STEELE COUNTY BOARD OF COMMISSIONERS
WORK SESSION AGENDA

Administration Center - 630 Florence Avenue – Owatonna, MN 55060

Steele County's Mission:
Driven to deliver quality services in a respectful and fiscally responsible way.

TUESDAY, APRIL 25, 2023 AT 3:30PM
County Boardroom, Steele County Administration Center

Agenda

1. Call to Order

2. Investment Review
   Jack Samuels, UBS Senior Wealth Strategy Associate

3. OPIOID Settlement Funding Presentation
   Amber Aaseth, Public Health Director
   Madelyn Hessian, Public Health Project Coordinator through AmeriCorps

4. Other Business

Adjourn

Disclaimer: This agenda has been prepared to provide information regarding an upcoming meeting of the Steele County Board of Commissioners. This document does not claim to be complete and is subject to change.

OPIOID SETTLEMENT FUNDING

Public Health
Prevent. Promote. Protect.
Steele County Public Health

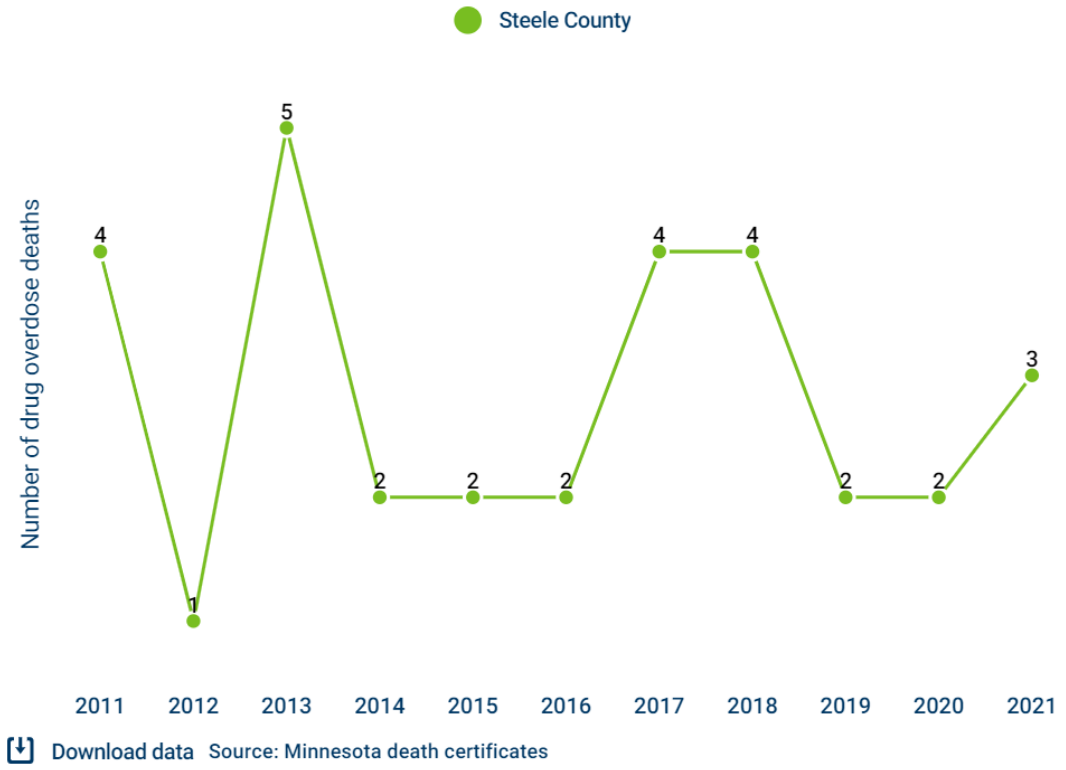
Steele County Public Health

OBJECTIVES

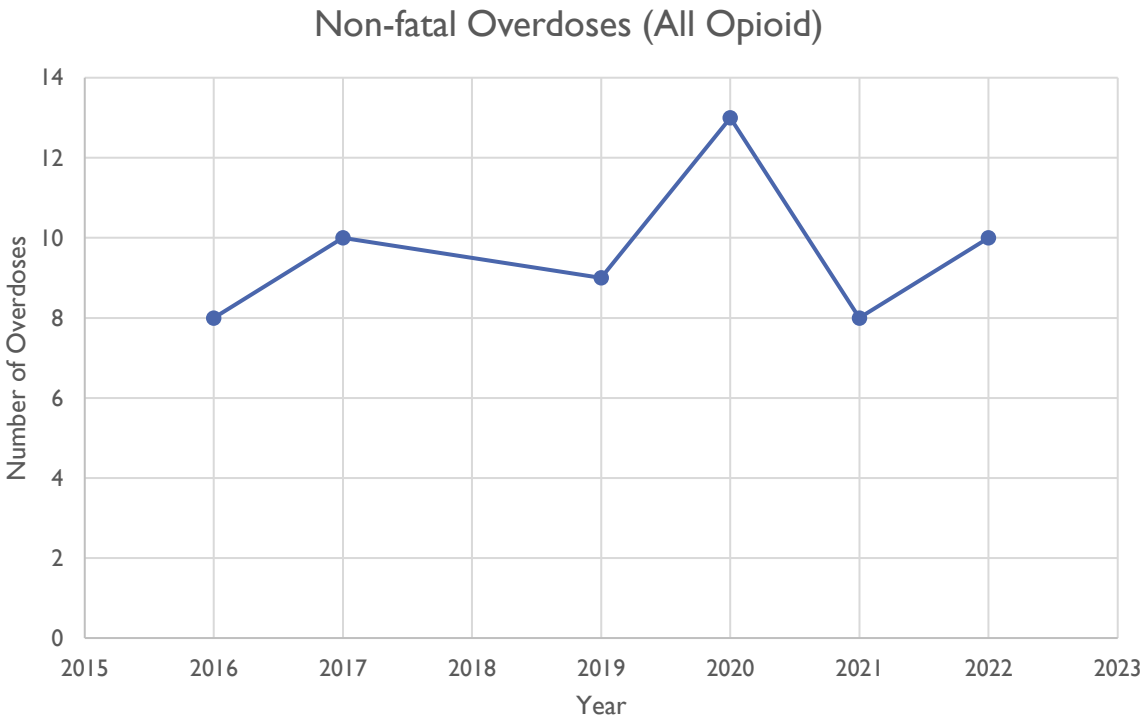
- To provide an overview of the impact of opioids on Steele County.
- To share information on the Opioid Settlement and county funds.
- To discuss Steele County's current opioid prevention initiatives and resources, including an example of infrastructure in another county.
- To discuss next steps, gathering feedback on continued prioritization of opioid prevention activities in Steele County.

OPIOID IMPACT ON STEELE COUNTY

Drug Overdose Deaths by Year



Non-Fatal Opioid Overdoses by Year

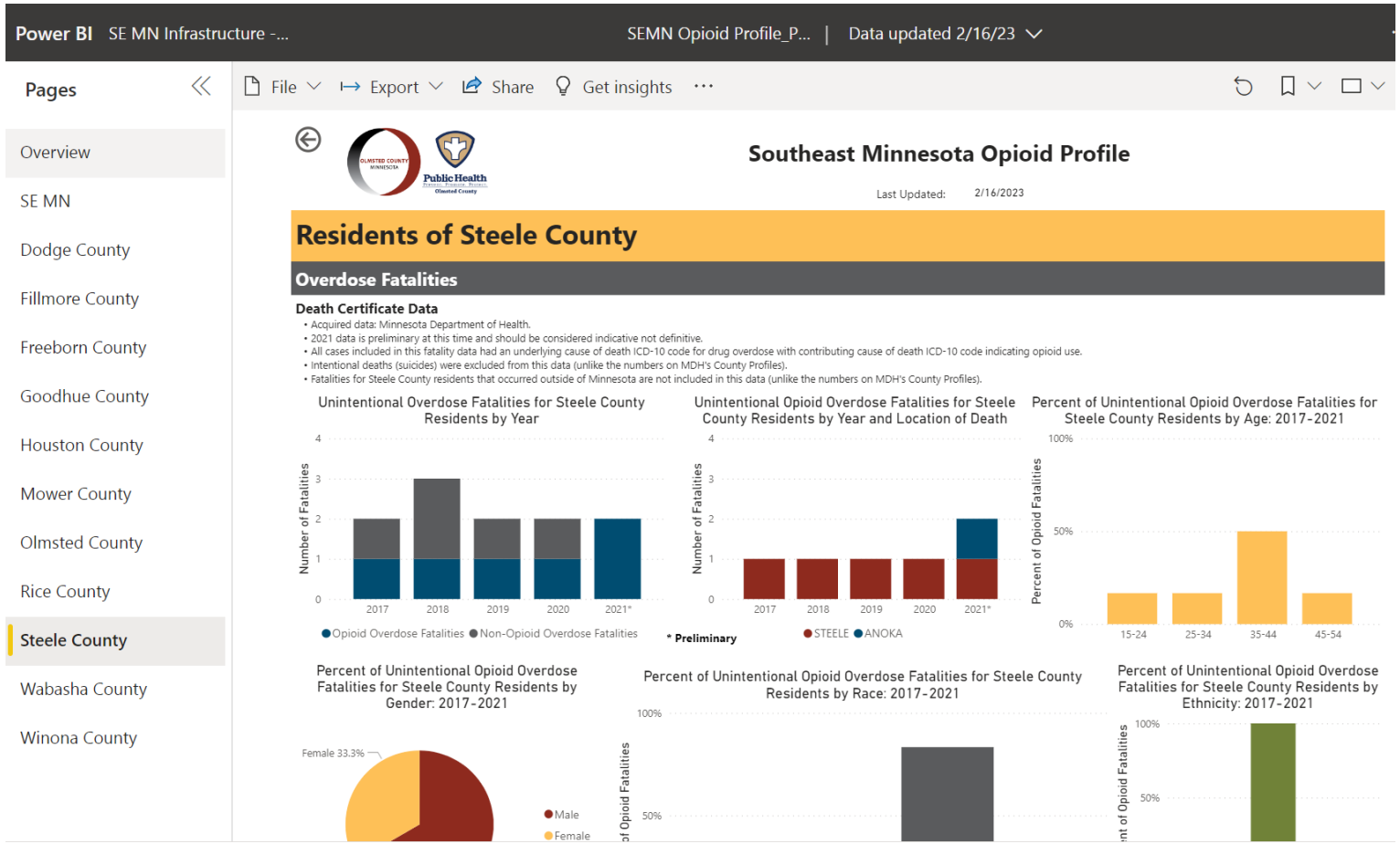


Opioids were involved in the greatest number of deaths in 2021

Greatest number of overdoses occurred in the 15-24 and 35-44 age groups; Shift to opioids besides heroin

POWER BI OPIOID DASHBOARD

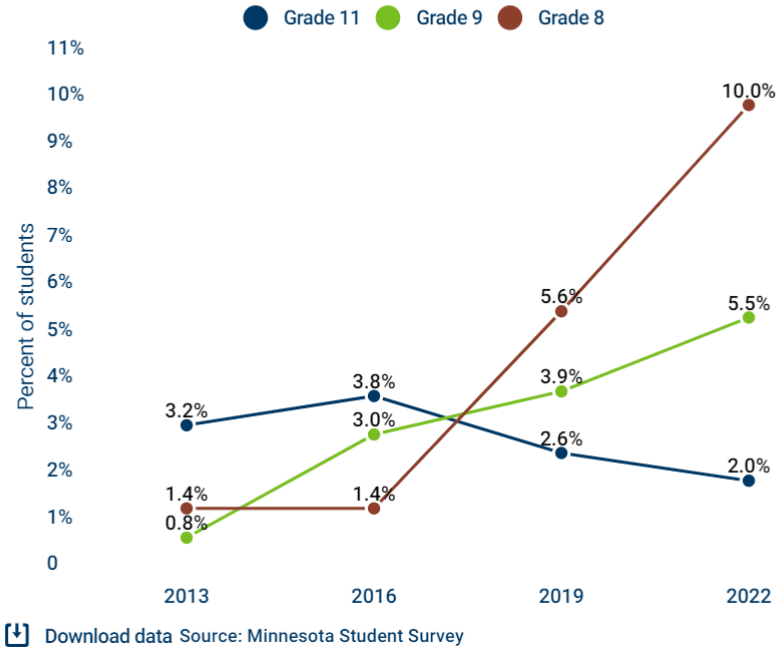
- In collaboration with Olmstead county and other SE MN counties, state infrastructure funding is being utilized to pilot several data projects, including an opioid dashboard.
- Phase 1 of the Power BI dashboard was launched earlier this year.
- Phase 2 will be ongoing throughout the rest of 2023 (adding unique county data like CHNA data, EMS data, syndromic surveillance data).
- Ultimate goal to have a county-specific opioid dashboard to make accessible to community members.



OPIOID IMPACT ON STEELE COUNTY – KEY TAKEAWAYS

- MSS Data indicates an increase in the misuse of prescription opioids since 2013, with **10%** of 8th graders responding affirmatively in 2022
- ER visits for opioid overdose have generally increased since 2016, with opioids excluding heroin becoming the dominant cause
- The Steele County opioid prescription rate by year has stayed stable and is on par with the state average
- South Central Drug Task force (Serving Steele, Waseca, Faribault, Freeborn population) had an increase in prescription drug seizures from 30 to **470** from 2018-2019
  - Heroin rose from 342 to 739 seizures in the same timespan
- Limitations:
  - Lack data on fentanyl contamination
  - Does not capture non-fatal ODs not brought to ED

The percentage of students attending schools in Steel County that in the past 12 months used prescription pain medications without a prescription or differently than how a doctor intended has increased among 8th and 9th graders.



OPIOID SETTLEMENT BACKGROUND

- July 2021 → Office of the MN AG joined a $26 billion multistate settlement agreement involving major opioid distributors and manufacturers
  - 75% of funding to counties/cities and 25% to state; 18 year payout (Funding may be carried over from year to year or invested. There is **no deadline** for spending the entire sum.)
- December 2022 → 5 additional national settlements; MN share could be $235 million over 15 years on top of $300 million in initial funds
- Public Health Department deemed lead agency and chief strategist in the disbursement of funds
  - Convene multi-sector meetings and build on community health assessments

Settlement Timeline

1. Agreement in principle with manufacturer Endo in August 2022;
2. Settlements with manufacturer Johnson + Johnson and distributors AmerisourceBergen, Cardinal Health, and McKesson in July 2021;
3. Settlement with Purdue Pharma, manufacturer of the blockbuster opioid OxyContin, in July 2021;
4. Settlement with international consultancy McKinsey in February 2021;
5. Settlement with manufacturer Mallinckrodt in October 2020; and
6. Settlement with manufacturer Insys in January 2020.
7. NEW in December 2022: Settlements with Teva, Allergan, Walmart, CVS, and Walgreens

HOW MUCH WILL THE COUNTY RECEIVE?

Payments received thus far = $178,291.30 total

28,472.14 – Distributor Payment Year 1 (10/17/22)

29,922.83 – Distributor Payment Year 2 (12/15/22)

10,136.26 – Janssen Year 1 (12/15/22)

23,648.11 – Janssen Year 2 (12/15/22)

18,927.42 – Janssen Year 3 (12/15/22)

29,062.32 – Janssen Year 4 (12/15/22)

32,212.49 – Janssen Year 5 (12/15/22)

5,909.73 – Mallinckrodt (2/3/23)

Steele County Settlement Funds: $816,786.49 (Johnson & Johnson + distributors settlement)

$667,187.08 (Second Wave Settlements)

-MN Office of the Attorney General

HOW ARE THE FUNDS ALLOWED TO BE USED?

The Minnesota State-Local Memorandum of Agreement (MOA) gives a list of allowed uses, which consist of treatment, prevention, and other strategies:

➢ Treatment

Support treatment of Opioid Use Disorder ("OUD") and any co-occurring Substance Use Disorder or Mental Health ("SUD/MH") conditions through evidence-based or evidence-informed programs or strategies (ex. Medication-assisted treatment)

➢ Prevention

Support efforts to prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids; efforts that stop opioid misuse from occurring; and efforts that reduce harm through evidence-based or evidence-informed programs or strategies (ex. Education, naloxone distribution)

➢ Other Strategies

First responders, leadership, planning and coordination, training, research, and post-mortem (i.e., toxicology, etc.)

EVIDENCE-BASED STRATEGIES - CDC

10 EVIDENCE-BASED STRATEGIES FOR PREVENTING OPIOID OVERDOSE

Targeted Naloxone Distribution

- Naloxone can quickly and safely reverse opioid overdose with no risk of misuse or harm.
- Targeted distribution programs seek to train and equip individuals most likely to encounter an overdose—especially people who use drugs and first responders— with naloxone kits.
- Ex. Co-prescription programs

Medication-Assisted Treatment (MAT)

- MAT is a proven pharmacological treatment for opioid use disorder. The backbone of this treatment is FDA approved medications.
- Quells cravings and allows patients to stabilize their physical dependency. This allows MAT patients to achieve healthy social, psychological, and lifestyle changes.
- Should be combined with counseling, social support, etc.

10 EVIDENCE-BASED STRATEGIES FOR PREVENTING OPIOID OVERDOSE

Academic Detailing

- Structured visits to healthcare providers by trained professionals who can provide tailored training and technical assistance, helping healthcare providers use best practices.
- Used to assist physicians in reducing potentially risky opioid prescribing practices.

Eliminating Prior-Authorization Requirements for MAT

- Health insurance providers cover the cost of MAT as a standard benefit and all requirements that a physician contact the insurance provider for approval prior to writing the prescription (a process called "prior authorization") are removed.
- Allows a patient to be initiated into treatment the same day they see their doctor, increasing treatment retention.

10 EVIDENCE-BASED STRATEGIES FOR PREVENTING OPIOID OVERDOSE

Screening for Fentanyl in Routine Clinical Toxicology Testing

- Inclusion of fentanyl in the standard panel of substances in routine clinical drug screens
- Early warning of supply contamination and routine surveillance

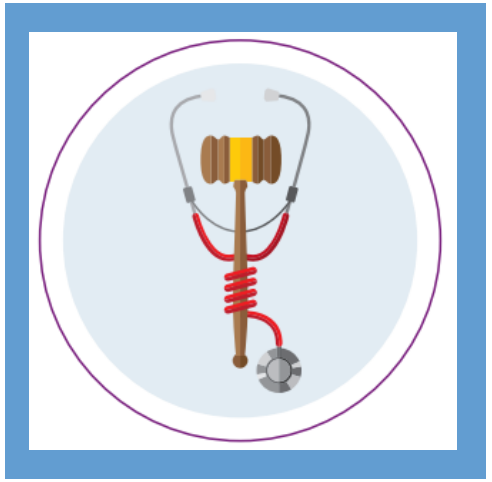
911 Good Samaritan Laws

- Legislation that may provide overdose victims and/or overdose bystanders with limited immunity from drug-related criminal charges and other criminal or judicial consequences that may otherwise result from calling first responders to the scene.
- MN has a Good Samaritan law in place

10 EVIDENCE-BASED STRATEGIES FOR PREVENTING OPIOID OVERDOSE

Naloxone Distribution in Treatment Centers and Criminal Justice Settings

- Target individuals who are about to be released from supervision and/or cease treatment to receive overdose response training and naloxone kits
- Incarcerated individuals are at a higher risk of overdose, and periods immediately following release, when tolerance is low, are particularly dangerous



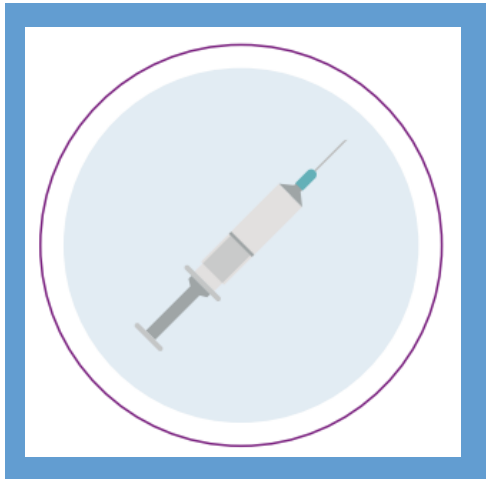
MAT in Criminal Justice Settings and Upon Release

- MAT made available as a standard of care for incarcerated individuals with opioid use disorder
- Facilitate "warm handoffs" to providers after release
- MAT in correctional facilities is associated with decreased heroin use, decreased levels of syringe sharing, decreased criminal activity, and a significantly higher probability of engaging with treatment upon release.

10 EVIDENCE-BASED STRATEGIES FOR PREVENTING OPIOID OVERDOSE

Initiating Buprenorphine-based MAT in Emergency Departments

- Patients in EDs who have untreated opioid use disorder are referred to a provider for long-term buprenorphine-based MAT.
- Referral is accompanied by initial doses of buprenorphine or a short-term prescription that can be filled right away.
- The patient can begin treatment immediately, instead of waiting several days for the appointment.



Syringe Services Programs

- Provide access to clean and sterile equipment used for the preparation and consumption of drugs as well as tools for the prevention and reversal of opioid overdose.
- Lowers the frequency of syringe sharing and re-use, with major protective impacts on the rates of infectious diseases like HIV and hepatitis C

Participants are **five times more likely to enter drug treatment** and **3.5 times more likely to cease injecting** compared to those who don't utilize these programs.

PEER SUPPORT SERVICES

- Peer-delivered mentoring, education and non-clinical services focused on supporting a person's individualized recovery process related to substance use. Peer support services are delivered through formal and specialized roles by people with lived experience of substance use and/or recovery.
- Growing body of evidence demonstrates effectiveness
- Peer support workers, in the context of substance use, are people with lived experience of substance use and/or recovery who have completed specialized training to provide support to PWUD and PWSUD, including those at risk of overdose
- After completing training, participants must take the Certified Peer Recovery Specialist (CPRS) exam with the MN Certification Board

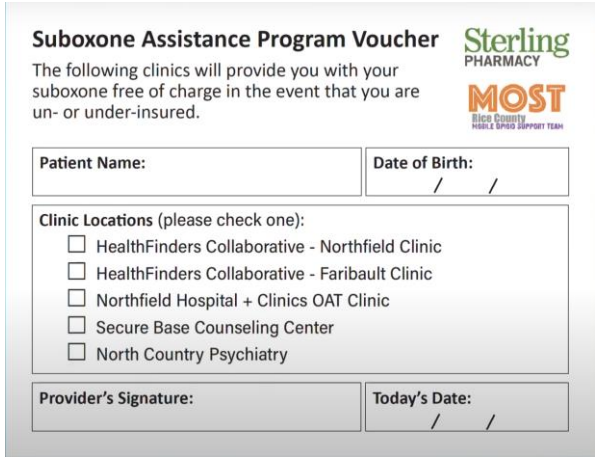
WHAT ARE OTHER COUNTIES DOING?

RICE COUNTY EXAMPLES

RICE COUNTY OPIOID RESPONSE

Medication-Assisted Treatment

- Currently have 8 MAT providers dispersed throughout county
- Jail-based program partnering with HealthFinders
- Pharmacy partners aid in improving Suboxone affordability for MOST clients



Suboxone Assistance Program Voucher

Sterling PHARMACY

MOST Rice County Mobile Opioid Support Team

The following clinics will provide you with your suboxone free of charge in the event that you are un- or under-insured.

Patient Name:	Date of Birth: / /

Clinic Locations (please check one):

- ☐ HealthFinders Collaborative - Northfield Clinic
- ☐ HealthFinders Collaborative - Faribault Clinic
- ☐ Northfield Hospital + Clinics OAT Clinic
- ☐ Secure Base Counseling Center
- ☐ North Country Psychiatry

Provider's Signature:	Today's Date: / /

Take it to the Box

- Program promoting the safe use, storage, and disposal of medications
- 6 different locations, including the police departments, sheriff's office, and local pharmacies

Mobile Opioid Support Team (MOST)

- Provide support and connections to community resources. Offer:
- Funding for emergenices, transportation, insurance support
- Free naloxone and fentanyl test strips (can deliver)
- Connections to MAT, chemical health assessments, county services
- Bilingual team members

RICE COUNTY OPIOID RESPONSE

Extensive Naloxone Availability

- Free naloxone kits are available at 10 different locations, including the Northfield Public Library and the PH department
- MOST can deliver naloxone to a location of your choice
- Law enforcement officers distribute "leave behind" naloxone kits at the scene of an overdose

Data Review

- Law enforcement agencies and Emergency Departments utilize ODMAP, a DEA tool providing real-time overdose surveillance data
- Established a multidisciplinary overdose fatality review team which conducts confidential death reviews to identify system gaps and intervention strategies

2023 Initiatives

- Establishing syringe services program in partnership with HealthFinders
- Working with local EDs to establish a rapid, low threshold entry to buprenorphine
- Project CLEANUP

PROJECT CLEANUP → NEW RICE COUNTY INITIATIVE

- **Pre-arrest deflection:** Rice County law enforcement agencies will create non-arrest pathways to treatment and recovery.
- **Post-booking diversion:** Based on evidence-based national models, law enforcement agencies will redirect justice-involved individuals struggling with substance use to community based services, including SUD treatment services, instead of jail; social workers are embedded within county law enforcement agencies.
  - Once a social worker or police officer identifies someone with SUD who is willing to get treatment, they'll refer them to the County Attorney's office, who will decide eligibility on a case-by-case basis. As long as the charge is a misdemeanor and the person has no prior felony charges, the program is intended to get them into inpatient treatment.
- **Pre-treatment housing:** Through partnerships, this program will provide safe, supportive housing and treatment coordination until inpatient space becomes available. (Beyond Brink here in Owatonna)
- **Post-treatment housing:** In partnership with community organizations, the program will provide affordable and supporting housing for program participants exiting treatment.

Rural Opioid Epidemic Response Model
Rice County, Minnesota

Rapid Response Team: A community-based team with bilingual members that responds to and supports those who are using or in recovery from opioid drugs.

Syringe Service Program (SSP): Availability of a local SSP, which reduces the harms associated with drug use; provides a connection to health and behavioral health resources; and prevents HIV and viral hepatitis infections.

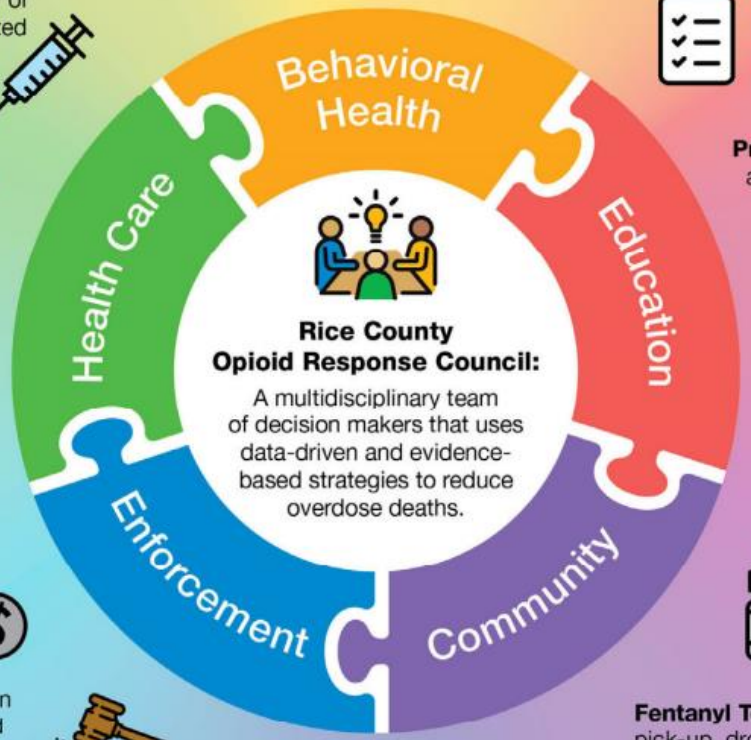
MAT/MOUD Accessibility: Varying schedules, providers, and locations for the community to access medications for opiate use disorder.

Emergency Department-Based MAT/MOUD: MAT/MOUD is offered as the first-line treatment for patients with opiate withdrawal syndrome in the ER to quickly and effectively manage symptoms, along with a referral to continued treatment.

Suboxone Affordability: Program that helps people who are un- or under-insured pay for opiate use disorder medications.

Jail-Based MOUD: Screening and connection to a MOUD provider while incarcerated, paired with continued treatment and recovery resources upon release.

ODMAP: Utilization of a national overdose mapping tool by public safety and emergency services. Used to deploy response plans and address increases in overdose incidents.



Workforce Development: Fellowship program to support those pursuing a career in behavioral health, with a focus on increasing the number of local diverse providers.

Overdose Fatality Reviews: Individual death reviews by a multidisciplinary team to identify system gaps and innovative community-specific overdose prevention and intervention strategies.

Prevention and Education: Community- and school-based prevention and education campaigns, executed in multiple languages, designed to prevent opiate misuse and promote the availability of local resources.

Peer Recovery Navigators: Navigators, with lived experience, are placed in the community to provide support to people in recovery.

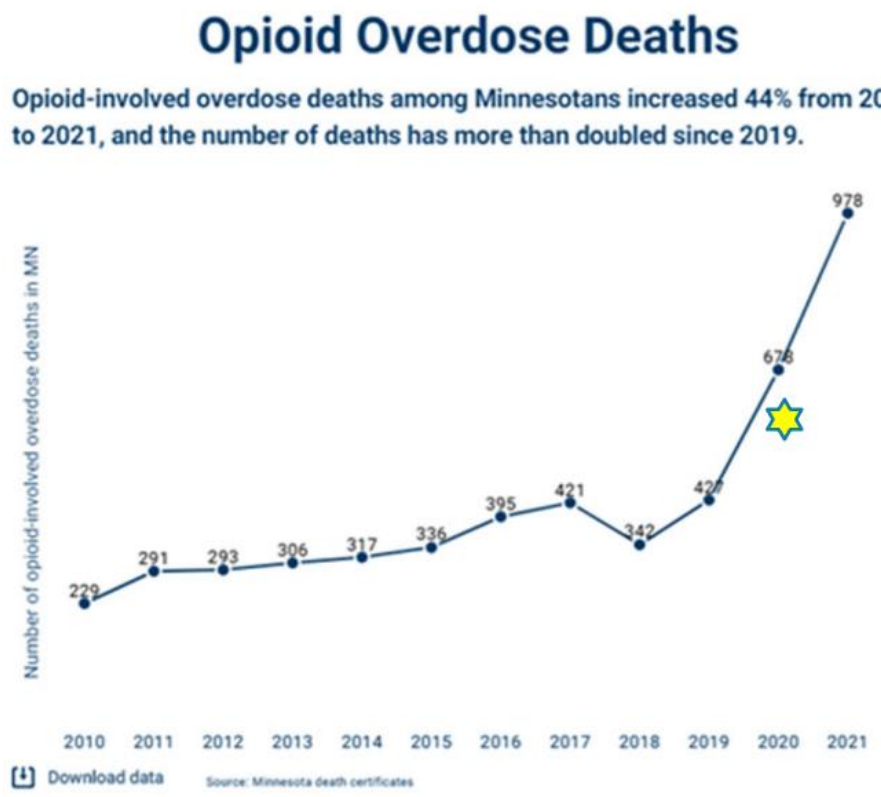
Naloxone Availability: Free pick-up, drop-off, mail-home, and targeted training and distribution. First responders and community organizations carry naloxone to respond immediately to overdose emergencies.

Fentanyl Test Strips Distribution: Free fentanyl test strip pick-up, drop-off, mail-home, and targeted distribution.

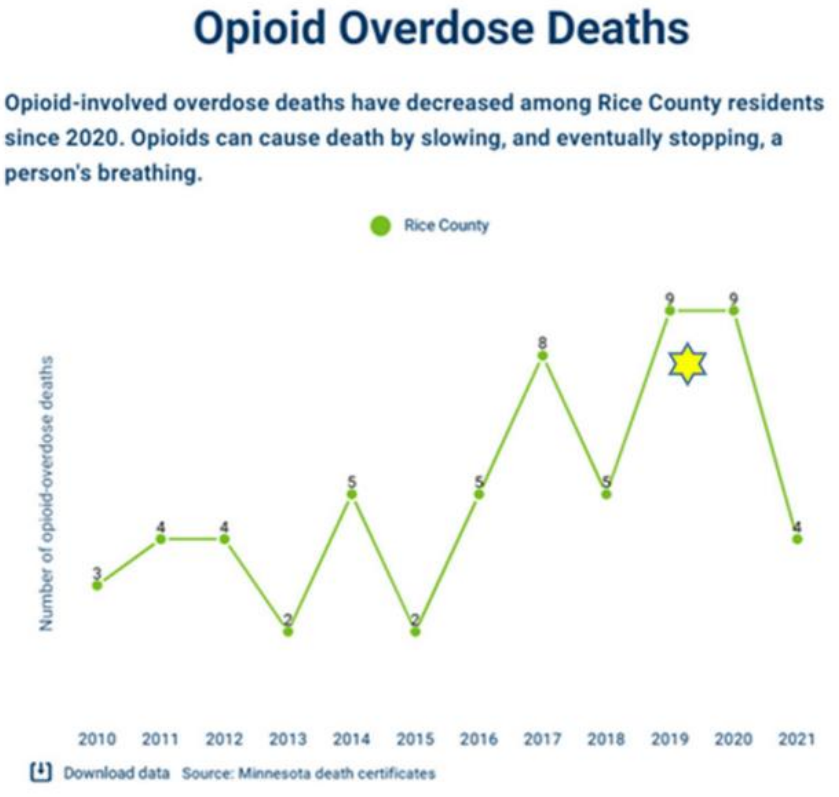
Take It To The Box: Various collection locations for community members to safely dispose of unneeded prescription and over-the-counter medications to prevent medication misuse.

EARLY IMPACTS IN RICE COUNTY – OVERDOSE DEATHS COMPARISON

MINNESOTA



RICE COUNTY



INFORMATION SHARING AND OUTREACH IN OTHER COUNTIES

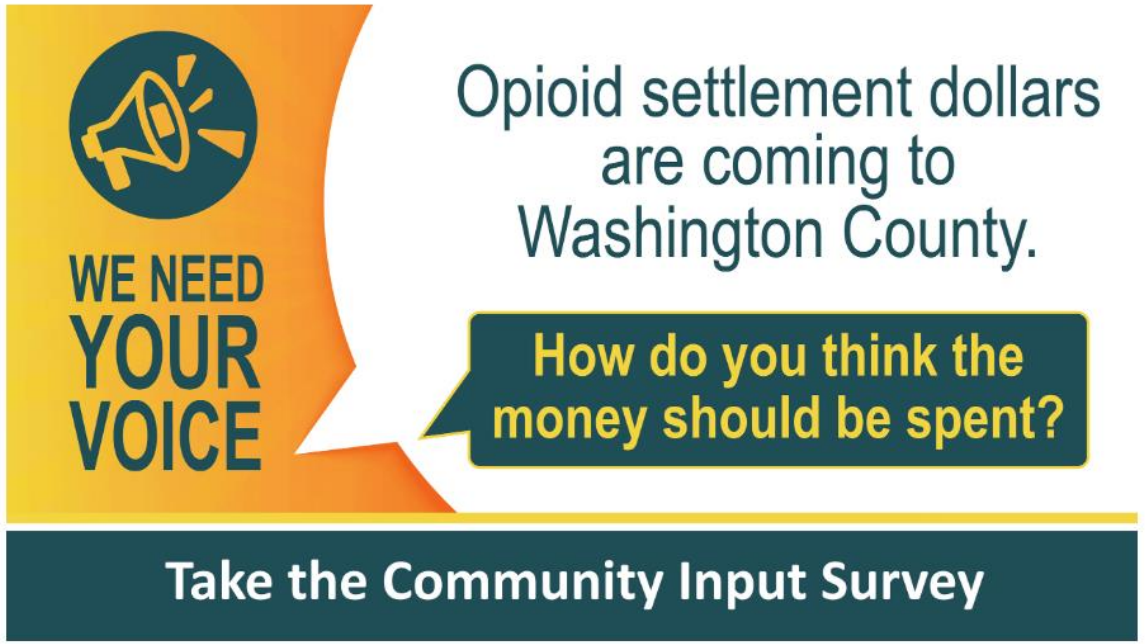
- Various other counties have established webpages within the public health section of their county website devoted to settlement funds, presenting the background and data to the community
  - Wright, Washington, Ramsey, and Polk counties are just a few examples
- Featured on some sites is information on a county Opioid Advisory Council, if established
- Others display information on county-wide surveys and outreach events, as well as survey results and action plans if available

Health Data

Opioid Settlement Funding

Home › Departments › Public Health and Environment › Assessment and Planning › Opioid Settlement Funding

Opioid Settlement Funding



Washington County is committed to an opioid settlement funding approach that:

- Embraces a philosophy of harm reduction.

Contact us for assistance with the web page or survey including interpreter, translation, or accessibility requests.

Contact PHE

Public Health and Environment
Phone: 651-430-6655
Fax: 651-430-6730
TTY: 651-430-6246
Email Staff

Washington County Government Center
Room 4600
14949 62nd Street North
Stillwater, MN 55082

Office Hours
Monday - Friday

Opioid Settlement Advisory Council

Wright County's expected portion of the settlement is $3,770,945.03

Wright County is committed to reducing the negative impacts associated with opioid use disorders by convening key sectors on an Advisory Council. The Opioid Settlement Advisory Council will guide the spending of National Opioid Settlement dollars to save lives and prevent further damage.

- Contact information – opioids@co.wright.mn.us

NATIONAL SETTLEMENT	ADVISORY COUNCIL	DATA	FUNDING PRIORITIZATION SURVEY

The Opioid Settlement Advisory Council released a Funding Prioritization Survey in December 2022 to help identify the community's input on how the opioid funds should be spent. The surveys were offered electronically and on paper, in both English and Spanish.

The data was analyzed and will help identify funding priorities and allow funds to be awarded using a Request for Proposals (RFP) process expected to be released by mid-2023.

CURRENT OPIOID INFRASTRUCTURE IN STEELE COUNTY

What do we already have in place?

WHAT RESOURCES AND INITIATIVES DO WE HAVE NOW?

MAT

- Currently there are 3 waivered MAT providers serving the county
  - Two at SCHRC, one at Mayo
  - Steele HealthFinders does not have a MAT provider, but Rice providers can travel upon request
  - Starting 6/27/23, the federal "X-waiver" requirement is no longer in place

Law Enforcement

- Officers carry naloxone
- South Central Drug Investigation Unit → mobile unit serving Steele, Freeborn, Waseca counties and Faribault
  - Report an increase of opioid abuse and the potent synthetic opioid, fentanyl in the past year
  - Participate in ODMAP
- Take it to the Box at Steele County Law Enforcement Center and Blooming Prairie City Hall

Naloxone Distribution

- Carried by first responders
- All pharmacies carry Naloxone, however the majority require a prescription and cost is determined by insurance
- One free access point in the county, at HealthFinders
  - PH is in the process of becoming another
- Owatonna MS and HS are establishing Naloxone policies

SOME OPPORTUNITIES FOR GROWTH:

- Expanding MAT accessibility/affordability, emphasizing jail-based populations and warm handoffs from ED
- Establishing a rapid-response team and/or peer recovery specialists to engage the community
- Increasing use of ODMAP and other data-gathering systems, and conduction of overdose fatality reviews
- Expansion of Take it to the Box, syringe disposal programs, and free Naloxone access points
- Increase in multi-sector and community collaboration, including formation of an Opioid Advisory Council

TIMELINE

Current state	Quarter 2 2023	Quarter 3 2023	Quarter 4 2023	Quarter 1 2024
PH gathering data and resources, and beginning to meet with county stakeholders for input.	With feedback from initial discussions, continue to expand circle and meet with other community partners.	Gather broader community feedback on funding priorities via a county-wide survey. Begin to develop a county opioid response strategic framework.	Review and share data from community survey. Develop funding structure and processes guided by results.	Establish opioid advisory council and formal structure for settlement fund distribution.

THANK YOU!

Questions? Please contact:

Maddie Hessian

Madelyn.Hessian@steelecountymn.gov

Discussion

We want your feedback!

- ❑ What do you see as the needs of the county when it comes to addressing opioid misuse?
- ❑ How would you like to see settlement funding distributed? What do you see as funding priorities in the county?
- ❑ We will be working towards the formation of an opioid advisory council with various community partners. Is this something you or another member of your department would be interested in participating in?