Health & Human Services and Public Safety Committee Minutes

Tuesday, October 13, 2020, 5:30pm, Remote Meeting

Committee Attendance:

Belinda Ray, Chair (District 1), Tae Chong (District 3), Pious Ali (At-Large).

Councilors in Attendance:

City Staff:

Kristen Dow, Director of Health and Human Services; Jennifer Thompson, Associate Corporation Counsel; Bob Fowler, Director of Public Health; Bridget Rauscher, Chronic Disease Prevention Program Manager; Adam Harr, Executive Assistant for Social Services.

Meeting called to order at 5:32 PM.

AGENDA ITEM 1 – Announcements

AGENDA ITEM 2 – Approval of Minutes

- Councilor Chong moved to approve the minutes, Councilor Ali seconded and the minutes were approved unanimously.

AGENDA ITEM 3 – Updates

- Kristen Dow, Director of Health and Human Services gave an update on the new Homeless Services Center as well as general shelter updates.
    - Must leave the Expo by October 25th but still can only have 75 people at OSS.
    - Currently working on an MOU to use the Joyce House at County Way for temporarily emergency housing.
    - Currently negotiating rates to have a block of rooms at one hotel similar to what Bangor has done.
    - Homeless Services Center is moving forward.
        - Will include the services previously planned: peer, medical, mental health and substance use, and employment services, laundry and food on site.
    - Councilor Chong Asked how many people are at the Expo.
        - Last night there were 31 individuals.
        - Looking at the hotel as well as Joyce House because numbers increase in winter. .
        - New people presenting for shelter are placed in hotels using GA.
            - Looking to consolidate with a short term lease into one hotel operated more like a shelter.
    - For people who do stay in hotels longer term, at what point do we consider people as part of the larger population at OSS or Joyce House?

        - With the established winter plan, it is possible to bring people in to fill the shelter.
    - We are hiring housing councilors
    - What is our GA acceptance rate and is it till in the high 90%? It has been low during COVID-19.
        - Will get this number.
    - Councilor Ray asked if there is a timeline on the State-funded hotel.
        - Director Dow is hoping to have something solidified by the end of October. It would be similar to the PUI/Respite shelter being run by the Jetport which is month to month based on the pandemic emergency.
    - Councilor Ray asked about the plans for the new Homeless Services Center on Riverside Street. There was along public process in this committee with a site plan up next. They understood needs but were unsure how the pieces would fit together without a site; now that the site has been chosen, staff are working on fitting those pieces to the site. The next step is seeing those components chosen in the public process in this committee worked out and inform a site plan review.
        - This was pre-covid and bed spacing needs to be considered now.
        - The homeless services center needs to keep moving forward as the Joyce House agreement expires in April and we are in hotels month to month.
    - Councilor Chong asked if the state is aware how much we are spending on hotels and the associated expenses. Do people placed in individual rooms at hotels feel it is a better experience?
        - The State is aware the costs. We take responsibility being good stewards of the City's money and the State's money.
        - There is isolation in hotels and feelings towards hotels will be different person to person.

AGENDA ITEM 4 – Mental Health

- Bob Fowler, Director of Public Health, explained he will contextualize mental health and substance use with national level data.
    - US
        - 2019 had the highest number of drug related deaths on record:
        - Life Expectancy has gone down as a result of the opioid epidemic.
        - 72,000 died last year due to drug overdose, a 5% increase; 2020 is expected to increase by 13%
        - Suicide rates have increased 35% over the past 20 years.
    - Maine
        - Drug fatalities up 23% in 1st quarter 2020 versus prior quarter (127 vs 103)
            - Opioid involvement in 82% of cases
            - Cocaine/crack in 30%
            - Methamphetamine in 16%
            - Non-pharmaceutical in 71%
- Trends that negatively impact mental health and substance use.
    - Economic Trends
        - Widening economic disparity

        - Stagnant wages that saw 2018 adjusted wages are lower than those in 1973.
        - Loss of good jobs and union jobs.
    - Hopelessness increases with the loss of opportunity seen in the above indicators.
    - Impacting everyone.
- Loss of community and civic engagement.
- Loss of "Social Capital" reducing the ability to find a job, recover from illness and cope with stress.
- Epidemic of Loneliness with measurable health impacts.
- People with Mental Health and Substance Use Disorder are especially impacted.
    - Substance Use isolates people to begin with.
- Increase in incarceration rates impacting mental health in our communities.
    - Rates of incarceration increase fivefold since 1970s.
    - Families separated and children are raised without parents, often fathers.
    - Disparity in incarceration rates:
        - 1 in 9 men
            - 1 in 17 white men
            - 1 in 3 black men
            - 1 in 6 Latino men
        - 1 in 56 women
            - 1 in 111 white women
            - 1 in 18 black women
            - 1 in 45 Latina women.
    - Makes it extremely hard to find housing.
- Criminalization of poverty.
    - Poor people at greater risk of being fined, arrested, or incarcerated for minor offenses.
    - Impacts of criminal justice involvement can depress wages for entirety of a career.
- Adverse Childhood Experiences (ACEs)
    - ACEs are traumatic childhood events that can have lasting, cumulative effects on health, behavior, and life potential.
    - They are counted with a cumulative score; 4 and above see greatly increased health risks and social determinants of health including being more likely to smoke, have a substance use disorder and die by suicide.
- "Deaths of Despair," deaths from drugs, alcohol, and suicide which arose from:
    - Loss of status
    - Loss of a good job
    - Loss of hope for one's kids.
    - On the rise before COVID-19.
- Portland
    - Resilience
        - Strong community collaboration
        - Much inter-departmental work within City
        - Close working relations with state partners like the CDC
        - Maine has kept Covid-19 infection rates low.

        - Collaborating with other communities on best practice responses.
        - Health of Portland report provides good baseline information about the health of our community.
    - Covid-19 is disrupting the lives and challenging the mental health of all of us
        - No one is spared the impacts
        - Family lives disrupted
        - Increased isolation
        - Usual coping mechanisms unavailable
        - Sense of uncertainty about the future
    - Impacts are greater for the most vulnerable:
        - Increasing sense of desperation
            - Loss of day spaces
            - Challenges with bathroom access
            - Difficulty accessing food and water
        - Disruptions of the "underground economy"
    - Difficult to foresee the long-term future. In short term:
        - Retain and build sense of community and mutual caring
            - Safe Halloween practices.
        - Address basic safety net needs such as food and housing
        - Employ harm reduction approaches
            - Keep people as well as possible while they are struggling; keep people alive.
        - Redouble efforts to outreach to our vulnerable neighbors.
        - Will resume longer-term planning work on comprehensive Community Health Improvement Plan when situation stabilizes.

Committee questions and discussion:

- Councilor Chong asked if Public Health were to create a dashboard for Portland, what would be looked at in Portland? (unemployment, substance use, etc.)
    - There are public health indicators and other social determinants of health that are tracked. Unemployment and more social factors would be beneficial to track.
    - As of October 1st, the research and evaluation program staff that tracks those indicators is no longer furloughed from that work.
- Councilors Chong was on a zoom call that shared statistics on businesses not reopening; what are some indicators that should be monitored and how can community be built around people who will face difficult times around the corner. What indicators can predict and prevent vs looking at things like overdoses after the fact.
    - Prevention is at the core of what Public Health does; while the specific dashboard may not be in place now, prevention and indicators are constantly monitored and adapted.
    - The United Way Thrive2020 looks at such social determinants of health.
    - Covid will impact these.
- Councilor Ali asked if this is the first Health of Portland report.
    - It is the First Health of Portland Report, previously we had annual reports.
    - The Health of Portland Report builds on the annual reports with a holistic view of the health of Portland.

        - New indicators may be added to the Health of Portland Report.
        - Health of Portland Report set to be produced every three years.
            - The next will be in 2022.
- Councilor Ray is interested in particular project community partners are engaged with; are there any projects or area Director Fowler would like to share?
    - Police Department is working on alternative police response: ways to have more of a public health response to certain issues.
        - Chief Clark discussed this direction at the Finance Committee.
    - Others are too new to talk much about.
- Councilor Ray asked about the full range of harm reduction efforts; what do those look like?
    - Harm reduction is a wide term.
    - He was referring to things like the use of Medication Assisted Therapies (MAT) and the Needle Exchange Program.
- Councilor Chong said that mental health has been on his radar since June and would like to have some kind of small update each meeting.
    - How do we assess the epidemic of loneliness?
        - Number of EAP requests of frontline staff? Public equivalent?
        - 2-1-1 calls?
    - How do you measure building community?
    - The election and holiday seasons are milestones that may exacerbate mental health.
    - Are there populations who need mental health outreach during these times?
    - COVID will have ACEs impacts.
    - He would like to see resources for providers and some sort of mental health/substance use campaign.

AGENDA ITEM 5 – Overdose Prevention Sites

- Bridget Rauscher, Chronic Disease Prevention Program Manager last updated the committee in May of 2019.
- Safe House
    - Ruled that Safe House did not violate federal drug laws due to the medical supervision aspect in October, 2019.
    - The Justice Department appealed.
    - Safe House requested explicit permission to open a supervised injection site.
    - The Judge affirmed Safe House.
    - In February, 2020, Safe House stopped their plans due to community opposition; they made clear it was not due to any possible violation of federal law.
    - Stay on February 2020 ruling until the appeal process is resolved.
- San Francisco, California
    - February, 2020 – Legislation was introduced by the Mayor and Supervisor that would permit nonprofits to open safe injection sites where people can inject drugs under medical supervision.
    - June, 2020 – San Francisco Supervisors unanimously approved an ordinance creating an Overdose Prevention Program in an effort to prevent overdose deaths.
    - August, 2020 – Proposed bill failed to pass in the California legislature.

- New England Journal of Medicine (NEJM) published a report evaluating an unsanctioned safe consumption site in the United States in August, 2020. In 2014, an organization in an undisclosed US city opened an unsanctioned safe consumption site.
    - Site staff entered data documenting each:
        - Drug injection
        - Type of drug used
        - Opioid-involved overdose
        - Related death that occurred during injections at the site.
    - Over the first five years of operation, there were"
        - 10,514 injections and
        - 33 opioid-involved overdoses (all of which were reversed by naloxone administered by trained staff).
        - No person who experienced an overdose was transferred to an outside medical institution and
        - There were no deaths.
    - The results of the data, according to the author of the study, suggest that implementing sanctioned safe consumption sites in the United States could reduce mortality from opioid-involved overdose.
- Councilor Chong asked what the next steps are: waiting for an appellate court to make a decision?
    - Jen Thompson can answer in public session or wait for the executive session.
- Councilor Ray would like to cover the public aspects before asking legal questions in executive session, adjourning from the executive session.
- Start the next meeting with a brief overview of resources available to people with substance use disorders.
    - Maine Med has a program and would like to learn more.
- Councilor Ray asked about SF's legislation for nonprofits to open overdose prevention sites. What have other communities done?

AGENDA ITEM 5 – Next Steps

- The next meeting is November 10, 2020.
    - Overdose Prevention Sites
        - Overview of available resources locally and regionally
        - Public Hearing
        - Next steps.

- Councilor Ali moved end the public portion of the meeting to go into executive session and to adjourn from the executive session when it finishes. Councilor Chong seconded.

Public comment on the executive session opened at 7:07 PM and closed at 7:08 PM.

- The motion passed unanimously.
- The committee went into executive session with the Committee members in attendance, Jennifer Thompson, Kristen Dow, Bob Fowler and Bridget Rauscher.