal management; Opioid use disorder; Recovery communities; School (administration); Chronic pain providers.

### Survey question 4:

Within each community which individual below would you most want to hear from?

Individuals experiencing [fill in]; Families and friends of [fill in]; Specialist (physicians...); Community (public safe...)

### Survey question 5:

How long should the presentations be?

15 minutes; 30 minutes; 45 minutes; 60 minutes; 90 minutes.

Note: For Community Survey Results, please refer to slide 17, slide 18, slide 19, slide 20, and slide 21 in PowerPoint presentation, Opioid Epidemic Response Advisory Council, dated June 18, 2021 by Kristin van Amber of MMB.

Only 11 of 21 OERAC members responded to the aforementioned survey questions, despite the fact that there is a “serious epidemic.” It was explicitly pointed out that American Indians should be invited.

The question was asked: “If we are being equitable, do we need to hear from all communities?”

A discussion around equity followed, and OERAC members affirmed they will “try to listen to groups who feel they have not been treated equitably.” Another concern was: “How do we (OERAC) get enough input on alternative therapies?” The suggestion was: “We (OERAC) need to find a way to include things (therapies) that are out of the ordinary knowledge of people.” OERAC members agreed that “this is an ongoing process of learning from the communities.” However, the time OERAC members have is limited and there is no strategy right now for how to reach all groups. OERAC members agreed on this proposition: “To have equitable access, we (OERAC) need to create equitable access.” OERAC needs to reach out to groups and communities (affected by the opioid crisis).

### **Survey question 6:**

Who will be invited to present?

- How to present all of these perspectives?

Normally, there are 10 minutes set aside for guests who want to speak during a public comment period.

Is there an opportunity to embed three public comment periods into the monthly OERAC meeting? How do groups and communities know they may contact DHS to request time to voice their feedback and concerns in a monthly OERAC meeting? Can DHS get involved and reach out to the groups and communities?

The COVID-19 epidemic had an impact on OERAC meetings. It is difficult to receive more feedback from groups and communities in a meeting that takes place once a month and lasts from three to four hours.

The town hall meeting, also known as town hall forum, seems to be a suitable format for public outreach. Should DHS continue to approach the groups and communities, and then physically go to them?

Does OERAC and DHS need to prioritize town hall meetings by hosting them in the communities most impacted by the opioid crisis? The suggestion is that BHD/ DHS plan and facilitate town hall meetings in the respective communities, while at least one OERAC member is present in the meetings.

OERAC members are aware that American Indians want more representation. OERAC and BHD/ DHS will reach out to Vernon LaPlante of the Minnesota Indian Affairs Council to ask American Indian Tribal leaders or their designees to join OERAC and BHD/ DHS in the discussion and ensuing efforts.

OERAC asks DHS representatives Tara Holt and Boyd Brown whether BHD/ DHS can gather data in addition to the data that is already available about American Indians and how the opioid crisis has affected them. The question was: “Can the data be pulled together and sliced differently to have even more data?”

Tara Holt of BHD/ DHS advised OERAC members that the data delineation DHS is capable of based on their data warehousing systems is limited because of the way the data is collected.

DHS is planning a meeting with American Indian Tribes in August. What needs to be put on the agenda? OERAC members want to talk to them directly about what? Data? Funding? Strategy to stem the opioid crisis?

## Meeting Planning Based on Survey Results

Kristin Van Amber - 11:00am - 11:25am

Motion: BHD/ DHS to recommend groups and communities impacted by the opioid crisis OERAC may want to hear from. Try to find groups and communities with different perspectives, such as:

- American Indians
- African Americans
- Homeless population
- Youth

Invite representatives from these groups and communities to attend the OERAC meetings in July or August (August is preferred).

Motion passed.

## Next Steps and Meeting Wrap-up

Kristin Van Amber - 11:25am - 11:30am

After today's OERAC meeting, a survey will be sent to OERAC members, who are asked to complete this survey.

### Survey question 7:

What is the meeting preference going forward?

Online; In-person only; A mix of in-person only meeting...; Meetings with both in person...; Other.

For results, please refer to slide 24 of the PowerPoint presentation, Opioid Epidemic Response Advisory Council, dated June 18, 2021 by Kristin van Amber of MMB.

## Next Steps

Assignment review – Who is doing what?

The next OERAC meeting will take place on 16-July-2021.