

Community Solutions for Substance Use and Recovery (CSSUR) Agenda

Thursday, July 15th – 3:00 – 4:30 pm – WebEx

We begin each meeting with a moment of silence to honor all of the people we have lost to deaths of despair (suicide, drug overdose, and alcoholism), all of those currently struggling with Behavioral Health (Substance Use Disorder, Mental Illness), those who are bravely walking the recovery path, and all the families, friends, community members, and supports impacted.

Note taker:

AGENDA

- Everyone is muted if you have something to share use the chat function and we'll call on you. Please feel free to put your name and the organization you represent or role you play in the community to introduce yourself.
- Lt. Kazel Task Force Area Opioid-Related Overdoses: Unable to make it today, but will come to our next meeting to give us (October). Jess McCarthy shared: OD update, not good news (this is average nationally) Q2 of 2021 was highest total OD (89 total, 8 fatal) in Duluth, SLC-wide 108 opioid OD (9 of those were fatal, only one outside of Duluth). Good news as of Tuesday Narcan was used 77% of time with 9-1-1 involvement due to every first responder in county being trained. Linear prediction for 2021 is that this will be the highest OD year we've had ever (CDC indicated that 2020 was the highest OD year ever) – we continue to have the highest numbers each year.
- Recovery Alliance Duluth (RAD) Updates: We have PRS in ED and it's going well. 3 recovery meetings at Thunderbird Wren, one at Life House (LGBTQI+), In CHUM 2 Thursdays a month and looking for funding. We are getting involved in all the systems. Recovery services are becoming a part of all we do and we are working on
- St. Louis County updates
 - Safe Babies Court Team: We are in year two and both north and south have approx. 10 cases. We have been awarded one additional year of funding that will support the community partner work such as RAD, Peer Recovery Support.
 - CP Opioid Fund Update – Preliminary allocation for 2022 is \$271,532.96 which is cut from last year.
 - Paramedic Co-responder – now HDC has hired an RN who is embedded in DPD with our embedded social worker. This is going well and many gaps that previously existed are being addressed with a medical professional on staff. We are strategizing how to sustain this position.
 - COSAAP grant (RAD/County collaboration) – submitted a new grant proposal for jail MAT navigator, RN for MHU, 2 PRS from RAD for justice involved individuals, Narcan, 5 justice involved individuals to be trained in PRS.
 - Clarity Project update: things are moving along, DSGW is the architect, we are diligently working on site selection and programming needs that would be present on-site. Dec. 2022 is our aim.
 - [Reimagining Crisis Response](#) We are bringing our community together to continue building a more comprehensive and strategic crisis response system that diverts

individuals in crisis from criminal justice involvement. The linked guidebook (above) is an incredible resource we are using for this purpose. We are currently mapping current state and encouraging all entities providing alternative crisis response to develop and follow a logic model to appropriately track data and measure outcomes. Our hope is to build a sustainable system. There is community pressure and a request to the City of Duluth to fund a sustainable crisis response system that is separate from law enforcement.

- Safe Injection Site efforts, St. Louis County – Meeting monthly (Jenny Swanson) – The SIS/Harm Reduction subgroup has been meeting monthly (though we missed July's meeting because it fell on the July 4th federal holiday). Since there are legal restrictions on SISs in the US, we are working towards advocating for building toward SIS in Minnesota while trying to offer low threshold services immediately. The discussion is whether we should focus on planning pop-up health events or work towards having a mobile clinic. Pop up clinics are already occurring with HRSs. While assessing the possibility of a mobile clinic, the decision was to support current services including all of the great work that CHUM is doing at their weekly clinic in collaboration with DFMC and to support HRS's pop-ups. The pop-up events include HIV testing (note- Duluth area is currently in the midst of a HIV and Syphilis outbreak) offered by the Indigenous People's Task Force, education and resources, Narcan training and distribution, wound care, and now virtual low-threshold MAT through YourPath.

Rhode Island's legislature just allowed for the creation of supervised injection sites. That will be the first pilot site in the nation and we will be keeping our eye on its implementation progress.

- Website/webpage for CSSUR <https://www.stlouiscountymn.gov/cssur>

CSSUR Workgroups (Please invite people to join the groups and if you are in CSSUR this is an action oriented group and we hope that everyone will engage in at least one group):

- **Community Awareness Workgroup** (Jake Lewis jake.lewis@nuway.org, NuWay) - 3rd Friday of the month at 11am
 - [CSSUR Logo](#)
- **Recovery Workgroup** (Julie Vena julie.v@recoveryallianceduluth.org and Beth Elstad beth.e@recoveryallianceduluth.org RAD) – Every other Wednesday. They are creating a spot on website where we can gather all the recovery resource and have it available. Recovery Events are planned – July 31st, makers space in Virginia and Portland Square park, Recovery Month – Sept 11th our annual Recovery Walk.
- **Policy Workgroup** (Laura, Community Health Board - bennettl2@communityhealthboard.org;) - 2nd Tuesday of the month 10am-11am (July 13, Aug 10, Sept 14, Oct 12, Nov 9, Dec 14) revisit meeting schedule for 2022
- **Opioid Workgroup** (Rachel Wickstrom rachelw@cad.t.org, CADD) - 3rd Thursday of the month (September 16 2:30-4p; November 18 2:30-4p) – Stigma associated with SUD, Keri did a training at CADD with staff on MAT 101 and discussed the language – expanding the withdrawal until at CADD. Richard from CAIR (HR Coordinator) did a presentation and shared all the resources and programs. Closed high-intensity residential program and use 10 beds for withdrawal management. Out of 40 beds only 15 or so bed. There is a staffing crisis. We did this because we think we can do as much in this area as we did (can stay 2-10 days and get

medication, stabilized, assessment, wraparound care, groups, diagnostics in a shorter amount of time). The DHS requirement of 30 hours is unreasonable and doesn't equate to better recovery outcomes for people.

- MEnD is now contracted with NERCC to provide MAT services, and the SLC jail and NERCC are working on transitions of care for shared residents.
 - The upcoming Opioid Epidemic Resonse Advisory Council (OERAC) meetings will be specifically to design and implement targeted community engagement for historically excluded folks, with the RFP to fund response efforts coming out later this summer/fall. Here is a link to the OERAC meeting line-up including the next monthly meeting scheduled for tomorrow, July 16 from 8:30a-12:30p. <https://mn.gov/dhs/opioids/oer-advisory-council.jsp#:~:text=In%202019%2C%20Governor%20Tim%20Walz,Council%20to%20oversee%20the%20funding.>
- Other organization updates

Next meeting: On-going meetings will be quarterly (January 21, April 15, July 15, October 21, January 20) the third Thursday of the month from 3:00-4:30 pm. You will receive a new calendar invite for our on-going meetings 2021- January 2022.

FORMAT LAYOUT

Rather than using the initials, CSSUR, the most important words, '**Community Solutions**' are bold, large, and can be used as shorthand for the full name of the organization



COMMUNITY SOLUTIONS

FOR SUBSTANCE USE & RECOVERY

LETTER 'C'

The round shape of the 'C' creates a balanced base for the icon and represents the holistic work being accomplished.

COLOR/PATTERN

Using the color palate associated with recovery, we've created a 'quilt' of fresh inviting colors to represent the community working together to achieve one goal.



SPEECH BUBBLE

Conversations between groups, between community members, and among families are the root of an effective strategy to make change.

PEOPLE/ELLIPSIS

Three silhouettes of people sit in the center of the speech bubble to illustrate the idea of continued work that is, by nature, ongoing...

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