Health & Human Services and Public Safety Committee

Tuesday, January 11, 2022, 5:30 PM
Remote Meeting

Councilor Tae Chong, District 3, Chair
Councilor Mark Dion, District 5
Councilor Victoria Pelletier, District 2
Councilor Anna Trevorrow, District 1

1. Announcements

   a. Zoom Link:
   Please click the link below to join the webinar:
   https://us06web.zoom.us/j/84096089380?pwd=VGk2cThxYVBFTU51VEFLUmlEWVZZUT09
   Passcode: 020025
   Or One tap mobile :
   US: +19292056099,,84096089380#,,,,*020025# or +13017158592,,84096089380#,,,,*020025#
   Or Telephone:
   Dial(for higher quality, dial a number based on your current location):
   US: +1 929 205 6099 or +1 301 715 8592 or +1 312 626 6799 or +1 669 900 6833 or +1 253 215 8782 or +1 346 248 7799
   Webinar ID: 840 9608 9380
   Passcode: 020025
   International numbers available: https://us06web.zoom.us/u/kDofnLVaK

2. Review and Approval of Minutes from November 9, 2021

   a. Vote on draft minutes

3. Updates

   a. HHS Update
   b. Fire Update
   c. Police Update

4. Overdose and Naloxone Distribution Update

a. Staff presentation

5. 2022 Agenda Setting

6. Next Meeting: February 8, 2022

NOTE: Since there are no action items on the agenda, there will be no opportunity for public comment at this meeting. Please feel free to send comments to members of the committee on any issue at any time via email. Councilors email addresses are available on the city website: www.portlandmaine.gov

The meeting can be watched online via livestream: www.portlandmaine.gov/livestream

Keep up to date with the new shelter design and planning process at the City's website

www.portlandmaine.gov/shelterplanning

Health & Human Services and Public Safety Committee Minutes

Tuesday, November 9, 2021, 5:30pm, Remote Meeting

Committee Attendance:

Tae Chong, Chair (District 3), Mark Dion (District 5), Belinda Ray (District 1)

Councilors in Attendance:

City Staff:

Kristen Dow, Director of HHS; Tina Pettingill, Deputy Director of HHS; Aaron Geyer, Director of Social Services; Adam Harr, Executive Assistant for Social Services. Christopher Goodall, Assistant Fire Chief; Bridget Rauscher, Chronic Disease Prevention Program Manager; Ethan Hipple, Director of Parks, Recreation & Facilities; Heath Gorham, Interim Police Chief; Kirsten Goodrich, Tobacco Prevention Program Coordinator; Chelsea Hoskins, Resettlement Coordinator.

Meeting called to order at 5:40 PM.

AGENDA ITEM 1 – Announcements

- October 12, 2021 draft workshop minutes.
    - Councilor Ray moved to accept the minutes; Councilor Dion seconded and the minutes were accepted unanimously.

AGENDA ITEM 2 – September Updates

HHS Update

- 39 Forest Avenue Update
    - Lancaster St staff & GA operations moved on Thursday, October 28th and began seeing clients inside the new location on Friday, October 29th.
    - India Street programs will operate out of 103 India Street November 8-10, staggering them through being fully operational at 39 Forest Ave. on the 15th.
    - HHS won't miss a single day of services through this transition.
- General Assistance Program
        - Total Applications: 1,417
        - Number of denials: 74
        - Denial rate: 5%

- Oxford Street Shelter and contract hotel:
    - OSS average nightly census: 64
    - Contract hotel average nightly census: 133
    - Average individuals placed in hotels through General Assistance: 210
- Overview of the Family Shelter:
    - Number of on-site at the family shelter: 28 families/ 79 individuals
    - Number of families at local hotels for shelter overflow: 125 families/ 402 individuals
- Totals for the Needle Exchange Program (NEP) are as follows:
    - Total number of exchanges: 479 (248 onsite, 231 outreach)
    - Total number of needles collected: 39,310
    - Total number of needles distributed: 39,270
    - Total number of Narcan doses distributed: 252 kits (504 doses)
    - Community needles collected: 1,076
        - Collected from community sharps containers: 563 (52% of total)
- Clinic Numbers:
    - STD Clinic: Patients seen: 105, new patients: 43
    - PCFC: Patients seen: 41, new patients: 5

Asylum Seeker Resettlement Update

- High number of families arriving.
    - 45 families/145 individuals presented for shelter.
    - Of those, 39 families/128 individuals were new arrivals.
    - FS: 29 families/84 individuals
    - Total went up from 429 to 442 individuals.
- Arrivals are starting to happen later in the evening than in the past.
- Started a bi-weekly meeting with Deputy Commissioner Hamm and other staff from the Commissioner's office with representation from MaineHousing.
- Call is scheduled for Friday with the Director of the National Food and Shelter Program to discuss funding.
    - Seeing more direct referrals from the Southern border rather than first going to border communities first then here.
- Temporary housing placements for winter in Old Orchard Beach for 20 families.
    - 2 more families moving this week completing all 20.
    - Staying on FS waiting list since it is a temporary placement.
    - Provider outreach is working with providers connecting to relocate services.
    - Families are able to do their own cooking using stove top burners.
    - Good Shepherd is delivering culturally appropriate food twice a week.
    - Pastors are driving these families to appointments.
    - OOB Town manager reached out and will join a provider meeting.
- Increasing resources available at Quality Inn and Comfort in.
    - Interns orienting families placed from GA to resources on site and providing referrals and applications to benefits they may be eligible for.

        - WIC
        - School
        - Medical providers
        - SNAP Education cooking course
- Gaps presented at the last meeting continue: food, transportation, and hosing.
- Transportation may be addressed through the county ARPA money.
    - Meeting with GPCOG.

Committee questions and discussion

- Councilor Ray said the total average number of individuals sheltered by the city is 888 with 745 in area hotels.
- Councilor Ray asked if other communities are receiving asylum seekers?
    - Not in Maine.
    - We may be eligible for direct southern border funding since families are coming directly here when that is typically only for border cities.
- Are the children in OOB still going to school in Portland?
    - We targeted families without school aged children for the OOB placements.
    - St Josephs college offered housing.
- GA in OOB?
    - Continuing GA through our office based on statute; we will pay for the duration of their stay since it is 6 months or less.
    - Working with Hannaford's in South Portland for them to accept Portland GA vouchers.
- Councilor Chong asked if the funding is from ORR?
    - The border funding is separate from ORR. We believe we can get funding because people are being sent directly here from the border.
    - Shelter costs are $1 million per month; the funding it temporarily funded through FEMA.
- Councilor Chong said we need more funding and will reach out to our representatives.
    - We need a task force to rehouse people in other parts of Maine where there is vacancy.
- Councilor Dion hopes Director Dow and Chief Gorham develop and communicate a plan on community policing in Riverton around the Homeless Services Center.

Parks Update - Encampments

- Director Hipple shared information in encampments.
    - Portend has 1,300 acres of public open space managed by the department.

    - 2 full time park rangers.
        - Duties include dealing with encampments.
        - Camping overnight is not permitted in public parks.
- Tagged Tent Sites = 75 tents.
- Abandoned Tent sites = 84 sites.
- Debris sites from relocated tent sites/encampment sites = 83
- Total number of camp infractions = 242 (Total numbers do not include Deering Oaks Park.)
- Estimated number of hours Park Rangers dedicated to camping infractions = 793 Hours
- Total number of needles collected in 15 parks by Rangers – 2,002 Needles (these are needles found on the ground in parks or campsites, not including those collected in needle collection boxes).
- Skylark Drive was a recent example of an encampment off trails composed of four or five long abandoned campsites.
- Usually just find trash but occasionally weapons are found.

Committee questions and discussion

- Councilor Ray asked about the process of tagging sites and waiting 48 hours; if you come back and no effort was made to clean it up, what happens?
    - Work with other City departments such as HHS staff providing outreach and the then the PD if needed, but this is rare.
- Councilor Dion is concerned that people camping could be shelter resistant.
    - This is a city-wide challenge and is not limited to the peninsula.
- Councilor Ray said that in an earlier draft of the HSC, there was an outdoor sleeping pavilion. If we can make that happen, it will be a game changer for some folks who have been reluctant to access shelter including hotels.
- Councilor Chong thanked Director Hipple for the encampments map.

Overdose Response.

- Fire tracking overdoses due to opioids: in a comatose state, opioid overdoses not presenting in comatose states, and non-opioid overdoses.
- There was consistency in all three categories through June but in August saw an increase in opioid overdoses.
    - Just under 20 opioid ODs in August to just under 40 in October, nearly double.
- November to date: 14 Opioid ODs and 4 non-opioid ODs.
- Fatal overdoes are down.
    - Widespread availability of Narcan is helping reduce fatalities.
- Lack of resources.
    - Attempting bed to bed transfers but not finding success.
    - A lot of services went remote only.
    - Some service providers have a year and half wait list; the ACT team is a 9 month wait list.

Committee questions and discussion

- Councilor Chong said you can see major thoroughfares in and out of the City is where many ODs take place.
- Councilor Chong asked since there are fewer fatalities under covid and what we can do as a city now to reduce ODs?
    - Naloxone distribution has helped lower fatalities, with Public Health, PD and Fire working together.
    - We have not reached Naloxone saturation yet; we are trying to keep alive until resources become available.
    - We can encourage people to be trained on Narcan and be good bystanders by Public Health.
        - As a tier one we can distribute naloxone to anyone interested.
    - Naloxone saturation and normalization of responding with naloxone have helped reduce fatalities.
    - Councilor Dion said we don't know why fatalities are down without looking at the facts of the individual fatalities.
        - State task force: UMaine is reviewing individual OD fatalities.
            - Councilor Dion asked for the task force's contact information.
        - Public Health would be open to a small taskforce if data was shared.
- Councilor Ray asked if surrounding municipalities' first responders carry Narcan?
    - We do not know which but it is becoming more mainstream.
- Councilor Dion asked how many people did we lose?
    - The fatalities are human lives and we should not lose sight of that.
- Councilor Chong said the City Council just passed MaineHealth's recuperation funding. Would that help?
    - Any additional resources are welcome.
- Councilor Chong asked how many staff members are trained to distribute Naloxone and should we increase the number of staff trained on administering Naloxone?
        - Only Public Health can distribute Naloxone.
            - First responders are not able to distribute under the law.
        - First responders and Shelter staff are trained and can administer.

AGENDA ITEM 3 – Flavored Tobacco Ban

- Kristen Goodrich, Tobacco Prevention Coordinator explained the rates of youth flavored tobacco used and the efficacy of bans.
- Bangor was the first municipality in the state to pass a tobacco flavor ban.
- A full flavor ban is important as it includes menthol.
    - Menthol advertising has targeted marginalized communities.
    - Menthol sales increased after the partial flavor ban that did include menthol was implemented.
- Maine increased the legal age to purchase tobacco products to 21 in 2018.

Public comment opened at 6:56 PM.

- Thomas Briant is the Executive Director of the National Alliance of Tobacco Outlets that did a FOIA request and asked the ordinance not go through until the requested information is received. They shared results of a study that shows local flavor tobacco bans increase young adult tobacco use. A significant number of electronic cigarettes using pods were banned and manufacturers of all other electronic cigarette products had to go to FDA review; 6 million have been denied and only one was approved. The FDA is taking action and they would appreciate it if the Council would defer to the FDA.
- Anna Bettencourt of Energy North Group that has three sites in Portland. She is speaking as a category manager in MA. Individual flavor bans do not work. The FDA failed to make a decision in 2020; we cannot rush science. We cannot rush science. We are using science, not emotion. We do not want to sell tobacco to minors; adults should be able to buy flavored tobacco if that's what they choose. They card customers. She asked to let the FDA do their job.
- Liz Blackwell-Moore has two children in Portland schools and is a public health professional and supports the ban. Working in substance use prevention and harm reduction, they know the earlier young people use tobacco, cannabis or alcohol, the higher the risk is for substance use disorder later in life. They speak to any young person who will listen on the importance of waiting as long as possible to use substances. People of color and LBTQ people have been targeted by the tobacco industry because it's known that marginalized communities are at greater risk of addiction. We can talk about e-cigarettes as a harm reduction tool, but there is no evidence that flavoring is.
- Dan Morin Director of Communications and Government Affairs for the Maine Medical Association. 1/13 children alive will die of a smoking related illness. There are $6,000 in employer costs related to smoking. Medicines have flavors because they work on children. The industry uses cartoons and targets menthols to the black community.
- Anne Haskel, resident of Portland, urges strong support for the ordinance. She lost her husband who died at age 52 of lung cancer. He had two kids and who had grandchildren he never got to see. This ordinance could be one of the most important public health measures to prevent high schoolers from nicotine and the related losses. It is a leading cause of preventable disease and death.
- Brett Scott, owner of Smokers Haven, disagrees with including vapes in the ban. He understands for someone who doesn't smoke, it is difficult to see the harm reduction benefit of vaping. The conversation should be around banning all cigarettes. Has it been considered to allow the sale at 21+ only stores?
- James Dowd is the CFO of YMCA of Southern Maine and resident of Portland and father of three. The YMCA of Southern Maine strongly supports the ban of flavored tobacco. A majority of data show youth tobacco use started with a flavored product. They encourage the support of the flavored tobacco ban.
- Elizabeth Nalli spoke on behalf of Portland Public Schools. Every day they see students smoke on and off school grounds, usually flavored vapes. Rarely a day goes by that they do not intervene with students using tobacco on school grounds, usually a flavored vape product. Flavors like mocha and cotton candy target youth; a quarter of high school students in Maine use e-cigarettes. Last week, the Bangor City Council acted to end the sale of these products in their city and asked the committee to act now.
- John Shaer, NECSEMA hopes the Council votes on practicality. If the intent is to prevent youth use, what youth is using should be targeted. Why would ban all flavored tobacco

when only some are used by youth. The USPS announced they will not allow e-cigarettes to be sent through the mail. There isn't any reason for Portland to ban products because the FDA will remove harmful ones from the market. Tobacco retailers in Portland have a 97% FDA verified compliance rate restricting the sale of tobacco to minors. The city issues licenses that allows people to responsibly sell tobacco to adults. The legislature understands not all tobacco products have youth appeal with less reason to act today because of the federal government's action.

- Heather Drake of the Maine Public Health Association spoke in favor of the ordinance to end the sale of flavored tobacco products. Menthol products have targeted people of color, LGBT people and women and marketed them and perceived by consumers as healthier than non-menthol. E-cigarettes have been marketed as healthier. The unfair targeting has been and continues to be seen today. Most youth who use e-cigarettes started with a flavored variety. Please support the ban.
- Shayla Compton is a staff member for the Black Health and Equity and lives in South Carolina. They spoke in support of removing flavors from all tobacco products such as smokeless and hookah. For every product that is removed, another is there to replace it. We are looking at this through health equity; tobacco products are strategically targeted without regard to health outcomes. Tobacco use is a huge barrier to overcoming Covid; tobacco use is a risk factor for severe illness. This would help protect black lives and youth. Removing from any access point is critical.
- Christopher Jackson is a small business owner in Portland. He strongly encourages the committee to reject this ban. He used to smoke and used vaping to quit nicotine. Over 90% of his products are not big tobacco. His store is 21 plus. Customers will drive to another city to buy these products. Smoking kills but vaping is different. He would like statistics on vaping. Harm reduction creates a safer way to use; banning these products will lead to use of other substances.
- Chris Baulier is the director of retail operations for Cigarettes Shopper, which operates 22 tobacco-only stores in Maine and 2 in Portland. A ban would lead to customers leaving for other towns. Local bans place retailers at a severe competitive advantage. The FDA has taken aggressive action against vaping products, denying 6 million vaping products. The local ordinance should be paused for the FDA.
- Phillip Gardiner, Co-chair of the African American Tobacco Control Leadership Council called for the end of sale for all flavored tobacco products. Menthol cigarettes were responsible for 1.5 million African American. Menthol has a numbing effect that allows more poison to be consumed and get more addicted; it's not just a flavor, it's an anesthetic. Menthol was left out of the flavor ban in 2009. If the FDA takes action, it would still take years to see the effects. You may lose sales but you will save lives.
- John Hennessy of Portland and Equality Maine supports the Ordinance. The tobacco industry has marketed to LGBT people and as a result the community smokes at a higher rate than the general population and suffer disproportionately to related diseases. 8/10 children who use tobacco started with flavored products.
- Richard Veillr, health professional and resident of Portland said the tobacco industry has been very successful at recruiting a new generation of addicts through flavored products. Rather than waiting for years for the FDA, we have the opportunity to lead to protect the health or our people. This could save thousands of kids from addiction n Portland.

- Christine Peters is the CFO for the Maine Smoke Shops in Portland. It is disappointing that during Covid they need to fight for the rights of their customers. No one wants to sell tobacco products to minors; they are an adults-only location. She was a smoker and started smoking by stealing her mother's unflavored cigarettes and teaches her children not to smoke. People will travel to wear they can buy menthol and flavored products. Maybe there are other solutions such as limiting advertising or carding at sale.
- Danielle Doctor of Portland is a pediatrician and member of the Maine chapter of the American Academy of Pediatrics and supports the ordinance. They worked as a health coach in addiction of medicine. Addiction is something that can happen to anyone and our children are no exception. We have all walked the streets of Portland and smelled something fruity only to realize it is someone vaping. Students use vapes in school.
- Josh Maynor is a supervisor for the Smoke Shop in Portland. Their stores are adult only and diligent at checking IDS to make sure products don't go to minors. The ban won't prevent residents from acquiring the products. The surrounding towns will gladly accept the tax revenue.
- Dr. Kneka Smith lives in Portland and is a healthcare professional and mother of 4. This issue is personal as they are a cancer survivor and their mother was hooked on menthol cigarettes as a 10 year old. Kids have access now to flavored tobacco products and personally knows children here as young as 11 who use vaping devices. Children are hiding their devices from teachers and parents. Tobacco use is one of the causes of health disparities in in black people.
- Hillary Schneider is the government relations director for ACS CAN. She read a statement for a cancer survivor in strong support of the ordinance. Smoking is a known cause of cancer.
- Allyson Perron Drag, Is the government relations director for the American Heart Association in Maine. We have heard from tobacco industry tonight make the same false claims the industry makes about health impacts of smoking. There will be revenue losses but the health benefits will far outweigh any loss. They respectfully request that the committee moves this forward.
- Anthony Scott owns Portland Smoke and Vape and thinks cigarettes should be banned not flavors. His business helps people quit combustible cigarettes. All types of devices and tobacco products can't be lumped together. 9% of devices used by youth were open source tanks or mods.
- Carol Kelly of Briggs Street in Portland. Juul pods contained as much nicotine as a pack of cigarettes targeting kids. We can't stand by and let the tobacco industry hook another generation of new products. There is a concerning loophole in the ordinance. Puff Bar is a brand of disposable e-cigarettes is the most popular e-cigarette brand among kids. They have switched to use synthetic nicotine to get around the FDA. As drafted, the Portland ordinance Puff Bar could remain on as a product continuing made or derived from nicotine.
- Carol McGruder is a cochair of the African American Tobacco Control Leadership Council. They urge for the strongest laws possible and are currently suing the FDA for not taking action on menthol. The FDA has stated their intent to take menthol, little cigars and cigarillos of the market but interference can get in the way. People need services to get off these deadly and addictive products.

- Jen Jewell of Milton Street is a pediatrician and supports the proposed ordinance. As the child of a smoker, she knows the harm they cause. Her father of laryngeal cancer and then pancreatic cancer. Menthol is used to hide the harsh experience of smoking. Please ban flavored tobacco in Portland
- Matt Moonen is a resident of Thomas Street and executive director of Equality Maine speaking for themselves. Some people view vaping as harm reduction for quitting smoking, but it has nothing to do with the ordinance at hand. The ordinance does not ban vaping, it bans flavored tobacco products. A new device was allowed but only if no flavoring is used. Waiting for the FDA to take action is a deflection. The majority of the HHS committee in Augusta accepted the proposed flavor ban in committee and left the committee with majority support and was carried over and will come back when the legislature convenes next year. They hope it moves forward and implement June first with Bangor.

Public comment closed at 8:16 PM.

Committee questions and comments.

- Councilor Chong said they are looking to ban flavored nicotine, natural or synthetic.
- Councilor Ray moved to recommend for passage, Councilor Dion seconded.
    - Councilor Ray moved to amend to implement on June first, Councilor Dion seconded.
        - The Motion to amend passed 3- 0.
    - The ordinance being voted on includes "natural or synthetic" and language was posted before the meeting.
        - The committee received emails last week that said the as written previously, there are nicotine products that are synthetic which would not have been banned without this language. Councilor Ray would have brought this amendment independently had it not been updated before the meeting.
    - Councilor Dion is worried about what 17-24 do because 14 year-olds model them.
    - Councilor Ray has read emails that came in and hears the concern from people quitting cigarettes using vapes and information shared such as the baker institute report that concludes vaping among teens and young adults has increases significantly and carries risk; most people who vape continued to smoke. She finds it more compelling to pursue the flavor ban. Vaping will remain; only the flavors will be banned.
    - The Committee voted unanimously 3 – 0 to recommend the ordinance for passage by the full Council.
- Thank you Councilor Ray!

AGENDA ITEM 4 – Next Meeting: January 11, 2022

The meeting adjourned at approximately 8:40 PM.

Health & Human Services Department
Kristen Dow, Director

MEMORANDUM

To: Members of the Health & Human Services & Public Safety Committee
From: Kristen Dow, Director of Health & Human Services
Date: December 14, 2021
Re: Month of November Health and Human Services Department Updates

The following data and information is to serve as the monthly update from the Health & Human Services Department to the HHS & PS Committee:

Homelessness and Emergency Shelter Update:

As was reported at the October and November Health & Human Services and Public Safety Committee meetings, the City saw an increase of families in September and had an average of 1.5 families presenting for shelter per day in October. The rate has remained around 1 family per day on average in November, pushing us to the highest numbers in shelter that we have seen to date.

We continue to be on the cusp of reaching capacity with the ebb and flow of shelter requests and housing placements. We have actually reached capacity on various nights recently and staff actively worked to identify additional hotel rooms and used bed management in our shelter, in order to ensure shelter to all those seeking it in these cold months. We have met with both the ME CDC and Portland Public Health officials onsite at Oxford Street Shelter to determine bed placement so that we can safely increase our nightly capacity. We are also currently utilizing hotels in four area municipalities including Westbrook, South Portland, and Old Orchard Beach.

As the number of individuals located in South Portland have increased, the city has experienced an increase in the calls for service at the hotels. As a result, South Portland leadership formally requested hotel owners reduce their calls for service to pre-pandemic levels or risk losing their operating license. Hotel owners are reporting concerns about the potential of having to go before the South Portland City Council for a license suspension or revocation hearing. In an effort to help address these concerns, I convened a meeting with South Portland officials and several local service providers to try and identify needed services and increase those services currently offered at each of the hotels that we are utilizing.

City and HHS leadership continue to communicate with state officials to express the need for regional and state support. As I stated at the October 12th Health & Human Services & Public Safety Committee meeting, we are quickly getting to a point with the numbers we are facing, that

we are fearful we will not be able to provide adequate services to those in need in order for them to be successful.

Overview of Oxford Street Shelter and contract hotel:

- OSS average nightly census 68
- Contract hotel average nightly census 132
- Average individuals placed in hotels through General Assistance: 226

Overview of the Family Shelter:

- Average number of Families/individuals on site in shelter 29 families/79 individuals
- Average number of families/individuals in hotel overflow 135 families/ 446 individuals

Average Nightly Individuals in Shelter in November:

- 951 per night between various sheltering methods

The totals for the City's General Assistance Program are as follows:

- Total Applications: 2383 (there were 1417 applications in October)
- Denials: 81
- Denial rate: 3%

Totals for the Needle Exchange Program (NEP) are as follows:

- Total number of exchanges: 467 (185 onsite, 282 outreach)
- Total number of needles collected: 37,900
- Total number of needles distributed: 38,267*
- Total number of new enrollees: 49
- Total number of Narcan doses distributed: 256 kits (512 doses)
- Community Needles collected: 676
    - Collected from community sharps containers: 499 (73.8%)

*367 more syringes were distributed than collected based upon 10 pack start up kits for new enrollees.

Public Health Clinic Numbers:

- **STD Clinic:** Patients seen: 62, new patients: 20
- **PCFC:** Patients seen: 42, new patients: 5

39 Forest Ave relocation update:

- All programs and locations have been fully moved and are fully operational out of 39 Forest Ave.

Health & Human Services Department
Kristen Dow, Director

MEMORANDUM

To: Members of the Health & Human Services & Public Safety Committee
From: Kristen Dow, Director of Health & Human Services
Date: January 6, 2022
Re: Month of December Health and Human Services Department Updates

The following data and information is to serve as the monthly update from the Health & Human Services Department to the HHS & PS Committee:

Homelessness and Emergency Shelter Update:

In the month of December we have seen an increase of new families arriving from one family per day in November to nearly three families per day in December. These increasing numbers coupled with the increase of individuals seeking emergency shelter through Oxford Street Shelter, has pushed us to the highest nightly average of those in emergency shelters we have seen to date. As of the date of this memo we have 1,017 accessing emergency shelter through our shelter system.

We continue to shelter both individuals and families using a combination of shelter beds and hotel placements. We are now utilizing hotels in five different municipalities, including Portland. With the continued support of our community partners, we are actively working to ensure that the needs of all those in emergency shelters are met. As I stated at our October committee meeting and in my December committee report; the resources of our community are being stretched to the point where the families and individuals we serve will not have access to the resources they need to be successful. City management and HHS leadership continue to notify State officials of the increasing numbers that we are experiencing and urge for assistance with a regional approach for both resettlement and emergency sheltering.

Overview of Oxford Street Shelter and contract hotel:

- OSS average nightly census 78
- Contract hotel average nightly census 130
- Average individuals placed in hotels through General Assistance: 206

Overview of the Family Shelter:

- Average number of Families/individuals on site in shelter 23 families/62 individuals
- Average number of families/individuals in hotel overflow 150 families/ 498 individuals

Average Nightly Individuals in Shelter in November:

- 974 per night between various sheltering methods

Update from the City's Resettlement Coordinator:

Continuous arrivals of new families have drastically increased on-the-ground needs. Bi-weekly meetings continue to be co-led by the Resettlement Coordinator and the town of Old Orchard Beach for the area partners supporting the 20 families at the two properties in this town. We have helped 3 families locate permanent housing which allowed for new families to be placed in these rentals. English classes have begun for adults, and the local grocery store has begun accepting Portland General Assistance vouchers allowing for ease of access for grocery shopping for families in this municipality.

The Resettlement Coordinator continues to coordinate drop-in service providers at the Quality Inn, with an accompanying provider calendar. Beginning in January providers such as Care Partners, Greater Portland Health, and SNAP education programming will be outreaching to Howard Johnson as well.

December proved to be the highest number of newly arriving families in all of 2021, which led to another overflow hotel to be brought on board for family placements in Freeport. The Resettlement Coordinator reached out to existing agencies and area providers to establish food access, medical services, school enrollment processes aid, and identify an initial point of contact for families at this site. Meetings are scheduled to plan additional wraparound services similar to Old Orchard Beach. As numbers grow, the need for families and individuals to receive pertinent information similar to past in-person Cultural Orientations has become apparent. The Resettlement Coordinator, in partnership with the City's OEO office is planning a video series of cultural orientation topics which will be recorded and translated for new arrivals to access as on-demand.

The totals for the City's General Assistance Program are as follows:

- Total Applications: 1559
- Denials: 65
- Denial rate: 4%

Totals for the Needle Exchange Program (NEP) are as follows:

- Total number of exchanges: 366 (227 onsite, 139 outreach)
- Total number of needles collected: 44,961
- Total number of needles distributed: 44,558
- Total number of new enrollees: 48
- Total number of Narcan doses distributed: 240 kits (480 doses)

- Community Needles collected: 938
    - Collected from community sharps containers: 784 (83.6%)

Public Health Clinic Numbers:

- **STD Clinic:** Patients seen: 98, new patients: 27
- **PCFC:** Patients seen: 42, new patients: 8
- **COVID Vaccines Given:** 266

CITY OF PORTLAND
Health and Human Services
Kristen Dow, Director

Public Health Division
Tina Pettingill, MPH, Acting Public Health Director

MEMORANDUM

To: **Kristen Dow, Director of Health and Human Services**
From: **Bridget Rauscher, Public Health Division**
Date: **Jan 6, 2022**
Subject: **Overdose and Naloxone Distribution Data Review**
CC: **Keith Gautreau, Fire Chief**
Heath Gorham, Interim Police Chief
Tina Pettingill, Deputy Director of Health and Human Services

Introduction: This memo is in response to a request from the HHS & PS Committee for updates on overdose data and naloxone distribution in Portland.

Background: Rates of both fatal and non-fatal overdoses have been on the rise for several years, with the exception of a slight dip in 2018. The onset of the COVID-19 pandemic has created an unpredictable instability in the drug supply, in use patterns of people who use drugs, and an overall negative impact on the well-being of Mainers.

The Margaret Chase Smith Policy Center, in collaboration with the State Medical Examiner's Office, releases an annual Expanded Drug Death Report. This report contains data specific to all drug related deaths in the previous year. The Expanded Drug Death Report for 2021 can be expected in or around April, 2022. The following table is a summary of overdose fatalities in Maine as well as Portland specifically, dating back to 2016.

Year	Fatalities in Portland	Fatalities in Portland Caused by Opioids	Total Fatalities in Maine	Percentage of Overall Fatalities Caused by Opioids
2016	42	28	376	84%
2017	57	51	418	85%
2018	44	34	354	80%
2019	55	41	380	84%
2020	56	45	504	81%

While the Expanded Drug Death Report for 2021 is not available at this time, the following monthly data has been published by the Margaret Chase Smith Policy Center. The following table is a breakdown of overdose fatalities, by month, in Cumberland County, compared to the total in Maine. October's numbers presently include suspected overdose fatalities, but are subject to change based upon final toxicology reports.

Month	Cumberland County	State of Maine
January	10	54
February	9	41
March	8	58
April	5	46
May	8	48
June	10	54
July	6	46
August	9	50
September	14	58
October	13*	60*
Total	**92***	**515***

*Subject to change based on final determination by medical examiner's office

For more information about drug related data in Maine, please visit the Maine Drug Data Hub.

Portland Fire Department

The following tables contain data collected by the Portland Fire Department in 2021 and provide a month by month view of both overdose calls as well as the patient disposition, as noted by the EMS provider upon arrival.

In 2021, the Portland Fire Department responded to 465 overdoses, 200 of which were determined by EMS responder to be related to opioids. Just under 41% of these overdoses occurred in the first half of 2021. For those denoted as “opioid with coma” the victim was unconscious, or comatose, at time of EMS response. Those denoted as “opioid without coma” were responsive at time of EMS arrival, in some cases as the result of naloxone administration, either via bystander or Portland Police, prior to the arrival of EMS.

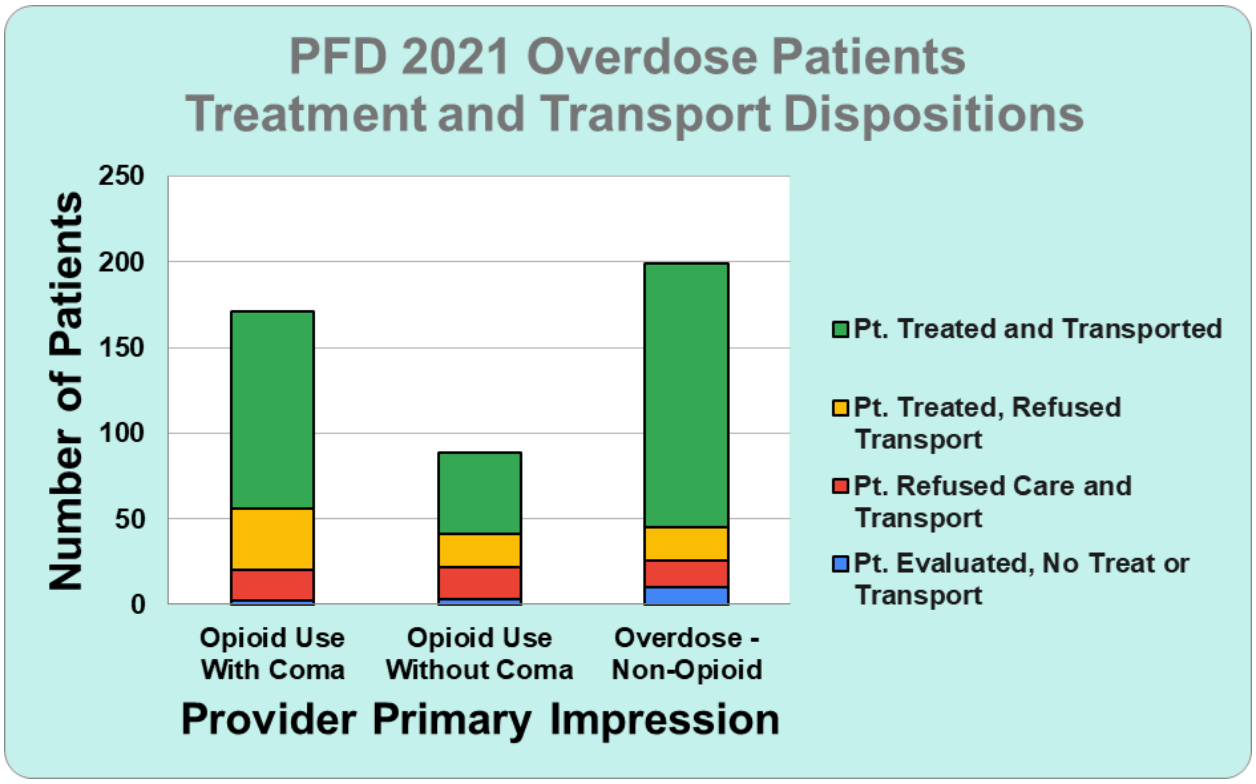
Month	Opioid with Coma	Opioid w/o Coma	Non-Opioid	Total
January	12	6	12	30
February	9	3	19	31
March	10	8	17	35
April	5	4	14	23
May	10	2	14	26
June	14	10	21	45
July	14	5	19	38
August	11	8	21	40
September	21	10	22	53
October	24	14	20	58
November	24	10	7	41
December	18	9	18	45
Totals	172	89	204	465

In 2021, four dispositions were used by EMS responders after interaction with patients with suspected overdose. Out of 459 patients, 317, or 69% were treated and transported to an emergency department for further evaluation. Another 127, or nearly 28% “refused care and/or transport,” however it is important to note that 18 of those individuals who were unconscious as

the result of suspected opioid use, were likely determined to be deceased at time of EMS response. Finally, 15 individuals were evaluated but either did not require treatment and/or transport or were deceased at the time of EMS response.

Provider Primary Impression	Pt. Evaluated, No Treat or Transport	Pt. Refused Care and Transport	Pt. Treated, Refused Transport	Pt. Treated and Transported	Totals
Opioid Use With Coma	2*	18*	36	115	171
Opiod Use Without Coma	3	19	19	48	89
Overdose - Non-Opioid	10	16	19	154	199
Totals	15	53	74	317	459

*Most likely denotes patients pronounced dead at scene



The following table compares naloxone distribution by Portland Fire Department EMS providers from 2018 - 2021. In 2019, responders administered naloxone to 136 individuals (66% of all patients experiencing an opioid overdose), the largest percentage in recent history. Since that time, naloxone administration by EMS responders has steadily decreased, despite rates of reported overdoses. It is believed that this is, in large part, due to the availability of naloxone in the community.

Year	Number of Patients with Opioid Overdose	Patients Receiving PFD Naloxone	Percentage of Patients Received PFD Naloxone
2018	75	48	64%
2019	207	136	66%
2020	192	111	58%
2021	260	102	39%

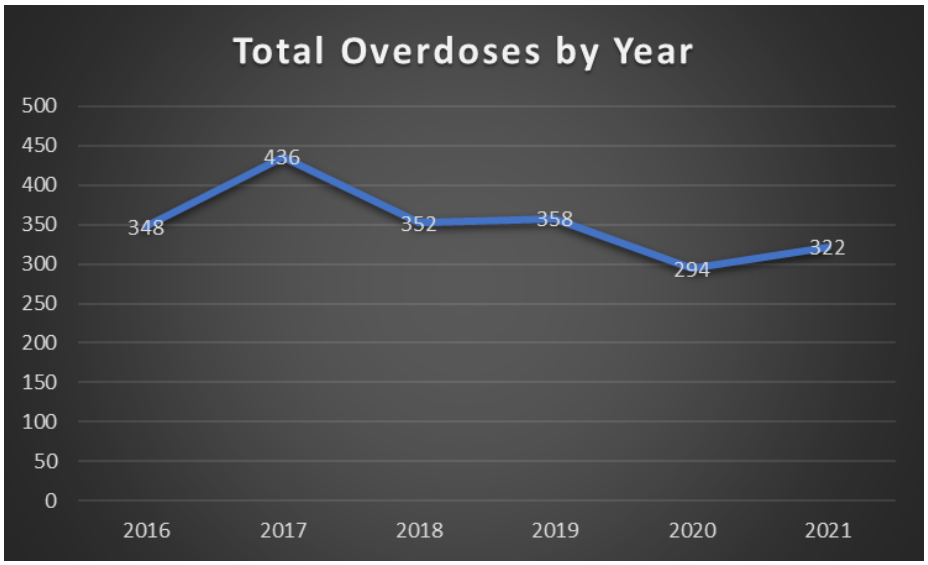
While the Portland Fire Department is administering naloxone to fewer of the overdose patients they see, the patients they do administer naloxone to, however, are receiving larger doses of naloxone than in previous years. Synthetic opioids, such as fentanyl, may be the reason additional doses are necessary.

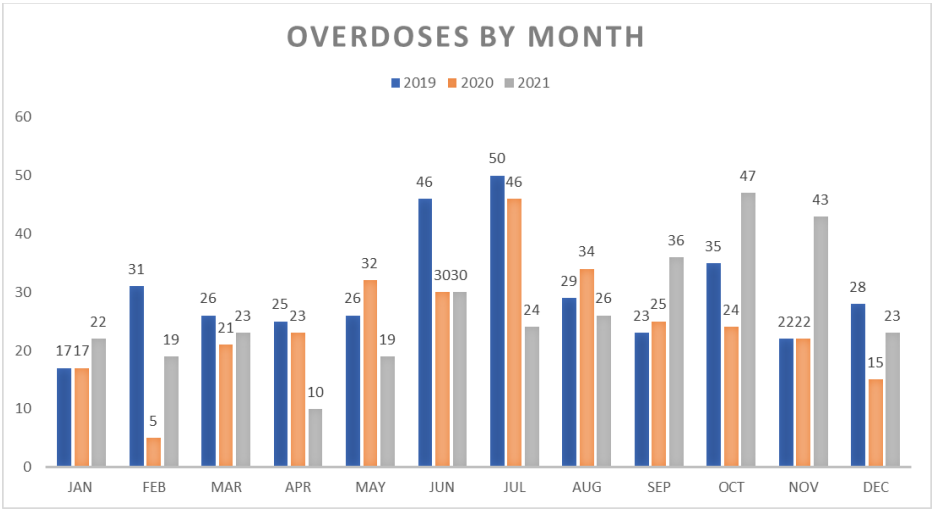
Year	Naloxone Doses Administered by PFD*	Number of Patients Receiving EMS-administered Naloxone	Number of Doses/Patient*
2018	129	48	2.7
2019	593	136	4.4
2020	424	111	3.8
2021	512	102	5**

*Doses can be any amount, may be much less than a full 4mg dose
**May indicate need for naloxone due to presence of fentanyl
(source: https://substanceabusepolicy.biomedcentral.com/articles/10.1186/s13011-019-0195-4)

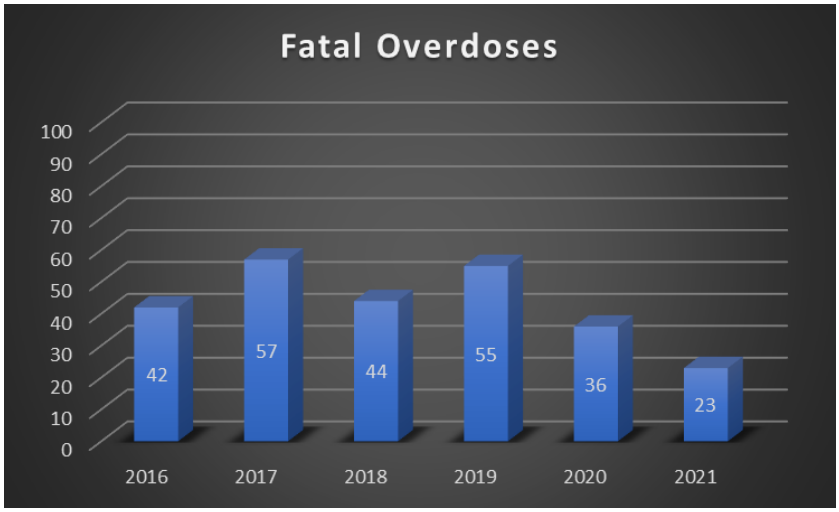
Portland Police Department

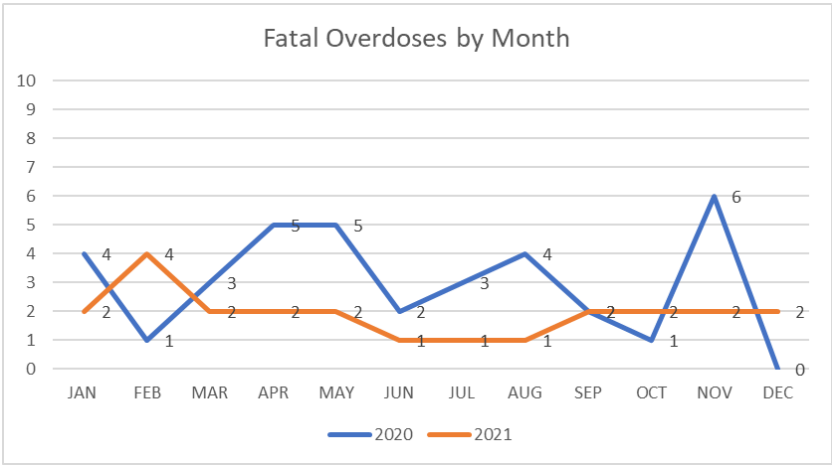
The Portland Police responded to 322 overdoses in 2021, approximately a 9.5% increase from 2020, however still down 10% from 2019 and down 26% from 2017 which was our highest on record. Below is a graph of overdoses over the last three years broken down by month.



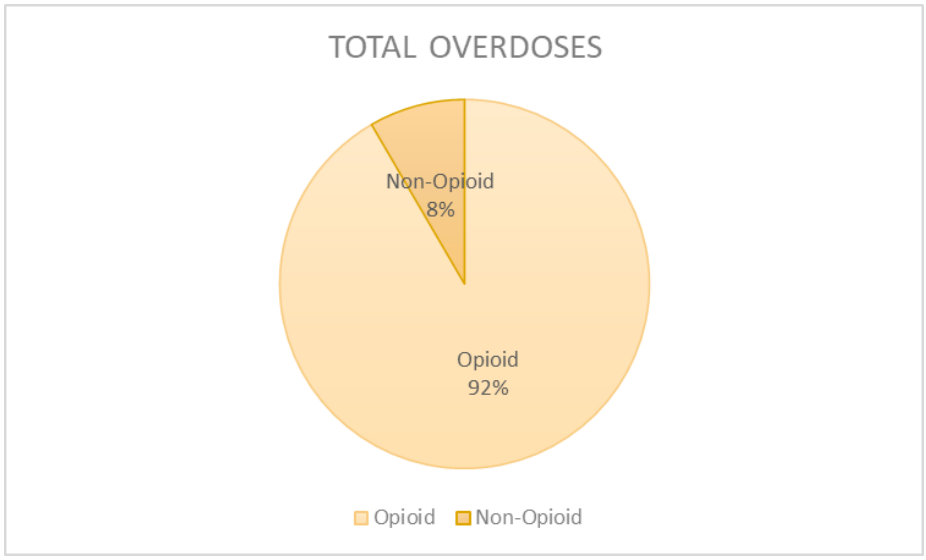


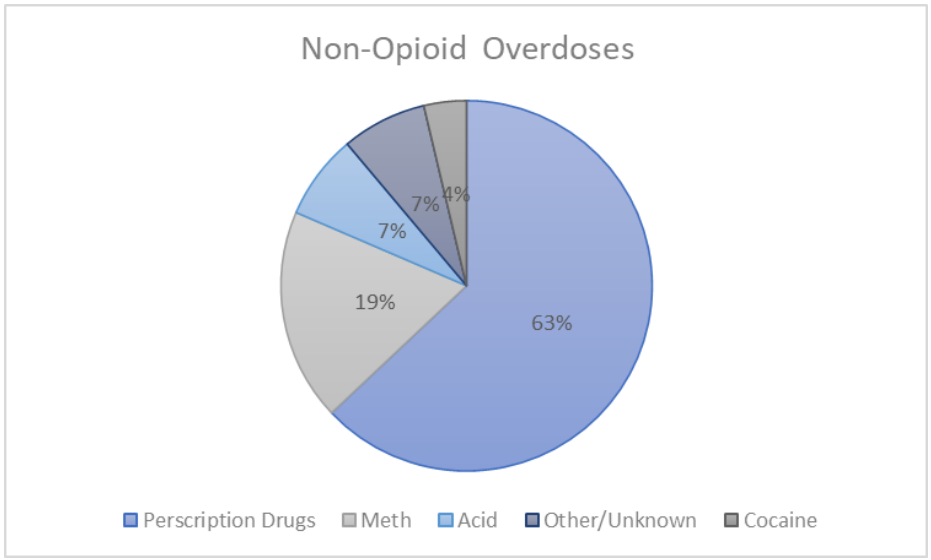
Of the 322 overdoses that PPD responded to, 23 were fatal overdoses. That is 36% decrease from 2020, and 58% decrease from 2019. PPD Officers gave Narcan 77 times in 2021, approximately 67% more times than in 2020.





Of the 322 overdoses, 27 were non-opioid related. Intentional overdoses using prescription drugs accounted for 63% of non-opioid related incidents, followed by 19% due to use of methamphetamine.


TOTAL OVERDOSES
Non-Opioid
8%
Opioid
92%
Opioid
Non-Opioid


Non-Opioid Overdoses
7%
4%
7%
19%
63%
Perscription Drugs
Meth
Acid
Other/Unknown
Cocaine

Portland Public Health Division Harm Reduction Services

Naloxone Distribution

In 2021, the Portland Syringe Services Program (The Exchange) distributed 4,610 doses of nasal Narcan to clients. While The Exchange has been distributing naloxone for several years, distribution has increased with the development of the Maine Naloxone Distribution Initiative (MNDI), in July, 2019. The MNDI, funded by the State, has four "Tier 1" Distributors, including Portland Public Health, who distribute Narcan to "Tier 2" Distributors across all sixteen counties. Tier 2 Distributors are agencies, businesses, or schools who either request Narcan to keep on hand in case of an emergency or who redistribute Narcan to "end users" to assist in reversing overdoses in their communities. In January - November, 2021 the Public Health Division distributed 6,606 doses of Narcan to 71 Tier 2 Distributors (41 in Portland alone).

The following table summarizes the monthly distribution of Narcan to Exchange clients throughout 2021. Distribution has increased in the second half of the year, which appears to be consistent with the increase in calls for service to overdoses by the Portland Fire Department over the same timeframe, as well as the decrease in EMS administered naloxone.

Month	Narcan Kits Distributed via Exchange (two doses/kit)
January	68
February	109
March	113
April	129
May	207
June	182
July	235
August	247
September	267
October	252
November	256
December	240
Total	**2,305 kits/4,610 doses**

Syringe Service Program: The Exchange

Portland's Syringe Service Program (SSP), also known as the Exchange, has been a certified SSP since 1998. Until November, 2021, the Exchange operated for many years out of 103 India Street, but has recently moved to 39 Forest Avenue, where the Public Health Division is now co-located with the Social Services Division, reducing barriers and increasing access to services by many clients.

2021 was an historic year for the Exchange, safely collecting and disposing of 384,346 syringes and distributing 435,399 syringes to people who use drugs. Over this timeframe, the Exchange assisted nearly 1,400 clients in 6,435 exchanges, in addition to providing support and referral services for food, shelter, healthcare (including HIV/HCV testing), and more. As in some of the previous tables, exchange patterns seemed to increase in the second half of the year, making up 54% of the total exchanges.

Month	Needles In	Needles Out	Total Exchanges
January	29,185	30,006	474
February	21,197	23,163	432
March	27,655	31,175	497
April	24,551	30,269	459
May	27,197	36,706	605
June	28,576	34,173	495
July	35,437	46,424	779
August	28,149	43,237	769
September*	40,228	38,151	613
October	39,310	39,270	479
November	37,900	38,267	467
December	44,961	44,558	366
Totals	**384,346**	**435,399**	**6,435**

*end of Civil State of Emergency triggered reinstatement of strict 1:1 policy, effective August 31, 2021