



Office of Addiction and Recovery - Monthly update

<https://mn.gov/mmb/oar/>

Hello and introductions

Meeting logistics:

- All attendees, except presenters, will remain muted
- We will work to address all questions during the time allotted.
- Please refrain from using chat during presentations

Agenda

11:00 a.m.	Hello and introductions
11:05 a.m.	OAR update
11:15 a.m.	Overview of the Communities That Care (CTC) model
11:35 a.m.	Safe Recovery Sites overview
11:55 a.m.	Closing

- Recovery Friendly Workplace executive order
- Federal update
- State legislative update
- Rx Summit

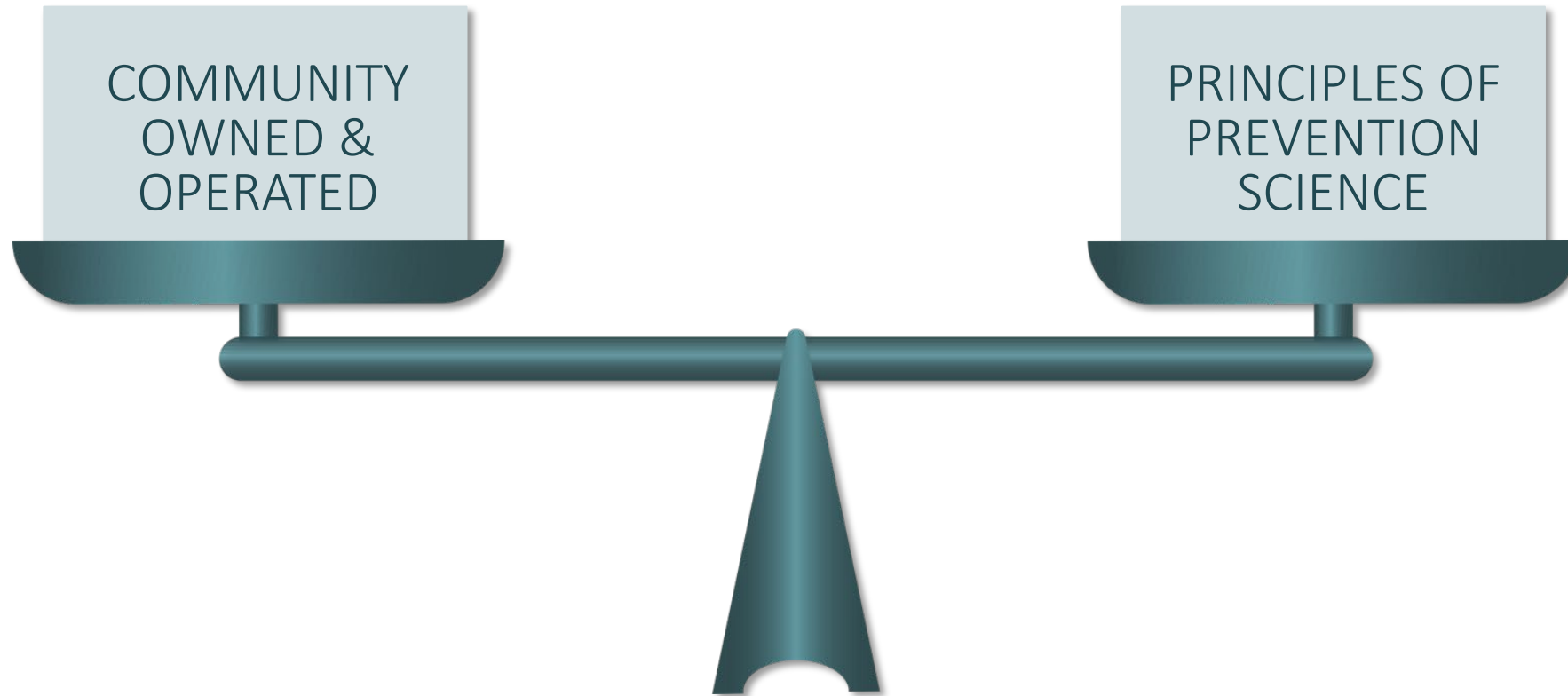


WHAT IS COMMUNITIES THAT CARE?



communities
that care *PLUS*

CTC: THE SPIRIT AND THE SCIENCE



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LOOKING DOWN THE ROAD



To prevent a problem before it happens, the factors that predict the problem must be changed.



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40+ YEARS OF RESEARCH ADVANCES

We know

1. what **predicts** many negative developmental outcomes, and what **predicts** healthy developmental outcomes
2. what **works to change those predictors** to both prevent behavioral problems and create positive outcomes for our youth
3. experimental trials have identified **over 100 effective interventions** for promoting behavioral health and preventing negative developmental outcomes



THE CHALLENGE

How to put this
knowledge into
the hands of
communities to
make their own
changes?



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CRITICAL ELEMENTS OF CTC

1 Public health approach
uses a public health approach to prevent youth problem behaviors

2 Community owned & operated
run by a coalition of community stakeholders from all sectors

3 Data Driven
the community makes its decisions using the community's own data

4 Evidence Based
adoption of effective programs

5 Outcome Focused
reductions in community levels of adolescent risk-taking behavior; improvements in child & youth well-being

6 It works!



CTC = POWERFUL RESULTS

A large trial of Communities That Care produced reductions in drug use and delinquency.



33% tobacco

32% alcohol

25% delinquent behavior



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CTC = POWERFUL RESULTS

Less likely to:

- initiate gateway drug use (tobacco, marijuana & alcohol)
- initiate antisocial behavior
- have lower lifetime incidence of violence

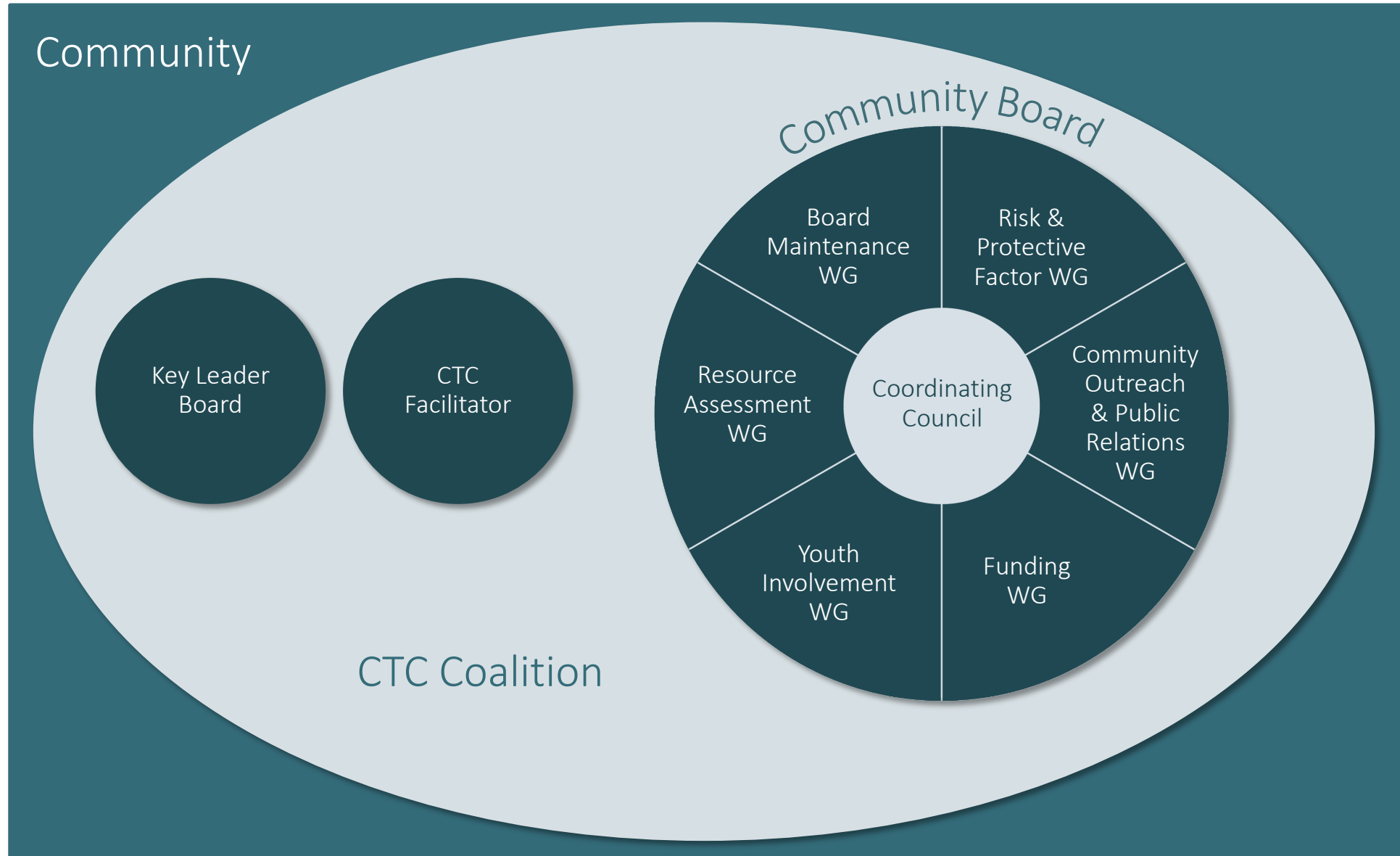
Males were more likely to:

- abstain from tobacco use
- abstain from marijuana use
- have reduced lifetime incidence of inhalant use



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HOW IT'S ORGANIZED – CTC SYSTEM



HOW IT WORKS

5 Phases
Guided by the
Milestones &
Benchmarks



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MILESTONES AND BENCHMARKS

Roadmap to success

Guide fidelity to the model

Do not need to go in order of activities



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FOUNDATIONS OF CTC

Prevention Science: Risk
and Protective Factors

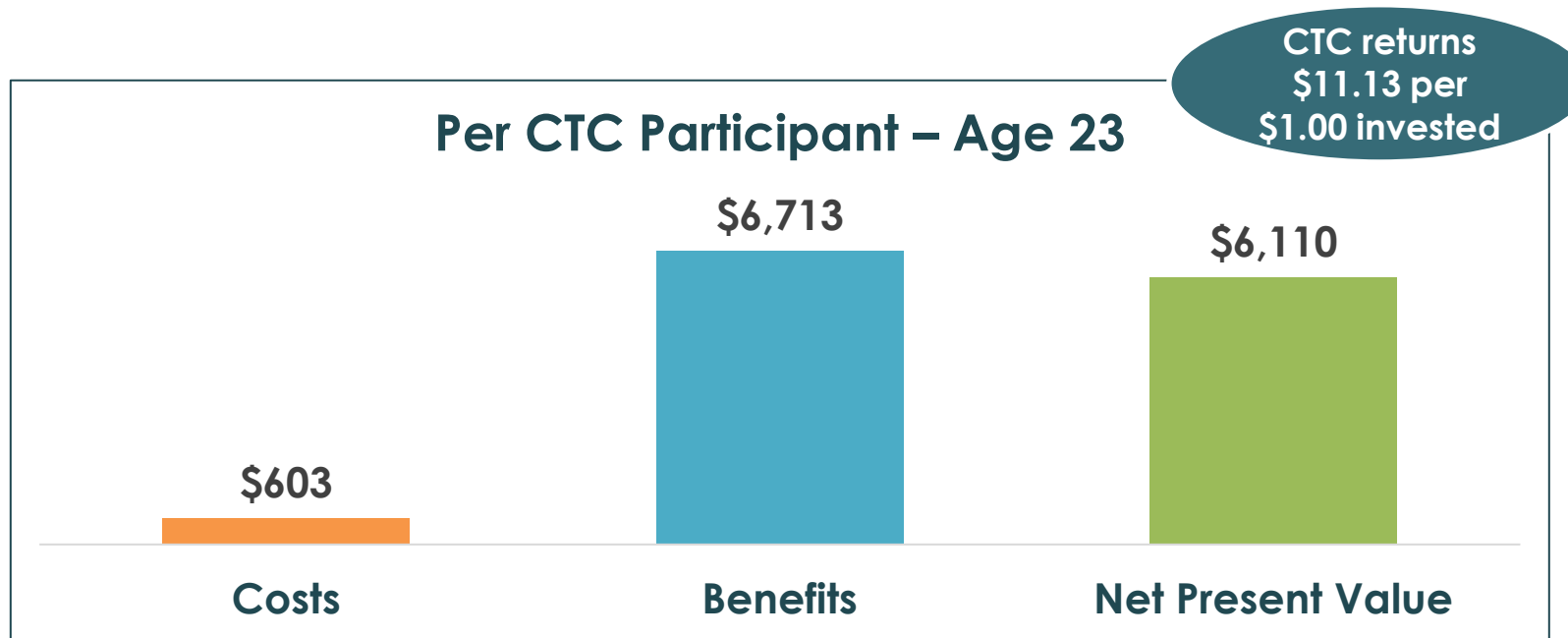
Social Development
Strategy

Tested and Effective
Programs/Policies/Practices



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CTC is a Good Investment



Long-term economic benefits from CTC's primary impacts exceed implementation costs (2017 USD, 1000 Monte Carlo simulations)



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Thank you!

We welcome questions and feedback!

Contact The Center for Communities That Care at: ctr4ctc@uw.edu

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Connect with us!

- communitiesthatcare.net/
- facebook.com/centerforctc/
- linkedin.com/company/center-for-communities-that-care/

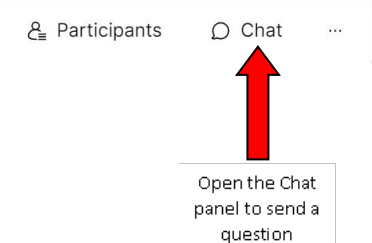
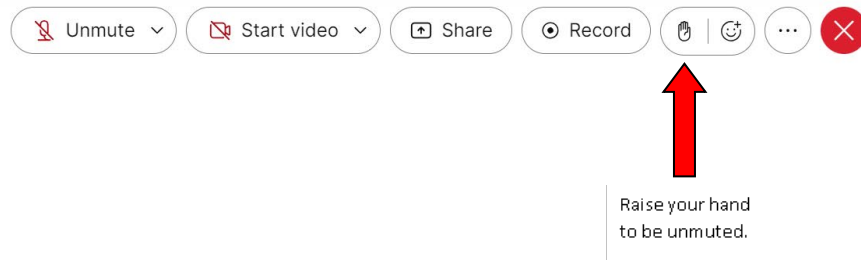


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Questions about Communities That Care

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Use the menu bar at the bottom of your screen to raise your hand so we can unmute you or open the Chat panel and submit a question.



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Safe Recovery Sites: Saving lives through compassion, connection

Teresa Steinmetz | Behavioral Health Assistant Commissioner

Help urgently needed for people who use drugs

- In Minnesota, the rate of opioid-involved overdose deaths nearly tripled between 2018 and 2023.
- There are also two ongoing HIV outbreaks in Minnesota that are disproportionately impacting people who inject drugs.
- In addition, the majority of new Hepatitis C diagnoses, as well as other bacterial infections and soft tissue infections in the state, involve people who inject drugs.
- Everyone deserves health, safety and a chance to recover.

Safe Recovery Sites can serve as centers of hope

Addiction is often a disease suffered in isolation.

- People often avoid treatment and mainstream health care due to stigmatization and subsequent, sustained societal marginalization.
- Safe Recovery Sites can foster trusted and stabilizing relationships – especially for those belonging to marginalized communities and those who are unhoused.
- These sites successfully engage people who are not connected with community health programs or human service systems.
- At safe recovery sites, staff can provide education and referrals to treatment and recovery services, mental health services, housing, nutrition, health care, holistic supports and other critical services.
- These sites will be centers of hope, compassion and acceptance where people can embrace the possibilities of healing and recovery.

Legislative support

- In May 2023, the Minnesota Legislature approved funding for Safe Recovery Sites.
- The primary function of these sites is to save lives through overdose and disease prevention.
- The sites will offer supplies and services, such as:
 - Sterile syringe exchanges
 - Naloxone/Narcan kits, and staff trained to administer in the case of an overdose
 - Street outreach
 - Health, safety and wellness services
 - Educational and referral services to primary and behavioral health care, and other supports such as housing
 - Fentanyl testing and other drug checking
 - Access to sanitation and hygiene.

More engagement needed for safer use spaces

Also included in the legislation as a possible service Safe Recovery Sites could provide is a **space for people to use drugs under the supervision of staff**.

- These “safer use spaces” **will not** initially be included in the services these sites provide.
- Minnesota is committed to implementing safer use spaces, but there is still much work to be done before this service can be offered in our state.
- DHS will continue to work with communities, federal partners and local law enforcement to determine how this service could be implemented.

Extension of existing harm reduction work

- The creation of Safe Recovery Sites is an extension of harm reduction work already occurring in Minnesota.
 - Minnesota funds syringe service providers delivering sterile syringe and other safe use supplies, and drug testing equipment to people who use drugs.
 - Syringe service providers also provide HIV and Hepatitis C testing, distribute naloxone, and provide community trainings on overdose reversal.
 - The Department of Corrections provides overdose prevention kits to individuals leaving incarceration.
 - Naloxone utilization is promoted and required in schools, jails, with law enforcement, and at other settings.
- In Minnesota, people who have access to a syringe service provider are five times more likely to enter into treatment for substance use disorder and three times more likely to reduce drug use or stop altogether.

Research, community engagement

- For the past year, DHS staff have been engaging the community to inform the RFP.
- Staff visited New York City in January 2024 where they met with their overdose prevention site, OnPoint, as well as the New York City Health Department and local syringe service program VOCAL NYC.
- Staff also visited Rhode Island in spring 2024 and met with the Office of Health and Human Services to discuss their RFP for overdose prevention centers. Staff then met with the program they are contracting with, Weber/Renew, to operate the center.
- In summer 2024, staff engaged 13 syringe service programs in greater Minnesota and the Twin Cities metropolitan area.



Research, community engagement

- In summer/fall 2024, DHS staff continued their community engagement by visiting with seven Ojibwe Tribes: White Earth, Leech Lake, Red Lake, Bois Forte, Fond du Lac, Grand Portage and Mille Lacs, as well as one Dakota Tribe, Lower Sioux.
- We are still looking to engage the remaining three Dakota Tribes.
- Community engagement is continuing, and will continue after awards are made.
- Once sites are selected, DHS staff will provide education regarding the new sites and will engage directly with surrounding communities.
- DHS will also evaluate the program on an ongoing basis to monitor health-related outcomes, as well as public safety and broader community impacts.

Lessons learned

- Community doesn't want to move faster than is safe and practical. No rushing safe use sites. Cautiously, intentionally.
- Learned from Rhode Island there is more work to do legislatively before opening and operating sites with safer use included.
- Learned from New York safe and effective methods of implementing restrooms, showers and drop-in space.
- Understanding cost of opening and operating sites, including securing a building, insurance, staffing ratios.
- Community engagement is ongoing for all of these existing sites. Street outreach and community building have been imperative for sites' success.

Safe Recovery Site RFP

This grant is for current or prospective harm reduction organizations to promote health, wellness, safety and recovery to people who are in active stages of substance use disorder. Grants must be used to establish sites that offer harm reduction services and supplies, including but not limited to:

- sterile needle exchange; opiate antagonist rescue kits; fentanyl and other drug testing; street outreach; educational and referral services; health, safety, and wellness services; and access to hygiene and sanitation. Optional to grantees is harm reduction vending machines.
- Anticipated number of awards: 4-6 grants. The number of awards will depend on applications received and available funding.
- Funding will go from July 1, 2025, to June 30, 2029.

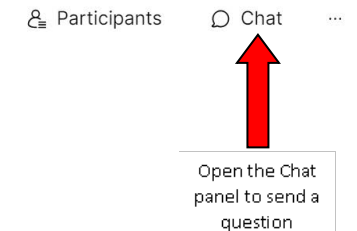
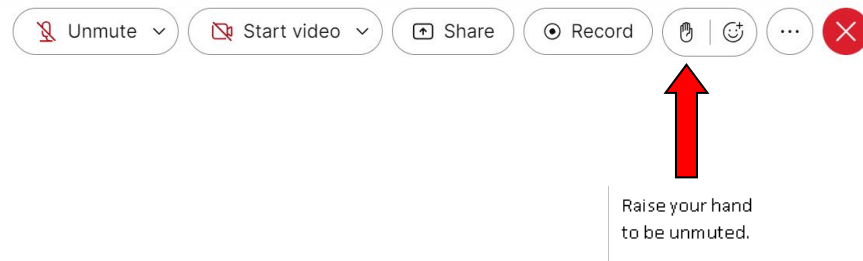
RFP timeline and looking ahead

- DHS published the Safe Recovery Site RFP on April 11, 2025.
- Safe Recovery Site RFP closes at 4 p.m. on May 12, 2025.
- DHS plans to select grantees within three months after the proposal submission due date.
- Contract are anticipated to be for four years, from July 1, 2025, until June 30, 2029. The state may extend contracts up to a total of five years.
- DHS Harm Reduction staff and MMB Evaluation staff are available for technical assistance throughout the grant. TA and consultation are also allowable expenses in the RFP.
- Community engagement will be ongoing for grantees and Harm Reduction Team staff.

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Thank You!

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