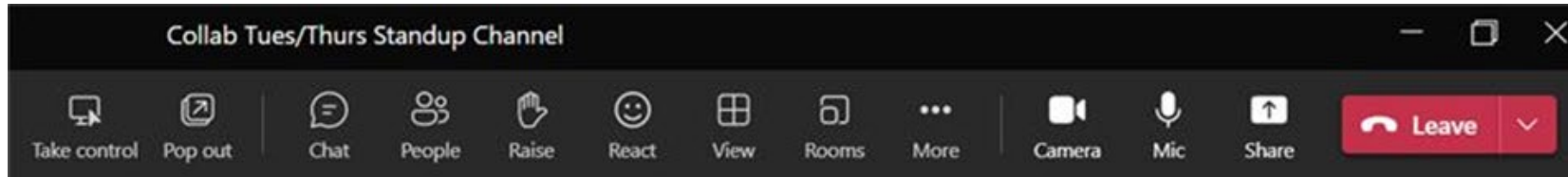




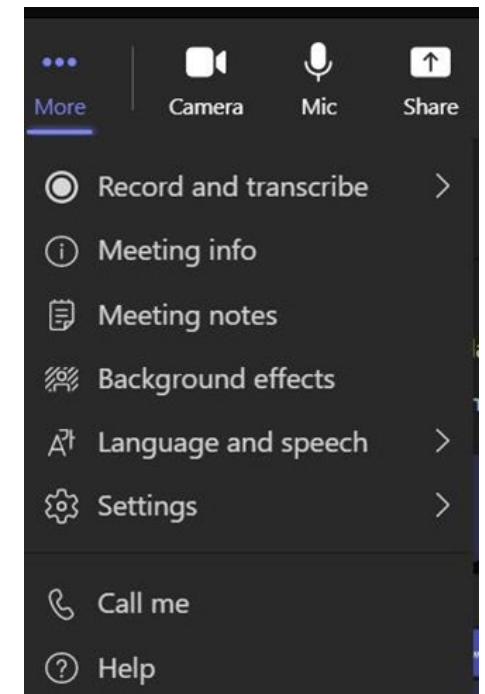
Task Force on Holistic and Effective Responses to Illicit Drug Use

Using MS Teams



- Mute **Mic** when not speaking [Ctrl+Shift+M]
- Use **Raise** your hand [Ctrl+Shift+K]
- Select **React** to 👍 ❤️ 🙌
- State your name when speaking
- Turn on live captions, select **More ...** > **Language and speech**
- Use **View** to choose from different meeting views

[Use meeting controls in Microsoft Teams - Microsoft Support](#)



Note: meeting transcript is being recorded to assist with note-taking

Welcome Task Force members

Welcome meeting observers

- **Thank you** for your interest in the work of the Holistic and Effective Responses to Illicit Drug Use Task Force.
- This is a **working meeting** and there are no plans for taking public comment during the Task Force discussion, but in accordance with Minnesota's Open Meeting Laws, you are welcome to observe this meeting.
 - We are holding 10 minutes at the end of the meeting for public comment
 - Around 11:40, we will open chat to allow you to list your name if you would like to be called on. Please plan to speak for no more than 2 minutes.
- The **meeting summary** will be posted on the task force website along with other materials: <https://mn.gov/mmb/oar/task-force/>

Agenda

Time	Topic
8:30	Introductions
8:45	Draft charter
8:55	What it means for recommendations to be “in the report”
9:10	Recommendations review
9:15	Methodology
9:25	10-minute break
9:35	Review of recommendations: health care
10:30	10-minute break
10:40	Review of recommendations: social determinants
11:35	Vote on recommendations
11:40	Next meeting
11:50	Public comment
Noon	Adjourn

- Previous meeting's summary will be approved next month
- Roll call/introductions
 - Name and role/organization

Draft charter: guiding principles

1. Evidence-based and practice-informed decision making: Prioritize recommendations backed by scientific evidence and research, and real-world experience.
2. Health equity: Ensure that proposed policies and interventions address disparities in substance use disorder treatment and outcomes across different populations.
3. Interdisciplinary collaboration: Encourage cooperation between public health, healthcare, law enforcement, social services, and other relevant sectors.
4. Person-centered approach: Focus on the needs, experiences, and dignity of individuals with substance use disorders.
5. Destigmatization: Promote language, policies, and practices that reduce stigma associated with substance use disorders.
6. Harm reduction: Embrace strategies that minimize negative health, social, and legal impacts associated with drug use, addiction, and drug policies.
7. Innovation and flexibility: Be open to novel approaches and adaptable solutions as new evidence emerges.
8. Long-term perspective: Consider both immediate impacts and long-term consequences of recommendations.
9. Transparency: Maintain open communication about the task force's processes, deliberations, and decision-making rationale.

Recommendations “in the report”

Your role on this task force as a stakeholder and expert is important in reviewing data, research and recommendations from Rise Research and providing final recommendations to the legislature for the 2025 Legislative Session.



Recommendations review

- Methodology overview from Rise Research
- Review results from form where members indicated whether they are ready to form an opinion on each recommendation
- Recommendations with “no, I have questions or would like to discuss further” responses
 - Questions/discussion
 - Goal: convert as many as possible from “no” into “ready to form opinion”
- Next week: “ready” recommendations will be included in voting form

- Qualitative key informant interviews
 - Sought experts in the 4 domains of healthcare, harm reduction, drug policing, and social determinants
 - Ensured experts from metro Twin Cities area as well as outer MN
 - Included experts on how drugs/the drug war disproportionately impacts special pops (staff from agencies that serve Native folks, Somali community, homeless youth, and others)
- Interview structure
 - One hour in length, over Zoom
 - Guided by a semi-structured questionnaire that asked people to think about areas that MN does well and areas where MN needs improvement when it comes to the care and treatment of people who use drugs
 - Interviews were audio recorded and transcribed

Methodology: key informants

- 49 interviewees

- Domains (interviewees could have expertise in multiple domains so totals will not = 49)
 - drug policing = 13 interviewees
 - harm reduction = 10 interviewees
 - healthcare = 18 interviewees
 - social determinants of health = 13 interviewees
- Interviewees came from:
 - government agencies at state level (e.g. MN Dept of Corrections, MDH) and local levels (county sheriff's office, public defender, city police departments)
 - trade groups (Mn Medical Association), hospitals and clinics (M Health Fairview, Hennepin Healthcare)
 - non-profit service providers (Village Arms, Avivo, North Point Syringe Service Program, Alliance Wellness Center, Streetworks)
 - advocacy groups (NAMI, MARCO, ICWA Law Center, Indigenous People's Task Force)

Analysis

- Transcripts were each reviewed for themes as they relate to recommendations
- Aided by AI program CoLoop and hand reviewed by us and one other researcher
- Combined with review of reports and published recommendations
- Technical support, expert advice from the Overdose Prevention Program's lawyers and epidemiologists at Vital Strategies, as well as Drug Policy Alliance

Break (10 minutes)

Review of Recommendations

- Mural: virtual whiteboard
 - Link and password sent by email this morning
 - After entering the password, click “View as a visitor.” You can enter your name if you wish, or use the default.
- Bypass recommendations where 100% of responses were “yes, I have enough information to form an opinion.” These are ready for voting.
- For the remainder, begin with the highest % of “yes, I have enough info” responses, then the next highest, and the next, until we run out of time.
- If unable to resolve quickly, move to the next recommendation
- Task Force members are encouraged to add questions, comments, discussion points to the Mural to facilitate additional discussion as the Task Force continues its work
- Mural will be screen shared so observers can see Task Force activity

(Go to Mural)

Health care recommendations

Break 2 (10 minutes)

Social determinants recommendations

Voting

- Form to be sent next week with all “ready to form an opinion” recommendations
- Vote on whether each recommendation should be included in the legislative report

Additional recommendations to review

- After the vote: form containing the next round of recommendations
- As with first batch, indicate “yes, ready to form an opinion” or “no, I have questions or would like to discuss further”

Next meeting

Ground rules

- Stay on topic
- Stay within time limit
- Respect and appreciate diversity of thought
- Focus on the issue, not the people
- If you disagree, disagree respectfully

Adjourn

Thank you