

# Agenda and Minutes

## Washington County Opioid Settlement Council

### Meeting Information

- Date and time: May 21, 2025 (Wednesday) from 4:00 pm to 5:30 pm
- Location: Washington County Government Center, Stillwater
- Council meetings are held on the third Wednesday of each month from 4:00 pm to 5:30 pm.
- Members of the public are welcome to attend council meetings as observers and have an opportunity to share comments during the designated period.

### Opioid Settlement Council Members

- |                                                    |                                                    |                                                  |
|----------------------------------------------------|----------------------------------------------------|--------------------------------------------------|
| <input type="checkbox"/> Emily Brunner             | <input type="checkbox"/> Josephine Igwacho         | <input checked="" type="checkbox"/> Jay Pernu    |
| <input checked="" type="checkbox"/> Deb Chmielecki | <input type="checkbox"/> Lori Kelley               | <input checked="" type="checkbox"/> Seth Perry   |
| <input checked="" type="checkbox"/> Jessica Feider | <input checked="" type="checkbox"/> Rose Kosin     | <input type="checkbox"/> Carla Schweich          |
| <input checked="" type="checkbox"/> Kristi Gullett | <input type="checkbox"/> Denise Lasker             | <input checked="" type="checkbox"/> Jamie Steber |
| <input type="checkbox"/> Alicia House              | <input checked="" type="checkbox"/> Jess Muszynski |                                                  |

### Public Health and Environment (PHE) Chief Strategist Representatives

- Rolando Vera | *Correctional Health Nursing Manager*
- Sean Young-Stephens | *Public Health Program Coordinator*
- Allison Spears | *Administrative Assistant*

### Agenda Items

- Public comment period
- Welcome and introductions
- Updates
  - 2025 timeline

*PHE suggested some updates to the council's 2025 timeline. The changes extend the planning/evaluation period and shift the 2025 funding application process back by about two months. Council members were supportive of the updated version.*

- Breakdown of grant spending to date

*PHE provided a comprehensive update of the current status and budget for each of the eight projects funded by opioid settlement dollars.*

- Facilitated activity: consider current strategies and opportunities

*Council members engaged in a facilitation conducted by PHE. The facilitation was structured around the strategy categories from the Minnesota Opioid Memorandum of Agreement (MOA). Council members began by sorting seven key priorities from the [Community Input Survey](#) into the MOA categories organized in a table. Next, they sorted the eight currently funded opioid settlement projects into the table. Finally, they reflected on the completed table and brainstormed potential opportunities and focus areas for the next round of funding.*

*Materials and results from the facilitation are included in later pages of this packet.*

- Closing and next steps

*In the coming months, the council will continue planning work in the lead up to the 2025 funding application process which will open in Quarter 3. PHE will continue to coordinate with current grantees.*

# Shared Agreements

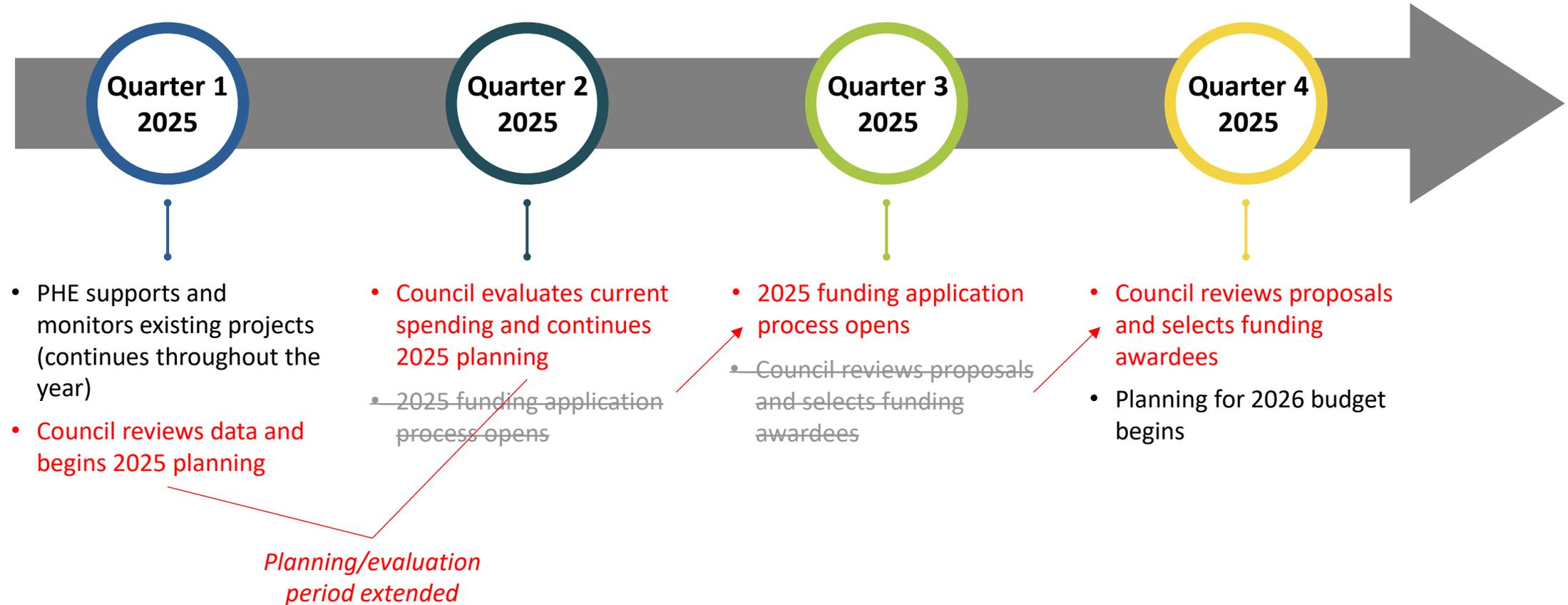
- Honor confidentiality
- Be present at meetings and participate
- Listen to understand, not respond – we all have something different to offer
- Be open and respectful to the ideas of others – use respectful language to talk about those impacted
- Speak from your own experience and speak objectively
- Take space/make space – everyone has an equal voice during the meeting
- Have an agenda and stick to it – be efficient
- Only one person speaks at a time

# Public Comments

- Welcome!
- Please introduce yourself
- Please limit comments to a maximum of 3 minutes



# Suggested Update – 2025 Timeline



# Strategy Categories from the Minnesota Opioid Memorandum of Agreement (MOA)

## **A. Treat Opioid Use Disorder (OUD)**

Support treatment of Opioid Use Disorder (OUD) and any co-occurring substance use disorder (SUD) or mental health conditions through evidence-based or evidence-informed programs. This includes Medications for Opioid Use Disorder (MOUD).

## **B. Support people in treatment and recovery**

This strategy includes funding support services, such as peer recovery specialists or care navigators and supporting Recovery Community Organizations and Recovery Oriented Systems of Care. This strategy includes ensuring robust support is available by providing a full continuum of care for SUD and funding wrap-around services such as housing, transportation, education, job placement and training, and child care.

## **C. Connect people who need help with the help they need (connections to care)**

This includes identifying SUD and other risk factors, supporting MOUD in the emergency department, and connecting individuals to services following an overdose. Peer recovery specialists are often an effective way to connect individuals to the help they need.

## **D. Address the needs of criminal justice-involved persons**

This includes supporting diversion and deflection programs that reroute people out of the criminal justice system and into treatment, providing MOUD to individuals with OUD in jail, and connecting individuals leaving jail to MOUD, harm reduction, and wrap-around services in the community.

## **E. Address the needs of the perinatal population, caregivers, and families, including babies with neonatal opioid withdrawal syndrome**

This includes providing MOUD and recovery services and supports to the perinatal population, education and support to families affected by NOWs, and trauma-informed services to reduce the negative impact of adverse childhood experiences (ACEs).

## **F. Prevent over-prescribing and ensure appropriate prescribing and dispensing of opioids**

This includes efforts to educate and train healthcare providers, support non-opioid treatment alternatives, and improve the use of the Prescription Drug Monitoring Program (PDMP).

## **G. Prevent misuse of opioids**

Support efforts to prevent substance misuse through public education campaigns and evidence-based youth primary prevention programs. Jurisdictions should be cautious of funding prevention programs that do not have evidence supporting their effectiveness. Several resources are available to help jurisdictions select evidence-based programs that are likely to be effective.

## **H. Prevent overdose deaths and other harms (harm reduction)**

This includes increasing the availability of naloxone and fentanyl test strips, supporting and expanding

syringe service programs, infectious disease testing, and increasing awareness of the Good Samaritan Law.

#### **I. First responders**

In addition to items in sections C, D, and H relating to first responders, support first responders in response to the overdose epidemic.

#### **J. Leadership, planning and coordination**

Support efforts to provide leadership, planning, coordination, facilitations, training, and technical assistance to abate the opioid epidemic.

#### **K. Training**

This includes staff training or networking programs that improve the capability of organizations to abate the overdose epidemic and supporting infrastructure for cross-systems coordination to prevent overdoses and related harms.

#### **L. Research**

This strategy includes data collection, epidemiological monitoring and surveillance, and evaluation of opioid abatement strategies.

#### **M. Post-mortem**

Support strategies related to the postmortem period, such as toxicology testing, autopsies, death investigations, and overdose fatality reviews.

*Sources: The 13 strategy categories (A through M) are from Exhibit A of the [Minnesota Opioid Memorandum of Agreement \(PDF\)](#). The descriptions are excerpts from the Minnesota Department of Health (MDH) [Local Public Health Guide to Spending Opioid Settlement Funds \(webpage\)](#), accessed May 2025.*

# Opioid Settlement Funding Project Descriptions



## Family Recovery Programming

Thrive! Family Recovery Resources

Funding amount: \$37,348

**Project description:** Thrive! Family Recovery Resources (Thrive) is a recovery community organization (RCO) that brings hope, help, and healing to the families of loved ones struggling with substance use disorder by providing resources, peer support, education, advocacy, and connections with compassion, kindness, and love. This project will support Thrive's implementation of the evidence-based *Strengthening Families Program* in Washington County, offering workshops in English and Spanish. This program has been researched and is highly effective in equipping parents with actionable solutions, improving the relationship between the parent and child, mitigating harm and reducing negative behaviors in the child.



## Technology and Access to Care

YourPath

Funding amount: \$158,750

**Project description:** YourPath exists to respond to the suffering in our communities caused by issues related to substance use and worsened by systemic inequities and discrimination. The *ACCESS: Advancing Community Care and Effective Support Systems* program is a Washington County-based collaborative effort aimed at improving access to evidence-based treatments for substance use disorders (SUD) and common comorbid issues that accompany SUD. This program has two parts:

- A low-barrier, collaborative care model
- An innovative software platform to power community response

YourPath's unique blend of collaborative services and innovative technology allows for improvement in the entire system of care in Washington County, not just the addition of another service or program.



## Focused Community Education

ShelettaMakesMeLaugh, LLC

Funding amount: \$64,800

**Project description:** ShelettaMakesMeLaugh.com is a Twin Cities-based podcasting platform, multi-media production company and integrated marketing firm. With a loyal following of subscribers, the organization floods social media channels with key messages that promote specific activities and initiatives that target the black community. This project supports a multi-media education campaign revolving around a series of podcast interviews that address the full complement of opioid awareness, risks, treatment options, and programs available to the community. The education and awareness campaign will focus messaging on the youth, teens, and adult populations of all ethnic demographics.



## Recovery and Peer Support

WayMakers to Recovery

Funding amount: \$120,000

**Project description:** This project supports the establishment of *WayMakers*, a new recovery community organization (RCO) that is currently being developed in Forest Lake. *WayMakers'* plans include:

- Onboarding and training Certified Peer Recovery Specialists (CPRS)

- Improving access to Medication Assisted Therapy and Harm Reduction
- Creating a strong recovery community

Those who are at or below poverty level will benefit the most from this project.



## Hispanic/Latino Community Health

Wellshare International

**Funding amount:** \$50,000

**Project description:** With 45 years of experience pioneering the Community Health Worker (CHW) model in Minnesota, Wellshare has deep roots in community health practices and long-established trust in the communities they serve. Wellshare’s *Project Salud* will use a holistic mental health and substance abuse education/promotion strategy to reduce stigma, promote access to care pathways, and provide culturally relevant resources and education to combat addiction. The focus population for all activities are Latin/x leaders and community members of all ages, within Washington County zip codes.



## Education in Rural/Faith Communities

Elim Lutheran Church

**Funding amount:** \$9,000

**Project description:** This project from Elim Lutheran Church in Scandia will support an educational documentary podcast and resource that aims to inform listeners about the diverse addiction and mental health issues faced by faith communities in Washington County. Elim Lutheran Church is focused on:

1. Education and Stigma Reduction of Addictions and Mental Health Issues
2. Connecting Rural Communities and Churches with Evidence-Based Interventions

The project is multicultural, multi-faith, BIPOC-inclusive, LGBTQIA+-inclusive, and interdenominational in focus.



## Youth Programming in Schools

Change the Outcome

**Funding amount:** \$50,000

**Project description:** Change the Outcome’s mission is to provide focused, real time, fact-based learning opportunities for Minnesota youth, educators, parents, and community members on substance use disorder and the opioid epidemic. With this project, Change the Outcome aims to broaden their impact within Washington County by forming new partnerships with school districts, particularly focusing on schools that serve underserved populations and those in more rural areas. Education on the opioid epidemic can prevent addiction, overdoses and overdose fatalities, reduce stigma, and empower people to ask for or offer support and save lives.



## Support for Veterans and First Responders

Invisible Wounds Project

**Funding amount:** \$30,000

**Project description:** The mission of the Invisible Wounds Project is to positively impact and enhance the lives of those who serve(d), including military, police, fire, EMS, frontline medical staff, corrections, dispatch, and their families related to mental health and wellness. The organization provides a space for safe and healthy social connection, therapeutic services, therapy resources, and regular groups and activities that are tailored to their specific at-risk group. This project will specifically support increased social connection activities and family support.

# Washington County Opioid Settlement Council Facilitation Results – May 21, 2025

MOA Categories	Community Input Survey Priorities		Currently Funded Projects			
A. Treat OUD	#4: Medications for treating opioid use disorder					
B. Support people in treatment/recovery	#5: Treatment during pregnancy	Comments theme: Treatment/recovery support	Recovery and Peer Support: WayMakers to Recovery			
C. Connections to care	#3: Warm handoff programs		Technology and Access to Care: YourPath			
D. Justice-involved persons	Comments theme: Justice system/incarcerated people					
E. Perinatal population						
F. Prevent over-prescribing						
G. Preventing misuse	#2: Prevention programs		Family Recovery Programming: Thrive! Family Recovery Resources	Focused Community Education: ShelettaMakesMeLaugh, LLC	Hispanic/Latino Community Health: Wellshare International	Youth Programming in Schools: Change the Outcome
H. Harm reduction	#1: Naloxone access					
I. First responders			Support for Veterans and First Responders: Invisible Wounds Project			
J. Leadership/planning/coordination			Education in Rural/Faith Communities: Elim Lutheran Church			
K. Training						
L. Research						
M. Post-mortem						

**Reflection: potential opportunities and focus areas**

- Diversifying strategies
- Focusing on specific strategies
- Naloxone
- Syringe services or other harm reduction
- Justice-involved individuals
- Supporting organizations with funding gaps
- Non-opioid treatment alternatives
- Education on MOUD