



ANOKA COUNTY OPIOID SOLUTIONS INITIATIVE

Opioid Advisory Council

Minutes

Friday, June 13, 2025

9:00-11:00 am

Blaine Human Service Center, Room 2402

Mission: *To improve health, save lives, and reduce the impact caused by opioids and other substances in Anoka County by managing opioid settlement funding and supporting strategic partnerships.*

Vision: *All Anoka County residents and partners are supported, engaged, and prepared to overcome the opioid crisis and meet the challenges related to substance use in the community.*

Called to Order by Patti Constant, Senior Program Specialist – Opioids, at 9:00 am

Present: Patti Constant, Chris McCook, Katherine Cole, Susan Ferron, Peggy McNabb, Krista Johnson, Troy Friesen, Lacey Towe, Tim Kizer, Randi Prebil, Ryan George, Christina Lefkowich, Nicholas Warnke, Joshua VanHeuveln, Sam Martinez, Jess VanKuyk, Diana Hoffman, Melissa Olsen, Nancy Norman, Lori Lachner, Samantha Guthman, Corey Kohan, Musab Adam, Amanda Amundson (Begin Anew, rep. Justin McNeal)

Absent: Molly Nee, Joe Amerman, Carrie Wood, Derek Schuldt, Megan Schueller, Justin McNeal, George Borrell, Quita Curtis, Reysel Castillo

Guests: Cy Dodson and Megan Thompson -- Triumph Pictures / Faces of Hope

1. Welcome, Introductions, Moment of Grounding, and Approvals

- Patti welcomed everyone to today's meeting of the Opioid Advisory Council.
- A moment of silence was observed to honor all the people that we have lost to deaths of despair (including suicide, drug overdose, & alcoholism), all of those currently struggling with behavioral health challenges (substance use disorders, mental illness), those who are bravely walking the recovery path, and all the families, friends, community members, and supports that are impacted. Thank you for helping us to remember why we are here.
- A reminder from Patti: Every single person in this room brings a unique piece of knowledge, information, and experience. Everyone has a unique role. Every perspective helps provide a piece of a bigger picture – no one is more important than another.
- This is also a field FILLED with acronyms. We become comfortable in 'our little piece of the puzzle' and think everyone shares that knowledge. I invite and encourage each of you to question/ask when things are unclear. We do NOT, nor should we, all come with the same background information, so we need to feel comfortable questioning/asking.



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Please feel comfortable using AcroKnock... if you hear someone using an acronym or language that you are not familiar with, please knock three times – it's a gentle/friendly reminder to us all.

- Self-introductions were made, along with thoughts about the rain.
- Motion to approve the May 9, 2025, Advisory Council meeting minutes by Ryan George. Second by Lacey Towe. Motion carried.
- Motion to approve the June 13, 2025, Advisory Council meeting agenda by Krista Johnson. Second by Josh VanHeuveln. Motion carried.

2. Community and County Updates / Patti Constant

- Patti called on members to share on upcoming events, opportunities, trends or issues you are seeing, etc. What should this group be aware of? What do we need to know?
 - Corey Kohan reported the coordinated initiative wherein overdose prevention kits will be offered to select Jail and Workhouse inmates as they released for re-entry to the community is about to kick off. Facility medical staff and correctional officers will identify individuals who are either self-reporting substance use or who, by way of assessment, are at risk. The kits include two nasal naloxone doses, instructions on use, community resources, and information for accessing protective gear. Steve Rummler HOPE Network is supplying us with kits during this pilot period. Looking for a longer-term supply solution so we can build our own kits. We will be tracking / following the outcomes of those who accept a kit and those who do not to assess program impact. We are excited to be getting this off the ground. More to come.

Patti added here that Anoka County Public Health will have increased capacity to naloxone by way of access to the MN Department of Human Services Naloxone Portal. Will perhaps do some leave behind programs. More to come on this as we get more information and create a plan.

- Nancy Norman reported a recent HeartSafe Training she attended included AED training and commentary on the naloxone kit, with the trainer (Coon Rapids Police Officer Bryan Platz) emphasizing that naloxone will not harm someone if you give it to them and they are not overdosing. Very good training.
- Troy Friesen provided an overview of the Minnesota EHR Consortium website that provides data collected from seven metro county emergency room visits / hospital admissions. Anoka County had 2,900 opioid-related visits during calendar year 2024. That number for the first two months of 2025 was 520. Interesting website. Good information. Patti noted this consortium data may be incorporated into our data at some point. <https://mnehrconsortium.org/>





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- Krista Johnson, Meraki Recovery Housing
 - Is having success ordering / reordering naloxone via the DHS portal.
 - Meraki Recovery Housing has recently lost two residents to overdose death. Both had walked away from Meraki; one with six months of sobriety.

- Ryan George reported on a recent Fridley Police Department meeting / conversation with Fulcrum Health surrounding Fulcrum's grant-funded initiative looking to enhance access to non-pharmacological pain treatment and management i.e., acupuncture, chiropractic, physical therapy, massage, etc., thereby reducing opioid prescription dependence. Naloxone will be onsite, but no other meds. A mobile trailer is currently being constructed that will serve as the clinic / treatment site. Currently seeking parking sites, parking lots, etc., to serve Anoka, Hennepin, and Ramsey counties. Hoping to deploy by August; October at the latest. Fulcrum's executive summary of the grant attached.

Musab Adam noted a Dr. Ziwe, Fairview Clinic, has received grant funding and is providing suboxone shots at no cost. Musab would like to connect Dr. Z with the Opioid Advisory Council. Dr. Ziwe can be found at dziwe@umn.edu and his bio can be found here: <https://med.umn.edu/bio/dziwe-ntaba>

- Patti's Updates

- The AED project is about to be implemented as well, wherein a naloxone dosage will be added to AEDs across the county.
- Over 160 doses (between naloxone and fentanyl test strips) have been dispensed over the first six to seven weeks of our Library NAPs. NOTE- Patti misspoke in the meeting, it is well over 200 within the first 6 weeks.
- Naloxone is also being made available at certain Anoka County Parks, potentially at an entrance gate, camping area, with park ranger / park vehicle(s), Bunker Beach.
- Still looking for a parent representative to serve on the Advisory Council. Please connect appropriate candidates with Patti.

3. Musab Adam spoke on his recent ADHD diagnosis and its challenges in many areas of his life, along with his need for tools, support, and courage. *It's been difficult. With my recent diagnosis and medications, I am now understanding more and speaking up. Using my strengths, I know where I can help.*

Patti thanked Musab for sharing, noting the work of this Council covers a network of people who can make a difference and provide support.

4. **2024 Data Updates / Patti Constant**

Patti noted a shift in overdose data tracking for the Advisory Council that will keep us consistent with the Medical Examiner's data. We have shifted to tracking the number of overdose deaths that occur in Anoka County rather than the number of overdose deaths among Anoka County residents. Patti presented a PowerPoint overview of overdose data dated June 13, 2025:

- Overdose deaths in Anoka County by year continue to decrease from 50 in 2023 to 41 in





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2024, and roughly 21 through April 2025. We are a few ahead of the April 2024 count of 17.

- More males died from overdose in both 2023 and 2024 than females, however, there was a slight uptick in females from 2023 to 2024.
- Age range with the highest number of overdose deaths is ages 25 to 44, however, the 55 to 64 age range likelihood to die of overdose increased from 2% in 2023 to 12.2% in 2024.
- By a significant margin, those who identify as white were most likely to die of overdose. Patti noted here that both Hennepin and Ramsey counties are seeing a lot of overdose deaths among African American and Native American.
- Fentanyl and opioids represent the vast majority of substance use for both 2023 and 2024. Combined substances get counted in each category. There was agreement to re-label the "Prescription Opioids" column to read "Non-Prescribed Prescription Opioids."
- Increase in January through April overdose death counts -- 16 in 2023, 12 in 2024, and 21 in 2025.

There was suggestion to attach a potential cause for specific trends, i.e., COVID.

Patti asked for input on member interest in seeing this data regularly. Krista Johnson currently shares Hennepin County data with the recovery community with alerts that identify new additives, current supplies, and trends; adding that month-to-month Anoka County data would be helpful. Patti noted that Anoka County data can be accessed via the Hennepin County dashboard Krista is using. Using ODMAP data, Patti will provide fatal overdoses in Anoka County each month.

5. RFP Discussions / Guests / Advisor Engagement

Faces of Hope / Triumph Pictures, LLC

Patti introduced Cy Dodson and Megan Thompson, journalists and filmmakers with Faces of Hope / Triumph Pictures, LLC, who will be working on two prevention RFPs:

- A Faces of Hope 15 to 20-minute educational documentary. The video will also be cut up into smaller snippets for classrooms, social media, and other educational efforts.
- Dr. Susan Ferron's continuing education training module for medical health care providers.

Cy's awareness of this RFP opportunity came by way of his sister's co-worker connection to Georgia Panopoulos and Dr. Susan Ferron at Allina HealthPartners. He then sought out Megan as being a great fit for this storytelling project. A web developer with clinical experience has also been selected to house the produced educational material where it will be made available to the public as well.

Megan noted she is excited to be working on this project and is in the pre-production information gathering phase, learning about people and programs in Anoka County. Ultimate goal is to tell impactful stories with a strong connection to Anoka County that will educate, provide prevention resources, and encourage people to make different choices. Content may intermix with Dr. Susan Ferron and Georgia's educational project as Cy and Megan are providing them production assistance as well.





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Cy and I want this to be a two-way street, very specific to Anoka County. These will be your community stories. I have talked to many with lived experiences who are willing to share their stories. Megan will learn about people's experiences and gauge their interest in being involved. I will have conversation with as many people as are willing to talk with me. People willing to share their story as a way of helping others. I am still looking for, and please let me or Patti know if you know of:

- An Anoka County family who has lost a loved one to opioids and willing to share their story publicly.
- A student who was attending an Anoka County school when started using opioids.

Cy and I would like to ask what you would like to see in the video, what topics, what messages would be most impactful. Member feedback:

- Awareness of knowing drug content before using. People are dying from drugs they never intended to use. Ingesting drugs that are not their drug of choice.
- Stigma and moving beyond the environment of shame.
- Nick Warnke's lived experience, saved by naloxone, and now using his story and sobriety to save others.
- Strong stories about successful use of medications to keep people alive while in recovery. For inclusion in Dr. Susan Ferron's medical health care training module as well.
- A format that is engaging for younger kids. Less educational and more exciting with younger personalities that will keep kids watching and interested.
- Would it be helpful to address the impact to kids when mom and dad use drugs?
- Bring home the fact that there is a criminal aspect as well, while noting the help that is available and being provided by law enforcement, rather than arrest. Give them hope rather than fear.
- Community events for families in recovery, i.e., volleyball in Ham Lake, Minnesota Teen Challenge teen boys camp in Buffalo, Minnesota.
- Families working on reunification.
- Kids who have died by getting into parental drugs.
- Anoka County community backgrounds that will be very familiar and recognizable to viewers.
- Youth-focused programs, i.e., Hazelden Betty Ford in Plymouth; Recovery Café in Anoka.

Continuing Education Modules for Health Care Providers and the Public

Dr. Ferron distributed a hard copy rough draft of the continuing medical education program segments she and Georgia Panopoulos are developing for doctors, nurses, physician assistants, psychologists, and the public. Will be a free eight-hour training posted on Anoka County's website. Working toward a highly motivational training, with provider and patient stories sprinkled within the modules. Will use terminology familiar to patients and the public rather than medical terms. We are looking forward to working with Cy and Megan. Please contact me with any stories or awareness you may have. Review the module segments and let me know if you think we are missing anything. Susan will welcome any input.





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Patti recalled many meetings ago having conversation about educating health care providers. To now be at this point is very exciting.

Thank you to Cy and Megan and thank you from Cy and Megan. We appreciate your time and are looking forward to working with you. We will be ready to begin filming very soon.

6. Closing

- Thank you. I appreciate you being here today. I am excited to see these efforts get underway. I encourage you to check out the data consortium website.
<https://mnehrconsortium.org/>
- Next Meeting -- Friday, July 11, 2025, 9-11:00 am, Blaine Human Service Center, Room 2402.

Adjourn 11:03 am

Patti Constant
Senior Program Specialist

Randi Prebil
Health Promotion and Planning Manager
PHES

Peggy McNabb
Administrative Services Supervisor

Approved: 7-11-2025



Opioid Epidemic Response Services Grant

Utilizing Non-Pharmacological Treatments Executive Summary

Fulcrum Health, Inc. is committed to addressing the significant disparities in access to effective chronic pain treatments, particularly among historically marginalized and medically underserved populations in Minnesota. Chronic pain is a common condition that leads to high healthcare utilization, yet access to evidence-based, non-opioid treatment options remains insufficient in many communities, particularly in Anoka, Hennepin, and Ramsey Counties. This grant using non-pharmacological treatment (NPT) aims to close this gap by offering access to and raising awareness about alternative, non-pharmacological pain management options through the deployment of a mobile physical medicine clinic.

The mobile clinic will be operated by Fulcrum Health with a diverse team of high-quality physical medicine professionals, which may include chiropractors, acupuncturists, massage therapists, physical therapists, and health educators. These providers will offer evidence-based treatments designed to address the underlying causes of chronic pain, rather than relying on opioid prescriptions. The clinic will serve populations in the targeted counties where unmet pain management needs are particularly high, helping individuals who may not have access to these services otherwise.

The primary objectives of this grant are twofold:

1. **Enhance Access to Non-Pharmacological Pain Treatments:** The mobile clinic will provide evidence-based alternatives to opioids, including therapies like chiropractic care, acupuncture, physical therapy, and massage therapy, to individuals who have limited access to such services. The goal is to ensure that these underserved communities have the opportunity to receive effective, non-opioid treatments for chronic pain.
2. **Reduce Opioid Prescription Dependence:** By providing non-opioid alternatives, the project aims to reduce the reliance on opioid prescriptions, which are commonly used to manage chronic pain but are associated with significant risks, including addiction and overdose. The clinic will also focus on educating patients and healthcare providers about the risks of opioid dependence and the benefits of non-pharmacological therapies for pain management.

The project also emphasizes community outreach and education as key components of its strategy. The outreach team will engage the local population and healthcare providers to raise awareness about the clinic's services, address common misconceptions about non-opioid treatments, and promote the benefits of alternative pain management options. A critical component of the project is to build strong referral networks with local healthcare providers, including primary care physicians, urgent care centers, and emergency departments. These medical professionals often prescribe opioids for pain management, and establishing trust-based relationships will be essential to facilitate referrals to the mobile clinic and ensure continuity of care.

Implementation Strategy:

The implementation will occur over a phased approach and the project will span over 3-3 ½ years. The first phase is six months dedicated to community engagement, where the outreach team will conduct needs assessments, establish relationships with local organizations, and engage the community to ensure the services meet the specific needs of the populations in the target counties. This phase will also include extensive outreach to local healthcare providers, including organizing educational events and developing materials about the benefits of non-pharmacological pain management.

The second phase will include the launch of the mobile physical medicine clinic providing clinical care to the target population. The clinic will offer a wide range of non-pharmacological therapies tailored to individual needs, helping to reduce pain, improve mobility, and enhance overall quality of life. The services will be offered in flexible, mobile settings to reach individuals who may have transportation challenges or live in areas with limited access to healthcare facilities.

The success of the project depends on the collaboration between Fulcrum Health's outreach team and local healthcare providers. The outreach team will work to build a referral network, providing care navigation from local practitioners to the mobile clinic, and vice versa. By establishing strong relationships with primary care providers, urgent care clinics, and emergency departments, the project will create a seamless continuum of care that ensures patients receive the best possible treatments for their pain management needs.

Long-Term Goals:

This project is designed not only to address immediate chronic pain management needs but also to create a lasting impact on the healthcare landscape in underserved communities. By offering effective, non-opioid treatments and promoting education about their benefits, Fulcrum Health aims to:

- **Improve Health Outcomes:** By providing access to evidence-based, non-pharmacological therapies, the project will help individuals manage chronic pain without relying on opioids, which can have long-term health risks.
- **Reduce Opioid Use:** The project aims to reduce opioid prescriptions in the target areas, contributing to the broader effort to combat the opioid crisis in Minnesota and beyond.
- **Increase Awareness and Education:** Through outreach and educational initiatives, the project will raise awareness among patients and healthcare providers about the availability and benefits of non-opioid treatments for chronic pain.
- **Establish Community-Based Referral System:** Through development of a two-way referral network the project will improve provider collaboration and continuity of patient care.

By focusing on these objectives and strategies, Fulcrum Health seeks to make a meaningful difference in the lives of individuals suffering from chronic pain, helping to address healthcare inequities while improving access to safer, more effective treatment options for those in need.

For additional information please contact:

Jane Gebhard

Senior Manager of Clinical Programs

P: 651-219-4261

E: j.gebhard@fulcrumhealthinc.org

Continuing Medical Education Program

SEGMENTS

- 1) 45 min to 1 hour: history of chronic, non-malignant pain management, and history of the development of opioid use disorder (first, second, third phases), and the interface between the two.
- 2) 45 min to 1 hour: Pathophysiology of pain, pathophysiology of substance use disorders, focusing on opioid use disorder, and the interface between the two.
- 3) 15-30 min: Introduction to comprehensive pain management.
- 4) 45 min to 1 hour: Physical therapy for primarily chronic pain, including focus on pain neuroscience education/manual therapy/graded exercise.
- 5) 45 min to 1 hour: Behavioral care for pain
- 6) 1 hour: non-opioid medications for acute and chronic pain.
- 7) 1 hour: opioids for acute and chronic pain, including buprenorphine
- 8) 45 min to 1 hour: responsible prescribing of opioids in primary/specialty care, including
 - education of risks and benefits
 - screening for substance use disorders prior to prescribing opioids
 - Narcan with every prescription
 - follow-up, including on-going screening for substance use disorders, during and after prescribing.
- 9) 45 min to 1 hour: Treatment of substance use disorders (focus on opioids and alcohol) in primary care.



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Overdose Data

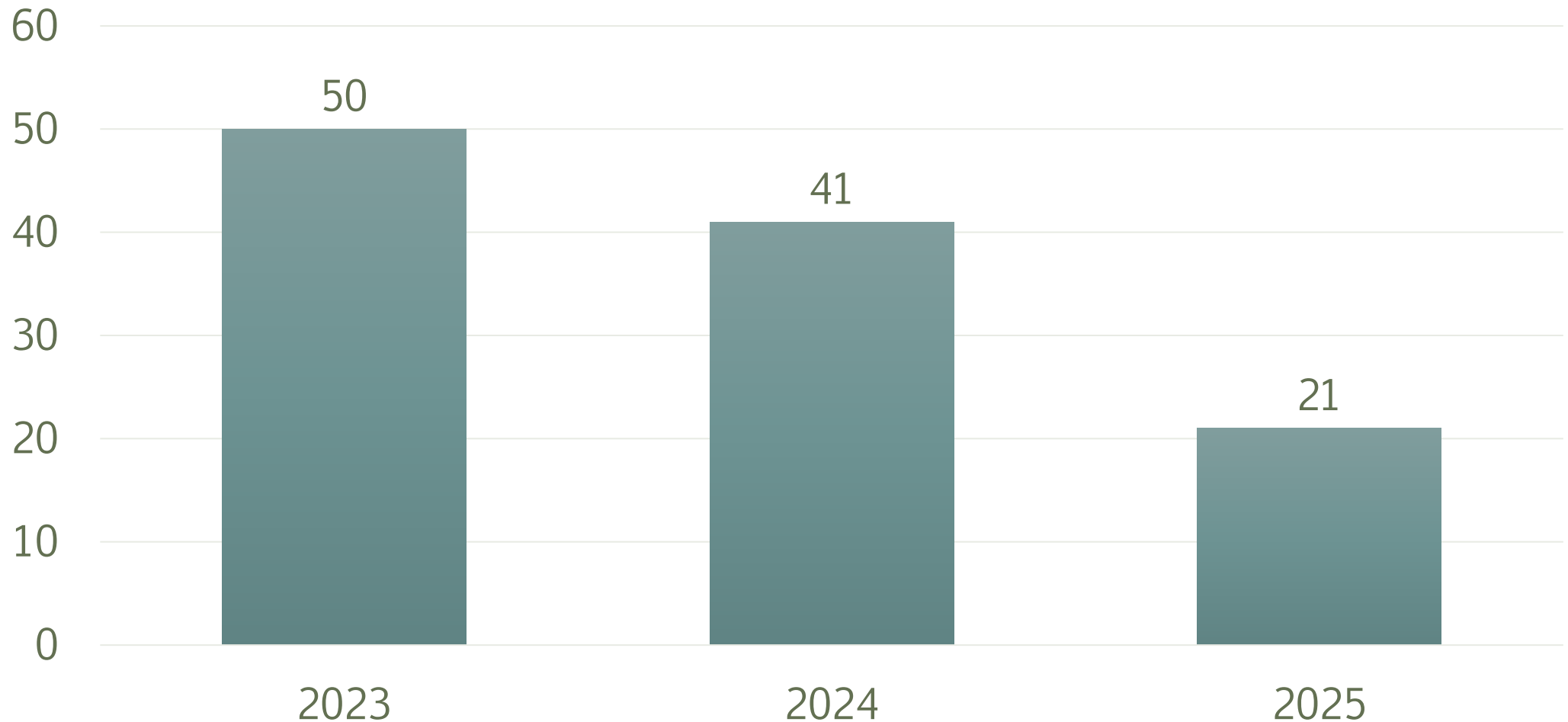
June 13, 2025



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Overdose deaths in Anoka County by Year (preliminary data)

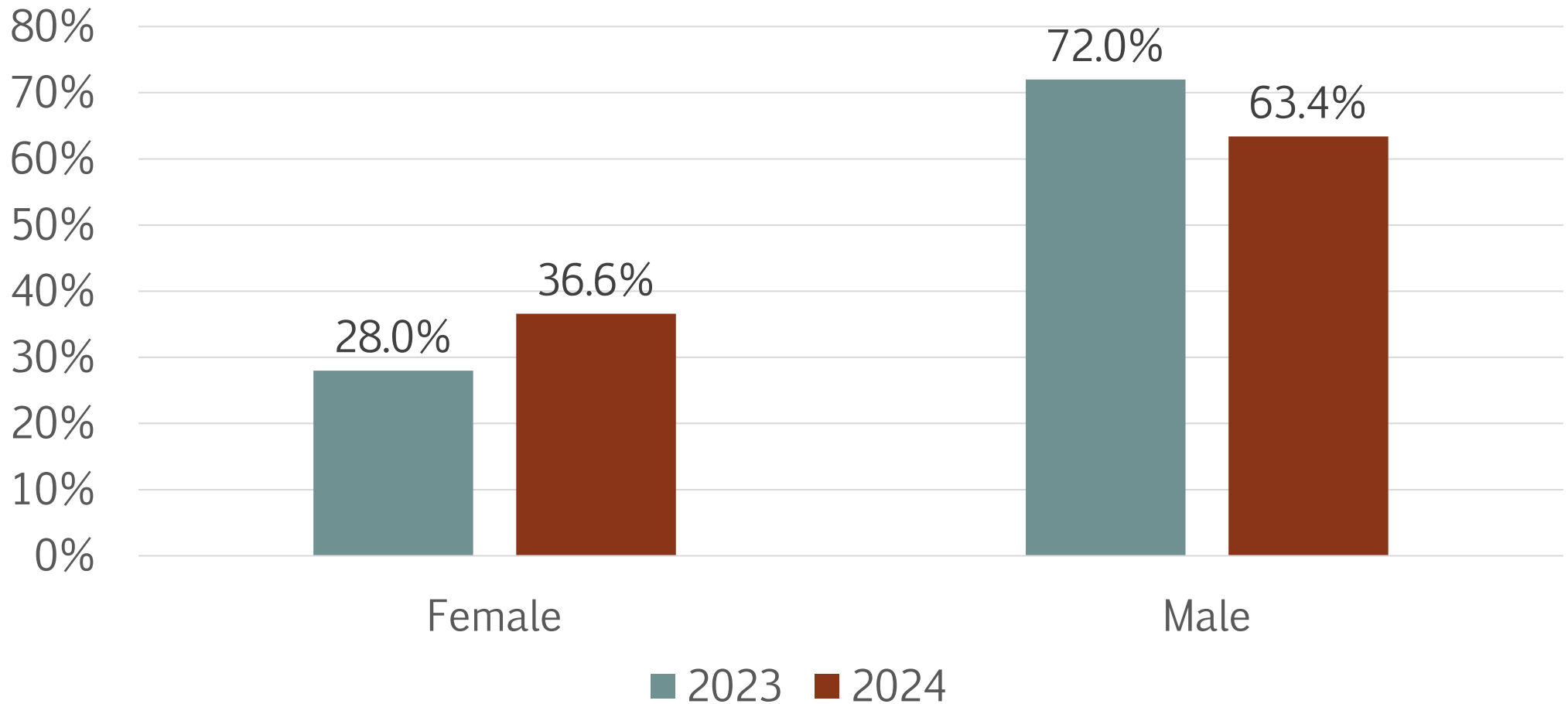
Overdose deaths continued to decrease in 2024



Data from: Midwest Medical Examiner's Office

Overdose deaths in Anoka County by sex (preliminary data)

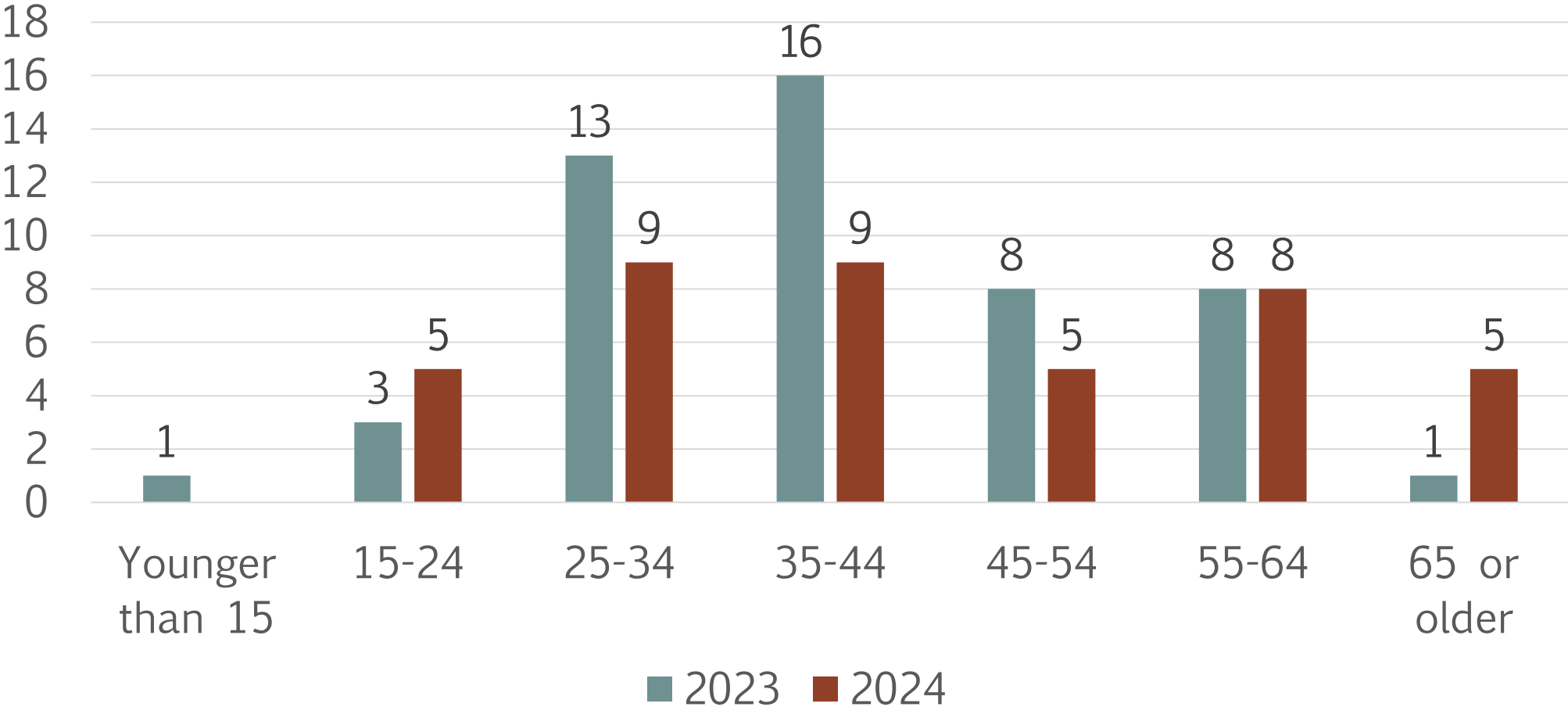
More males died from overdose than females



Data from: Midwest Medical Examiner's Office

Overdose deaths in Anoka County by age (preliminary data)

Ages 25-44 were most likely to die of overdose

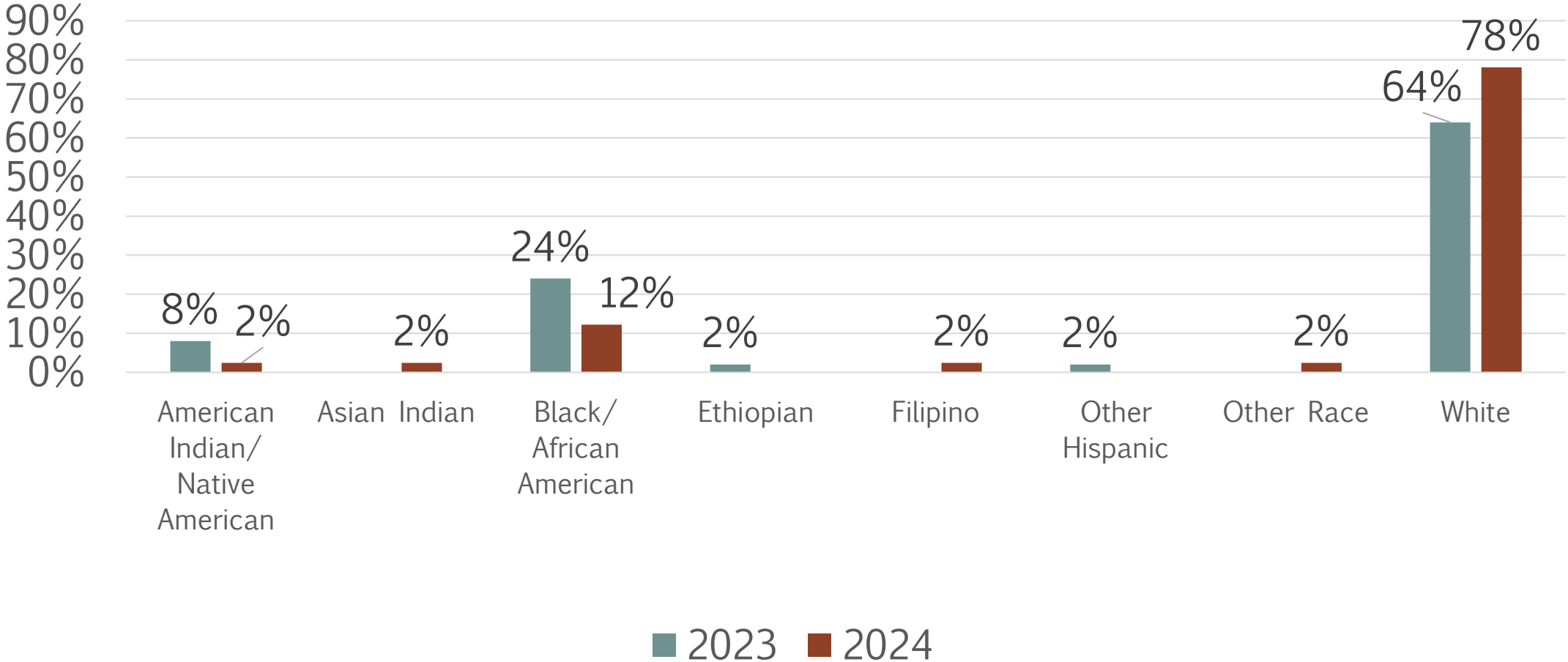


Data from: Midwest Medical Examiner's Office



Overdose deaths in Anoka County by race (2024- preliminary data)

Those who identify as white were most likely to die of overdose

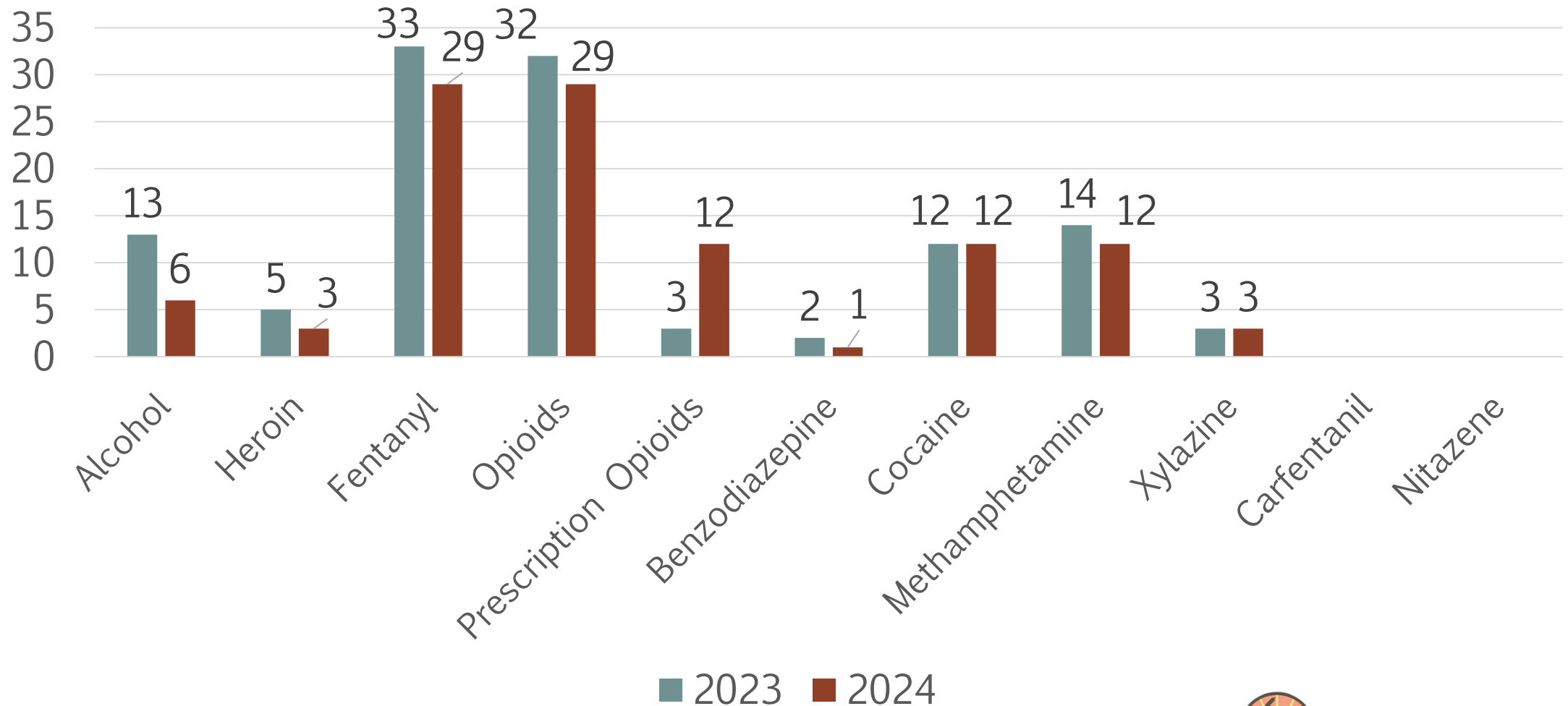


Data from: Midwest Medical Examiner's Office



Overdose deaths in Anoka County by substance (preliminary data)

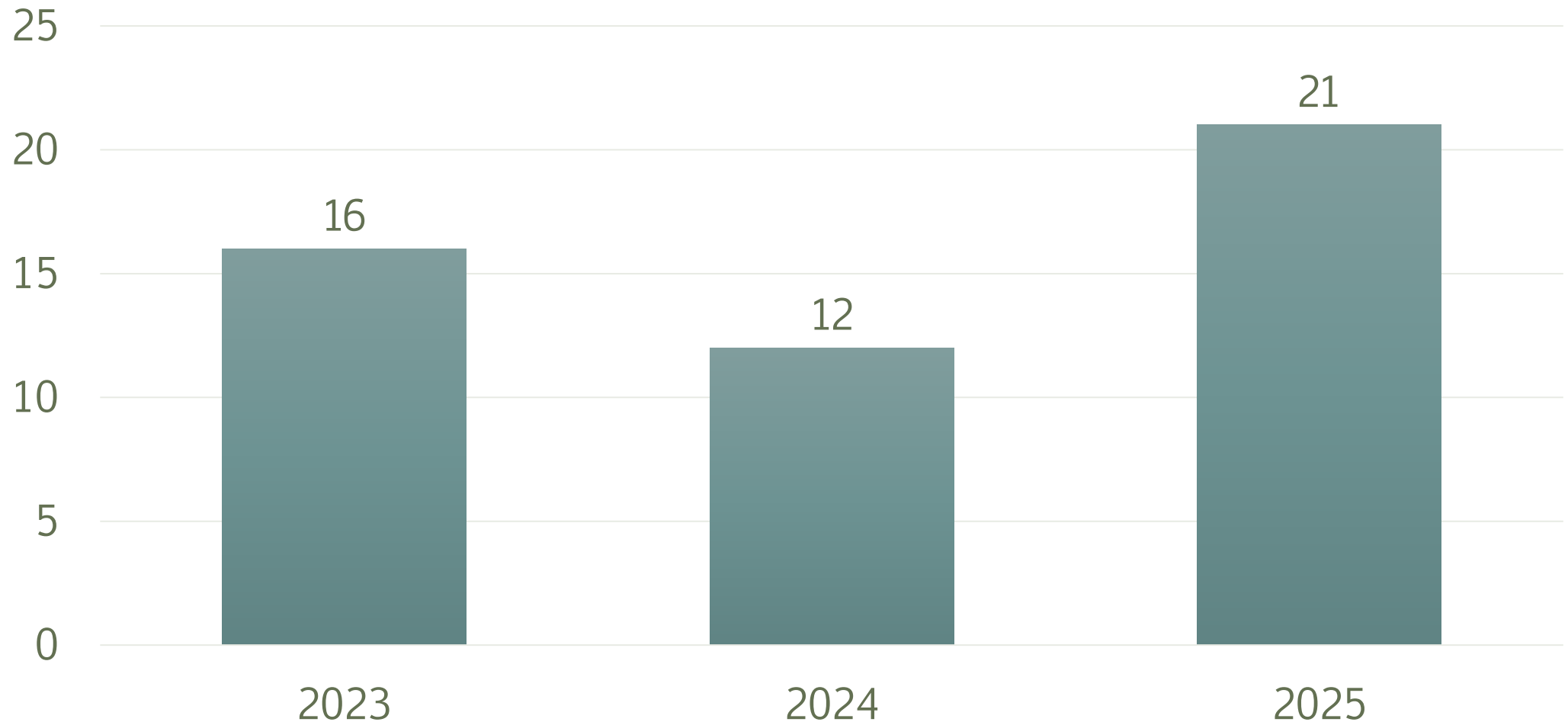
Most common substance was opioids



Data from: Midwest Medical Examiner's Office

Overdose deaths in Anoka County by Year (January through April, preliminary data)

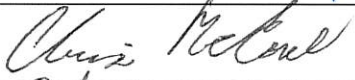
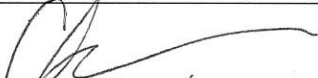
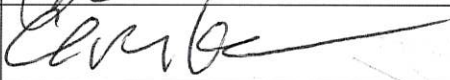

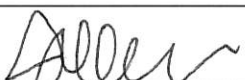
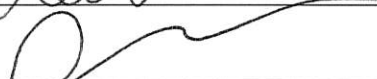




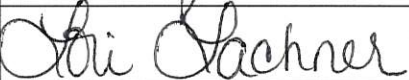

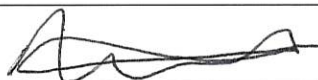
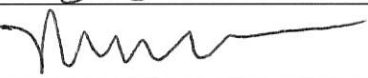

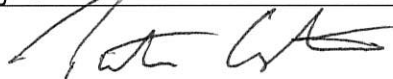
Overdose deaths appear to be increasing in 2025, compared to 2024



Data from: Midwest Medical Examiner's Office

Questions?

Anoka County Opioid Advisory Council Meeting Sign-In / June 13, 2025

Name	Signature	Representing
Carrie Wood		Operations Lieutenant, Anoka County Jail / Sheriff's Office
Chris McCook		Associate Health Education Specialist / Anoka County Public Health & AmeriCorps
Christina Lefkowich		Director of Treatment Service, Riverplace Counseling Center
Corey Kohan		Senior Manager, Rum River Campus Anoka County Community Corrections
Derek Schuldt		Narcotics and Violent Crime Lieutenant, Anoka County Sheriff's Office
Diana Hoffman		Senior Social Worker, Anoka County Social Services and Behavioral Health
George Borrell		Director, Anoka County Social Services and Behavioral Health
Jess VanKuyk		Senior Manager, Anoka County Children and Family Services
Joshua VanHeuveln		Chemical Health Professional, Anoka-Hennepin Schools
Joe Amerman		Cannabis Planner / Anoka County Public Health
Justin McNeal		Executive Director, Begin Anew Recovery
Katherine Cole		Supervisor, Anoka County Public Health Budget and Technology
Krista Johnson		Owner/Operator, Meraki Recovery Housing
Lacey Towe		Forensic Technician, Midwest Medical Examiner's Office
Lori Lachner		Community Member
Megan Schueller		Supervisor, Anoka County Behavioral Health and Substance Use Disorder
Melissa Olsen		Treatment Director Specialized Treatment Services, Inc.
Molly Nee		Senior Communications Specialist, Anoka County
Musab Adam		Director of Community Relations, Access Healing Center
Nancy Norman		Anoka County Attorney's Office
Nicholas Warnke		Community Member
Patti Constant		Opioid Prevention Specialist, Anoka County Public Health
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Opioid Advisory Council

Agenda

Friday, June 13, 2025

9:00-11:00 am

Blaine Human Service Center, Room 2402

Mission: *To improve health, save lives, and reduce the impact caused by opioids and other substances in Anoka County by managing opioid settlement funding and supporting strategic partnerships.*

Vision: *All Anoka County residents and partners are supported, engaged, and prepared to overcome the opioid crisis and meet the challenges related to substance use in the community.*

Call to Order

1. **Welcome, Moment of Grounding, Introductions, and Approvals**
 - 5-9-2025 Meeting Minutes
 - 6-13-2025 Meeting Agenda
2. **Community and County Updates**
3. **2024 Data Updates**
4. **RFP Discussions / Guests / Advisor Engagement**
 - Triumph Pictures / Faces of Hope – Cy Dodson and Megan Thompson
 - Georgia Panopoulos and Susan Ferron
5. **Closing**

